Louisiana Department of Health



Department Description

For additional information, see:

Louisiana Department of Health

Louisiana Department of Health Budget Summary

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	Prior Year Actuals FY 2016-2017	Enacted FY 2017-2018	Existing Oper Budget as of 12/01/17	Continuation FY 2018-2019	Recommended FY 2018-2019	Total Recommended Over/(Under) EOB
Means of Financing:						
State General Fund (Direct)	\$ 2,390,817,265	\$ 2,410,874,521	\$ 2,415,119,251	\$ 3,030,425,465	\$ 1,926,355,053	\$ (488,764,198)
State General Fund by:						
Total Interagency Transfers	283,768,736	305,571,745	306,924,794	332,553,734	302,751,637	(4,173,157)
Fees and Self-generated Revenues	437,362,503	510,154,478	510,154,478	399,363,888	348,095,469	(162,059,009)
Statutory Dedications	852,900,036	842,350,843	842,350,843	780,513,840	739,238,733	(103,112,110)
Interim Emergency Board	0	0	0	0	0	0
Federal Funds	7,929,824,440	9,499,160,003	9,519,368,265	9,505,768,919	7,958,491,347	(1,560,876,918)
Total Means of Financing	\$ 11,894,672,980	\$ 13,568,111,590	\$ 13,593,917,631	\$ 14,048,625,845	\$ 11,274,932,239	\$ (2,318,985,392)
Expenditures & Request:						
Jefferson Parish Human Services Authority	\$ 16,641,680	\$ 18,544,167	\$ 18,544,167	\$ 20,850,234	\$ 20,161,234	\$ 1,617,067
Florida Parishes Human Services Authority	17,803,143	18,661,195	18,661,195	20,764,426	20,056,842	1,395,647
Capital Area Human Services District	24,350,458	25,863,212	25,863,212	27,245,225	26,825,703	962,491
Developmental Disabilities Council	1,734,162	2,076,629	2,092,249	2,203,291	2,199,484	107,235
Metropolitan Human Services District	25,685,544	26,017,565	26,017,565	26,485,034	26,397,814	380,249
Medical Vendor Administration	325,904,635	524,214,094	547,504,958	539,088,564	522,566,073	(24,938,885)
Medical Vendor Payments	10,636,119,498	11,950,698,596	11,951,198,596	12,343,848,798	9,618,739,326	(2,332,459,270)
Office of the Secretary	70,640,258	79,186,275	80,145,562	81,268,897	79,408,839	(736,723)



Louisiana Department of Health Budget Summary

	Prior Year Actuals FY 2016-2017	Enacted FY 2017-2018	Existing Oper Budget as of 12/01/17	Continuation FY 2018-2019	Recommended FY 2018-2019	Total Recommended Over/(Under) EOB
South Central Louisiana Human Services Authority	19,494,640	22,173,005	22,173,005	23,148,208	22,584,584	411,579
Northeast Delta Human Services Authority	12,000,455	13,857,726	13,857,726	14,796,181	14,248,950	391,224
Office of Aging and Adult Services	40,361,211	51,963,411	50,402,299	56,786,333	54,432,821	4,030,522
Louisiana Emergency Response Network Board	1,485,653	1,632,985	1,657,985	1,703,408	1,687,134	29,149
Acadiana Area Human Services District	15,364,308	18,104,165	18,123,370	20,115,600	19,406,602	1,283,232
Office of Public Health	302,990,462	389,120,707	389,249,667	396,644,605	393,672,845	4,423,178
Office of Behavioral Health	215,331,061	234,361,033	236,787,637	274,457,066	258,639,525	21,851,888
Office for Citizens w/ Developmental Disabilities	135,726,162	152,203,675	152,205,288	157,628,605	153,540,968	1,335,680
Imperial Calcasieu Human Services Authority	8,651,179	11,161,125	11,161,125	12,200,233	11,668,046	506,921
Central Louisiana Human Services District	12,321,997	15,000,856	15,000,856	15,371,381	14,992,140	(8,716)
Northwest Louisiana Human Services District	12,066,474	13,271,169	13,271,169	14,019,756	13,703,309	432,140
Total Expenditures & Request	\$ 11,894,672,980	\$ 13,568,111,590	\$ 13,593,917,631	\$ 14,048,625,845	\$ 11,274,932,239	\$ (2,318,985,392)
Authorized Full-Time Equiva	lents:					
Classified	5,648	5,711	5,711	5,908	5,965	254
Unclassified	84	83	83	83	83	0
Total FTEs	5,732	5,794	5,794	5,991	6,048	254



09-300 — Jefferson Parish Human Services Authority



Agency Description

The Mission of Jefferson Parish Human Services Authority is:

Individuals and families in Jefferson Parish affected by Mental Illness, Addictive Disorders and/or Developmental Disabilities shall live full, healthy, independent and productive lives to the greatest extent possible for available resources.

The goals of Jefferson Parish Human Services Authority Program are:

- Ensure the availability of adequate resources to meet Mission and ultimately achieve Vision while adhering to Board Priorities for the provision of services and supports.
- · Achieve universal design as the model to guide the provision of integrated care to the individuals served by JPHSA and its programs.
- · Attract and retain a qualified workforce committed to Mission and Vision.

In 1989, the Louisiana State Legislature passed R.S 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 area 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.

The Board operates under a policy governance model with an ends statement, i.e. mission and means limitations policies in place for an Executive Director to follow. The Board governs with an emphasis on: outward vision rather than an internal preoccupation; encouragement of diversity in viewpoints; strategic leadership more than administrative detail; clear distinction between Board and Chief Executive roles; collective rather than individual decisions; future rather than past or present; and, actively rather than reactively.

The JPHSA Executive Director, selected by the Board, 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, ongoing assessment of needs, and continuous performance and quality improvement. Success is defined by positive outcomes and "customer" satisfaction along with maximized efficiency and cost-



effectiveness in the provision of services and supports. JPHSA is fully accredited by the Council on Accreditation.

For additional information, see:

Jefferson Parish Human Services Authority

Jefferson Parish Human Services Authority Budget Summary

		Prior Year Actuals 7 2016-2017	F	Enacted Y 2017-2018	Existing Oper Budget s of 12/01/17	Continuation FY 2018-2019	ecommended Y 2018-2019	Total commended ver/(Under) EOB
Means of Financing:								
State General Fund (Direct)	\$	12,358,418	\$	13,421,537	\$ 13,421,537	\$ 15,577,604	\$ 14,888,604	\$ 1,467,067
State General Fund by:								
Total Interagency Transfers		1,783,262		2,347,630	2,347,630	2,347,630	2,347,630	0
Fees and Self-generated Revenues		2,500,000		2,775,000	2,775,000	2,925,000	2,925,000	150,000
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	\$	16,641,680	\$	18,544,167	\$ 18,544,167	\$ 20,850,234	\$ 20,161,234	\$ 1,617,067
Expenditures & Request:								
Jefferson Parish Human Services Authority	\$	16,641,680	\$	18,544,167	\$ 18,544,167	\$ 20,850,234	\$ 20,161,234	\$ 1,617,067
Total Expenditures & Request	\$	16,641,680	\$	18,544,167	\$ 18,544,167	\$ 20,850,234	\$ 20,161,234	\$ 1,617,067
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), R.S. 29:912, and related statutes.

Program Description

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

- JeffCare Provides adults, children, adolescents, and their families with inter- and outer-agency coordinated care through collaborations that aid in the provision of integrated primary care and behavioral health services that improve health outcomes, reduce costly and restrictive inpatient or out-of-home placement, and address key health factors such as self-care and reduction of unhealthy behaviors. Clinic-based care for individuals discharged from hospitals is facilitated by care managers; follow-up services are determined by primary care needs and a best practice level of care system for behavioral health needs; and, services are individualized by a multidisciplinary treatment team that includes the adult, child, or adolescent, and the family served.
- Behavioral Health Community Services Provides community-based treatment and support services for
 adults, children and adolescents with serious mental illness, emotional and behavioral disorders, and/or
 addictive disorders. Treatment and support services include the development, expansion, and provision of
 housing, employment, mobile crisis services and in-home treatments and supports, as well as, linkage to
 additional community resources. Services prevent psychiatric hospitalization, facilitate independence, and
 maximize individual recovery and resiliency.
- Developmental Disabilities Community Services Provides a single point of entry for individuals with developmental disabilities. Supports and services are person- and family-centered and planned to assist individuals with developmental disabilities to achieve full participation and inclusion in their community. Developmental Disabilities Community Services encourages full community participation and inclusion by focusing on increasing independence, promoting equal employment, supporting educational goals, assisting with increasing skill development, and decreasing challenging behaviors that may lead to institutionalization or services in a more restrictive setting.
- Performance & Quality Improvement/Business Management Services Provides accreditation maintenance; quality management (monitoring, auditing, corrective action and/or improvement activities); utilization review and management (right services at the right time for the right duration with the right provider and record review); decision support (data collection, mining and analysis); outcomes reporting; managed care contracting and credentialing; service billing and denial management; contract and grants administration; fiscal/accounting services; facilities management; risk prevention and safety inspection; information technology management (network, hardware, software); human resources management and internal consulting; training; and, benefits management. JPHSA nurtures a culture of service quality, efficiency, and efficacy as well as maximization of resources and capacity.

For additional information, see:

Jefferson Parish Human Services Authority



Jefferson Parish Human Services Authority Budget Summary

		rior Year Actuals 2016-2017	F	Enacted Y 2017-2018	existing Oper Budget s of 12/01/17	Continuation FY 2018-2019	ecommended Y 2018-2019	Total commended ver/(Under) EOB
Means of Financing:								
State General Fund (Direct)	\$	12,358,418	\$	13,421,537	\$ 13,421,537	\$ 15,577,604	\$ 14,888,604	\$ 1,467,067
State General Fund by:								
Total Interagency Transfers		1,783,262		2,347,630	2,347,630	2,347,630	2,347,630	0
Fees and Self-generated Revenues		2,500,000		2,775,000	2,775,000	2,925,000	2,925,000	150,000
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	\$	16,641,680	\$	18,544,167	\$ 18,544,167	\$ 20,850,234	\$ 20,161,234	\$ 1,617,067
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		16,641,680		18,544,167	18,544,167	20,850,234	20,161,234	1,617,067
Total Acq & Major Repairs		0		0	0	0	0	0
Total Unallotted		0		0	0	0	0	0
Total Expenditures & Request	\$	16,641,680	\$	18,544,167	\$ 18,544,167	\$ 20,850,234	\$ 20,161,234	\$ 1,617,067
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

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 through the Statewide Managed Care Organizations. The Interagency Transfers are from the Office of Behavioral Health and Medical Vendor Payments - Title XIX.



Major Changes from Existing Operating Budget

		Table of	
neral Fund	Total Amount	Organization	Description
\$ 0	\$ 0	0	Mid-Year Adjustments (BA-7s):
\$ 13,421,537	\$ 18,544,167	0	Existing Oper Budget as of 12/01/17
			Statewide Major Financial Changes:
51,550	51,550	0	2% General Increase Annualization Classified
314,870	314,870	0	Market Rate Classified
94,627	94,627	0	Civil Service Training Series
522,444	522,444	0	Related Benefits Base Adjustment
1,135,011	1,135,011	0	Salary Base Adjustment
(623,494)	(623,494)	0	Attrition Adjustment
(1,133,993)	(1,133,993)	0	Personnel Reductions
(16,339)	(16,339)	0	Risk Management
(888)	(888)	0	UPS Fees
283	283	0	Civil Service Fees
(10,997)	(10,997)	0	Office of Technology Services (OTS)
			Non-Statewide Major Financial Changes:
0	150,000	0	Increase in Fees and Self-generated revenue to account to align with increase client volume.
1,133,993	1,133,993	0	Realigning funds from personnel to Other Charges for needed operating expenses and contracts.
\$ 14,888,604	\$ 20,161,234	0	Recommended FY 2018-2019
\$ 0	\$ 0	0	Less Supplementary Recommendation
\$ 14,888,604	\$ 20,161,234	0	Base Executive Budget FY 2018-2019
\$ 14,888,604	\$ 20,161,234	0	Grand Total Recommended

Professional Services

Amount	Description
	This agency does not have funding for Professional Services.

Other Charges

Amount		Description	
	Other Charges:		



Other Charges (Continued)

Amount	Description
\$14,426,918	Salaries and related benefits for Other Charges positions
\$5,516,224	Contractual and operating costs of mental health, addictive disorders and developmental disability services
\$19,943,142	SUB-TOTAL OTHER CHARGES
	Interagency Transfers:
\$45,318	Payments to the Department of Civil Service - Civil Service Fees
\$143,587	Payments to the Division of Administration - Risk Management
\$8,094	Payments to the Division of Administration - Uniform Payroll Services
\$21,093	Payments to the Division of Administration-Technology Services
\$218,092	SUB-TOTAL INTERAGENCY TRANSFERS
\$20,161,234	TOTAL OTHER CHARGES

Acquisitions and Major Repairs

Amount	Description
	This agency does not have funding for Acquisitions and Major Repairs.

Performance Information

1. (KEY) Through the JeffCare activity, provide a continuum of integrated care services appropriate for all ages and abilities that generate sufficient resources to support the implementation and maintenance of evidence-based practices through FY 2021-2022.

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 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): Substance Abuse and Mental Health Services Administration; Healthy People 2020; Institute of Medicine Report; National Alliance for the Mentally Ill; National Council for Behavioral Health; American Academy of Pediatrics - Mental Health Initiatives; Universal Design; and, Louisiana Act 1078.



	rs					
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Ind Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Number of adults who receive primary care services (LAPAS CODE - 25521)	10,000	3,614	10,000	10,000	10,000	10,000
K Number of children and adolescents who receive primary care services (LAPAS CODE - 25526)	250	186	250	250	250	250
K Number of adults who receive behavioral health services (LAPAS CODE - 25522)	7,500	6,537	7,500	7,500	7,000	7,000
The Performance Standard fo fully integrated Primary and I stable, may opt to receive car capacity for those individuals	Behavioral Heath Car e from a JPHSA Prin	re. Service recipients nary Care provider ra	s with low-level Beh	avioral Health need	s, e.g. mild depression	on, and who are
K Number of children and adolescents who receive behavioral health services (LAPAS CODE - 25527)	2,200	1,590	2,200	2,200	2,200	2,20
K Number of individuals assisted with submission of applications through the						
Health Insurance Marketplace or the Louisiana Medicaid portals (LAPAS CODE - 26067)	Not Applicable	Not Applicable	1,200	1,200	1,200	1,200
Marketplace or the Louisiana Medicaid portals	Not Applicable 2,000	Not Applicable 2,178	1,200 2,000	1,200 2,000	1,200 2,250	1,20 2,25



50%

70%

50%

70%

50%

70%

56%

58%

50%

70%

K Percent of adults who report improvement in or maintenance of recovery behaviors of goal setting, knowledge of symptom control, and responsibility for recovery (LAPAS CODE - 25525)

K Percent of children and adolescents who report improvement in or maintenance of attention deficit symptoms (LAPAS CODE - 25529) 50%

70%

2. (KEY) Through the Behavioral Health Community-Based and Specialty Services activity, provide a continuum of best and evidence-based practices to serve individuals of all ages, ensure care coordination among programs, and retain or acquire resources needed to maintain such programs by the end of FY 2021-2022.

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: Jefferson Parish Human Services Authority has an array of Authority-wide 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): Substance Abuse and Mental Health Services Administration; Healthy People 2020; Institute of Medicine Report; National Alliance for the Mentally Ill; National Council for Behavioral Health; American Academy of Pediatrics - Mental Health Initiatives; Universal Design; and, Louisiana Act 1078.

Performance Indicators

			Performance Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Percent of adults receiving community-based services who remain in the community without a hospitalization (LAPAS CODE - 25519)	85%	87%	85%	85%	85%	85%
K Percent of adults receiving community-based services who remain in stable housing (LAPAS CODE - 25520)	87%	97%	87%	87%	90%	90%
S Percent of individuals completing Multi-Systemic Therapy (MST) living in the home (LAPAS CODE - 26068)	Not Applicable	Not Applicable	90%	90%	90%	90%

This was a new Performance Indicator for FY 2017-2018.



Performance Indicators (Continued)

			Performance Ind	icator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
S Percent of individuals completing Functional Family Therapy (FFT) living in the home (LAPAS CODE - 26069)	Not Applicable	Not Applicable	90%	90%	90%	90%
This is a new performance inc	licator for FY 2017-	2018.				
K Percent of payor denials for Functional Family Therapy (FFT), Multi-Systemic Therapy (MST), and Community Psychiatric Supportive Treatment (CPST) services (LAPAS CODE - 26070)	Not Applicable	Not Applicable	5%	5%	5%	5%
This is a new performance inc	licator for FY 2017-	2018.				

Jefferson Parish Human Services Authority General Performance Information

		Perfo	mance Indicator V	alues	
Performance Indicator Name	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016	Prior Year Actual FY 2016-2017
Percent of youth showing a decrease in positive attitude and an increase in perception of harm toward substance use/abuse (LAPAS CODE - 26258)	Not Available	Not Available	Not Available	13%	7%
This is a new performance indicator for FY 20	17-2018.				
Percent of individuals completing Multi- Systemic Therapy (MST) free from arrests (LAPAS CODE - 23818)	68%	92%	89%	87%	92%
Percent of individuals completing Multi- Systemic Therapy (MST) in school or working (LAPAS CODE - 23819)	86%	96%	84%	87%	98%
Percent of youth who completed Functional Family Therapy (FFT) showing improvement in behavioral problems (LAPAS CODE - 23821)	72%	95%	85%	79%	82%

3. (KEY) Through the Developmental Disabilities Community Services activity, promote wellness, independence, and productivity through integrated care and use of best practices by the end of FY 2021-2022.

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 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): Healthy People 2020; Universal Design; American Association on Intellectual and Developmental Disabilities; Individuals with Disabilities Education Act; Louisiana Act 378; and, Louisiana Act 1078.

Performance Indicators

				Performance Ind	licator Values		
L e v e l	Performance Indicator Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K	Percent of new system entry applications received and completed within 45 calendar days (LAPAS CODE - NEW)	Not Applicable	Not Applicable	90%	90%	90%	90%
	This is a new performance ind	icator for FY 2017-	2018.				
K	Total unduplicated number of individuals receiving developmental disabilities community-based services (LAPAS CODE - NEW)	Not Applicable	Not Applicable	1,760	1,760	1,760	1,760
	This is a new performance ind	icator for FY 2017-	2018.				
S	Percent of Individual and Family Support recipients who remain living in the community vs. institution (LAPAS CODE - 22936)	97%	99%	97%	97%	97%	97%
S	Percent of available home and community-based waiver slots utilized (LAPAS CODE - 25513)	97%	100%	97%	97%	97%	97%
S	Percent of individuals participating in home and community-based waivers utilizing self-direction (LAPAS CODE - 25514)	8%	9%	8%	8%	9%	9%

4. (KEY) Through the Performance & Quality Improvement/Business Management Services activity, optimize resources through leadership, communication, workforce development and maximization of operational efficiency while maintaining the highest level of performance and accountability through FY 2021-2022.

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 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): Substance Abuse and Mental Health Services Administration; Healthy People 2020; Universal Design; American Association on Intellectual and Developmental Disabilities; and, Louisiana Act 1078.

Performance Indicators

				Performance In	dicator Values		
L e v e l	Performance Indicator Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
	Average number of days from date of service to claim submission (LAPAS CODE - 25515)	5	4	5	5	5	5

Jefferson Parish Human Services Authority General Performance Information

		Perfo	mance Indicator V	alues	
Performance Indicator Name	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016	Prior Year Actual FY 2016-2017
Percent compliance with Performance Evaluation System (PES) evaluations completed within required timeframe (LAPAS CODE - 25530)	100%	100%	100%	100%	100%
Percent of JPHSA Annual Performance & Quality Improvement Initiatives achieved (LAPAS CODE - 25532)	100%	100%	86%	78%	50%
Percent compliance with recommended frequency of documented individual supervision per Staff Development & Supervision Guidelines (LAPAS CODE - 25257)	Not Available	Not Available	Not Available	80%	70%
This is a new performance indicator for FY 20	17-2018.				



09-301 — Florida Parishes Human Services Authority



Agency Description

Florida Parishes Human Services Authority (FPHSA) is lighting the path forward into Recovery by providing person-centered services to those with behavioral health needs and developmental disabilities so that they may reach their fullest potential in health and wellness.

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 behavioral health disorders (substance use and serious/persistent mental illness) and developmental disabilities, 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 the use of data-based decision-making.
- III. To promote healthy and safe lifestyles 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 the 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 behavioral health disorders and developmental disabilities 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 Louisiana Department of Health (LDH). 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 FPHSA Board of Directors and administration assure consistency of its goals with LDH in the areas of prevention, treatment, support, and advocacy for persons with behavioral health disorders and developmental disabilities.

For additional information, see:



Florida Parishes Human Services Authority

Florida Parishes Human Services Authority Budget Summary

		Prior Year Actuals 7 2016-2017	F	Enacted Y 2017-2018	xisting Oper Budget s of 12/01/17	Continuation Y 2018-2019	commended Y 2018-2019	Total ecommended ver/(Under) EOB
Means of Financing:								
State General Fund (Direct)	\$	11,007,457	\$	11,346,084	\$ 11,346,084	\$ 13,631,150	\$ 13,021,287	\$ 1,675,203
State General Fund by:		, ,		, ,	, ,	, ,	, ,	, ,
Total Interagency Transfers		4,743,510		5,060,823	5,060,823	4,760,469	4,760,469	(300,354)
Fees and Self-generated Revenues		2,052,176		2,254,288	2,254,288	2,372,807	2,275,086	20,798
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	\$	17,803,143	\$	18,661,195	\$ 18,661,195	\$ 20,764,426	\$ 20,056,842	\$ 1,395,647
Expenditures & Request:								
Florida Parishes Human Services Authority	\$	17,803,143	\$	18,661,195	\$ 18,661,195	\$ 20,764,426	\$ 20,056,842	\$ 1,395,647
Total Expenditures & Request	\$	17,803,143	\$	18,661,195	\$ 18,661,195	\$ 20,764,426	\$ 20,056,842	\$ 1,395,647
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

Created and authorized by: Act 594 of the 2003 Regular Legislative Session and operates under the following provisions of the Louisiana Revised Statutes (LSA-RS): R.S. 36:258(I); R.S. 28:911-920; R.S. 28.851-856; R.S. 28:771.

Program Description

The program has two major activities: Behavioral Health Services (substance use and serious/persistent mental illness) and Developmental Disabilities Services. Also included is the activity of Executive Administration.

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

- Behavioral Health Services (BHS) provides an accessible system of prevention and treatment services for addiction and mental health, as well as home and community-based services. These services are available for persons residing in all five parishes served by FPHSA.
- Primary Prevention 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 these substances, concentrating on areas where research and experience suggest that success in reducing abuse and addiction is most likely. Evidenced-based programs are currently administered to students in schools in three of the five parishes. Also included is the prevention gambling initiative, "Kid's Don't Gamble...Wanna Bet?"; as well as the ages 18-25 initiative.
- Substance Use Disorders and Gambling Treatment FPHSA promotes and supports healthy lifestyles for
 individuals, families, and communities by providing treatment for substance use disorders and compulsive
 problem gambling. Priority admission and preference to treatment is given in the following order: Pregnant Intravenous Drug Users; Other Pregnant Substance Abusers; Intravenous Drug Users; all others seeking treatment. Levels of care include:
- Outpatient clinics provide intensive and non-intensive outpatient treatment. Intensive outpatient treatment consists of a minimum of nine hours per week at a minimum of three days per week for adults 18 years and older. Non-intensive treatment includes aftercare, counseling and supportive services. The primary mode of treatment for substance use and compulsive problem gambling is group counseling.
- Residential Treatment (Alcohol Drug Unit/Fontainebleau Treatment Center) is a twenty-four hours a day, seven days a week residential treatment modality providing non-acute care; it includes a planned and professionally implemented treatment regime for persons experiencing alcohol and/or other substance use problems.
- Mental Health Services FPHSA provides services to adults with severe and persistent mental illness, as
 well as services for children and adolescents. Clinic-based services, as well as outreach and home and
 community-based services, are provided in the five parish area in order to enhance accessibility. Services
 provided are individualized, educational, and supportive to assist individuals in their recovery.
- All of these services are coordinated and every effort is made to avoid duplication of services, both within
 the agency and with other community service providers and stakeholders. This philosophy and promotion
 of coordination and collaboration of service delivery helps to maximize use of limited resources, both staff
 resources and funding for contracted services.



- Developmental Disabilities Services (DDS) focuses on community-based 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, Individual and 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 and/or intellectual impairment, must occur prior to the age of 22, not solely attributed to mental illness, and results in substantial functional limitations in three or more areas of major life activities. The Entry Services unit determines whether the individual meets criteria for participation in the system.
- Community Support Professionals assist individuals in obtaining needed services through an assessment of their needs, and development of a Plan of Support (POS) which identifies and provides access to natural community supports and system-funded services (such as Medicaid) to meet their needs. Information and referral to other agencies is provided on an ongoing basis.
- Individual and 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 LDH 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 child with a developmental disability in the
 home.
- Residential Living Options include a broad range of living options which provide 24-hour supports such as community homes and Supports and Services Centers.
- 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 this state with the mission to direct the operation and management of public community-based programs and services relative to behavioral health disorders (including Alcohol Drug Unit and Fontainebleau Treatment Center) and developmental disabilities in the FPHSA catchment area. FPHSA was created to pool funding dollars in the areas of behavioral health and developmental disabilities services and to bring spending and operational decisions down to the local level. FPHSA's geographical service area includes the five 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. 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.

For additional information, see:

Florida Parishes Human Services Authority

Florida Parishes Human Services Authority Budget Summary

	Prior Year Actuals FY 2016-2017		F	Enacted FY 2017-2018	Existing Oper Budget as of 12/01/17		Continuation FY 2018-2019		Recommended FY 2018-2019		Total Recommended Over/(Under) EOB	
Means of Financing:												
State General Fund (Direct)	\$	11,007,457	\$	11,346,084	\$	11,346,084	\$	13,631,150	\$	13,021,287	\$	1,675,203
State General Fund by:												
Total Interagency Transfers		4,743,510		5,060,823		5,060,823		4,760,469		4,760,469		(300,354)
Fees and Self-generated Revenues		2,052,176		2,254,288		2,254,288		2,372,807		2,275,086		20,798
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	\$	17,803,143	\$	18,661,195	\$	18,661,195	\$	20,764,426	\$	20,056,842	\$	1,395,647
Expenditures & Request:												
Personal Services	\$	0	\$	0	\$	0	\$	0	\$	0	\$	0
Total Operating Expenses		776,946		795,314		795,314		818,306		795,314		0
Total Professional Services		0		0		0		0		0		0
Total Other Charges		17,026,197		17,865,881		17,865,881		19,946,120		19,240,730		1,374,849
Total Acq & Major Repairs		0		0		0		0		20,798		20,798
Total Unallotted		0		0		0		0		0		0
Total Expenditures & Request	\$	17,803,143	\$	18,661,195	\$	18,661,195	\$	20,764,426	\$	20,056,842	\$	1,395,647
Authorized Full-Time Equiva	lante											
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

This program is funded with State General Fund, Interagency Transfers, and Fees and Self-generated Revenues. The Interagency Transfers are from the Office of Behavioral Health, Office of Aging and Adult Services, Department of Public Safety - Office of Corrections, and Bureau of Health Services Financing. The Fees and Self-generated Revenues are from the collection of billable services provided to clients generated from Managed Care Organizations, Medicare, Third Party Liability, and Self-Pay clients; the 22nd Judicial District Court for services provided in accordance with Memorandum of Understandings; and copy fees for medical records.

Major Changes from Existing Operating Budget

G	eneral Fund	Т	otal Amount	Table of Organization	Description
\$	0	\$	0	0	Mid-Year Adjustments (BA-7s):
\$	11,346,084	\$	18,661,195	0	Existing Oper Budget as of 12/01/17
					Statewide Major Financial Changes:
	101,537		101,537	0	2% General Increase Annualization Classified
	4,769		4,769	0	Structural Annualization Classified
	330,616		330,616	0	Market Rate Classified
	3,614		3,614	0	Civil Service Training Series
	552,047		552,047	0	Related Benefits Base Adjustment
	1,310,870		1,310,870	0	Salary Base Adjustment
	(609,863)		(609,863)	0	Attrition Adjustment
	(1,711,521)		(1,711,521)	0	Personnel Reductions
	0		20,798	0	Acquisitions & Major Repairs
	(23,075)		(23,075)	0	Risk Management
	7,141		7,141	0	Legislative Auditor Fees
	(1,189)		(1,189)	0	UPS Fees
	3,896		3,896	0	Civil Service Fees
	(7,207)		(7,207)	0	Office of Technology Services (OTS)
	2,047		2,047	0	Office of State Procurement
					Non-Statewide Major Financial Changes:
	0		(15,000)	0	Reduction of a contract with La Dept. of Public Safety and Corrections due to historical utilization patterns.
	0		(285,354)	0	Interagency Transfer adjustment from Louisiana Department of Health Office of Behavioral Health/Addictive Disorders to Florida Parishes Human Services Authority.



Major Changes from Existing Operating Budget (Continued)

Ge	eneral Fund	To	otal Amount	Table of Organization	Description
	1,711,521		1,711,521	0	Realigning funds from personnel to Other Charges for needed operating expenses and contracts.
\$	13,021,287	\$	20,056,842	0	Recommended FY 2018-2019
\$	0	\$	0	0	Less Supplementary Recommendation
\$	13,021,287	\$	20,056,842	0	Base Executive Budget FY 2018-2019
\$	13,021,287	\$	20,056,842	0	Grand Total Recommended

Professional Services

Amount	Description
	This agency does not have funding for Professional Services.

Other Charges

Amount	Description
	Other Charges:
\$14,399,070	Salaries and related benefits for Other Charges positions
\$4,336,023	Contractual and operating costs of mental health, addictive disorders and developmental disabilities services
\$18,735,093	SUB-TOTAL OTHER CHARGES
	Interagency Transfers:
\$51,494	Payments to the Department of Civil Service - Civil Service and Comprehensive Public Training Program Fees
\$83,188	Payments to the Division of Administration - Technology Services
\$188,513	Payments to the Division of Administration - Risk Management
\$8,154	Payments to the Division of Administration - Uniform Payroll Services
\$50,698	Payments to the Legislative Auditor
\$3,116	Payments to the Division of Administration - Office of State Procurement
\$120,474	Transfers to other state agencies (Office of Telecommunications, Office of State Police/Dept. of Public Safety and Services, etc.)
\$505,637	SUB-TOTAL INTERAGENCY TRANSFERS
\$19,240,730	TOTAL OTHER CHARGES

Acquisitions and Major Repairs

Amount	Description
	This agency does not have funding for Acquisitions and Major Repairs.



Performance Information

1. (KEY) Through the Behavioral Health Services (BHS) activity, FPHSA will maintain the quality of treatment services for individuals with behavioral health disorders and prevention services while providing them in a more cost-effective manner, each year through June 30, 2022.

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): Smoking Cessation services are linked to the Tobacco Settlement; Integrated care delivery of treatment services are linked to the Managed Care Organization initiative; Behavioral health treatment services for pregnant women are linked to the Birth outcomes initiative; STD/HIV/TB services are linked to Office of Public Health Strategic Plan Program A Objective VII prevention of the spread of STD/HIV/AIDS and TB; Prevention services for youth are linked to Synar requirements to reduce youth tobacco access and Healthy People 2020 (TU-2 Reduce tobacco use by adolescents); Treatment services for youth are linked to Coordinated System of Care (CSoC) initiative; Treatment and prevention services are linked to Substance Abuse and Mental Health Services Administration (SAMHSA); Treatment services are linked to Healthy People 2020 (MHMD-10 Increase the proportion of person with co-occurring substance abuse and mental disorders who receive treatment); Healthy People 2020; National Council for Behavioral Health Same Day Access initiative; and Substance Abuse and Mental Health Services Administration (SAMHSA). Treatment services are linked to NAVIGATE first episode psychosis program providing early intervention to persons newly experiencing psychosis to increase recovery and community integration.

Explanatory Note: The Florida Parishes Human Services Authority provides community-based behavioral health 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

				Performance Inc	dicator Values		
L e v e l	Performance Indicator Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K	Percentage of adult service recipients remaining in outpatient substance use disorders treatment for at least six weeks. (LAPAS CODE - 25516)	65%	45%	60%	60%	55%	55%
K	Percentage of individuals successfully completing the Level III.5 Adult residential treatment program (FTC/ADU) (LAPAS CODE - 21038)	80%	74%	80%	80%	75%	75%
S	Average daily census - Level III.5 Adult residential treatment program (FTC/ADU)) (LAPAS CODE - 21039)	34	32	34	34	34	34
K	Total number of persons registered in evidence- based educational (prevention) programming (enrollees). (LAPAS CODE - 25517)	8,310	5,379	6,300	6,300	6,300	6,300
	ram.						
K	Total unduplicated number of individuals served in the Level III.5 adult residential treatment program (ADU/FTC). (LAPAS CODE - 25954)	630	572	630	630	570	570
K	Total unduplicated number of persons served in outpatient behavioral health clinics, includes screening, assessment, and treatment of persons seeking services for substance use, mental health, and compulsive gambling. (LAPAS CODE						
	- NEW)	Not Available	Not Available	7,500	7,500	7,500	7,500



Florida Parishes Human Services Authority General Performance Information

				Perfo	rma	nce Indicator V	alue	S		
Performance Indicator Name	Prior Y Actus FY 2012	al		Prior Year Actual 7 2013-2014	F	Prior Year Actual Y 2014-2015		Prior Year Actual Y 2015-2016		Prior Year Actual 7 2016-2017
Percentage of persons on survey who say they would continue to come to FPHSA clinic even if they could go anywhere for treatment. (LAPAS CODE - NEW)	Not Av	railable]	Not Available		Not Available		Not Available		85%
Average cost per client day (Level III.5 Adult residential treatment program)(FTC/ADU)) (LAPAS CODE - 21045)	\$	160	\$	176	\$	174	\$	190	\$	198
Both the addictive disorders services and menta "Behavioral Health Services".	al health ser	vices pe	rform	ance indicators	s hav	ve been combined	d inte	o one new prog	ram a	ectivity,
Average cost per individual served in Level III.5 Adult (FTC/ADU) substance use disorders residential treatment services. (LAPAS CODE - 23829)	\$	3,952	\$	3,883	\$	3,594	\$	3,911	\$	1,484
Both the addictive disorders services and menta "Behavioral Health Services". Change in perfo wording "compulsive problem gambling".								1 0		• .
Average cost per individual served in prevention substance use disorders and prevention gambling programs (LAPAS CODE - 23830)	\$	24	\$	17	\$	11	\$	16	\$	12
Both the addictive disorders services and menta "Behavioral Health Services". Change in perfo wording "compulsive problem gambling".										
Total number of individuals served in prevention programs (LAPAS CODE - 23825)		27,733		38,474		63,357		43,646		53,542
Both the addictive disorders services and menta "Behavioral Health Services".	al health ser	vices pe	rform	ance indicators	s hav	ve been combined	d into	o one new prog	ram a	ectivity,
Total number of merchants educated through Synar services (LAPAS CODE - 23831)		746		705		523		243		531
Both the addictive disorders services and menta "Behavioral Health Services".	al health ser	vices pe	rform	ance indicators	s hav	ve been combined	d int	o one new prog	ram a	ectivity,
Cost per registered enrollee in evidence-based educational (prevention) programs. (LAPAS CODE - 23832)	\$	54	\$	64	\$	60	\$	52	\$	53
Both the addictive disorders services and menta "Behavioral Health Services".	al health ser	vices pe	rform	ance indicators	s hav	ve been combined	d into	o one new prog	ram a	ctivity,
Percentage of Mental Health Services/ Flexible Family Fund recipients who remain in the community (vs. institution) (LAPAS CODE - 25848)	Ģ	96.29%		100.00%		93.30%		97.00%		100.00%
Both the addictive disorders services and menta "Behavioral Health Services".	al health ser	vices pe	rform	ance indicators	s hav	ve been combined	d into	o one new prog	ram a	ectivity,
Average cost per individual served in outpatient Behavioral Health Services. (LAPAS CODE - NEW)	Not Av	ailable]	Not Available		Not Available		Not Available		1,083



2. (KEY) Through the Developmental Disabilities Services (DDS) activity, 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, each year through June 30, 2022.

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): 09-303 Developmental Council; 09-340 Office for Citizens with Developmental Disabilities; Louisiana Health Care Reform Act by providing care to the uninsured, creating access to appropriate health care resources, such as Long Term Care connections, improving health education and awareness, improving local service delivery and providing local resource; Pre-admission Screening and Resident Review (PASRR) services are linked to the Code of Federal Regulations (CFR) 42 Part 483, Sub-part C. PASRR services to Mentally Ill and Mentally Retarded Individuals; The Performance Indicators are linked to the Human Services Accountability and Implementation Plan (AIP) in accordance with the provisions of Louisiana R. S. 28:382.2; Louisiana Act 378, Family Support Act of 1989 through Flexible Family Funds.

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 resulting 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	dicator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Total unduplicated number of individuals receiving community-based developmental disabilities services (LAPAS CODE - 21022)	402	457	402	402	445	445

The performance standard is being increased to reflect the increase in Individual Family Support (IFS) and Pre-admission Screening Resident Review (PASRR) services.

K Total unduplicated number of individuals receiving Individual and Family Support services. (LAPAS CODE - 21023) 170 182 170 170 182 182

The performance standard was set prior to Act. No. 73 of the 2017 Regular session which increased the funds available for IFS services. Therefore, the total number of IFS recipients receiving services is increased.



Performance Indicators (Continued)

				Performance Inc	dicator Values		
L e v e l	Performance Indicator Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K	Total unduplicated number of individuals receiving Flexible Family Fund services. (LAPAS CODE - 23833)	170	187	180	180	180	180
	This Performance Standard is	being increased to	allow for individuals	that will age out of	Flexible Family Fun	d services during Fi	scal Year 2017-

This Performance Standard is being increased to allow for individuals that will age out of Flexible Family Fund services during Fiscal Year 2017-2018, resulting in their slot becoming open and filled by another qualifying individual.

K Total unduplicated number of individuals receiving Individual and Family Support Crisis services. (LAPAS CODE - 23834)	60	48	60	60	60	60
K Total unduplicated number of individuals receiving Pre-Admission Screening and Resident Review (PASRR) services. (LAPAS CODE - 23835)	25	49	25	25	45	45

The number of individuals receiving PASRR services is increasing to capture all PASRR services, not just those admitting to a nursing home.

	0	<i>C</i> 1		, J	2	
K Percentage of Waiver participants with a current Statement of Approval (LAPAS CODE - 24950)	95%	100%	96%	96%	96%	96%
K Percentage of Waiver participants discharged from program services due to admission to an institution (LAPAS CODE - 24951)	0.40%	0.21%	0.40%	0.40%	0.25%	0.25%

The home and community based services are designed to support Waiver recipients in the community. The goal is for Waiver participants to remain in the community. The percentage of waiver participants discharged due to admission to a more restrictive setting is anticipated to remain extremely low; therefore, the future target is decreased to 0.25 percent.



			Perfo	rma	nce Indicator V	'alue	es		
Performance Indicator Name	Prior Year Actual FY 2012-2013		Prior Year Actual FY 2013-2014		Prior Year Actual FY 2014-2015		Prior Year Actual FY 2015-2016		Prior Year Actual FY 2016-2017
Average value of services per individual receiving Individual and Family Support services. (LAPAS CODE - 23837)	\$	1,346	\$ 1,386	\$	2,514	\$	2,850	\$	1,629
Average value of services per individual receiving Flexible Family Funds. (LAPAS CODE - 23838)	\$	2,531	\$ 2,519	\$	2,543	\$	2,958	\$	2,717
Average value of services per individual receiving individual and family Support Crisis Services. (LAPAS CODE - 23839)	\$	698	\$ 680	\$	1,042	\$	945	\$	572
Average cost per individual receiving Pre- admission Screening and Resident Review (PASRR) services. (LAPAS CODE - 23840)	\$	410	\$ 557	\$	407	\$	357	\$	360
Percentage of Flexible Family Fund recipients who remain in the community (vs. institution). (LAPAS CODE - 23842)		100%	100%		100%		100%		100%
Percentage of Individual and Family Support recipients that remain in the community (vs. institution). (LAPAS CODE - 23843)		100%	100%		100%		98%		99%
The total unduplicated number of individuals served through waiver supports and services, including New Opportunities Waiver (NOW), Children's Choice Waiver (CC), Supports Waiver (SW), and Residential Options Waiver (ROW) (LAPAS CODE - 25073)		1,255	1,288		1,365		1,381		1,399

3. (KEY) Through the Executive Administration activity, FPHSA will increase the efficiency of the operation and management of public, community-based services related to behavioral health disorders and developmental disabilities in the Authority's catchment area, each year through June 30, 2022.

Children's Budget Link: Not applicable

Human Resource Policies Beneficial to Women and Families Link: The following Florida Parishes Human Services Authority (FPHSA) policies/procedures currently in place that benefit women and families are: Equal Employment Opportunity, Discrimination and Harassment Complaints, Cultural Diversity and Competency, and Workplace Violence Prevention (also domestic violence). FPHSA, through its Human Resources Office, continues to develop and implement policies that are helpful and beneficial to women and families. FPHSA adheres to all federal, state and/or local laws, including those applicable to women and families. Additionally, FPHSA currently utilizes several of the Louisiana Department of Health Human Resource policies, such as the Family Medical Leave Act and the Grievance Policy, just to name a couple, until such time as the agency can finalize policy implementation of these policies. As part of the policy implementation process, continued monitoring of all applicable resources will ensure that these policies are regularly maintained and updated to ensure accuracy.



Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Get a Game Plan: Emergency Preparedness-Staff members of FPHSA are appropriately trained in state emergency preparedness initiatives and are ready to serve when called upon. Coordination is provided by the Executive Administration activity.

Explanatory Note: FPHSA 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. 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.

Performance Indicators

			Performance Inc	licator Values		
L e v e Performance Indic l Name	Yearend Performance ator Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Percentage of inform technology (IT) work orders closed within business days of worl request (LAPAS CO 25534)	5 S	Not Applicable	95%	95%	90%	90%
K Percentage of contrac invoices for which pa is issued within 30 da agency receipt. (LAI CODE - 25535)	yment ys of	Not Applicable	90%	90%	90%	90%
K Percentage of agency performance indicato with a desirable varia (within +/- 5% of tar with a higher varianci is a positive outcome	rs nce get or e that).	7/0/	Not Applied	N. A. Amelia, I.I.	900/	900/
(LAPAS CODE - NE	W) Not Applicable	76%	Not Applicable	Not Applicable	80%	80%



Florida Parishes Human Services Authority General Performance Information

		Perfo	rmance Indicator V	alues	
Performance Indicator Name	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016	Prior Year Actual FY 2016-2017
Percentage of Performance Evaluation System (PES) completed annually. (LAPAS CODE - 23844)	Not Available	100%	100%	Not Available	100%
Even though the PES performance year ends on period ends on 8/30 annually.	6/30 annually, the re	portable data is not	available for LAPAS	reporting until after	the CS evaluation
Executive Administration expenditures as a percentage of agency's budget. (LAPAS CODE - 23850)	11%	14%	12%	14%	14%
Percentage of agency's moveable property accounted for annually. (LAPAS CODE - 23851)	100%	100%	100%	100%	99%
Total number of individuals served by Florida Parishes Human Services Authority. (LAPAS CODE - 23852)	34,844	46,323	70,084	51,896	64,574
Percentage of contract performance evaluations completed annually. (LAPAS CODE - NEW)	Not Available	Not Available	Not Available	Not Available	97%
Agency's annual turnover rate. (LAPAS CODE - NEW)	Not Available	Not Available	Not Available	Not Available	14%



09-302 — Capital Area Human Services District



Agency Description

The mission of the Capital Area Human Services District (CAHSD) is to facilitate person-centered recovery by empowering people of all ages with behavioral health needs and developmental disability challenges to strengthen relationships, establish independence, and enhance their ability to improve their physical health and emotional wellbeing. 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 that 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 Louisiana Department of Health 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.
- IV. To be structurally and functionally prepared to operate clinics in a managed care, managed Medicaid environment within the context of health care reform.

For additional information, see:

Capital Area Human Services District



Capital Area Human Services District Budget Summary

		rior Year Actuals 2016-2017	F	Enacted Y 2017-2018	xisting Oper Budget s of 12/01/17	Continuation FY 2018-2019	ecommended Y 2018-2019	Total commended ver/(Under) EOB
Means of Financing:								
State General Fund (Direct)	\$	13,878,402	\$	15,837,429	\$ 15,837,429	\$ 17,219,442	\$ 16,799,920	\$ 962,491
State General Fund by:								
Total Interagency Transfers		6,012,390		6,472,675	6,472,675	6,472,675	6,472,675	0
Fees and Self-generated Revenues		4,459,666		3,553,108	3,553,108	3,553,108	3,553,108	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	\$	24,350,458	\$	25,863,212	\$ 25,863,212	\$ 27,245,225	\$ 26,825,703	\$ 962,491
Expenditures & Request:								
Capital Area Human Services District	\$	24,350,458	\$	25,863,212	\$ 25,863,212	\$ 27,245,225	\$ 26,825,703	\$ 962,491
Total Expenditures & Request	\$	24,350,458	\$	25,863,212	\$ 25,863,212	\$ 27,245,225	\$ 26,825,703	\$ 962,491
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. 28:901-906; R.S. 28:911-920; R.S. 28:771(D); R.S. 36:254(F); and R.S. 36:258(G)-(I)

Program Description

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 Louisiana Department of Health (LDH) through a Memorandum of Understanding (MOU) monitored by the LDH 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 Office for Citizens with Developmental Disabilities operates community-based services for people with mental retardation, developmental disabilities and autism residing in the District's service area.
- Nurse Family Partnership CAHSD Nurse Family Partnership operates the Maternal and Child Health Program for individuals residing in the District's service 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.
- Adult Behavioral Health Services CAHSD Adult Behavioral Health Services provides the mental health and addiction recovery treatment and support services for adults.
- Prevention and Primary Care CAHSD Prevention and Primary Care Coordination provides physical health screening and referral from the behavioral health settings for clients receiving mental health and addiction recovery services.
- Disaster Response CAHSD Disaster Response provides targeted communication, supports, and services prior to, during and after an emergency/disaster; and participates in staffing and management of the Region 2 Medical Special Needs Shelter Theater by providing leadership and 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 works with community partners to develop crisis continuum to prevent, mitigate and avoid repeated cycles of crises to reduce reliance on first responders, emergency departments and acute psychiatric beds.



Capital Area Human Services District Budget Summary

	Prior Year Actuals FY 2016-2017		F	Enacted FY 2017-2018		Existing Oper Budget as of 12/01/17		Continuation FY 2018-2019		ecommended Y 2018-2019	Total Recommended Over/(Under) EOB	
Means of Financing:												
State General Fund (Direct)	\$	13,878,402	\$	15,837,429	\$	15,837,429	\$	17,219,442	\$	16,799,920	\$	962,491
State General Fund by:												
Total Interagency Transfers		6,012,390		6,472,675		6,472,675		6,472,675		6,472,675		0
Fees and Self-generated Revenues		4,459,666		3,553,108		3,553,108		3,553,108		3,553,108		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	\$	24,350,458	\$	25,863,212	\$	25,863,212	\$	27,245,225	\$	26,825,703	\$	962,491
Expenditures & Request:												
Personal Services	\$	0	\$	0	\$	0	\$	0	\$	0	\$	0
Total Operating Expenses		648,894		827,574		827,574		827,574		827,574		0
Total Professional Services		36,874		42,000		42,000		42,000		42,000		0
Total Other Charges		23,664,690		24,993,638		24,993,638		26,375,651		25,956,129		962,491
TotalAcq&MajorRepairs		0		0		0		0		0		0
Total Unallotted		0		0		0		0		0		0
Total Expenditures & Request	\$	24,350,458	\$	25,863,212	\$	25,863,212	\$	27,245,225	\$	26,825,703	\$	962,491
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, and Fees and Self-generated Revenues. 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, and payments from the Office of Public Health for community based services in Region 2. Fees and Self-generated Revenues represent reimbursements for ineligible patient fees from the Office of Behavioral Health, and collection of fees for services provided to clients through insurance, self-pay, and the Statewide Management Organization (SMO).



Major Changes from Existing Operating Budget

			Table of	
Ge	neral Fund	Total Amount	Organization	Description
\$	0	\$ 0	0	Mid-Year Adjustments (BA-7s):
\$	15,837,429	\$ 25,863,212	0	Existing Oper Budget as of 12/01/17
				Statewide Major Financial Changes:
	132,643	132,643	0	2% General Increase Annualization Classified
	13,288	13,288	0	Structural Annualization Classified
	446,432	446,432	0	Market Rate Classified
	359,611	359,611	0	Related Benefits Base Adjustment
	130	130	0	Retirement Rate Adjustment
	464,790	464,790	0	Salary Base Adjustment
	(419,522)	(419,522)	0	Attrition Adjustment
	(961,691)	(961,691)	0	Personnel Reductions
	(19,471)	(19,471)	0	Risk Management
	2,381	2,381	0	Legislative Auditor Fees
	(23,175)	(23,175)	0	Rent in State-Owned Buildings
	(730)	(730)	0	UPS Fees
	(1,858)	(1,858)	0	Civil Service Fees
	9,281	9,281	0	Office of Technology Services (OTS)
	(1,309)	(1,309)	0	Office of State Procurement
				Non-Statewide Major Financial Changes:
	961,691	961,691	0	Transfers funding from positions to Other Charges for needed operating expenses and contracts.
\$	16,799,920	\$ 26,825,703	0	Recommended FY 2018-2019
\$	0	\$ 0	0	Less Supplementary Recommendation
\$	16,799,920	\$ 26,825,703	0	Base Executive Budget FY 2018-2019
\$	16,799,920	\$ 26,825,703	0	Grand Total Recommended

Professional Services

Amount	Description		
\$42,000	Direct legal, medical, dental and other professional services		
\$42,000	TOTAL PROFESSIONAL SERVICES		



Other Charges

Amount	Description
	Other Charges:
\$20,462,261	Salaries and related benefits for Other Charges positions
\$3,898,577	Contractual and operating costs of mental health, public health, addictive disorders and developmental disability services
\$24,360,838	SUB-TOTAL OTHER CHARGES
	Interagency Transfers:
\$73,262	Payments to the Department of Civil Service
\$75,981	Payments to the Division of Administration - Technology Services
\$246,322	Payments to the Division of Administration - Risk Management
\$12,162	Payments to the Division of Administration - Uniform Payroll Services
\$0	Payments to the Division of Administration - Office of State Procurement
\$46,779	Payments to the Legislative Auditor
\$277,056	Payments to Capitol Police
\$664,606	Rent in State Owned Buildings
\$199,123	Miscellaneous commodities and services
\$1,595,291	SUB-TOTAL INTERAGENCY TRANSFERS
\$25,956,129	TOTAL OTHER CHARGES

Acquisitions and Major Repairs

Amount	Description				
This agency does not have funding for Acquisitions and Major Repairs.					

Performance Information

1. (KEY) Through the Administration activity, Capital Area Human Services District (CAHSD) will support and oversee programmatic operations that improve health outcomes of the citizens served by ensuring that at least 90% of LaPAS performance 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: Capital Area Human Services District (CAHSD) is a political subdivision of the state created in 1996 to provide the publically funded mental health, addiction recovery and developmental disabilities services in the former DHH Region 2. CAHSD operations is governed by a 17 member Board of Directors nominated by local government and appointed by the Governor. An Executive Director (ED), hired by the Board, is responsible for implementation of successful programmatic and Administrative functions. Administration (in conjunction with an Executive Management Team), under the direction of the ED, establishes strategic goals and objectives, develops policies & procedures, provides direction, training and guidance, and monitors compliance with state and federal regulations, departmental directives, and legislative mandates.

Performance Indicators

	Performance Indicator Values					
Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019	
E 100%	100%	100%	100%	100%	100%	
	100%	100%	100%	100%	100%	
	100%	100%	100%	100%	100%	
	1%	90%	90%	90%	90%	
	0	0	0	0	0	
	Performance Standard FY 2016-2017 EE 100% in 100% al 1100%	Performance Standard Performance FY 2016-2017 EE 100% 100% 100% all 100% 100% 100% 100% 100% 100% 100% 10	Yearend Performance Standard as Initially Appropriated FY 2016-2017	Yearend Performance Standard as Initially Appropriated FY 2016-2017 Performance Standard FY 2017-2018 Performance Standard FY 2017-2018 FY 2017-2018	Yearend Performance Standard as Existing Performance Standard as Standard Standard Performance Performance	

2. (KEY) Through the Developmental Disabilities activity, CAHSD will arrange for services for persons with developmental disabilities in the least restrictive setting near their home or community and will 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 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 to foster/increase their ability to live independently within the community.

Performance Indicators

			Performance Indicator Values			
L e v e Performance Indicate l Name	Yearend Performance or Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
S Percentage of those surveyed reporting that they had choice in the services they received (LAPAS CODE - 15703) 75%	1%	75%	75%	75%	75%
S Percentage of those surveyed reporting they had overall satisfaction with the services receive (LAPAS CODE - 15704		91%	95%	95%	95%	95%
K Percentage of those surveyed reporting that t Individual and Family Support services contributed to maintaining themselves or their faming member in their own hor (LAPAS CODE - 15707)	ng ly ne	1%	80%	80%	80%	80%
S Total persons served (LAPAS CODE - 25518	4,730	3,888	4,730	4,730	4,730	4,730



Capital Area Human Services District General Performance Information

	Performance Indicator Values							
Performance Indicator Name	Prior Year Actual FY 2012-20		Prior Ye Actua FY 2013-2	I		Prior Year Actual Y 2014-2015	Prior Year Actual FY 2015-2016	Prior Year Actual FY 2016-2017
Number of available Family Flexible Fund slots (LAPAS CODE - 11189)		155		198		262	190	170
Amount of Family Flexible Fund stipend per person per month (LAPAS CODE - 11198)	\$	258	\$	258	\$	258	\$ 258	\$ 258
Number of persons determined eligible for MR/DD services, but not yet receiving services (LAPAS CODE - 15712)		430		221		0	196	43

OCDD implemented a new database in FY2012. The new database did not capture this data for Fiscal Year 2011-2012.

Increased funding made available through the 2015 Legislative funding process and leveraging of these funds through LINCCA allowed CAHSD to eliminate the list of those found eligible for services but not yet receiving a service.

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

Children's Budget Link: This objective is linked to Objective I.1.c 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 their future, plan future pregnancies, continue their education and find work.

Performance Indicators

			Performance Ind	licator Values		
L e v e Performance Indicator I Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Total number of home visits completed (LAPAS CODE - 25074)	3,829	2,571	3,829	3,829	3,829	3,829
K Number of families served in program (LAPAS CODE - 25075)	370	146	370	370	370	370



4. (KEY) Through the Children's Behavioral Health Services activity, CAHSD will provide an integrated, comprehensive behavioral health system of care, prevention and treatment services for at-risk youth and their families, ensuring that at least 95% of children/adolescents who are admitted for mental health services and 85% admitted for addiction recovery services 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 Child Mobile Outreach teams in the deescalation and resolution of potential crisis in the home and preventing out-of-home placement and Interagency Services Coordination (ISC) to bring together state and local service providers (CAHSD, DCFS, FINS, OJJ, school officials, truancy officials) to assess and address the needs of children at risk of out-of-home placement, hospitalization or incarceration 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 addiction recovery services to children in their parish of residence.

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Healthy People 2020, Reduce substance abuse to protect the health, safety and quality of life for all, especially children. TANF: Utilizing TANF funds in cooperation with DCFS and OBH, we are now able to provide the treatment services necessary for TANF-eligible women and their children with addiction problems to maintain a lifestyle free from the harmful effects of addiction. The goals of this TANF program include not only addiction recovery 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 problems.



			Performance Ind	licator Values		
L e v e Performance Indicator I Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Percentage of total children/adolescents admitted for mental health services who are served within their parish of residence (LAPAS CODE - 7925)	95%	94%	95%	95%	95%	95%
K Percentage of total children/adolescents admitted for addiction recovery services who are served within their parish of residence (LAPAS CODE - 11142)	85%	97%	85%	85%	85%	85%
S Percentage of persons provided services by Child Mobile Outreach reporting that services helped maintain them or their family member in their home; avoiding unnecessary hospitalization or removal (LAPAS CODE - 23999)	95%	1%	95%	95%	95%	95%
S Percentage reduction of problem behaviors (suspension, expulsion and truancy) by providing behavioral health services in the school setting (LAPAS CODE - 24000)	40%	38%	40%	40%	40%	40%



	Performance Indicator Values					
Performance Indicator Name	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016	Prior Year Actual FY 2016-2017	
Percentage increase in desired knowledge, perceptions, resilience and behaviors related to youth substance use and measured by teh Prevention Impact score (LAPAS CODE - 15713)	6%	18%	20%	16%	16%	
Number of children/adolescents admitted per year who are provided publicly supported behavioral services in their parish of residence (LAPAS CODE - 24001)	679	690	756	750	697	
Number of child/adolescents admitted per year for behavioral health services (LAPAS CODE - 24002)	705	708	795	805	763	
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)	11	10	10	8	8	
Number of parishes in which child/adolescent substance abuse primary prevention programs exist (LAPAS CODE - 11323)	7	7	7	7	7	
Percentage of child/adolescent mental health prevalence population served (LAPAS CODE - 15687)	14.0%	13.0%	15.0%	17.3%	15.8%	
Total children/adolescents served (LAPAS CODE - 24004)	12,393	9,497	9,516	12,280	659	
Average cost per person served in the community (LAPAS CODE - 24005)	\$ 384	\$ 502	\$ 448	\$ 360	\$ 323	

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 85% 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): Healthy People 2020, Reduce substance abuse to protect the health, safety and quality of life for all, especially children. TANF: Utilizing TANF funds in cooperation with DCFS and OBH, we are now able to provide the treatment services necessary for TANF-eligible women and their children with addiction problems to maintain a lifestyle free from the harmful effects of addiction. The goals of this TANF program include not only addiction recovery 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 Inc	dicator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
S Annual percentage of adults reporting satisfactory access to services (LAPAS CODE - 15683)	85%	97%	85%	85%	85%	85%
S Annual percentage of adults reporting positive service quality (LAPAS CODE - 15684)	90%	97%	90%	90%	90%	90%
K Percentage of clients successfully completing outpatient treatment program (Addiction Recovery Services) (LAPAS CODE - 9976)	65%	65%	65%	65%	65%	65%
K Percentage of persons successfully completing residential addictions (CARP 28 day inpatient) treatment program (LAPAS CODE - 11284)	85%	79%	85%	85%	85%	85%
S Percentage of adults with major mental illness served in the community receiving new generation medications (LAPAS CODE - 15680)	95%	83%	95%	95%	95%	95%



Capital Area Human Services District General Performance Information

	Performance Indicator Values				
	Prior Year Actual	Prior Year Actual	Prior Year Actual	Prior Year Actual	Prior Year Actual
Performance Indicator Name	FY 2012-2013	FY 2013-2014	FY 2014-2015	FY 2015-2016	FY 2016-2017
Total adults served in CAHSD (Mental Health) (LAPAS CODE - 24006)	8,097	7,668	8,324	8,967	8,326
Average cost per person served in the community (Mental Health) (LAPAS CODE - 24007)	\$ 1,820	\$ 1,808	\$ 1,069	\$ 896	\$ 840
Percentage of adult mental health prevalence population served (LAPAS CODE - 15686)	50%	59%	63%	68%	63%
Number of Community Mental Health Centers operated in CAHSD (LAPAS CODE - 15688)	3	3	3	7	7
Percentage of Community Mental Health Centers licensed (LAPAS CODE - 11240)	100.00%	100.00%	100.00%	100.00%	100.00%
Total adults served in CAHSD (Addiction Recovery Services) (LAPAS CODE - 25537)	1,394	1,536	2,330	2,123	2,104
Average cost per person served in the community (Addiction Recovery Services) (LAPAS CODE - 25538)	\$ 1,820	\$ 1,808	\$ 2,265	\$ 2,510	\$ 1,143
Numbers of persons provided Social Detoxification Services (LAPAS CODE - 24008)	500	266	213	145	181
Average daily census (Detoxification) (LAPAS CODE - 11241)	35	20	23	6	6
Average length of stay in days (Detoxification) (LAPAS CODE - 11250)	6.30	6.00	6.00	6.37	7.00
Number of beds (Detoxification) (LAPAS CODE - 11297)	37	20	37	35	8
Percentage of positive responses on client survey (Detoxification) (LAPAS CODE - 15700)	51%	Not Available	97%	95%	89%
Number of beds Residential (Inpatient) (LAPAS CODE - 11301)	32	32	32	32	32
Average daily census Residential (Inpatient) (LAPAS CODE - 15698)	28	30	31	26	29
Number of persons provided Residential (28 day Inpatient) services (LAPAS CODE - 24009)	223	445	479	424	455
Number of persons provided Community-Based Residential services (LAPAS CODE - 24010)	95	156	421	354	369
Average daily census (Community-Based Residential) (LAPAS CODE - 15695)	23	64	64	84	84
Number of beds (Community-Based Residential) (LAPAS CODE - 15696)	46	64	66	78	78



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Capital Area Human S	Services Dist	rict General i	Performance	intormation (Continued)

	Performance Indicator Values						
Performance Indicator Name	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016	Prior Year Actual FY 2016-2017		
Number of persons provided Outpatient Addiction Recovery Services (LAPAS CODE - 24011)	1,671	2,519	2,897	2,766	2,104		
Number of services provided (Outpatient Addiction Recovery services) (LAPAS CODE - 11294)	15,793	14,940	18,302	15,056	10,976		
Number of admissions (Outpatient Compulsive Gambling) (LAPAS CODE - 15691)	49	62	30	26	34		
Number of services provided (Outpatient Compulsive Gambling) (LAPAS CODE - 15694)	2,069	1,766	1,003	917	780		

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 95% of new adult admissions in the three largest behavioral health clinics receive a physical health screen.

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 provide 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 Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Percentage of new adult admissions in the three largest behavioral health clinics receiving a physical health screen (LAPAS CODE - 24012)	95%	94%	95%	95%	95%	95%
K Percentage of clients receiving a referral to primary care as a result of the physical health screen (LAPAS CODE - 24013)	25%	19%	25%	25%	25%	25%
K Percentage of clients who keep their first primary care appointment (LAPAS CODE - 24014)	72%	52%	72%	72%	72%	72%
S Percentage of clients who rate the extent to which they felt better on the client satisfaction survey as agree (LAPAS CODE - 24015)	76%	97%	76%	76%	76%	76%

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



L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Ind Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Percentage of Medical Special Needs Shelter- assigned staff who are trained in required NIMS courses (LAPAS CODE - 24017)	100%	96%	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%	97%	80%	80%	80%	80%

8. (KEY) Through the Behavioral Health Emergency Crisis Response activity, CAHSD will provide community-based behavioral health 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 95% 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 crisis response 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 Inc	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
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%	88%	95%	95%	95%	95%
K Percentage of consumers receiving Inter-agency Services Coordination who achieve and maintain residential stability within 12 months (LAPAS CODE - 24024)	70%	0	70%	70%	70%	70%
There were no adult ISC mee	tings held in FY 201	5-2016.				



DEPARTMENT ID: 09-LOUISIANA DEPARTMENT OF HEALTH AGENCY ID: 09-302 CAPITAL AREA HUMAN SERVICES DISTRICT PROGRAM ID: 09-302 CAPITAL AREA HUMAN SERVICES DITRICT PROGRAM ACTIVITY: CAHSD Children's Behavioral Health Services PROGRAM ACTIVITY: CAHSD Adult Behavioral Health Services

	GENERAL PERFORMANCE INF SOUTHERN STATE COMP.		V:	
STATE	Percentage of Adults	Ranked highest volume in Nation	State Mental Health Agency, Mental Health Per Capita Expenditures, 2013	Ranked lowest expenditure in Nation
Alabama	34.8%	21	\$72.64	15
Arkansas	35.9%	10	\$45.56	5
Florida	34.2%	24	NR	1
Georgia	31.6%	39	\$59.33	11
Kentucky	37.0%	6	\$55.06	7
Louisiana	34.7%	22	\$55.50 ³	8
Maryland	33.0%	28	\$178.82	40
Mississippi	32.7%	32	\$55.95	9
North Carolina	30.4%	43	\$97.08	24
Oklahoma	34.3%	23	\$53.01	6
South Carolina	33.9%	26	\$58.35	10
Tennessee	28.5%	49	\$87.48	17
Texas	28.1%	50	\$40.65	4
Virginia	30.1%	45	\$92.58	21
West Virginia	32.0%	38	\$94.44	22
National AVERAGE	33.7%		\$119.62	

¹ In Louisiana, 34.7% of all residents are reporting Poor Mental Health; Statehealthfacts.org 2013

Source:

1 & 2: http://kff.org/other/state-indicator/poor-mental-health-among-adults/ (Percentage of Adults Reporting Poor Mental Health, 2013)
3 & 4: http://kff.org/other/state-indicator/smha-expenditures-per-capita/ (State Mental health Agency (SMHA), Per Capita Mental Health Services Expenditures, FY2013)



² We are 1% above the national average which ranks us as a state with a slightly greater than average number of residents suffering from SMI, we rank 22nd in the nation for highest number per capita; Statehealthfacts.org 2013

³ Louisiana spends \$55.50 per resident per capita for treatment of mental illness, the national average is \$119.62; Statehealthfacts.org 2013

⁴ Louisiana, while ranking slightly above the national average for number of residents with mental illness per capita, rank 8th in the nation for the least amount of resources allocated for the treatment of this disease. We allocated \$64.12 less per resident per capita in 2013 for the treatment of mental illness than the national average; Statehealthfacts.org 2013

DEPARTMENT ID: 09-LOUISIANA DEPARTMENT OF HEALTH AGENCY ID: 09-302 CAPITAL AREA HUMAN SERVICES DISTRICT PROGRAM ID: 09-302 CAPITAL AREA HUMAN SERVICES DITRICT PROGRAM CTIVITY: CAHSD Adult Behavioral Health Services PROGRAM ACTIVITY: CAHSD Children's Behavioral Health Services

	GENERAL PERFORM					
	SOUTHERN STA					
	Percentage of high school student population-Alcohol consumption-binge drinker (students grades 9 to 12 having 5 or more drinks of alcohol in a row within a couple of hours on	of Pop)	Percentage of adult population- Alcohol consumption-binge drinker (adult men having 5 or more drinks on one occasion and adult women having 4 or more drinks on one occasion) 2012	Rank (1 is the High Rank % of Pop)	Traffic Fatalities by State/ Fatalities with Driver in Crash BAC at .08+ or higher, 2013	% Total Driving Fatalities Driver BAC at .08+ or Higher
	at least 1 day in the last 30 days) 2013					
Alabama	19.4%	18	12.3%	40	852/260	31%
Arkansas	22.9%	5	11.8%	42	483/123	25%
Florida	16.6%	30	16.5%	25	2407/676	28%
Georgia	13.3%	40	14.4%	36	1179/297	25%
Kentucky	19.4%	17	14.9%	34	638/167	26%
Louisiana	19.8%	16 2	16.5% 3	25 '	703/234	33%
Maryland	17.0%	27	16.4%	26	465/141	30%
Mississippi	16.7%	28	12.1%	41	613/210	34%
North Carolina	14.6%	36	13.1%	39	1289/371	29%
Oklahoma	21.8%	8	14.4%	36	678/170	25%
South Carolina	14.7%	35	15.4%	31	767/335	44%
Tennessee	16.1%	32	11.3%	43	995/277	28%
Texas	21.0%	11	16.2%	27	3382/1337	40%
Virginia	14.5%	37	15.7%	30	740/254	34%
West Virginia	24.4%	2	10.2%	45	332/91	27%
National AVERAGE	20.8%		16.9%		32719/10076	36%

- ¹ In Louisiana, 19.8% of high school students in grades 9 through 12 are considered binge drinkers; Centers for Disease Control (CDC) 2013

 ² Louisiana ranked 16th in the nation for largest population of high school students having 5 or more drinks of alcohol in a row within a couple of hours on at least 1 day within the last 30 days, We are 4.8% below the national average for this statistic; Centers for Disease Control (CDC) 2012

 In Louisiana, 16.5% of the adult population is considered binge drinkers; Centers for Disease Control (CDC) 2012

 Louisiana ranked 25th in the nation for largest population of adult binge drinkers. We are 4.9% below the national average for binge drinkers; Centers for Disease Control (CDC) 2012

 In Louisiana, 234 of the total 703 traffic fatalities involved drivers with a Blood Alcohol Content (BAC) of .08 or above; National Center for Statistics and Analysis 2013 Data

- ⁶ Louisiana ranks 16th in the nation for the largest number of student binge drinkers (Centers for Disease Control 2013); 15th in the nation for the largest number of adult binge drinkers (Centers for Disease Control 2012); and 33% of all traffic fatalities involved drivers with a BAC of .08+ or above (National Center for Statistics and Analysis 2013 Data)

- 1 & 2: http://apps.nccd.cdc.gov/brfss/list_PF.asp (Centers for Disease Control (CDC), Behavioral Risk Factor Surveillance System, Prevalence and Trends Data, 2013) 3 & 4: http://apps.nccd.cdc.gov/brfss/list_PF.asp (Centers for Disease Control (CDC), Behavioral Risk Factor Surveillance System, Prevalence and Trends Data, 2012)
- 5 & 6: www-nrd.nhtsa.dot.gov/cats/listpublication.aspx (National Center for Statistics and Analysis, Traffic Safety Facts 2013 Data)



09-303 — Developmental Disabilities Council

♣Louisiana Developmental Disabilities Council♣

Agency Description

The mission of the Louisiana Developmental Disabilities Council is to lead and promote advocacy, capacity building, and systemic change to improve the quality of life for individuals with developmental disabilities and their families.

The goal of the Developmental Disabilities Council Program is to:

To effectively implement the Developmental Disabilities Assistance and Bill of Rights Act of 2000 in Louisiana. The Council, through direct activity and funded projects with agencies, organizations, universities, other state agencies and individuals, shall facilitate advocacy, capacity building, and systemic change that contribute to increased community based services for individuals with developmental disabilities.

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

	rior Year Actuals 2016-2017	F	Enacted FY 2017-2018	Existing Oper Budget as of 12/01/17	Continuation FY 2018-2019	ecommended FY 2018-2019	Total Recommended Over/(Under) EOB
Means of Financing:							
State General Fund (Direct)	\$ 507,076	\$	507,067	\$ 507,067	\$ 507,517	\$ 507,517	\$ 450
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	1,227,086		1,569,562	1,585,182	1,695,774	1,691,967	106,785
Total Means of Financing	\$ 1,734,162	\$	2,076,629	\$ 2,092,249	\$ 2,203,291	\$ 2,199,484	\$ 107,235
Expenditures & Request:							
Developmental Disabilities Council	\$ 1,734,162	\$	2,076,629	\$ 2,092,249	\$ 2,203,291	\$ 2,199,484	\$ 107,235



Developmental Disabilities Council Budget Summary

	Prior Year Actuals FY 2016-2017	Enacted FY 2017-2018	Existing Oper Budget as of 12/01/17	Continuation FY 2018-2019	Recommended FY 2018-2019	Total Recommended Over/(Under) EOB
Total Expenditures & Request	\$ 1,734,162	\$ 2,076,629	\$ 2,092,249	\$ 2,203,291	\$ 2,199,484	\$ 107,235
Authorized Full-Time Equiva	lents:					
Classified	6	6	6	6	6	0
Unclassified	2	2	2	2	2	0
Total FTEs	8	8	8	8	8	0



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; R.S. 28:750-758; R.S. 36) 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 lead and promote advocacy, capacity building, and systemic change to improve the quality of life for individuals with developmental disabilities and their families. 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.

Developmental Disabilities Council Budget Summary

	Prior Year Actuals Y 2016-2017	F	Enacted Y 2017-2018	Existing Oper Budget as of 12/01/17	Continuation Y 2018-2019	ecommended FY 2018-2019	Total ecommended ver/(Under) EOB
Means of Financing:							
State General Fund (Direct)	\$ 507,076	\$	507,067	\$ 507,067	\$ 507,517	\$ 507,517	\$ 450
State General Fund by:							
Total Interagency Transfers	0		0	0	0	0	0



Developmental Disabilities Council Budget Summary

		Prior Year Actuals Y 2016-2017	F	Enacted Y 2017-2018	Existing Oper Budget as of 12/01/17	Continuation FY 2018-2019	Recommended FY 2018-2019	Total ecommended Over/(Under) EOB
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		1,227,086		1,569,562	1,585,182	1,695,774	1,691,967	106,785
Total Means of Financing	\$	1,734,162	\$	2,076,629	\$ 2,092,249	\$ 2,203,291	\$ 2,199,484	\$ 107,235
Expenditures & Request:								
Personal Services	\$	695,755	\$	799,712	\$ 802,182	\$ 909,955	\$ 909,955	\$ 107,773
Total Operating Expenses		101,074		131,463	131,463	133,842	131,463	0
Total Professional Services		0		0	0	0	0	0
Total Other Charges		934,467		1,142,454	1,155,604	1,156,494	1,155,066	(538)
Total Acq & Major Repairs		2,866		3,000	3,000	3,000	3,000	0
Total Unallotted		0		0	0	0	0	0
Total Expenditures & Request	\$	1,734,162	\$	2,076,629	\$ 2,092,249	\$ 2,203,291	\$ 2,199,484	\$ 107,235
Authorized Full-Time Equiva	lents	•						
Classified		6		6	6	6	6	0
Unclassified		2		2	2	2	2	0
Total FTEs		8		8	8	8	8	0

Source of Funding

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

Major Changes from Existing Operating Budget

Gen	ieral Fund	Т	otal Amount	Table of Organization	Description
\$	0	\$	15,620	0	Mid-Year Adjustments (BA-7s):
\$	507,067	\$	2,092,249	8	Existing Oper Budget as of 12/01/17
					Statewide Major Financial Changes:
	0		22,013	0	2% General Increase Annualization Classified
	0		13,710	0	Market Rate Classified
	0		7,322	0	Civil Service Training Series
	0		22,742	0	Related Benefits Base Adjustment
	0		41,986	0	Salary Base Adjustment



Major Changes from Existing Operating Budget (Continued)

General Fun	dl	Total Amount	Table of Organization	Description
	0	(3,000)	0	Non-Recurring Acquisitions & Major Repairs
	0	(13,150)	0	Non-recurring Carryforwards
	0	4,231	0	Risk Management
(6	51)	(61)	0	UPS Fees
5	11	511	0	Civil Service Fees
	0	(310)	0	Office of Technology Services (OTS)
	0	(1,909)	0	Office of State Procurement
				Non-Statewide Major Financial Changes:
	0	13,150	0	The Developmental Disabilities Council serves children through contractual relationships with the Families Helping Families regional resource centers. Specific services contracted for include newborn assistance, family assistance, inclusive education facilitation, and advocacy for children with disabilities.
\$ 507,5	17	\$ 2,199,484	8	Recommended FY 2018-2019
\$ 507,5	1 /	\$ 2,199,404	8	Recommended F 1 2010-2017
\$	0	\$ 0	0	Less Supplementary Recommendation
\$ 507,5	17	\$ 2,199,484	8	Base Executive Budget FY 2018-2019
\$ 507,5	17	\$ 2,199,484	8	Grand Total Recommended

Professional Services

Amount	Description
	This program does not have funding for Professional Services.

Other Charges

Amount	Description
	Other Charges:
\$507,076	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.
\$240,000	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.
\$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.
\$12,000	Jack Warner- This contract is for budget analysis, budget preparation and other budgetary matters as required.
\$1,500	Redstick Internet- This is a contract for web design and maintenance for the DD Council's website.



Other Charges (Continued)

Amount	Description
\$15,000	Employment Training - Develop and/or obtain curriculum and provide training to agencies on recommended practices for supporting people with disabilities in employment.
\$178,587	Direct Support Professional Training - Support training and technical assistance that builds the capacity of Direct Support Professionals and DSP agencies with supporting people with disabilities with intensive behavioral and medical support needs.
\$13,150	Contractual relationships with Fanilies Helping Families (FHF) regional resource centers including newborn assistance, family assistance, inclusive education facilitation, and advocacy for children with disabilities.
\$40,000	Advocacy Training Events - Provide support for regional and statewide training opportunities related to home and community based services and education issues pertaining to people with developmental disabilities.
\$18,042	Amount available for additional initiatives.
\$1,105,355	SUB-TOTAL OTHER CHARGES
	Interagency Transfers:
\$8,733	Office of Risk Management-Insurance Premiums
\$13,344	Office of Telecommunications Management (OTM) Fees
\$8,340	Commodities and Services
\$2,296	Division of Administration- Printing
\$4,599	Division of Administration- Postage
\$5,227	Office of State Procurement
\$4,831	Office of Technology Services
\$398	Uniform Payroll Services
\$1,943	Civil Service Fees
\$49,711	SUB-TOTAL INTERAGENCY TRANSFERS
\$1,155,066	TOTAL OTHER CHARGES

Acquisitions and Major Repairs

Amount	Description
	Acquisitions and Major Repairs
\$3,000	Replace old computers
\$3,000	TOTAL ACQUISITIONS AND MAJOR REPAIRS

Performance Information

1. (KEY) Through the Developmental Disabilities Council activity, to obtain the Federal Developmental Disabilities Assistance and Bill of Rights Grant Allocation and ensure that Council plan objectives are met on an annual basis each year through June 30, 2022.

Children's Budget Link: Not Applicable

Human Resource Policies Beneficial to Women and Families Link:

Other Link(s): (TANF, Tobacco Settlement, Workforce Development Commission, or Other):



				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 2016-2017	FY 2016-2017	FY 2017-2018	FY 2017-2018	FY 2018-2019	FY 2018-2019			
K	Percentage of Council plan									
	objectives on target									
	(LAPAS CODE - 24027)	95%	93%	95%	95%	95%	95%			

2. (KEY) Through the Developmental Disabilities Council activity, to undertake advocacy, capacity building, and systemic change activities that contribute to increased quantity and quality of community-based services for individuals with developmental disabilities each year through June 30, 2022.

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.

Explanatory Note: The "five-year plan" referenced in this objective is a plan required by the federal government and does not refer to the state strategic plan.

Performance Indicators

				Performance Inc	dicator Values		
L e v e l	Performance Indicator Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
	Percentage of decisions regarding policy and program practices influenced through Council involvement (LAPAS CODE - 24026)	75%	85%	75%	75%	75%	75%



3. (KEY) Through the Developmental Disabilities Council activity, to support information and referral services, education and training for peer to peer support to individuals with developmental disabilities, parents/family members, and professionals each year through June 30, 2022.

Children's Budget Link: Not Applicable

Human Resource Policies Beneficial to Women and Families Link:

Other Link(s): (TANF, Tobacco Settlement, Workforce Development Commission, or Other):

Performance Indicators

			Performance Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Number of information and referral services provided (LAPAS CODE - 10697)	40,000	36,052	40,000	40,000	40,000	40,000
K Number of training sessions provided statewide (LAPAS CODE - 21284)	240	221	240	240	240	240
K Number of individuals provided training statewide (LAPAS CODE - 21285)	5,200	5,331	5,200	5,200	5,200	5,200
K Number of individuals provided peer to peer support opportunities statewide (LAPAS CODE - 21286)	25,000	21,125	25,000	25,000	25,000	25,000
K Percentage of individuals who report that they received the information/ support they needed (LAPAS CODE - 24025)	95%	99%	95%	95%	95%	95%

Developmental Disabilities Council General Performance Information

	Performance Indicator Values								
Performance Indicator Name	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016	Prior Year Actual FY 2016-2017				
Percent of funds spent on community living (LAPAS CODE - 14074)	41%	45%	49%	54%	76%				
Percent of funds spent on employment activities (LAPAS CODE - 14075)	17%	20%	22%	22%	9%				
Percent of funds spent on system coordination (LAPAS CODE - 14076)	36%	31%	24%	24%	10%				



Developmental Disabilities Council General Performance Information (Continued)

		Perfor	mance Indicator V	alues	
Performance Indicator Name	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016	Prior Year Actual FY 2016-2017
Percent of individuals with disabilities assisted (LAPAS CODE - 14077)	5%	8%	8%	8%	6%
Percent of parents/family members of individuals with disabilities assisted (LAPAS CODE - 14078)	68%	65%	63%	61%	61%
Percent of professionals assisted (LAPAS CODE - 14079)	17%	27%	29%	31%	32%
Percent of Families Helping Families maintaining 100% compliance with DD Council contractual obligations and standards of operation (LAPAS CODE - 21764)	100%	100%	100%	100%	100%



09-304 — Metropolitan Human Services District



Agency Description

The mission of the Metropolitan Human Services District (MHSD) is to ensure person centered support and services for eligible individuals with Addictive Disorders, Intellectual/Developmental Disabilities and Mental Illness are available/provided to individuals living in Orleans, Plaquemines, and St. Bernard.

The Goals of MHSD represent our analysis of the needs and expectations of our organization. Leadership is the cornerstone of all successful completions. Foundational to successful leadership is commitment to high quality and to the drivers and indicators that promote continuous improvement to our services. Given the impact required to be successful in our goal of fostering healthier communities, we are keenly sensitive to the need for fiscal responsibility throughout this process of change. The goals of Metropolitan Human Services District are:

- I. Leadership To establish a dynamic Center of Excellence for Behavioral Health (Addiction and Mental Illness) and Intellectual/Developmental Disabilities.
- II. Quality To establish a data environment, that includes but is not limited to system infrastructure, data management, and the service delivery monitoring, that supports continuous quality improvement across MHSD.
- III. Community To build community capacity through designated partnerships and facilitate further community awareness of MHSD.
- IV. Services To provide and facilitate a Behavioral Health and Intellectual/Developmental Disabilities continuum of care that is person centered, effective, and innovative for adults, children/adolescents, and their families.
- V. Fiscal Responsibility To create, optimize, and maintain a balanced budget while responsibly managing resources and other assets equitably and sustainably.

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 7 2016-2017	F	Enacted Y 2017-2018	xisting Oper Budget s of 12/01/17	Continuation Y 2018-2019	commended Y 2018-2019	Total commended ver/(Under) EOB
Means of Financing:								
State General Fund (Direct)	\$	17,082,286	\$	17,637,831	\$ 17,637,831	\$ 17,889,400	\$ 17,802,180	\$ 164,349
State General Fund by:		.,,		. , ,	.,,	.,,	.,,	- /
Total Interagency Transfers		5,998,963		5,795,439	5,795,439	6,011,339	6,011,339	215,900
Fees and Self-generated Revenues		1,249,243		1,229,243	1,229,243	1,229,243	1,229,243	0
Statutory Dedications		0		0	0	0	0	0
Interim Emergency Board		0		0	0	0	0	0
Federal Funds		1,355,052		1,355,052	1,355,052	1,355,052	1,355,052	0
Total Means of Financing	\$	25,685,544	\$	26,017,565	\$ 26,017,565	\$ 26,485,034	\$ 26,397,814	\$ 380,249
Expenditures & Request:								
Metropolitan Human Services District	\$	25,685,544	\$	26,017,565	\$ 26,017,565	\$ 26,485,034	\$ 26,397,814	\$ 380,249
Total Expenditures & Request	\$	25,685,544	\$	26,017,565	\$ 26,017,565	\$ 26,485,034	\$ 26,397,814	\$ 380,249
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. 28:861-865, R.S. 28:771; R.S.36:254; R.S.36:258.

Program Description

The MHSD program includes four main activities: Care Management/Administration, Intellectual/Developmental Disabilities, Adult Behavioral Health Services, and Child and Adolescent Behavioral Health Services.

- Care Management/Administration MHSD, serving as the planning body, implements a primary point-ofentry care management system that bridges the current gap between inpatient and outpatient behavioral
 health and developmental disabilities services. MHSD services include assessing the person's broad needs,
 planning and linking the individual to resources to assure access to medical and behavioral health care, and
 partnering with other community based providers to increase individual choice around housing and other
 supportive services. This work is supported by an administrative structure that is efficient, equitable, effective, evidence-based, person-centered, safe, and timely.
- Intellectual/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 employment opportunities, supports to maintain work, assistance with maintaining a household by developing skills such as paying bills, and assisting with learning life skills instead of hobbies.
- Adult Behavioral Health Services This activity focuses on improving coordination of services across the outpatient continuum of care for adults with behavioral health problems (mental illness and addictive disorders.) MHSD offers crisis intervention services which include a mobile crisis team that can be deployed as needed within the greater New Orleans area. MHSD has redesigned its clinic based structure so that mental and addictive disorder services are integrated for persons served on a walk-in basis. MHSD will continue to focus its efforts on care coordination linkage between the inpatient and outpatient settings by ensuring that the necessary transitional services are available for these high risk persons. And third, MHSD will expand services available to persons served as it continues to build out a comprehensive continuum of care which includes partnering with other complementary agencies.
- Child and Adolescent Behavioral Health Services This activity focuses on improving the coordination of services across the outpatient continuum of care for children and youth with behavioral health problems. MHSD offers crisis intervention services which include a mobile crisis team that can deployed as needed in instances of trauma within schools and community settings. MHSD will continue to focus its efforts on care coordination linkage between the inpatient and outpatient settings by ensuring that the necessary transitional services are available for these high risk persons. And third, MHSD will expand services available to persons served as it continues to build out a comprehensive continuum of care which includes partnering with other complementary agencies.

For additional information, see:

Metropolitan Human Services District



Metropolitan Human Services District Budget Summary

		rior Year Actuals 2016-2017	F	Enacted Y 2017-2018	existing Oper Budget s of 12/01/17	Continuation FY 2018-2019	ecommended Y 2018-2019	Total ecommended Over/(Under) EOB
Means of Financing:								
State General Fund (Direct)	\$	17,082,286	\$	17,637,831	\$ 17,637,831	\$ 17,889,400	\$ 17,802,180	\$ 164,349
State General Fund by:								
Total Interagency Transfers		5,998,963		5,795,439	5,795,439	6,011,339	6,011,339	215,900
Fees and Self-generated Revenues		1,249,243		1,229,243	1,229,243	1,229,243	1,229,243	0
Statutory Dedications		0		0	0	0	0	0
Interim Emergency Board		0		0	0	0	0	0
Federal Funds		1,355,052		1,355,052	1,355,052	1,355,052	1,355,052	0
Total Means of Financing	\$	25,685,544	\$	26,017,565	\$ 26,017,565	\$ 26,485,034	\$ 26,397,814	\$ 380,249
Expenditures & Request:								
Personal Services	\$	0	\$	0	\$ 0	\$ 228,597	\$ 228,597	\$ 228,597
Total Operating Expenses		0		0	0	0	0	0
Total Professional Services		0		0	0	0	0	0
Total Other Charges		25,685,544		26,017,565	26,017,565	26,256,437	26,169,217	151,652
Total Acq & Major Repairs		0		0	0	0	0	0
Total Unallotted		0		0	0	0	0	0
Total Expenditures & Request	\$	25,685,544	\$	26,017,565	\$ 26,017,565	\$ 26,485,034	\$ 26,397,814	\$ 380,249
Authorized Eul Time E	lou4-							
Authorized Full-Time Equiva 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

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 of Behavioral Health and Medicaid. 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) and Medical Vendor Payments - Title XIX Medicaid. Federal Funds are from collection of fees for services provided to Medicare eligible clients.



Major Changes from Existing Operating Budget

Ge	eneral Fund	Total Amount		Table of Organization	Description
\$	0	\$	0	0	Mid-Year Adjustments (BA-7s):
\$	17,637,831	\$	26,017,565	0	Existing Oper Budget as of 12/01/17
					Statewide Major Financial Changes:
	34,289		34,289	0	2% General Increase Annualization Classified
	194,308		194,308	0	Market Rate Classified
	4,182		4,182	0	Related Benefits Base Adjustment
	(68,564)		(68,564)	0	Risk Management
	134		134	0	Office of Technology Services (OTS)
					Non-Statewide Major Financial Changes:
	0		215,900	0	Increase of Interagency Transfers funding received from OBH due to adjustments in the allocation of Federal grant funding received by MHSD from Office of Behavioral Health.
\$	17,802,180	\$	26,397,814	0	Recommended FY 2018-2019
\$	0	\$	0	0	Less Supplementary Recommendation
\$	17,802,180	\$	26,397,814	0	Base Executive Budget FY 2018-2019
\$	17,802,180	\$	26,397,814	0	Grand Total Recommended

Professional Services

Amount	Description
	This agency does not have funding for Professional Services.

Other Charges

Amount	Description
	Other Charges:
\$11,469,971	Salaries and related benefits for Other Charges positions.
\$14,637,705	Contractual and operating costs of mental health, addictive disorders and developmental disability services
\$26,107,676	SUB-TOTAL OTHER CHARGES
	Interagency Transfers:
\$8,687	Payments to the Legislative Auditor
\$14,380	Payment to Office of Information Technology
\$38,474	Payments to the Department of Civil Service



Other Charges (Continued)

Amount	Description
\$61,541	SUB-TOTAL INTERAGENCY TRANSFERS
\$26,169,217	TOTAL OTHER CHARGES

Acquisitions and Major Repairs

Amount	Description	
	This agency does not have funding for Acquisitions and Major Repairs.	

Performance Information

1. (KEY) Through Care Management/Administration - MHSD, serving as the planning body, will implement a single point-of-entry care management system that bridges the current gap between inpatient and outpatient behavioral health and developmental disabilities services, assessing the consumer's broad needs, planning and linking the individual to resources to assure access to medical and behavioral health 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.

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 2020, Disability and Health Goal: Promote the health and well-being of people with disabilities. Healthy People 2020 - Mental Health and Mental Disorders Goal: Improve mental health through prevention and by ensuring access to appropriate, quality mental health services. Healthy People 2020 - Substance Abuse Goal: Reduce substance abuse to protect the health, safety, and quality of life for all, especially children.

Explanatory Note: Third Next Available Appointment (3NAA) is an industry accepted quality indicator that reports the length of time in days between the day a person served makes a request for an appointment with a provider and the third available appointment. The MHSD appointment categories monitored are assessment and continuity of care. The specific appointment types monitored are psychosocial assessments, psychiatric evaluations, aftercare transfers, new medication management, and routine medication management. Patient clinical access to services is crucial to the growth of behavioral health services. The MHSD recognized the need to reliably measure access and benchmark performance. By ensuring timely appointment access, MHSD aims to avoid delays which can be harmful to those seeking care. Our efforts are focused on developing highly efficient scheduling systems that can meet the needs of our persons served and their families. 3NAA is a good indicator of the successful balance between capacity and demand in the system. High 3NAA indicates a clogged and backlogged system.



	Performance Indicator Values							
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019		
K Average number of days until the third next available appointment for psychiatric evaluation (LAPAS CODE - 26074)	45	55	60	60	60	60		
K Average number of days until the third next available appointment for new medication management (LAPAS CODE - 26075)	45	32	35	35	35	35		
S Percentage of MHSD clinics implementing modified scheduling (i.e., walk-ins, early morning, weekend, and evening hours). (LAPAS CODE - 26076)	60%	80%	80%	80%	80%	80%		

2. (SUPPORTING) Through the Care Management/Administration activity, MHSD will maintain an administrative structure that is efficient, fiscally responsible, and patient-centered.

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 2020, Disability and Health Goal: Promote the health and well-being of people with disabilities. Healthy People 2020 - Mental Health and Mental Disorders Goal: Improve mental health through prevention and by ensuring access to appropriate, quality mental health services. Healthy People 2020 - Substance Abuse Goal: Reduce substance abuse to protect the health, safety, and quality of life for all, especially children.



			Performance Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Percentage of MHSD staff who have participated in training opportunities regarding co-occurring disorders (LAPAS CODE - 26077)	60%	32%	70%	70%	60%	60%
S Percentage of clinic service contracts monitored (LAPAS CODE - 26078)	95%	100%	95%	95%	100%	100%
S The number of documented electronic health record/ data systems audits (LAPAS CODE - 26079)	3.00	3.00	4.00	4.00	4.00	4.00

3. (KEY) Through the Intellectual/Developmental Disabilities activity, to focus 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.

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 2020, Promote the health and well-being of people with disabilities.

Explanatory Note: 1.) 21002 and 22319: The I/DD budget for Fiscal Year 2016-17, the I/DD was reduced by 20%. The budget decision will negatively impacted FY 2017-18 performance standards. 2.) 14 of 128 Flexible Family Fund slots will be double encumbered as several youth turn 18 years of age in FY 2017-18.



			Performance Inc	dicator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Total unduplicated count of people receiving state - funded developmental disabilities community - based services (LAPAS CODE - 21002)	525	517	425	425	425	425
K Total number of individuals applying for Developmental Disabilities Services (LAPAS CODE - 22194)	220	248	200	200	200	200
K Number of consumers receiving Flexible Family Funds (LAPAS CODE - 22317)	140	143	143	143	143	143
K Number of individual agreements with consumers (LAPAS CODE - 22319)	300	297	200	200	200	200
K Percentage of consumers who indicate satisfaction with services received from MHSD staff, as reflected in consumer evaluations (LAPAS CODE - 22320)	95%	96%	95%	95%	95%	95%

4. (KEY) Adult Behavioral Health Services - This activity focuses on improving coordination of services across the outpatient continuum of care for adults with behavioral health problems. MHSD has redesigned its clinic based structure so that mental health and addictive disorder services are integrated for the clients. MHSD will continue to 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 services available to clients as it continues to build out a comprehensive continuum of care.

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 2020 - Mental Health and Mental Disorders Goal: Improve mental health through prevention and by ensuring access to appropriate, quality mental health services. Healthy People 2020 - Substance Abuse goal: Reduce substance abuse to protect the health, safety, and quality of life for all, especially children.

Explanatory Note: To provide and facilitate a Behavioral Health continuum of care that is person centered, effective, and innovative for adults, children/adolescents, and their families.



		Performance Indicator Values								
L e v e l	Performance Indicator Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019			
	Total adults served in Community Mental Health Centers (i.e., via MHSD clinics) (LAPAS CODE - 21007)	7,000	6,601	7,000	7,000	7,000	7,000			
	Number of adults receiving Addiction treatment via MHSD clinics (LAPAS CODE - NEW)	50	62	75	75	100	100			
	This is a new performance inc	licator for FY 17-18.	There is no prior	year information availa	able. The existing	performance standar	rd is an estimate.			

Metropolitan Human Services District General Performance Information

	Performance Indicator Values									
Performance Indicator Name	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016	Prior Year Actual FY 2016-2017					
Total number of adults admitted into an addiction program reporting receiving prior mental health services (LAPAS CODE - 21013)	1,267	1,283	1,469	7,037	141					
Total number of participants admitted into an addiction program who report community - based employment (LAPAS CODE - 21016)	323	283	139	18	1					
Percentage of persons served that have weights and vital signs ordered at time of visit, via integration of Primary and Behavioral Health (LAPAS CODE - NEW)	Not Available	Not Available	Not Available	5.50	17.80					

5. (KEY) Through the Child and Adolescent Behavioral Health Services activity, to focus on improving the coordination of services across the outpatient continuum of care for children and youth with behavioral health problems. MHSD will continue its re-design of the clinic based delivery system so that mental health and addictive disorder services are integrated for the clients. MHSD will continue to 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 services available to clients as it continues to building out a comprehensive continuum of care.

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 2020 - Mental Health and Mental Disorders Goal: Improve mental health through prevention and by ensuring access to appropriate, quality mental health services. Healthy People 2020 - Substance Abuse goal: Reduce substance abuse to protect the health, safety, and quality of life for all, especially children.

Explanatory Note: To provide and facilitate a Behavioral Health continuum of care that is person centered, effective, and innovative for adults, children/adolescents, and their families.

Performance Indicators

			Performance Indic			
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Number of children receiving behavioral health services within the community (via MHSD contractors) (LAPAS CODE - 22323)	2,000	2,354	2,000	2,000	2,000	2,000
K Number of adolescents receiving Addiction treatment via MHSD clinics (LAPAS CODE - NEW)	16	17	20	20	40	40
This is a new performance inc	dicator for FY 17-18.	There is no prior y	vear information availal	ble. The existing J	performance standar	d is an estimate.



09-305 — Medical Vendor Administration



Agency Description

The mission of Medical Vendor Administration is to improve health and healthcare in Louisiana.

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 expand existing and develop 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 accountability through reporting and monitoring 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.
- VI. To implement measures that will constrain the growth in Medicaid expenditures while improving services and to secure alternative sources of funding for healthcare in Louisiana.

The Louisiana Medicaid Program, within the Department of Health, receives state funds via Medical Vendor Administration (Agency 09-305) and Medical Vendor Payments (Agency 09-306) state appropriations. Both of these appropriations are administered by the Bureau of Health Services Financing (BHSF). The BHSF, which is designated as Louisiana's single state Medicaid agency to administer the Medicaid and CHIP programs, ensures that the Medicaid program operates in accordance with federal and state statutes, rules and regulations. The Medicaid Program does not directly provide health services to citizens but is a payer to providers for services to eligible individuals who are enrolled in the Program. The BHSF is responsible for the determination of Medicaid eligibility, certification and enrollment of health care providers, payment to Medicaid providers and other administrative functions.

Medical Vendor Administration includes the following human resources policies that are helpful and beneficial to all employees: 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, telework opportunities, and the availability of Dependent Day Care Spending Accounts assist both employees and their families.

Medical Vendor Administration has one program: Medical Vendor Administration.



For additional information, see:

Medical Vendor Administration

Medical Vendor Administration Budget Summary

		Prior Year Actuals Y 2016-2017	Enacted FY 2017-2018				Continuation FY 2018-2019		Recommended FY 2018-2019		Total Recommended Over/(Under) EOB	
Means of Financing:												
State General Fund (Direct)	\$	88,091,296	\$	118,752,744	\$ 121,844,287	\$	124,038,030	\$	121,240,935	\$	(603,352)	
State General Fund by:												
Total Interagency Transfers		0		473,672	473,672		473,672		473,672		0	
Fees and Self-generated Revenues		956,371		4,200,000	4,200,000		4,200,000		4,200,000		0	
Statutory Dedications		1,454,918		1,051,683	1,051,683		916,075		916,075		(135,608)	
Interim Emergency Board		0		0	0		0		0		0	
Federal Funds		235,402,050		399,735,995	419,935,316		409,460,787		395,735,391		(24,199,925)	
Total Means of Financing	\$	325,904,635	\$	524,214,094	\$ 547,504,958	\$	539,088,564	\$	522,566,073	\$	(24,938,885)	
Expenditures & Request:												
Medical Vendor Administration	\$	325,904,635	\$	524,214,094	\$ 547,504,958	\$	539,088,564	\$	522,566,073	\$	(24,938,885)	
Total Expenditures & Request	\$	325,904,635	\$	524,214,094	\$ 547,504,958	\$	539,088,564	\$	522,566,073	\$	(24,938,885)	
Authorized Full-Time Equiva	lents	:										
Classified		886		890	893		894		894		1	
Unclassified		2		1	1		1		1		0	
Total FTEs		888		891	894		895		895		1	



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 Statutes 36:251 et seq., and Louisiana Revised Statute 46:976 gives the Louisiana Department of Health (LDH) Secretary authority to direct and be responsible for the Medical Assistance cases to 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 Medicaid 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 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 enroll and provide health care coverage for Medicaid recipients.
- IV. To improve health outcomes by operating healthcare delivery models that emphasizes coordination of care.

The Medical Vendor Administration Program has the following activities:

- Medicaid and CHIP Eligibility Determination The Eligibility activity advances the agency's outcome goals of 1) Reducing health disparities and encouraging better health outcomes; 2) safe/thriving children and families; and 3) transparent, accountable, and effective government. Activities are designed to identify, inform, enroll, and retain eligible citizens in Medicaid and CHIP health coverage. Stable health coverage is a prerequisite for access to healthcare and improving health outcomes for both existing and new enrollees.
- Executive Administration The Executive Administrative activity advances the agency's goals by promoting high quality health care and ensuring a continuum of delivery of medical care, preventive, and rehabilitative services for the citizens of Louisiana. It is focused on transparency, accountability and monitoring functions to mitigate fraud and abuse; creating coordinated systems of health and long-term care; providing choice in a competitive market; and employing health data information and policy analysis to improve health care outcomes, manage growth in future health care costs and creating a more sustainable model of state financing for health care that is quality-driven. Managing costs and efficient management of resources through business process improvement though evidence-based best practices and program analysis will enable the most cost-effective use of healthcare resources and reduce and eliminate inefficiencies, duplication of resources, and non-optimal activities.
- Rate and Audit Provider Monitoring The Rate and Audit Provider Monitoring activity decreases the percentage of avoidable state government expenditures in the Medicaid program and ensures that limited resources are used for health care initiatives that have proven to be the most responsive to the needs of patients. This activity also ensures that funding allocated to extremely high expenditure programs, such as Nursing Homes and Intermediate Care Facilities (ICF), is properly spent and that the development of Medicaid cost reports and analysis and audit of hospital records, as required by federal regulations assure that



hospitals are being reimbursed in accordance with the provisions of state and federal law and any rules and regulations promulgated pursuant thereto. Additionally, the Rate and Audit Provider Monitoring activity monitors Local Education Authorities (LEAs) participating in Medicaid for school-based health services to ensure access to Early Periodic Screening Diagnostic and Treatment (EPSDT) and other Medicaid allowable services for children and that reimbursement for these services through certified public expenditures are tracked and audited. Finally, the Rate and Audit Provider Monitoring activity administers the emergency and non-emergency transportation benefit to ensure that recipients have access to appropriate transportation to and from health-related visits.

- Medicaid Management Information Systems (MMIS) Operations Louisiana's Medicaid Management Information System (MMIS) is the state's mechanized claims processing and information retrieval system. It is operated by the Medicaid Fiscal Intermediary (FI) under the oversight and management of the MMIS Section. Management of Medicaid claims payments to providers advance the State Outcome Goal by implementing efficiencies to the operations of the Medicaid programs, ensuring that the most clinically appropriate and cost effective medical services are provided to Louisiana Medicaid enrollees. Project Management functions advance the State Outcome Goal by ensuring cost effectiveness in the delivery of health care services; centralizing and coordinating implementation activities in order to efficiently make use of tax dollars. Medicaid System Architecture advances the state outcome goal by streamlining work processes and increasing productivity through technology, driven by conscious decision making to streamline and re-use common system and business functionalities, as well as a willingness to explore a vision for potential functionality re-use through the exploration of a multi-state shared service model as an option for the eventual replacement the existing legacy MMIS system. Business Controls advance the State Outcome Goal by ensuring cost effectiveness in the delivery of health care services, focusing primarily on management and accountability of the FI.
- Pharmacy Benefits Management The Pharmacy Benefits Management (PBM) activity advances the agency's goals of improving health care outcomes and providing cost efficiencies in delivering prescriptions and direct patient access in providing prescription medications to Medicaid recipients. The Pharmacy Program provides clinically-appropriate and cost effective medications to Medicaid recipients in order to avoid more costly outpatient and institutional services. The Department has modernized state-managed pharmacy benefits by incorporating pharmacy into the Medicaid Managed Care Program. The Department will also continue to provide for traditional pharmacy fee for service benefits for members not enrolled in a managed care plan. The Pharmacy Program enhances services as needed, such as providing for a revised reimbursement methodology, enhancing the Prior Authorization (PA) process and Drug Utilization Review (DUR) initiatives. Clinical and support staff and contractors perform a variety of administrative initiatives to reduce expenditures including invoicing and reconciliation of pharmacy rebates from drug manufacturers, point of sale pharmacy prospective drug utilization review edits, cost avoidance of claims for Medicaid recipients with other drug coverage, pharmacy audit recoupments, provider compliance with the drugs on the preferred drug list, as well as, implementing an actual acquisition cost reimbursement methodology for ingredient cost determination on all drugs reimbursed in fee for service.
- Dismissal of Chisholm Consent Agreement and Provision of Medically Necessary Services for Class Members The outcome of this activity would create increased efficiencies in the delivery of services to children with disabilities and allow those children to receive the autism services that they need through their managed care plan. Currently, the Department must comply with three stipulations and several judgments under the litigation known as Chisholm. This class action lawsuit was filed in 1997 by the Advocacy Center on behalf of children on the waiting list for the MR/DD registry, now known as the developmental



disabilities registry, who were under 21 and Medicaid eligible. The lawsuit alleged that the children on the waiting list for the MR/DD registry were not receiving all medically necessary EPSDT services. Much of the stipulations and court orders do not reflect all of the various changes that have been made to modernize Louisiana Medicaid. Currently, the Department has strict requirements and limited flexibility in the way the Medicaid program is administered to Chisholm Class Members.

- Collections/Recovery and Cost Avoidance The purpose of establishing and maintaining an effective collections and recovery program is to reduce Medicaid expenditures. Monitoring of third party liability (TPL) claims processing enables the Department to enforce that Medicaid is the payer of last resort. Maximizing recoveries results in the most efficient use of Medicaid funds which increases the funds available for the eligible population.
- Program Integrity LDH's Program Integrity section (PI) is tasked with combating statewide fraud, waste, and abuse (FWA) as well as ensuring that the Department remains compliant with a range of state and federal laws and regulations. Statewide FWA efforts are performed by numerous entities with coordination by LDH's Program Integrity section to maximize efficiencies and prevent duplication. These entities include: LDH Program Integrity Analytics and Surveillance and Utilization (SURS) staff, contracted SURS staff which serve as an extension of LDH PI staff, Attorney General's Office (Medicaid Fraud Control Unit), CMS-funded contractors, other external contractors, and other health plans internal PI units. Program Integrity is responsible for oversight of PI-related activities of all Medicaid managed care, for external audit-related federal requirements including Medicaid Integrity Contractor (MIC), Payment Error Rate Measurement (PERM), and Medi-Medi Contract (Medicare-Medicaid), for the Surveillance and Utilization Review System (SURS), and for processing provider enrollments as well as exclusions and terminations.

For additional information, see:

Medical Vendor Administration

Medical Vendor Administration Budget Summary

	Prior Year Actuals FY 2016-2017		Enacted FY 2017-2018		Existing Oper Budget as of 12/01/17		Continuation FY 2018-2019		Recommended FY 2018-2019		Total Recommender Over/(Under) EOB	
Means of Financing:												
State General Fund (Direct)	\$	88,091,296	\$	118,752,744	\$	121,844,287	\$	124,038,030	\$	121,240,935	\$	(603,352)
State General Fund by:												
Total Interagency Transfers		0		473,672		473,672		473,672		473,672		0
Fees and Self-generated Revenues		956,371		4,200,000		4,200,000		4,200,000		4,200,000		0
Statutory Dedications		1,454,918		1,051,683		1,051,683		916,075		916,075		(135,608)
Interim Emergency Board		0		0		0		0		0		0
Federal Funds		235,402,050		399,735,995		419,935,316		409,460,787		395,735,391		(24,199,925)
Total Means of Financing	\$	325,904,635	\$	524,214,094	\$	547,504,958	\$	539,088,564	\$	522,566,073	\$	(24,938,885)



Medical Vendor Administration Budget Summary

		Prior Year Actuals Y 2016-2017	F	Enacted Y 2017-2018	Existing Oper Budget as of 12/01/17	Continuation FY 2018-2019	ecommended Y 2018-2019	Total ecommended Over/(Under) EOB
Expenditures & Request:								
Personal Services	\$	71,287,061	\$	73,214,305	\$ 73,368,459	\$ 78,234,573	\$ 75,478,228	\$ 2,109,769
Total Operating Expenses		3,155,230		7,378,369	7,447,371	7,804,588	7,595,043	147,672
Total Professional Services		98,852,454		150,531,164	150,990,149	155,339,225	155,339,225	4,349,076
Total Other Charges		152,609,890		293,090,256	315,698,979	297,710,178	284,153,577	(31,545,402)
Total Acq & Major Repairs		0		0	0	0	0	0
Total Unallotted		0		0	0	0	0	0
Total Expenditures & Request	\$	325,904,635	\$	524,214,094	\$ 547,504,958	\$ 539,088,564	\$ 522,566,073	\$ (24,938,885)
Authorized Full-Time Equiva	lents	:						
Classified		886		890	893	894	894	1
Unclassified		2		1	1	1	1	0
Total FTEs		888		891	894	895	895	1

Source of Funding

The Medical Vendor Administration Program is funded with State General Fund, Interagency Transfers, Fees and Self-generated Revenues, Statutory Dedications, and Federal Funds. The Interagency Transfers are from the Department of Corrections for funding assistance to reinstate the Medicaid Disability Program and from the Department of Children and Family Services (DCFS) for the Coordinated System of Care (CSoC). Fees and Self-generated Revenues are derived from provider fees for online training of waiver services and application fees, Board of Regents for Medical/Allied Professional Education Scholarship Program, and other miscellaneous sources. Statutory Dedications represent funding received from the Louisiana Health Care Redesign Fund (R.S. 39:100.51B) the New Opportunities Waiver Fund (R.S. 39:100.61), and the Medical Assistance Programs Fraud Detection Fund (R.S. 46:440.1). (Per R.S. 39.36B (8), see table below for a listing of expenditures out of each Statutory Dedicated Fund.) Federal Funds include 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 7 2016-2017	Enacted 7 2017-2018	xisting Oper Budget s of 12/01/17	Continuation Y 2018-2019	ecommended Y 2018-2019	Total commended ver/(Under) EOB
Medical Assistance Programs Fraud Detection Fund	\$ 1,444,549	\$ 1,050,000	\$ 1,050,000	\$ 915,000	\$ 915,000	\$ (135,000)
Health Care Redesign Fund	2,827	658	658	14	14	(644)
New Opportunities Waiver (NOW) Fund	7,542	1,025	1,025	1,061	1,061	36



Major Changes from Existing Operating Budget

			Toble of	
Ger	eral Fund	Total Amount	Table of Organization	Description
\$	3,091,543	\$ 23,290,864	3	Mid-Year Adjustments (BA-7s):
\$	121,844,287	\$ 547,504,958	894	Existing Oper Budget as of 12/01/17
				Statewide Major Financial Changes:
	276,520	553,039	0	2% General Increase Annualization Classified
	19,828	39,655	0	2% General Increase Annualization Unclassified
	168,958	337,915	0	Structural Annualization Classified
	928,221	1,856,443	0	Market Rate Classified
	13,387	26,776	0	Related Benefits Base Adjustment
	180	360	0	Retirement Rate Adjustment
	934,836	1,869,671	0	Salary Base Adjustment
	(1,378,172)	(2,756,345)	0	Attrition Adjustment
	(2,976,043)	(23,059,864)	0	Non-recurring Carryforwards
	(38,208)	(76,416)	0	Risk Management
	3,779	7,557	0	Rent in State-Owned Buildings
	(1,037)	(2,075)	0	Maintenance in State-Owned Buildings UPS Fees
	(2,037)	(4,074)	0	
	(14,419)	(28,838)	0	Civil Service Fees State Transpury Fees
	(4,023)	(8,046)	0	State Treasury Fees Office of Technology Services (OTS)
	117,690	359,057	0	Office of Technology Services (OTS) Office of State Procurement
	(28,798)	(57,595)	0	Non-Statewide Major Financial Changes:
				Meyers and Stauffer contract for prescription drug rates covered by State Maximum
				Allowable Cost (SMAC) - Increase for periodic Cost of Dispensing (COD) survey
	(5.292	120.766	0	required for pharmacy rate setting purposes. The Medicaid State Plan requires a COD
	65,383	130,766	0	survey every 3 years. The last COD survey was completed in 2015. Annualization of Medical Vendor Administration's (MVA) portion of the Serious Mental
				Illness (SMI) BA-7 costs for creating a system of transition and diversion to community
	555 404	1 110 040		placement where appropriate for recipients with SMI who are currently in nursing
	555,424	1,110,848	1	facilities.
				Eligibility Mail Operations and Mainframe Support - Projected increase in postage and mail handling costs related to the increase in enrollment since the implementation of
	29,923	119,693	0	Medicaid Expansion in July 2016.
				Annualization of a contract to modernize the provider enrollment functions of the current
				Medicaid Management Information Systems (MMIS). The solution will provide a single point of entry for health care providers to enroll in the Medicaid program, including both
				the fee for service and managed care delivery systems, and ensure Louisiana's
				compliance with the federal managed care rule as it relates to provider enrollment. It will also centralize the credentials verification function of provider enrollment, returning it
	1,889,648	3,779,295	0	from Managed Care Organizations (MCO) to the State.
				Projected increase in the number of Local Education Agencies (LEAs) requesting
	^	4 2 40 1 42	^	reimbursement for Administrative Claiming costs. The number of LEAs has increased
	0	4,249,142	0	due to numerous new charter schools.
				Projected increase in the Pre-Admission Screening and Resident Review (PASRR) expenses incurred by the Office of Behavioral Health (OBH). Based on a Memorandum
				of Understanding between Medical Vendor Administration (MVA) and OBH, MVA will
	0	114,151	0	reimburse OBH for the federal portion of all PASRR related activities.



Major Changes from Existing Operating Budget (Continued)

G	eneral Fund	Т	otal Amount	Table of Organization	Description
	0		0	1	Conversion of one job appointment expiring in FY19 to an authorized T.O The job appointment has been used to maintain critical Program Integrity functions. A request for funding is not needed as MVA has funding in the base budget to support the position.
	644		0	0	Means of financing substitution replacing Healthcare Redesign Fund with State General Fund (Direct) based on projected FY 19 balance.
	(36)		0	0	Means of financing substitution replacing State General Fund (Direct) with New Opportunities Waiver (NOW) Fund based on projected FY 19 balance.
	135,000		0	0	Means of financing substitution replacing Medical Assistance Programs Fraud Detection Fund with State General Fund (Direct) based on projected FY 19 balance.
	0		0	(1)	Annualization of the FY 18 BA-7 moving one Table of Organization (T.O.) position from Medical Vendor Administration to the Office of Behavioral Health.
	(1,300,000)		(13,500,000)	0	Delayed implementaiton ofr the Medicaid Modernization Project
\$	121,240,935	\$	522,566,073	895	Recommended FY 2018-2019
\$	0	\$	0	0	Less Supplementary Recommendation
\$	121,240,935	\$	522,566,073	895	Base Executive Budget FY 2018-2019
\$	121,240,935	\$	522,566,073	895	Grand Total Recommended

Professional Services

Amount	Description
	Professional Services:
\$56,304,793	Fiscal Intermediary
\$21,817,835	Enrollment Broker and Call Center Functions
\$12,801,484	XEROX/ACS State Healthcare, LLC
\$10,337,455	Provider Management
\$6,100,000	Mercer Health & Benefits LLC (BH/HLA/Expansion) - Actuarial Rate Setting
\$6,000,000	LSU CEA Center for Healthcare Transformation (CHT)
\$5,463,928	Statistical Resources (SRI)
\$5,145,435	Public Consulting Group (PCG) (IV&V)
\$5,137,669	Myers & Stauffer
\$3,516,858	EmployBridge Holding Company/Westaff
\$3,152,433	Health Management Systems (HMS)
\$3,113,094	Postlethwaite & Netterville
\$1,939,171	Louisiana Public Health Institute (LPHI)
\$2,286,294	Redmane Technology
\$2,228,030	LeBlanc Robertson Chisholm
\$2,183,389	IPRO - External Quality Review



Professional Services (Continued)

Amount	Description
\$987,458	Acumen Fiscal Agent
\$898,000	Contract services to support transitioning and diversion activities for individuals with Serious Mental Illness
\$876,881	Mediware/Harmony Incident Management System
\$762,000	Magellan PDL
\$612,062	Board of Supervisors of LSU/LSU Health Sciences Center - N.O.
\$513,500	MEDT contracts
\$500,000	Covington and Burling
\$500,000	Management Services for Modernization Planning
\$475,000	Environmental Scan
\$400,000	DRG Development and Implementation
\$398,377	Palco
\$318,823	PASRR contracts
\$163,184	Advocacy Center Legal/Attorney Fees
\$78,450	LSU Continuing Education
\$50,000	Institute for Healthcare Improvement
\$49,999	SoutheasTrans
\$43,681	Louisiana Press Association
\$42,200	Navigant Consulting, Inc.
\$42,142	Bailit Health Purchasing LLC
\$33,000	National Alliance Security
\$25,000	Certified Language International
\$20,000	Technical assistance for CMS inquiries and Home Care Setting transition plan
\$9,000	Internal Revenue Service
\$5,600	Contractor to provide expertise in reviewing and developing literary materials for Medicaid enrollees and potential enrollees
\$5,000	Capital City Press LLC
\$2,000	NAPHSIS
\$155,339,225	TOTAL PROFESSIONAL SERVICES

Other Charges

Amount	Description
	Other Charges:
\$47,850,500	HIT/EHR Incentive Payments transferred from MVP to MVA via SF Amendment
\$39,511,968	Merit - CSoC
\$26,985,587	University of New Orleans for professional services
\$4,430,334	LHCQF/Health Information Exchange
\$4,082,949	University of Louisiana at Monroe/GEO, Quality Informatics
\$2,200,000	Application Centers
\$6,249,142	IAT - Funds - MAC School-based Admin Clearing
\$1,857,674	Program Integrity initiatives
\$966,366	Children's Hosp-Vent Assist Program
\$272,648	Other Charges - Acquisitions for the replacement of outdated equipment
\$300,000	Social Security Administration (SSA)



Other Charges (Continued)

Description
Oregon Health Science
Nursing Home Nurse-Aide Training
University of Louisiana at Monroe - HIT Coordinator
HIT Advisory Committee
SNAPSS - Karen Scallan
Gregory Advisors
Vermont Oxford Network
National Committee for Quality Assurance (NCQA) provides a Quality Comparison Tool (software)
Quality Committee meetings
P & T Meetings & Travel Per Diem
Drug screening for potential employees
Transportation: Emergency Air Ambulance Fee-for-Service
SUB-TOTAL OTHER CHARGES
Interagency Transfers:
Board of Regents - Medical and Allied Health Professional Education Scholarships & Loan Program
DCFS - Administrative activities related to eligibility determination, case management and supervision, referral of medical and behavioral health related services and Medicaid outreach
DCFS - CAFÉ Systems integration
DCFS - Coordinated System of Care (CSOC)
DCFS Printshop
Department of Justice (DOJ) - Attorney General Advocacy Center, Community Living Ombudsman Program (CLOP)
DOA- Civil Service Fees
DOA - Maintenance for State Agencies
DOA - Office of Group Benefits (OGB) - Separate SCHIP TPA and premium pay
DOA - Office of Risk Management (ORM)
DOA - Office of State Buildings (OSB) Rent
DOA Office of State Mail Operations for postage
DOA - Office of State Printing (OSP)
DOA - Office of State Procurement
DOA - OTS for various information technology initiatives including information technology data processing and support services and maintenance and support for MEDS, Expansion, Modernization, CAFÉ and other support services
DOA- OTS Contract: Health Tech Solutions for State Level Registry (SLR)
DOA Office of Telecommunications for telephone services
DOA - State Treasurer's Office (STO)
DOA - State Uniform Payroll System (UPS)
DOJ Advocacy Center for Community Living Ombudsman Program (CLOP)
DOJ Advocacy Center for Independent Living Advocacy Program (SILAP)
LDH - OAAS - Adult Protective Services (APS)
LDH - OAAS - LTPCS Compliance and Audit Team Staff (CATS)
LDH- OAAS - Money Follows the Person
LDH-OAAS - Nursing Home Residents Trust Fund, Demonstration Projects improving quality of care
LDH-OAAS - Reimbursement for salaries and related expenses for appeals staff



Other Charges (Continued)

Amount	Description
\$820,708	LDH - OCDD - Assessment of Services Needs for persons on the "SUN" registry and to prioritize access of 1915c HCBS
\$771,332	LDH - Office of Behavioral Health (OBH) for salaries related to specialized behavioral health services
\$147,151	LDH- Office of Behavioral Health (OBH)- reimbursement of Federal portion of Pre-Admission Screening and Resident Review (PASRR) related activities
\$84,644	LDH - Office of Public Health (OPH) Tobacco Quit Line
\$25,000	LDH - Office of the Secretary - Record and report financial/fiscal information
\$3,189,930	LDH - Office of the Secretary - Transfer of Title 18 Federal Funds to for Health Standards
\$94,903	LDH - Office of the Secretary- indirect administrative costs
\$89,338	LDH - OPH - HIT Coordinator
\$10,458	Transfers in order to support transitioning and diversion activities for individuals with Serious Mental Illness
\$735,000	Legislative Auditor services
\$42,197	Louisiana Workforce Commission (LWC)
\$2,904,556	University of Louisiana, Lafayette (ULL) CBIT Data Processing
\$148,856,409	SUB-TOTAL INTERAGENCY TRANSFERS
\$284,153,577	TOTAL OTHER CHARGES

Acquisitions and Major Repairs

Amount	Description
	This agency does not have funding for Acquisitions and Major Repairs.

Performance Information

1. (KEY) Through the Medicaid Eligibility Determination activity, to maximize the efficiency and accuracy of enrolling eligible individuals in Medicaid and CHIP by processing at least 98.5% of applications timely through continuous improvement that is technology driven, simplifies administrative processes, and eliminates bureaucratic waste.

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 objective will support Act 1078 by ensuring the provision of healthcare services to women and families.

Other Link(s) (TANF, Tobacco Settlement, Workforce Development Commission, or Other): The Governor's Healthcare Reform Panel for improving healthcare in Louisiana.



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 Federal Poverty Level (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 Ind	licator Values		
L e v e Performance l Nar	e Indicator	Yearend erformance Standard Y 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Percentage of I applications re online (LAPA 25540)	ceived	40%	35%	45%	45%	45%	45%
K Number of chi enrolled throug Lane Eligibilit (LAPAS COD	gh Express y (ELE)	5,500	7,705	7,600	7,600	7,800	7,800
			*	•	•	cted level of perform ce were projected th	
K Percentage of a for Pregnant W approved within days (LAPAS 24036)	omen n 5 calendar	50%	35%	24%	24%	50%	50%
K Percentage of a for LaCHIP an programs for c approved with calendar days CODE - 25541	d Medicaid hildren in 15 (LAPAS	60%	48%	44%	44%	48%	48%
K Total number of enrolled (LAP 10013)		773,335	759,984	760,000	760,000	758,677	758,677
						cted level of perform ce were projected th	
K Percentage of a processed and for procedural (LAPAS COD)	not closed reasons	95.0%	93.7%	95.0%	95.0%	95.0%	95.0%
K Percentage of a received through Medicaid & La hotlines who h representative minutes (LAP, 24041)	gh the CHIP old for a less than 5	48%	79%	88%	88%	90%	90%
/						2 2 7 0	2 2 . 0



Performance Indicators (Continued)

				Performance Indicator Values					
1				Performance					
		Yearend		Standard as	Existing	Performance At	Performance		
,		Performance	Actual Yearend	Initially	Performance	Continuation	At Executive		
	Performance Indicator	Standard	Performance	Appropriated	Standard	Budget Level	Budget Level		
1	Name	FY 2016-2017	FY 2016-2017	FY 2017-2018	FY 2017-2018	FY 2018-2019	FY 2018-2019		

FY 2017-2018 numbers are based on expected level of performance. To determine the expected level of performance, a review was completed of data from FY 2015-2016 and a review of the expected performance from a continuation of Maximus handling Application and Renewal calls along with the launch of a statewide consolidated call center by January 1, 2018. The corresponding changes in performance were projected out through FY 2017-2018.

ren Laı	mber of children ewed through Express ne Eligibility (ELE) APAS CODE - 25542)	187,068	216,497	195,000	195,000	216,000	216,000
thro En	mber of adults enrolled ough SNAP Assisted rollment (LAPAS DDE - NEW)	Not Applicable	Not Applicable	50,000	50,000	10.800	10,800
	DE NEW)	rvotrippiicabic	1 tot / ipplicable	30,000	30,000	10,000	10,000
Th	is is a new performance indi-	cator for FY 2017-20	118 and there is no price	r year information a	vailable.		
enr Eli	mber of children olled as Title XXI gibles (LaCHIP) APAS CODE - 2241)	128,444	122,612	123,000	123,000	122.736	122,736
(,	,	-,	- ,	- /	,,,,,	_,,,,,

Performance values for FY 2017-2018 are based on the expected level of performance. To determine the expected level of performance, a review was completed of data from both FY 2014-2015 and FY 2015-2016. The corresponding changes in performance were projected through FY 2017-2018.

S Number of children enrolled as Title XIX Eligibles (traditional Medicaid) (LAPAS CODE - 2242)

Performance values for FY 2017-2018 are based on the expected level of performance. To determine the expected level of performance, a review was completed of data from both FY 2014-2015 and FY 2015-2016. The corresponding changes in performance were projected through FY 2017-2018.

638,000

638,000

647,473

647,473

637,372

S Percentage of applications for New Adult program approved within 15

calendar days (LAPAS CODE - NEW) Not Applicable Not Applicable 70% 70% 77% 77%

This is a new performance indicator for FY 2017-2018 and there is no prior year information available.

648,098

K Number of justice involved adults enrolled pre-release from incarceration (LAPAS CODE - NEW)

CODE - NEW) 3,500 Not Applicable 12,000 12,000 11,100 11,100

This is a new performance indicator for FY 2017-2018 and there is no prior year information available.



Medical Vendor Administration General Performance Information

	Performance Indicator Values					
Performance Indicator Name	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016	Prior Year Actual FY 2016-2017	
Number of Certified Medicaid Application Centers (LAPAS CODE - 12027)	516	583	562	566	618	
Number of individuals enrolled in all Medicaid and LaCHIP programs (LAPAS CODE - 25543)	1,263,442	1,269,019	1,391,896	1,413,395	1,595,571	
Number of applications processed annually (LAPAS CODE - 25545)	412,840	319,426	389,043	403,321	496,269	

2. (KEY) Through the Executive Administration activity, to administer the Medicaid program and ensure that operations are in accordance with federal and state statutes, rules, and regulations through June 30, 2022.

Children's Budget Link: The Children's Budget reflects funding and expenditures for a broad range of Medicaid service for children under 21 years of age throughout the Medical Vendor Administration budget.

Human Resource Policies Beneficial to Women and Families Link: The Medical Vendor Administration is dedicated to the development and implementation of human resource policies that are helpful and beneficial to women and families and demonstrates its support through the following human resource policies: the Family Medical Leave Policy (8108-930), the Sexual Harassment Policy (8143-02) and the Equal Employment Opportunity Policy (8116-77). In addition, the allowance of flexibility in work schedules and the availability of Dependent Day Care Spending Accounts assist both women and their families.

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

Performance Indicators

			Performance Inc	rformance Indicator Values				
L e v		Yearend Performance	Actual Yearend	Performance Standard as Initially	Existing Performance	Performance At	Performance At Executive	
e I	Performance Indicator Name	Standard FY 2016-2017	Performance FY 2016-2017	Appropriated FY 2017-2018	Standard FY 2017-2018	Budget Level FY 2018-2019	Budget Level FY 2018-2019	
	Administrative cost as a percentage of total cost (LAPAS CODE - 24045)	3%	3%	3%	3%	3%	3%	



Medical Vendor Administration General Performance Information

	Performance Indicator Values							
Performance Indicator Name	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016	Prior Year Actual FY 2016-2017			
Percentage of State Plan amendments approved. (LAPAS CODE - 24046)	29%	88%	96%	74%	65%			
Number of State Plan amendments submitted. (LAPAS CODE - 24047)	69	49	28	35	26			

3. (KEY) Through the Rate and Audit Provider Monitoring activity, to reduce the incidence of inappropriate Medicaid expenditures and to annually perform a minimum of 95% of the planned monitoring visits to Local Education Agencies(LEAs) participating in the Medicaid School-Based Administrative Claiming Program or the Early Periodic Screening Diagnostic and Treatment (EPSDT) Direct Services Program through state fiscal year 2022.

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 Indicator Values							
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019			
S Number of Local Education Agencies targeted for monitoring (LAPAS CODE - 13375)	32	34	34	34	34	34			
K Percent of targeted Local Education Agencies monitored (LAPAS CODE - 13376)	95.0%	100.0%	95.0%	95.0%	100.0%	100.0%			
S Number of Nursing Home cost reports targeted for monitoring (LAPAS CODE - 25549)	100	93	93	93	93	93			



Performance Indicators (Continued)

			Performance Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Percent of Nursing Home cost reports monitored (LAPAS CODE - 25550)	39%	36%	36%	36%	36%	36%
S Number of Intermediate Care Facilities (ICF) cost reports targeted for monitoring (LAPAS CODE - 25551)	91	75	102	102	91	91
S Percent of Intermediate Care Facilities (ICF) cost reports monitored (LAPAS CODE - 25552)	17%	14%	19%	19%	19%	19%
S Number of hospital cost reports reviewed and audited (LAPAS CODE - 25553)	400	363	350	350	350	350

Medical Vendor Administration General Performance Information

	Performance Indicator Values					
Performance Indicator Name	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016	Prior Year Actual FY 2016-2017	
Number of Local Education Agency claims adjusted as a result of monitoring activities (LAPAS CODE - 16539)	37	82	59	61	49	
Amount identified as over claimed as a result of monitoring (LAPAS CODE - 13540)	\$ -22,441	\$ 378,351	\$ 544,435	\$ 750,574	\$ 1,263,991	
Number of Nursing Homes cost reports adjusted as a result of monitoring activities (LAPAS CODE - 25554)	107	104	86	101	73	
Number of Intermediate Care Facilities (ICF) cost reports adjusted as a result of monitoring activities (LAPAS CODE - 25555)	129	95	92	79	66	

4. (KEY) Through the MMIS Operations activity, to operate the most efficient Medicaid claims processing system possible through state fiscal year 2022.

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 Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K 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%
S Average claim processing time in days (LAPAS CODE - 2217)	9.0	17.0	13.0	13.0	9.0	9.0
K Total number of managed care encounters processed (LAPAS CODE - 26086)	Not Applicable	Not Applicable	24,000,000.0	24,000,000.0	90,000,000.0	90,000,000.0
This is a new performance inc	licator for FY 2017-	2018 and there is no	prior year information	on available.		
K Total number of managed capitation payments processed (LAPAS CODE - 26087)	Not Applicable	Not Applicable	9,000,000	9,000,000	42,000,000	42,000,000
This is a new performance inc	licator for FY 2017-	2018 and there is no	prior year information	on available.		

5. (KEY) Through the MMIS Operations activity, to ensure maximum effectiveness of Medicaid Management Information System (MMIS) section contract expenditures and to take opportunity of federal funding where available.

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 Indicator Values							
L e v e Performance II I Name	idicator	Yearend erformance Standard Y 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Dollar value of M contract expenditu (LAPAS CODE -	ires	58,315,591	\$ 46,267,023	\$ 46,361,559	\$ 46,361,559	\$ 46,261,965	\$ 46,261,965
The updated projection only unknown is t				egin Jan 1, 2017. The	e Molina contract wa	s renegotiated at bett	ter terms. The
S Percent of MMIS expenditures that federally funded CODE - 25557)	are	70%	72%	70%	70%	70%	70%



Medical Vendor Administration General Performance Information

	Performance Indicator Values						
Performance Indicator Name	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016	Prior Year Actual FY 2016-2017		
Monthly Louisiana Information Form Tracking (Lift) System change request (LAPAS CODE - 26088)	Not Available	Not Available	Not Available	61.2	Not Available		
Average age of system change request (Lifts) (Line Graph by Month) (LAPAS CODE - 26089)	Not Available	Not Available	Not Available	117.6	Not Available		
Percent of system change request (Lifts) due for completion in quarter that were actually completed (LAPAS CODE - 26090)	Not Available	Not Available	Not Available	64.9%	Not Available		
Number of Medicaid Information Technology Architecture (MITA) business process advancements in maturity (LAPAS CODE - 26091)	Not Available	Not Available	Not Available	Not Available	0		
Number of months in the Design, Development and Implementation (DDI) phase for revisions and upgrades to systems (LAPAS CODE - 26092)	Not Available	Not Available	Not Available	Not Available	0		
Dollar value of penalties assessed on contractors (LAPAS CODE - 26093)	Not Available	Not Available	Not Available	Not Available	0		
Total number of claims processed (LAPAS CODE - 12020)	113,942,597	79,245,729	28,545,865	143,608,428	172,794,131		

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.

6. (KEY) Through the Pharmacy Benefits Management Activity, to strengthen the current state-run Pharmacy Benefits Management Program through June 30, 2022.

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 Indicator Values							
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019		
K Percentage (%) of Total Scripts PDL Compliance (LAPAS CODE - 24061)	90%	95%	90%	90%	90%	90%		
The percentage of total so	ripts Preferred Drug Lis	t (PDL) compliance	reports prescriber's a	dherence to the PD	L for Legacy Medica	aid prescriptions.		



7. (KEY) Transform the service delivery method for Chisholm Class Members to improve care coordination and health outcomes and decrease fragmentation by providing medically necessary services to eligible Medicaid enrolled children in accordance with the Chisholm requirements.

Children's Budget Link: All of the Chisholm Class Members are children 0-21

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

L						
e Performance Indicator	Yearend erformance Standard Y 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Percent of reports per calendar year that resulted in remediation or corrective action plan due to failure to follow Chisholm PAL requirements. (LAPAS						
	Not Applicable	Not Applicable	80.0%	80.0%	85.0%	85.0%

Medical Vendor Administration General Performance Information

		Perfo	rmance Indicator V	alues	
Performance Indicator Name	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016	Prior Year Actual FY 2016-2017
Percent of reports per calendar year that resulted in remediation or corrective action plan due to failure to follow Chisholm PAL requirements. (LAPAS CODE - 26095)	Not Available	Not Available	Not Available	Not Available	0
This is a new performance indicator and there is			1 (ot 1 variable	1 (ot 1 i unuoic	· ·
Percent of Chisholm class members who are denied services due to lack of sufficient documentation after all PAL procedures were correctly followed. (LAPAS CODE - 26096)	Not Available	Not Available	Not Available	10%	10%
This is a new performance indicator and there is	s no data currently a	vailable.			
Percent of Chisholm class members who are denied services due to lack of medical necessity after all PAL procedures were correctly followed. (LAPAS CODE - 26097)	Not Available	Not Available	Not Available	Not Available	0
This is a new performance indicator and there is	s no data currently a	vailable.			



8. (KEY) Through the Collections/Recovery and Cost Avoidance activity, to pursue collections from third party sources legally responsible for healthcare costs of Medicaid and CHIP enrollees via cost avoidance and/or pay and chase methods by June 30, 2022.

Children's Budget Link: Not Applicable

Human Resource Policies Beneficial to Women and Families Link: This objective will support Act 1078 by ensuring 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	icator Values		
L e v e Peri	formance Indicator Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
	per of TPL claims ssed (LAPAS CODE 5)	1,500,000	5,938,092	6,000,000	6,000,000	6,600,000	6,600,000

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. LDH has contracted for maintenance of the Medicaid resource file and, as a result, it is felt that there will be an increase in third party liability identification which will lead to an increase in the number of TPL claims processed.

K Percentage of TPL claims						
processed through edits						
(LAPAS CODE - 7957)	100.00%	96.00%	100.00%	100.00%	100.00%	100.00%

The "Percentage of TPL claims processed" is the percent of TPL claims processed for which the Bureau of Health Services Financing reduced payments, or avoided the full Medicaid payment.

9. (SUPPORTING)Through the Collections/Recovery and Cost Avoidance activity, to pursue collections from third party sources legally responsible for healthcare costs of Medicaid enrollees who sustained injuries or were involved in accidents by June 30, 2022.

Children's Budget Link: Not Applicable

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

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



Performance Indicators

						P	erformance In	dica	tor Values				
L e v e l	Performance Indicator Name	Per	Yearend rformance standard 2016-2017	P	tual Yearend erformance Y 2016-2017	S	erformance Standard as Initially ppropriated Y 2017-2018		Existing Performance Standard FY 2017-2018	C B	rformance At ontinuation udget Level Y 2018-2019	At Bu	rformance Executive dget Level 2018-2019
	TPL trauma recovery amount (LAPAS CODE - 7958)	\$	8,000,000	\$	5,926,980	\$	4,000,000	\$	4,000,000	\$	3,500,000	\$	3,500,000

Medical Vendor Administration General Performance Information

				Perfo	rma	nce Indicator V	⁄alue	es		
Performance Indicator Name		rior Year Actual 2012-2013		Prior Year Actual 7 2013-2014		Prior Year Actual Y 2014-2015		Prior Year Actual Y 2015-2016		Prior Year Actual Y 2016-2017
Number of claims available for TPL processing (LAPAS CODE - 12021)		92,124,018		79,317,167		83,680,515		62,770,350		8,926,647
The "Percentage of TPL claims processed through edits" is the percent of TPL claims processed for which the Bureau of Health Services Financing reduced payments, or avoided full Medicaid payment.										
Percentage of TPL claims processed and cost avoided (LAPAS CODE - 12022)		7.3%		8.0%		7.5%		9.8%		66.5%
The "Percentage of TPL claims processed and	cost av	voided" is the	numb	er of TPL clair	ns p	rocessed divided	l by	the total number	r of c	laims.
Funds recovered from third parties with a liability for services provided by Medicaid (LAPAS CODE - 26098)	\$	39,816,699	\$	29,058,565	\$	22,094,024	\$	31,520,876	\$	30,371,022
Estate recovery amount (LAPAS CODE - 25567)	\$	738,159	\$	502,985	\$	683,814	\$	287,927	\$	538,905
Recoveries have been negatively affected by s	taffing	limitations.								
Recipient recovery amount (LAPAS CODE - 25568)	\$	487,589	\$	1,110,559	\$	1,028,060	\$	1,003,227	\$	928,930
The amount in LAPAS for FY 16 is not correct. This is the correct yearend.										

10. (KEY)Through the Program Integrity Activity, to detect and manage claims-based fraud, waste and abuse within LDH by June 30, 2022.

Children's Budget Link: Not applicable

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 Ind	icator Values		
L e v e l	Performance Indicator Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
	Number of closed cases (LAPAS CODE - 26099)	Not Applicable	Not Applicable	600	600	600	600
,	This is a new performance indicator for FY 2017-18 and there is no prior year data available.						

Medical Vendor Administration General Performance Information

		Perfo	mance Indicator V	alues			
Performance Indicator Name	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016	Prior Year Actual FY 2016-2017		
Number of Provider Exclusions (LAPAS CODE - 26160)	Not Available	Not Available	Not Available	177	182		
This is a new performance indicator for FY17-18 and there is no data currently available.							



09-306 — Medical Vendor Payments



Agency Description

The mission of Medical Vendor Payments is to improve healthcare in Louisiana.

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 expand existing and develop additional community-based services as an alternative to institutional care.
- III. To ensure cost effectiveness in the delivery of healthcare services by using efficient management practices such as value-based payment and transforming hospital provider reimbursement.
- IV. To assure accountability through reporting and monitoring 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 providers and Medicaid administrative staff.
- VI. To implement measures that will constrain the growth in Medicaid expenditures while improving services and to secure alternative sources of funding for healthcare in Louisiana to maximize revenue opportunities.

Agencies 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 Louisiana Department of Health (LDH), 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 LDH 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 developmentally disabled, 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)
- Healthy Louisiana 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.

For additional information, see:

Medical Vendor Payments

Medical Vendor Payments Budget Summary

	Prior Year Actuals FY 2016-2017	Enacted FY 2017-2018	Existing Oper Budget as of 12/01/17	Continuation FY 2018-2019	Recommended FY 2018-2019	Total Recommended Over/(Under) EOB
Means of Financing:						
State General Fund (Direct) State General Fund by:	\$ 1,959,650,134	\$ 1,935,099,253	\$ 1,935,282,553	\$ 2,507,107,059	\$ 1,425,221,419	\$ (510,061,134)
Total Interagency Transfers	25,444,648	24,603,787	24,603,787	23,370,600	7,745,805	(16,857,982)
Fees and Self-generated Revenues	382,389,295	430,505,205	430,505,205	318,939,891	267,777,283	(162,727,922)
Statutory Dedications	835,203,060	821,238,138	821,238,138	758,941,161	715,746,821	(105,491,317)
Interim Emergency Board	0	0	0	0	0	0
Federal Funds	7,433,432,361	8,739,252,213	8,739,568,913	8,735,490,087	7,202,247,998	(1,537,320,915)
Total Means of Financing	\$ 10,636,119,498	\$ 11,950,698,596	\$ 11,951,198,596	\$ 12,343,848,798	\$ 9,618,739,326	\$ (2,332,459,270)
Expenditures & Request:						
Payments to Private Providers	\$ 8,943,227,291	\$ 10,293,915,784	\$ 10,294,415,784	\$ 10,709,077,507	\$ 8,774,784,842	\$ (1,519,630,942)
Payments to Public Providers	195,137,745	220,123,243	220,123,243	238,443,083	223,663,622	3,540,379
Medicare Buy-Ins & Supplements	459,706,112	522,424,563	522,424,563	535,747,483	535,747,483	13,322,920
Uncompensated Care Costs	1,038,048,350	914,235,006	914,235,006	860,580,725	84,543,379	(829,691,627)
Total Expenditures & Request	\$ 10,636,119,498	\$ 11,950,698,596	\$ 11,951,198,596	\$ 12,343,848,798	\$ 9,618,739,326	\$ (2,332,459,270)
Authorized Full-Time Equiva						
Classified	0	0	0	0	0	0
Unclassified 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 Statutes 36:251 et seq., give the Louisiana Department of Health (LDH) 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 for eligible recipients.

The goals of the Payments to Private Providers Program are:

- I. To improve health outcomes by emphasizing choice 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 the five Managed Care Organizations (MCOs).
- II. To provide cost effective and evidence based Medicaid covered services for individuals remaining in the Fee-for-Service Program.
- III. To provide cost effective and evidence based pharmaceutical services.

The Payments to Private Providers Program has the following activities:

• Expand Medicaid Coverage – On January 12, 2016, Governor John Bel Edwards signed an executive order (JBE 16-01) to expand Medicaid in Louisiana no later than July 1, 2016. Expansion will make Medicaid available to adults living in Louisiana who do not currently qualify for full Medicaid coverage and cannot afford to buy private health insurance. By receiving Medicaid coverage, these Louisianans, many of them working adults in important industries like food service and construction, will finally be able to get the regular, preventative and primary care that best promotes health and wellness. Any adult who meets the eligibility criteria will be able to enroll in Medicaid under expansion. Criteria includes persons aged 19 to 64 years old who have a household income less than 138% of the federal poverty level, do not already qualify for full Medicaid or Medicare, and are U.S. citizens. Expansion benefits will be the same as benefits adults with full Medicaid coverage currently receive through enrollment in a managed care plan. Services started July 1, 2016.



- Fee for Service Program This activity is representative of the operations maintained under Fee-For-Service Program payments to providers made through the Fiscal Intermediary, and includes payments for Legacy Medicaid. The program will focus on better health goals, including providing the right care at the right place at the right time; reducing avoidable hospitalizations and emergency room use for non-emergent conditions; improving health care quality through continuous monitoring of provider performance and quality outcomes; and innovative payment reform to incentivize improved health outcomes while at the same time ensuring savings and cost containment.
- Medicaid Managed Care Program The Medicaid managed care program (formerly known as Bayou Health) is Louisiana's Medicaid managed care system. Medicaid managed care provides for the delivery of Medicaid health benefits and additional services through contracted arrangements between state Medicaid agencies and managed care organizations (MCOs) that accept a set per member per month (capitation) payment for these services.
- Pharmacy Benefits Management Services The Pharmacy Benefits Management program advances the agency's goals of improving healthcare outcomes, assuring the delivery of quality pharmacy services through state monitoring of managed care administered pharmacy benefit programs under managed care contractual agreements with capitated MCOs. The MCOs are contracted to effectively manage delivery of their pharmacy services and provide cost effective utilization management. The Department also provides for traditional pharmacy fee for service benefits for members not enrolled in a Managed care plan. The Department has implemented a variety of cost saving initiatives including invoicing and reconciliation of pharmacy rebates from drug manufacturers, cost avoidance of claims for Medicaid recipients with other drug coverage, pharmacy audit recoupments, provider compliance with the drugs on the preferred drug list, as well as, implementing an actual acquisition cost reimbursement methodology for ingredient cost determination on all drugs reimbursed in fee for service.
- Inpatient Hospitalization The inpatient hospitalization activity reflects the goal of improving the health of Louisiana's citizens and maintaining access to care for Medicaid recipients. This activity provides medical care needed for the treatment of an illness or injury which can only be provided safely and adequately in a hospital setting and with the expectation that this care will be needed for 24 hours or more. Reimbursement reform opportunities are being evaluated to improve affordability and quality of the services provided and purchased. Agency initiatives seek to improve overall health, avoid infections and disease exacerbations that result in avoidable inpatient stays, and to effectively use Federally allowed Medicaid payments to increase access to inpatient services for Louisiana citizens.
- Increasing Dental Care Access The dental activity will advance the agency's goals by increasing basic preventative dental services, thereby decreasing the serious and costly consequences of poor oral health. A growing body of evidence has linked oral health to several chronic diseases, which may be prevented in part with regular preventative visits to the dentist. Ensuring access to quality dental care for children enrolled in Medicaid is a priority for the Department, as well as the Center for Medicaid and CHIP Services (CMCS). Preventive dental services are intended to defend against the onset of disease, such as using sealants to prevent cavities. National average costs for common preventive and restorative procedures show that stopping disease before it starts can yield savings. The American Dental Association proclaims the most cost effective method to ensure optimal oral health is through prevention, education and behavioral modification. This activity will support the effort of encouraging all Medicaid enrolled children to obtain appropriate preventive and primary oral healthcare in order to improve their oral health and quality of life and to ensure that those who care for them provide that care.



• Rebalancing Long Term Supports and Services – The Department has worked over the last decade to improve the balance of its long-term care supports and services system for the purpose of improving health care quality, controlling costs, and enhancing the quality of life for Louisiana citizens. The case for movement towards sustainable community living options is supported by the national Olmstead mandate, Louisiana class action suits, such as Barthelemy vs. Hood, and Chisholm vs. Hood, and the Department of Justice's settlement with LDH over its large public institutions.

For additional information, see:

Medical Vendor Payments

Payments to Private Providers Budget Summary

	1	Prior Year Actuals FY 2016-2017	Enacted FY 2017-2018	Existing Oper Budget as of 12/01/17	Continuation FY 2018-2019	Recommended FY 2018-2019	Total Recommended Over/(Under) EOB
Means of Financing:							
State General Fund (Direct)	\$	1,429,202,223	\$ 1,432,486,053	\$ 1,432,669,353	\$ 1,951,675,138	\$ 1,064,381,115	\$ (368,288,238)
State General Fund by:							,
Total Interagency Transfers		8,054,095	8,054,095	8,054,095	6,820,908	7,745,805	(308,290)
Fees and Self-generated Revenues		241,210,842	304,316,397	304,316,397	267,879,277	267,777,283	(36,539,114)
Statutory Dedications		813,899,986	799,935,064	799,935,064	737,638,087	706,598,955	(93,336,109)
Interim Emergency Board		0	0	0	0	0	0
Federal Funds		6,450,860,145	7,749,124,175	7,749,440,875	7,745,064,097	6,728,281,684	(1,021,159,191)
Total Means of Financing	\$	8,943,227,291	\$ 10,293,915,784	\$ 10,294,415,784	\$ 10,709,077,507	\$ 8,774,784,842	\$ (1,519,630,942)
Expenditures & Request:							
Personal Services	\$	0	\$ 0	•	*	\$ 0	•
Total Operating Expenses		0	0	Ť	The state of the s	0	0
Total Professional Services		0	10 202 015 704	0		0 774 794 942	(1.510.620.042)
Total Other Charges		8,943,227,291	10,293,915,784	10,294,415,784	10,709,077,507	8,774,784,842	(1,519,630,942)
Total Acq & Major Repairs Total Unallotted		0	0	0	0	0	0
		U	0	0	U	U	\$
Total Expenditures & Request	\$	8,943,227,291	\$ 10,293,915,784	\$ 10,294,415,784	\$ 10,709,077,507	\$ 8,774,784,842	(1,519,630,942)
Authorized Full-Time Equiva	lor	to.					
Classified	ieil	0	0	0	0	0	0
Unclassified		0	0	0	0	0	0
Total FTEs		0	0	0	0	0	0
			<u> </u>				



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 for the Behavioral Health Partnership, agencies within the Department of Health and Hospitals used as state match for the Low Income & Needy Care Collaboration, Office of Group Benefits from premium payments collected from individuals participating in LaCHIP Phase V., and transfers from LSU that will be used as match to support the new LSU Physicians Upper Payment Limit program. The Statutory Dedications represent funding received from the Louisiana Medical Assistance Trust Fund (R.S. 46:2623), which derives its funding from revenue collected from fees imposed on certain healthcare providers (Nursing Homes, Intermediate Care Facilities for Individuals with Developmental Disabilities, and Pharmacies) and premium tax revenues; the Louisiana Fund (R.S. 39:98.4; ART. VII, SECT. 10.8, 10.9, 10.10; R.S. 39:99.1; R.S. 39:99.12; R.S. 40:1105.13(F)) and the Health Excellence Fund (R.S. 39:98.1; ART. VII, SECT. 10.8; R.S. 39:98.3; R.S. 40:1105.13(F)), payable out of funding received pursuant to the Master Settlement Agreement reached between certain states and participating tobacco manufacturers; the Community and Family Support System Fund (R.S. 28:826); the Health Trust Fund (R.S. 46:2731); Medicaid Trust Fund for the Elderly (R.S. 46:2691; ART. VII, SECT. 14(B)); Hospital Stabilization Fund (ACT No. 438 of 2013 RLS); and Tobacco Tax Medicaid Match Fund (R.S. 47:841.2). (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, generally matched at a blended rate of 63.34% for state Fiscal Year 2017-2018.

Payments to Private Providers Statutory Dedications

Fund	Prior Year Actuals FY 2016-2017	Enacted FY 2017-2018	Existing Oper Budget as of 12/01/17	Continuation FY 2018-2019	Recommended FY 2018-2019	Total Recommended Over/(Under) EOB	
Community Hospital Stabilization Fund	\$ 2,767,414	\$ 0	\$ 0	\$ 7,687	\$ 7,687	\$ 7,687	
2013 Amnesty Collections Fund	1,419,568	0	0	0	0	0	
Community and Family Support System Fund	63	0	0	509,540	509,540	509,540	
Tobacco Tax Medicaid Match Fund	149,118,778	120,294,636	120,294,636	120,390,712	120,390,712	96,076	
Health Excellence Fund	24,617,110	26,090,316	26,090,316	26,179,101	26,179,101	88,785	
Health Trust Fund	11,118,476	590,522	590,522	3,053,599	3,053,599	2,463,077	
Medicaid Trust Fund for the Elderly	24,909,431	1,733,908	1,733,908	18,189,130	1,733,908	0	
Louisiana Medical Assistance Trust Fund	557,594,188	587,254,215	587,254,215	562,923,452	491,982,492	(95,271,723)	
Louisiana Fund	5,904,902	7,614,417	7,614,417	6,384,866	6,384,866	(1,229,551)	
Hospital Stabilization Fund	29,338,635	56,357,050	56,357,050	0	56,357,050	0	
Overcollections Fund	7,111,421	0	0	0	0	0	



Major Changes from Existing Operating Budget

•	General Fund	Total Amount	Table of Organization	Description
\$	183,300	\$ 500,000	0	Mid-Year Adjustments (BA-7s):
\$	1,432,669,353	\$ 10,294,415,784	0	Existing Oper Budget as of 12/01/17
				Statewide Major Financial Changes:
				Non-Statewide Major Financial Changes:
	1,236,355	3,499,447	0	Annualization for payments to 6 Rural Health Clinics (RHCs) and 13 Federally Qualified Health Clinics (FQHCs) that are projected to enroll in FY 18.
	2,683,430	7,595,333	0	Funding for 20 new Federally Qualified health Clinics (FQHCs) and 13 new Rural Health Clinics (RHCs) projected to enroll in FY 19. The funding is required by the Centers for Medicare and Medicaid Services (CMS) per 42 CFR, part 405, subpart X of the Code of Federal Regulations.
	685,842	1,941,245	0	Annualization of the increase in Medicare Economic Index (MEI) costs for Federally Qualified Health Clinics (FQHCs) and Rural Health Centers.
	2,068,676	8,518,859	0	Capitation rate payments for the population covered under the Dental Benefit Program (PAHP) for dental services. It reflects PMPMs paid, on average, at the 25th percentile in the actuarially sound rate range and the increase is a result of 1) utilization/trend adjustment and 2) continued enrollment growth in the expansion population.
	1,001,068	2,833,478	0	This adjustment is for a projected increase in utilization of Long Term Personal Care Services (LT-PCS) of 33 recipients per month in FY19.
	(55,586,302)	0	0	Means of financing substitution replacing State General Fund (Direct), Interagency Transfers, and Fees and Self-generated Revenues with Federal Funds due to a FMAP rate change in the Private Providers, Public Providers, Uncompensated Care Costs, and Medicare Buy-ins and Supplements Programs. The FY 18 Title XIX blended rate is 63.34% federal and the FY 19 blended rate is 64.67% federal. For UCC, the FY 18 FMAP rate is 63.69% federal and the FY 19 rate is 65% federal.
	4,841,949	13,704,922	0	Funding for the annualization of 627 waiver slots phased in during SFY18. This a combination of Children's Choice, New Opportunities and other waivers.
	1,448,912	4,100,956	0	Funding to annualize 60 Community Choice Waiver slots being added in SFY18 and 223 slots being phased in during FY19 because of the annualization of the Serious Mental Illness BA-7. These slots are meant to be offered to be people currently in nursing homes.
	532,675	1,507,712	0	Annualization of 79 new PACE enrollees that will be phased in during FY18.
	991,172	2,805,468	0	Funding to rebase the small rural hospitals inpatient per diem rates. Act 327 of the 2007 Regular Legislative Session requires small rural hospital rates to be rebased every other year. These rates were last rebased in SFY17.
	3,690,066	57,020,345	0	This request is to 1) rebase Nursing Home (NH) rates; 2) rebase Room and Board rates for Hospice recipients who are in nursing homes; and 3) provide for 40 offenders on medical furlough to be placed in nursing homes. State rules requires NH rates to be rebased at least every two years. NH rates were last rebased in SFY 17.
	8,214,414	97,286,867	0	Reverses a hospital FMP/UPL payment adjustment associated with changes to hospital payment methods intended for implementation in FY18 but deferred pending the outcome of a hospital payment study in progress.
	(51,103,094)	(376,322,339)	0	Reverses a hospital "base rate" payment adjustment associated with changes to hospital payment methods intended for implementation in FY18 but deferred pending the outcome of a hospital payment study in progress.



Major Changes from Existing Operating Budget (Continued)

General Fund	Total Amount	Table of Organization	Description
156,531,224	249,814,778	0	Funds projected increases in the total per member per month (PMPM) payments for the population covered under the Healthy Louisiana Managed Care Organizations (MCO). The increase is primarily a result of 1) reinstatement of the Health Insurer's Provider Fee, 2) utilization/trend adjustment, 3) enrollment increases and annualization of SFY18 new enrollees and 4) annualization of planned SFY18 program changes. The projected increase is based on PMPMs paid at the floor of the actuarially sound rate range.
3,259,307	9,324,910	0	Pharmacy Utilization
(34,616,893)	(515,153,142)	0	Removes all funding for Upper Payment Limit/Full Medicaid Pricing payments associated with the LSU Public Private Partnerships (PPPis) for FY 2019.
34,616,893	515,153,142	0	Increase funding for the High Medicaid UPL/Graduate Medical Education pool for providers consistent with the outcome of the hospital payment study in progress.
5,464,415	0	0	Reduction to the Fees and Self-generated Revenue (FSGR) received from public providers for Low-Income and Needy Care Collaboration Agreement (LINCCA) Disproportionate Share Hospital (DSH) payments. A portion of the FSGR is used as funding in the Payments to Private Providers Program.
81,166	229,738	0	Anticipated costs associated with Severe Combined Immunodeficiency (SCID) screening, a Medicaid reimbursable test to be added to the Newborn Screening panel. This is a companion request with the Office of Public Health.
3,942,917	0	0	Means of financing substitution replacing Louisiana Medical Assistance Trust Fund (MATF) with State General Fund (Direct) based on projected FY 19 collections.
3,578,879	0	0	Means of financing substitution replacing Fees and Self-generated Revenues with State General Fund (Direct) to adjust the New Orleans Medical School's maximum Fair Market Value to match the prior year actual collections.
(2,463,077)	0	0	Means of financing substitution replacing State General Fund (Direct) with Health Trust Fund based on a higher than projected FY 18 initial fund balance.
(96,076)	0	0	Means of financing substitution replacing State General Fund (Direct) with Tobacco Tax Medicaid Match Fund based on projected collections in FY 19.
(509,540)	0	0	Means of financing substitution replacing State General Fund (Direct) with Community and Family Support System Fund due to an available balance.
(7,687)	0	0	Means of financing substitution replacing State General Fund (Direct) with Community Hospital Stabilization Fund due to an available balance.
(10,877,713)	(30,326,012)	0	Eliminate Pediatric Day Healthcare (PDHC) Services.
(1,050,292)	(2,972,805)	0	Eliminate Nursing Home Bed Holds.
(3,690,066)	(57,020,345)	0	Eliminate Nursing Home Rebase in FY 19.
(4,049,647)	(62,302,262)	0	Reduce Upper Payment Limit (UPL) / Full Medicaid Pricing (FMP) by 20.6% of the FMP Payments at Expansion Federal Financial Participation (FFP).
(12,155,208)	0	0	Reduce Disproportionate Share Hospital (DSH) payments, eliminating funding to hospitals for their uncompensated care costs. This reduction also reallocates Statutory Dedicated Medical Assistance Trust Fund (MATF).
			Elimination of some mental rehabilitation services for individuals 21 years or older including psycho social rehabilitation services, community psychiatric support and treatment services, crisis intervention services, and services provided by licensed mental health professionals, as well as reductions to inpatient psychiatric services. This reduction also eliminates outpatient and residential substance abuse services for
(43,663,009)	(123,756,236)	0	individuals 21 years or older.
(38,229,293)	(106,579,573)	0	Eliminate Provisional Medicaid.
(260,560,661)	(971,687,052)	0	Eliminate Long Term Care Special Income Level Program.
(3,669,732)	(15,641,124)	0	Ambulatory Surgical Center.
(10,508,763)	(29,297,415)	0	Medically Needy Regular.
(1,231,569)	(3,433,493)	0	Medically Needy Spenddown.
(55,962,600)	(160,093,830)	0	Eliminate Long Term Personal Care Services (LT-PCS) Program.



Major Changes from Existing Operating Budget (Continued)

(General Fund	Fotal Amount	Table of Organization	Description
	(4,687,388)	(13,435,432)	0	Eliminate Children's Choice Waiver.
	(4,754,892)	(13,458,511)	0	Eliminate Supports Waiver.
	1,229,551	0	0	Means of financing substitution replacing Louisiana Fund with State General Fund (Direct) based on projected FY 19 collections.
	(88,785)	0	0	Means of financing substitution replacing State General Fund (Direct) with Health Excellence Fund based on projected collections in FY 19.
	(4,824,862)	(13,488,571)	0	Reduction of services provided by the New Opportunity Waiver (NOW) including reductions to Support Coordination Rate and the elimination of Supported Independent Living
\$	1,064,381,115	\$ 8,774,784,842	0	Recommended FY 2018-2019
\$	0	\$ 0	0	Less Supplementary Recommendation
\$	1,064,381,115	\$ 8,774,784,842	0	Base Executive Budget FY 2018-2019
\$	1,064,381,115	\$ 8,774,784,842	0	Grand Total Recommended

Professional Services

Amount	Description
	This program does not have funding for Professional Services.

Other Charges

Amount	Description					
	Other Charges:					
\$8,774,784,842	Payments to Private Providers					
\$8,774,784,842	SUB-TOTAL OTHER CHARGES					
	Interagency Transfers:					
\$0	This program does not have funding for Interagency Transfers.					
\$0	SUB-TOTAL INTERAGENCY TRANSFERS					
\$8,774,784,842	TOTAL OTHER CHARGES					

Acquisitions and Major Repairs

Amount	Description
	This program does not have funding for Acquisitions and Major Repairs.



Performance Information

1. (KEY) To expand Medicaid healthcare coverage and access to newly eligible adults with income below 138% Federal Poverty Level allowing for increased access to preventive care and reducing utilization of higher cost services

Children's Budget Link: Not applicable

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

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

Performance Indicators

			Performance Ind	icator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Number of new adults enrolled in Medicaid Managed Care (LAPAS CODE - 26103)	Not Applicable	436,556	508,962	508,962	460,556	460,556
This was a new performance i	ndicator for FY 17/	18.				
K Number of Primary care visits (LAPAS CODE - 26104)	Not Applicable	105,248	94,850	94,850	105,248	105,248
This was a new performance i	ndicator for FY 17/	18. This utilization co	ount was generated f	rom the MARS data	a warehouse provide	d by ULM.
K Number of mammograms (LAPAS CODE - 26105)	Not Applicable	16,330	9,166	9,166	16,330	16,330
This was a new performance i	ndicator for FY 17/	18. This utilization co	ount was generated f	rom the MARS data	a warehouse provide	d by ULM.
K Number of immunizations (LAPAS CODE - 26106)	Not Applicable	19,116	20,492	20,492	19,116	19,116
This was a new performance i	ndicator for FY 17/	18. This utilization co	ount was generated f	from the MARS data	a warehouse provide	d by ULM.
K Number of colonoscopies (LAPAS CODE - 26107)	Not Applicable	11,107	8,204	8,204	11,107	11,107
This was a new performance i	ndicator for FY 17/	18. This utilization co	ount was generated f	from the MARS data	a warehouse provide	d by ULM.
K Number of Emergency Department visits per 1000 (LAPAS CODE - 26108)	Not Applicable	101	100	100	101	101
This was a new performance i	ndicator for FY 17/	18. This utilization co	ount was generated f	from the MARS data	a warehouse provide	d by ULM.

2. (KEY) Maximize state general fund savings generated through enhanced federal financing under expanded Medicaid coverage.

Children's Budget Link: Not applicable

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 Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Total Medicaid expenditures for newly eligible adults (LAPAS CODE - 26109)	Not Applicable	Not Applicable	\$ 3,469,190,635	\$ 3,469,190,635	\$ 3,497,868,649	\$ 3,497,868,649
This was a new performance i	ndicator for FY 17/1	8.				
S Total state general fund savings from refinancing the cost of care for certain populations previously payable at regular match but now payable at enhanced match under expansion (LAPAS CODE - 26110)	Not Applicable	Not Applicable	\$ -58,291,849	\$ -58,291,849	\$ -50,019,036	\$ -50,019,036
This was a new performance i	ndicator for FY 17/	8.				
K Inpatient hospital expenditures for incarcerated offenders eligible under Medicaid expansion (LAPAS CODE - 26111)	Not Applicable	Not Applicable	\$ 22.592.479	\$ 22,592,479	\$ 23,888,048	\$ 23,888.048
This was a new performance i	**	11	22,002,110	22,002,110	22,000,010	20,000,010

3. (SUPPORTING)Streamline eligible offender enrollment in Medicaid prior to release under new adult group and reduce cost and recidivism through case management of offenders with special healthcare needs.

Children's Budget Link: Not applicable

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 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019	
	Number of high-need DOC offenders enrolled in case management (LAPAS CODE - 26112)	1,000	150	577	577	270	270	
	This was a new performance indicator for FY 17/18.							

4. (KEY) Through the Fee-For-Service Program activity, to implement policy and payment reform activities through state fiscal year 2022.

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 Indicator Values							
L e v e l	Performance Indicator Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K	Percentage of deliveries by Caesarean section (LAPAS CODE - 25569)	36%	36%	36%	36%	36%	36%

5. (KEY) Through the Medicaid Managed Care activity, to increase budget predictability while providing for service delivery model of high quality medically necessary health services, avoiding unnecessary duplication of services.

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 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Ind Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Percentage of Medicaid enrollees enrolled in a managed care model (LAPAS CODE - 25602)	86%	85%	86%	86%	86%	86%
Measure is for Healthy Louisi	ana members enrolle	ed for both physical	health and specialize	ed behavioral health	; includes new adult	group.
K Percentage of Medicaid enrollee expenditures under a managed care model (LAPAS CODE - 25603)	68%	70%	78%	78%	76%	76%

Payments to Private Providers General Performance Information

Performance Indicator Values					
Performance Indicator Name	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016	Prior Year Actual FY 2016-2017
Annual amount of premium taxes paid by Medicaid managed care plans (LAPAS CODE - 25604)	\$ Not Available	\$ Not Available	\$ 31,189,920	\$ 79,900,780	\$ 307,426,967
This performance indicator Measures premium reflect increased premium tax amount to 5.5%		luding quarterly pre-	-payments. Updated	to include the new	adult group and

6. (KEY) Increase preventive healthcare through the Medicaid Managed Care Program and improve quality, performance measurements, and patient experience for Medicaid Managed Care members.

Children's Budget Link: Not applicable

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 Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Percentage of adults' access to preventative/ambulatory health services for Medicaid Managed Care members (LAPAS CODE - 26113)	Not Applicable	Not Applicable	31%	31%	84%	84%
This was a new performance in	ndicator for FY 17/1	18.				
K Percentage of Medicaid Managed Care members in case management (LAPAS CODE - 26114)	Not Applicable	Not Applicable	41%	41%	41%	41%
This was a new performance in	11	11	.170	7170	1170	.170

Payments to Private Providers General Performance Information

	Performance Indicator Values						
Performance Indicator Name	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016	Prior Year Actual FY 2016-2017		
Actual rate of well-child visits in third, fourth, fifth, and sixth years of life for Medicaid Managed Care members (LAPAS CODE - 26115)	Not Available	Not Available	Not Available	63.59	65.68		
This was a new performance indicator for FY calendar year 2015 and 2016 data.	7/18. These numbers	s were provided by U	Iniversity of Louisia	ana Monroe-ULM ai	nd are on based on		
Actual rate of adolescent well-care visits for Medicaid Managed Care members (LAPAS CODE - 26116)	Not Available	Not Available	Not Available	51.51	54.70		
This was a new performance indicator for FY calendar year 2015 and 2016 data.	7/18. These numbers	s were provided by U	Iniversity of Louisia	nna Monroe-ULM ai	nd are on based on		
Follow-up care visits for children enrolled in a managed care plan who are prescribed Attention Deficit Hyperactivity Disorder (ADHD) Medication-Continuation Phase (LAPAS CODE - 26117)	Not Available	Not Available	Not Available	55.69	56.60		
This was a new performance indicator for FY I calendar year 2015 and 2016 data.	7/18. These numbers	s were provided by U	Iniversity of Louisia	nna Monroe-ULM ai	nd are on based on		

7. (KEY) Through the Medicaid Pharmacy Benefits Management Program, to reduce the rate of growth of expenditures for drugs in the legacy program and by contracting with the Medicaid MCOs.

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 In	dicator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
S Amount of cost avoidance in Pharmacy (in millions) through the prior authorization (PA) program and use of the preferred drug list (LAPAS CODE - 15421)	\$ 2.2	\$ 2.5	\$ 2.6	\$ 2.6	\$ 2.2	\$ 2.2

Pharmacy Benefits Management (PBM) utilizes the preferred drug list (PDL) to reduce the rate of growth of expenditures for the program. Amount of Cost Avoidance (in millions) through the Prior Authorization Program and use of the Preferred Drug List (PDL) identifies what is being measured. It is the cost avoidance generated by the PDL as a result of accrual of supplemental rebates and market share savings. This is not a cumulative performance indicator.

K Percentage of Total Drug						
Rebates Collected (LAPAS						
CODE - 22942)	90%	109%	90%	90%	90%	90%
D	6.11 . 1.1.1					

Percentage of Total Drug Rebates Collected is the percentage of rebates actually collected based on invoices/billing.

8. (KEY) Through the Medicaid Inpatient Hospitalization activity, to provide evidence-based 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 through value-based purchasing and payment reform.

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: 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 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019	
K Average (mean) length of stay in days (non-psych.) for Title XIX Medicaid recipients (LAPAS CODE - 24083)	4.8	4.8	4.8	4.8	4.8	4.8	
K Average length of stay at formerly state-owned hospital facilities (in days) (LAPAS CODE - 25578)	5.6	5.1	5.6	5.6	5.6	5.6	

9. (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 through state fiscal year 2022.

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 ensuring 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 l	Performance Indicator Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
	Number of Room and Board Services for Hospice Patients (LAPAS CODE - 24090)	491,678	437,551	433,000	433,000	491,478	491,478
	Number of Hospice Services (LAPAS CODE - 24091)	71,473	50,145	48,000	48,000	71,473	71,473

10. (KEY)Through the Dental activity, to increase the percentage of children ages 1-20 enrolled in Medicaid or CHIP for at least 90 consecutive days who receive a preventive dental service.

Children's Budget Link: Not Applicable



Human Resource Policies Beneficial to Women and Families Link: This objective will support Act 1078 by ensuring 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 l	Performance Indicator Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019	
	Percentage of Medicaid enrollees aged 2-21 years of age who had at least one dental visit in a year (LAPAS CODE - 22947)	55%	55%	55%	55%	57%	57%	

Increased performance standards for FY 2018-19 to align with DBP contract performance measurement goals and to require improved outcomes.

11. (KEY)To increase the proportion of children ages 6-9 enrolled in Medicaid or CHIP for at least 90 continuous days who receive a dental sealant on a permanent molar tooth.

Children's Budget Link: Not applicable

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

L e v e Performanc l Nai	Per e Indicator St	andard	octual Yearend Performance FY 2016-2017	Performance Indi Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Percentage of enrollees, enro- least 90 consec- aged 6-9, who dental sealant permanent mo (LAPAS COD	lled for at cutive days receive a on a lar tooth	16%	17%	15%	15%	17%	17%
Increased perf	ormance standards for	FY 2018-19 to	align with DBP con	ntract performance n	neasurement goals a	and to require impro	ved outcomes.

K Number of Medicaid
enrollees aged 6 - 9
enrolled for at least 90
consecutive days, who
receive a dental sealant on
a permanent tooth (LAPAS
CODE - 25577) 24,757 27,644 23,500 23,500 23,970 23,970

Increased performance standards for FY 2018-19 to align with DBP contract performance measurement goals and to require improved outcomes.



12. (KEY)Through the Community-based Long Term Care for Persons with Disabilities activity, to improve quality of services and health outcomes, decrease fragmentation, and refocus the system to increase choice and provide more robust living options for those who need long-term supports and services by promoting home and community-based services to meet the existing demand for services and decreasing the reliance on more expensive institutional care through June 30, 2022.

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 ensuring 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 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
	Number of unduplicated recipients receiving community-based services (LAPAS CODE - 25571)	38,000	33,937	34,068	34,068	34,619	34,619
	Percentage change in the unduplicated number of recipients receiving community-based services (LAPAS CODE - 25572)	1.0%	-12.0%	0.2%	0.2%	1.0%	1.0%
	Percentage of Medicaid spending that goes toward home and community- based services rather than institutional services (LAPAS CODE - 25573)	44%	35%	34%	34%	35%	35%
S	Percentage of recipients reporting satisfaction with self-directed services (LAPAS CODE - 25574)	90%	93%	90%	90%	90%	90%
	Percentage change in the unduplicated number of recipients self-directing services (LAPAS CODE - 25575)	24%	13%	12%	12%	13%	13%



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 Statutes 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 improve health outcomes through better coordination of care, increased access to medically necessary services, and mandating accountability for the delivery of Medicaid covered services through contractual arrangements with managed care organizations/ health plans and safety net public providers.
- II. To provide cost effective and medically appropriate Medicaid covered services through public providers.

The Payments to Public Providers Program has the following activities:

- Payments to Public Providers This activity provides access to care through state and local governmental
 providers of healthcare services, including some services not readily available in the private sector, such as
 services provided to individuals with severe mental illness (Eastern Louisiana Mental Health System, Central Louisiana State Hospital) and developmental disabilities (Pinecrest Services and Supports Center).
- Family Planning Services Federal law requires state Medicaid programs to cover family planning services and supplies for recipients of child-bearing age and provides an enhanced federal match rate for such services (90% Federal Financial Participation). The Office of Public Health (OPH) is the Medicaid Program's largest provider of family planning services, as well as the state's safety net provider of family planning services for the uninsured and underinsured. OPH offers family planning services throughout the state at its Parish Health Unit locations.

For additional information, see:

Medical Vendor Payments



Payments to Public Providers Budget Summary

		Prior Year Actuals FY 2016-2017		Enacted FY 2017-2018		Existing Oper Budget as of 12/01/17		Continuation FY 2018-2019		Recommended FY 2018-2019		Total Recommended Over/(Under) EOB	
Means of Financing:													
State General Fund (Direct)	\$	52,761,492	\$	55,876,153	\$	55,876,153	\$	55,868,994	\$	53,278,081	\$	(2,598,072)	
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		9,147,866		9,147,866		9,147,866		9,147,866		9,147,866		0	
Interim Emergency Board		0		0		0		0		0		0	
Federal Funds		133,228,387		155,099,224		155,099,224		173,426,223		161,237,675		6,138,451	
Total Means of Financing	\$	195,137,745	\$	220,123,243	\$	220,123,243	\$	238,443,083	\$	223,663,622	\$	3,540,379	
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		195,137,745		220,123,243		220,123,243		238,443,083		223,663,622		3,540,379	
TotalAcq&MajorRepairs		0		0		0		0		0		0	
Total Unallotted		0		0		0		0		0		0	
Total Expenditures & Request	\$	195,137,745	\$	220,123,243	\$	220,123,243	\$	238,443,083	\$	223,663,622	\$	3,540,379	
Authorized Full-Time Equiva	ients			0		0				0		- 0	
Classified Unclassified		0		0		0		0		0		0	
Unclassified Total FTEs		0		0		0		0		0		0	

Source of Funding

The Payments to Public Providers program is funded with State General Fund, a Statutory Dedication, and Federal Funds. The Statutory Dedication represents funding received from the Louisiana Medical Assistance Trust Fund (R.S. 46:2623) which derives its funding from revenue collected from fees imposed on certain healthcare providers (Nursing Homes, Intermediate Care Facilities for Individuals with Developmental Disabilities, and Pharmacies) and premium tax 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, generally matched at a blended rate of 63.34% for state Fiscal Year 2017-2018.



Payments to Public Providers Statutory Dedications

Fund F		Prior Year Actuals FY 2016-2017		Enacted FY 2017-2018		Existing Oper Budget as of 12/01/17		Continuation FY 2018-2019		commended Y 2018-2019	Total Recommende Over/(Under EOB		
Louisiana Medical Assistance													
Trust Fund	\$	9,147,866	\$	9,147,866	\$	9,147,866	\$	9,147,866	\$	9,147,866	\$	(0

Major Changes from Existing Operating Budget

G	eneral Fund	7	otal Amount	Table of Organization	Description
				<u> </u>	•
\$	0	\$	0	0	Mid-Year Adjustments (BA-7s):
\$	55,876,153	\$	220,123,243	0	Existing Oper Budget as of 12/01/17
					Statewide Major Financial Changes:
					Non-Statewide Major Financial Changes:
\$	(2,359,027)	\$	0	0	Means of financing substitution replacing State General Fund (Direct), Interagency Transfers, and Fees and Self-generated Revenues with Federal Funds due to a FMAP rate change in the Private Providers, Public Providers, Uncompensated Care Costs, and Medicare Buy-ins and Supplements Programs. The FY 18 Title XIX blended rate is 63.34% federal and the FY 19 blended rate is 64.67% federal. For UCC, the FY 18 FMAP rate is 63.69% federal and the FY 19 rate is 65% federal.
\$	0	\$	4,216,987	0	Enrollment growth in the Local Education Agency (LEA) Transportation Program. The Louisiana Department of Health (LDH) does not have control over how many LEAs use transportation direct services.
\$	(239,045)	\$	(676,608)	0	Adjusts funding in the Public Providers and Uncompensated Care Costs (UCC) programs due to the increased or decreased need for Title XIX and UCC in the various agencies' recommended budgets.
\$	53,278,081	\$	223,663,622	0	Recommended FY 2018-2019
\$	0	\$	0	0	Less Supplementary Recommendation
\$	53,278,081	\$	223,663,622	0	Base Executive Budget FY 2018-2019
Ψ	10,270,001	4		· ·	
\$	53,278,081	\$	223,663,622	0	Grand Total Recommended
φ	JJ,270,001	φ	223,003,022	0	Orang Total Accommended

Professional Services

Amount	Description
	This program does not have funding for Professional Services.



Other Charges

Amount	Description						
	Other Charges:						
\$46,969,746	Local Education for School Based Health						
\$46,969,746	SUB-TOTAL OTHER CHARGES						
	Interagency Transfers:						
\$2,453,094	LSU HCSD						
\$14,889,037	LSU Physicians						
\$510,038	Jefferson Parish Human Services Authority						
\$25,136	\$25,136 Capital Area Human Services District						
\$20,000	0,000 Metropolitan Human Services District						
\$19,113,319	Villa Feliciana Medical Complex						
\$85,000	Acadiana Area Human Services District						
\$1,655,938	Office of Public Health						
\$3,419,479	Office of Mental Health for public free standing psych units						
\$116,653,913	Office for Citizens with Developmental Disabilities						
\$60,655	Imperial Calcasieu Human Services Authority						
\$16,707,150	Louisiana Special Education Center						
\$717,321	Special School District #1						
\$383,796	Louisiana School for the Deaf						
\$176,693,876	SUB-TOTAL INTERAGENCY TRANSFERS						
\$223,663,622	TOTAL OTHER CHARGES						

Acquisitions and Major Repairs

Amount	Description
	This program does not have funding for Acquisitions and Major Repairs.

Performance Information

1. (KEY) Through the Payments to Public Providers activity, to track utilization of services provided to local school systems including nursing services, which allow for important medical screenings to be provided by these school systems with Medicaid reimbursement.

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 Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Number of Local Education Agencies participating in School Nursing Services (LAPAS CODE - 24092)	101	105	105	105	105	105
Number of unduplicated recipients Receiving School Nursing Services from Local Education Agencies (LAPAS CODE - 25580)	160,000	152,089	160,000	160,000	152,000	152,000

Payments to Public Providers General Performance Information

		Perfor	mance Indicator V	alues				
Performance Indicator Name	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016	Prior Year Actual FY 2016-2017			
Number of school nurses in participating Local Education Agencies (LAPAS CODE - 25582)	Not Available	Not Available	529	571	546			
This was a new performance indicator for FY15 and there is no prior year actual to report for previous years.								

2. (KEY) Through the Family Planning Services Activity, to increase the percentage of Medicaid eligibles seen by public providers who have Medicaid coverage by 5% through state fiscal year 2022.

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 to women.

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



			Performance Ind	Performance Indicator Values						
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019				
K Number of Medicaid eligibles receiving family planning services (LAPAS CODE - 25583)	2,500	5,483	5,600	5,600	7,070	7,070				
K Percentage change in the number of Medicaid eligibles accessing family planning services. (LAPAS CODE - 25585)	22%	31%	25%	25%	25%	25%				

3. (KEY) Through the Family Planning Services Activity, to reduce prevalence of Sexually Transmitted Infections (STI) through outreach, screening and treatment as a Medicaid service.

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 to women and children.

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 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019	
K Number of Medicaid eligibles screened for syphilis (LAPAS CODE - 25590)	34,726	92,522	66,740	66,740	66,740	66,740	
K Number of Medicaid eligibles screened for HIV (LAPAS CODE - 25591)	58,795	150,396	114,461	114,461	114,461	114,461	
K Number of Medicaid eligibles screened for chlamydia (LAPAS CODE - 25592)	10,000	23,377	20,523	20,523	20,523	20,523	
K Number of Medicaid eligibles screened for gonorrhea (LAPAS CODE - 25593)	10,000	23,354	20,519	20,519	20,519	20,519	



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 purchase health care services through the payment of premiums to other entities on behalf of certain Louisiana Medicaid and CHIP enrollees. This program has three major components:

The goals of the Medicare Buy-ins and Supplements Program are:

Medicaid cost avoidance through Buy-Ins (paying premiums) for Medicare and Medicaid dual eligibles.

To reduce Medicaid expenditures for Medicaid enrollees through reimbursement of employee's share of paid premiums for employer-based health insurance when cost effective to do so.

To reduce the number of uninsured Louisiana residents by reimbursing the most cost effective ESI premium which may provide health insurance coverage for non-Medicaid eligible family members.

The Medicare Buy-ins and Supplements Program has the following activities:

Medicare Savings Program for Low-Income Seniors & Persons with Disabilities – This type of dual coverage is much less costly for the state Medicaid agency. The state receives regular Medicaid federal match on Qualified Medicare Beneficiaries (income below 100% Federal Poverty Level [FPL]) and Specified Low Income Beneficiaries (income between 100-120% FPL), but expenditures for Qualified Individuals (between 120-135% FPL) are 100% federally funded. The ultimate aim of the Medicare Savings Program (MSP) is to improve the health of its beneficiaries. Reducing financial barriers to healthcare can lead to better health outcomes, and expanding access to healthcare improves health status and mortality for those with the lowest incomes. As an added benefit, people who qualify for the Medicare Savings Program are automatically eligible for the low-income subsidy (LIS or Extra Help), which helps pay for the premium, deductible, and some copayments of a Medicare Part D drug plan, enabling them to maintain drug coverage.

Louisiana Health Insurance Premium Payment (LaHIPP) – The LaHIPP program activity focuses on ensuring access to affordable and appropriate care to Medicaid & LaCHIP eligibles and their families who have access to Employer Sponsored Insurance (ESI). In an effort to realize potential cost avoidance available due to ESI, especially with the expansion population onboarding in 2016, the Department is currently in the planning process to re-implement LaHIPP, which was previously retired in 2015. Through coordination of services with private health insurance, the state Medicaid agency can leverage other resources that would otherwise have to be assumed for this population in the entitlement program. LaHIPP reduces the number of uninsured Louisiana residents and frees up Medicaid dollars by establishing a third party resource as the primary payer of medical expenses, assuring that Medicaid pays only after the responsible third party has met its legal obligation to pay. The Medicaid funds which are not expended for LaHIPP enrollees can be utilized to cover the medical needs of non-LaHIPP eligible Medicaid enrollees.



For additional information, see:

Medical Vendor Payments

Medicare Buy-Ins & Supplements Budget Summary

		Prior Year Actuals FY 2016-2017		Enacted FY 2017-2018		Existing Oper Budget as of 12/01/17		Continuation FY 2018-2019		Recommended FY 2018-2019		Total Recommended Over/(Under) EOB	
Means of Financing:													
State General Fund (Direct)	\$	238,151,110	\$	277,169,798	\$	277,169,798	\$	277,972,040	\$	277,972,040	\$	802,242	
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		221,555,002		245,254,765		245,254,765		257,775,443		257,775,443		12,520,678	
Total Means of Financing	\$	459,706,112	\$	522,424,563	\$	522,424,563	\$	535,747,483	\$	535,747,483	\$	13,322,920	
Expenditures & Request:													
Personal Services	\$	0	\$	0	\$	0	\$	0	\$	0	\$	0	
Total Operating Expenses		0		0		0		0		0		0	
TotalProfessionalServices		0		0		0		0		0		0	
Total Other Charges		459,706,112		522,424,563		522,424,563		535,747,483		535,747,483		13,322,920	
TotalAcq&MajorRepairs		0		0		0		0		0		0	
Total Unallotted		0		0		0		0		0		0	
Total Expenditures & Request	\$	459,706,112	\$	522,424,563	\$	522,424,563	\$	535,747,483	\$	535,747,483	\$	13,322,920	
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 Medicare Buy-Ins and Supplements Program is funded with State General Fund and Federal Funds. Federal Funds represent federal financial participation in the Medicaid program, generally matched at a blended rate of 63.34% for state Fiscal Year 2017-2018.



Major Changes from Existing Operating Budget

G	eneral Fund	Т	otal Amount	Table of Organization	Description
\$	0	\$	0	0	Mid-Year Adjustments (BA-7s):
\$	277,169,798	\$	522,424,563	0	Existing Oper Budget as of 12/01/17
					Statewide Major Financial Changes:
					Non-Statewide Major Financial Changes:
	1,644,526		1,644,526	0	Clawback to accommodate for payments to the Centers for Medicare and Medicaid Services (CMS) for a phase-down contribution to finance a portion of the Medicare drug expenditures for individuals (known as dual eligibles) whose projected Medicaid drug coverage is assumed by Medicare Part-D.
	1,806,812		6,523,301	0	The Medicare Part A and Part B adjustment provides funding for federally mandated rate changes to Medicare premiums and for the 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. The adjustment includes \$1,409,199 of 100% federal funds for Qualified Individuals (QI).
	(4,470,390)		0	0	Means of financing substitution replacing State General Fund (Direct), Interagency Transfers, and Fees and Self-generated Revenues with Federal Funds due to a FMAP rate change in the Private Providers, Public Providers, Uncompensated Care Costs, and Medicare Buy-ins and Supplements Programs. The FY 18 Title XIX blended rate is 63.34% federal and the FY 19 blended rate is 64.67% federal. For UCC, the FY 18 FMAP rate is 63.69% federal and the FY 19 rate is 65% federal.
	1,821,294		5,155,093	0	Annualize the reinstatement of the LaHIPP program. LaHIPP provides premium subsidies to Medicaid members with access to employer based health insurance. This increase is a companion to the CB-7 Healthy Louisiana form, which includes an offsetting reduction reflecting the exclusion of LaHIPP participants from managed care enrollment.
\$	277,972,040	\$	535,747,483	0	Recommended FY 2018-2019
\$	0	\$	0	0	Less Supplementary Recommendation
\$	277,972,040	\$	535,747,483	0	Base Executive Budget FY 2018-2019
\$	277,972,040	\$	535,747,483	0	Grand Total Recommended

Professional Services

Amount	Description
	This program does not have funding for Professional Services.



Other Charges

Amount	Description
	Other Charges:
\$5,155,093	LaHIPP
\$375,411,038	Medicare Savings Plans
\$155,181,352	Clawback Payments
\$535,747,483	SUB-TOTAL OTHER CHARGES
	Interagency Transfers:
\$0	This program does not have funding for Interagency Transfers.
\$0	SUB-TOTAL INTERAGENCY TRANSFERS
\$535,747,483	TOTAL OTHER CHARGES

Acquisitions and Major Repairs

Amount	Description
	This program does not have funding for Acquisitions and Major Repairs.

Performance Information

1. (KEY) Through state fiscal year 2022, the Medicare Savings Program for Low-Income Seniors & Persons with Disabilities activity will 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: Not Applicable

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

Performance Indicators

				Performance Inc	dicator Values		
L e v e l	Performance Indicator Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K	Total savings (cost of care less premium cost) for Medicare benefits (LAPAS CODE - 2266)	\$ 1,253,500,000	\$ 1,132,978,643	\$ 1,253,500,000	\$ 1,253,500,000	\$ 1,253,500,000	\$ 1,253,500,000



2. (KEY) Each year through June 30, 2022, the Louisiana Health Insurance Premium Payment (La. HIPP) activity will assist eligible Medicaid enrollees and their families in purchasing private health insurance through an employer while maintaining Medicaid/LaCHIP coverage as a secondary payer of medical expenses for Medicaid enrollees, resulting in reduced cost exposure to the state.

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 Indicator Values						
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019			
K Number of cases added in LaHIPP (LAPAS CODE - 26101)	Not Applicable	Not Applicable	2,000	2,000	2,348	2,348			
Program began June 1, 2017	; therefore, there is no	o inforamtion availa	ble for FY 16/17.						
K LaHIPP Total Savings in Millions (LAPAS CODE - 26102)	Not Applicable	Not Applicable	\$ 2,000,000	\$ 2,000,000	\$ 3,372,091	\$ 3,372,091			
Program began June 1, 2017	; therefore, there is no	o inforamtion availa	ble for FY 16/17.						



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.

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.

The Uncompensated Care Costs Program has the following activity:

• Uncompensated Care Costs – Without access to care, the uninsured population is likely to experience poorer health outcomes because they may not receive recommended screenings and follow-up care for urgent medical conditions. Delaying or forgoing needed medical care increases overall health care costs incurred because uninsured patients are more likely to be treated in either an emergency room or to be hospitalized for avoidable medical conditions. High bills that uninsured patients incur can permanently jeopardize their family's financial security. The Uncompensated Care Costs Program also funds a significant portion of the cost of training physicians in Louisiana hospitals which results in long-term increased access to primary, preventive and specialty care for all citizens. Louisiana currently has the fourth largest Disproportionate Share Hospital (DSH) program in the United States. Without leveraging federal funding available through DSH, Louisiana would have to fund these uncompensated costs using State General Fund dollars.

For additional information, see:

Medical Vendor Payments

Uncompensated Care Costs Budget Summary

	F	Prior Year Actuals Y 2016-2017	F	Enacted Y 2017-2018	Existing Oper Budget s of 12/01/17	Continuation FY 2018-2019	commended Y 2018-2019	Total Recommended Over/(Under) EOB
Means of Financing:								
State General Fund (Direct)	\$	239,535,309	\$	169,567,249	\$ 169,567,249	\$ 221,590,887	\$ 29,590,183	\$ (139,977,066)
State General Fund by:								
Total Interagency Transfers		17,390,553		16,549,692	16,549,692	16,549,692	0	(16,549,692)
Fees and Self-generated Revenues		141,178,453		126,188,808	126,188,808	51,060,614	0	(126,188,808)
Statutory Dedications		12,155,208		12,155,208	12,155,208	12,155,208	0	(12,155,208)
Interim Emergency Board		0		0	0	0	0	0
Federal Funds		627,788,827		589,774,049	589,774,049	559,224,324	54,953,196	(534,820,853)



Uncompensated Care Costs Budget Summary

	1	Prior Year Actuals FY 2016-2017	F	Enacted Y 2017-2018	xisting Oper Budget s of 12/01/17	Continuation FY 2018-2019	ecommended FY 2018-2019	Total Recommended Over/(Under) EOB
Total Means of Financing	\$	1,038,048,350	\$	914,235,006	\$ 914,235,006	\$ 860,580,725	\$ 84,543,379	\$ (829,691,627)
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		1,038,048,350		914,235,006	914,235,006	860,580,725	84,543,379	(829,691,627)
Total Acq & Major Repairs		0		0	0	0	0	0
Total Unallotted		0		0	0	0	0	0
Total Expenditures & Request	\$	1,038,048,350	\$	914,235,006	\$ 914,235,006	\$ 860,580,725	\$ 84,543,379	\$ (829,691,627)
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 Uncompensated Care Cost Program is funded with State General Fund, Interagency Transfers, Fees and Self-generated Revenues, a Statutory Dedication, and Federal Funds. The Statutory Dedication represents funding received from the Louisiana Medical Assistance Trust Fund (R.S. 46:2623) which derives its funding from revenue collected from fees imposed on certain healthcare providers (Nursing Homes, Intermediate Care Facilities for Individuals with Developmental Disabilities, and Pharmacies) and premium tax revenues. (Per R.S. 39:36B (8), see table below for a listing of expenditures out of each Statutory Dedicated Fund.) The Interagency Transfers originate from state agencies and are used to match federal funds for the Low Income Needy Care Collaboration. The Fees and Self-generated Revenues are via intergovernmental transfer from non-state public hospitals and are used to match federal funds for the Low Income Needy Care Collaboration. Federal Funds represent federal financial participation on Uncompensated Care Costs, matched at a straight rate of 63.69% for Fiscal Year 2017-2018.

Uncompensated Care Costs Statutory Dedications

Fund	Prior Year Actuals FY 2016-2017		Enacted			xisting Oper Budget s of 12/01/17	Continuation Recommend FY 2018-2019 FY 2018-20			Total ecommended Over/(Under) EOB	
Louisiana Medical Assistance											
Trust Fund	\$	12,155,208	\$	12,155,208	\$	12,155,208	\$	12,155,208	\$	0	\$ (12,155,208)



Major Changes from Existing Operating Budget

	General Fund	,	Fotal Amount	Table of Organization	Description
\$	0		0	0	
\$	169,567,249	\$	914,235,006	0	Existing Oper Budget as of 12/01/17
					Statewide Major Financial Changes:
					Non-Statewide Major Financial Changes:
\$	(7,782,495)	\$	0	0	Means of financing substitution replacing State General Fund (Direct), Interagency Transfers, and Fees and Self-generated Revenues with Federal Funds due to a FMAP rate change in the Private Providers, Public Providers, Uncompensated Care Costs, and Medicare Buy-ins and Supplements Programs. The FY 18 Title XIX blended rate is 63.34% federal and the FY 19 blended rate is 64.67% federal. For UCC, the FY 18 FMAP rate is 63.69% federal and the FY 19 rate is 65% federal.
\$	8,784,696	\$	17,099,133	0	Funding the Public Private Partnership (PPP) Uncompensated Care (UCC) budget up to the level of the agreed upon Memorandums of Understanding (MOUs) for FY 18.
\$	42,888,680	\$	118,118,095	0	Reverses a hospital Disproportionate Share Hospital (DSH) payment adjustment associated with changes to hospital payment methods intended for implementation in FY18 but deferred pending the outcome of a hospital payment study in progress.
\$	(175,799,652)	\$	(612,905,204)	0	Removes all funding for Disproportionate Share payments associated with the LSU Public Private Partnerships (PPPis) for FY 2019.
\$	175,799,652	\$	612,905,204	0	Increase funding for the High Medicaid DSH pool for providers, consistent with the outcome of the hospital payment study in progress.
\$	0	\$	(201,869,084)	0	Reduce the Uncompensated Care Costs (UCC) budget to the estimated Disproportionate Share Hospital (DSH) Cap in FY 2019. This request assumes that federal action will be taken to reduce DSH caps for all states.
\$	5,386,181	\$	5,587,778	0	Transfer state match from Eastern Louisiana Mental Health System (ELMHS) to Medical Vendor Payments (MVP). This is a companion request with OBH. ELMHSi budget maintains the State General Fund (Direct) (SGFD) match for a portion of federal funds that is in the MVP budget, which allows ELMHS to only request the federal funds for Phase I of the facility expansion in FY 2017. By transferring the SGFD to MVP and receiving a like amount of Interagency Transfer (IAT) revenue, the Office of Behavioral Health (OBH) will be able to more clearly identify and track actual IAT.
\$	5,337,489	\$	15,249,968	0	Adjusts funding in the Public Providers and Uncompensated Care Costs (UCC) programs due to the increased or decreased need for Title XIX and UCC in the various agencies' recommended budgets.
\$	(189,449,826)	\$	(769,186,686)	0	Reduce Disproportionate Share Hospital (DSH) payments, eliminating funding to hospitals for their uncompensated care costs. This reduction also reallocates Statutory Dedicated Medical Assistance Trust Fund (MATF).
\$	(5,141,791)	\$	(14,690,831)	0	Disproportionate Share Hospital (DSH) - Office of Behavioral Health (OBH) Public Private Partner (PPP) - Community Care & Northlake payments.
ф	20 500 102	¢	04 542 270	^	Decommonded EV 2019 2010
\$	29,590,183	Þ	84,543,379	0	Recommended FY 2018-2019
\$	0	\$	0	0	Less Supplementary Recommendation
\$	29,590,183	\$	84,543,379	0	Base Executive Budget FY 2018-2019
Φ.	20.500.102	¢.	04.542.250	^-	C. ITAID
\$	29,590,183	\$	84,543,379	0	Grand Total Recommended



Professional Services

Amount	Description
	This program does not have funding for Professional Services.

Other Charges

Amount	Description
	Other Charges:
\$0	Other Hospitals
\$0	SUB-TOTAL OTHER CHARGES
	Interagency Transfers:
\$84,543,379	Office of Mental Health Psyc Free Standing Units
\$84,543,379	SUB-TOTAL INTERAGENCY TRANSFERS
\$84,543,379	TOTAL OTHER CHARGES

Acquisitions and Major Repairs

Amount	Description
	This program does not have funding for Acquisitions and Major Repairs.

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 the reliance on State General 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 ensuring 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.



L e		Y earend			P	erformance In Performance Standard as	dica	tor Values Existing	Pe	erformance At	Pe	rformance
v e Performance Indicator l Name	Pe S	rformance Standard 7 2016-2017	P	tual Yearend erformance Y 2016-2017	A	Initially Appropriated Y 2017-2018		Performance Standard FY 2017-2018	I	Continuation Budget Level Y 2018-2019	At Bu	Executive adget Level 2018-2019
S Total DSH funds collected in millions (LAPAS CODE - 17040)	\$	630.5	\$	1,026.6	\$	914.2	\$	914.2	\$	853.2	\$	853.2
K Total federal funds collected in millions (LAPAS CODE - 17041)	\$	401.4	\$	639.3	\$	589.7	\$	589.7	\$	554.6	\$	554.6
S Total State Match in millions (LAPAS CODE - 17042)	\$	229.1	\$	387.3	\$	324.5	\$	324.5	\$	298.6	\$	298.6

Uncompensated Care Costs General Performance Information

	Performance Indicator Values										
Performance Indicator Name	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016	Prior Year Actual FY 2016-2017						
Percent change in annual DSH associated with uninsured costs for the recently completed fiscal year compared to the prior fiscal year (LAPAS CODE - 26304)	Not Available	Not Available	Not Available	-1.31%	-66.54%						
These were new performance indicators for FY	17-18; therefore, the	re is no data availab	le prior to FY 15/16.								
Dollar reduction in total Disproportionate Share Hospital (DSH) program expenditures (LAPAS CODE - 26305)	\$ Not Available	\$ Not Available	\$ Not Available	\$ 81.2	\$ -78.9						
These were new performance indicators for FY	17-18; therefore, the	re is no data availab	le prior to FY 15/16.								
Percent reduction in total DSH program expenditures (LAPAS CODE - 26306)	Not Available	Not Available	Not Available	3.84%	-3.72%						
These were new performance indicators for FY	17-18; therefore, the	re is no data availab	le prior to FY 15/16.								



09-307 — Office of the Secretary



Agency Description

Department Description (09)

The mission of the Louisiana Department of Health is to protect and promote health and to ensure access to medical, preventive and rehabilitative services for all citizens of the State of Louisiana.

The goals of the Louisiana Department of Health are:

- Provide quality services.
- Protect and promote health.
- To develop and stimulate services by others.
- Utilize available resources in the most effective manner.

Agency Description (307- Office of the Secretary)

The mission of the Office of the Secretary is to provide leadership and technical support services while maximizing resources to fulfill the Department's mission.

The goal of the Office of the Secretary is to provide primary leadership and direction for the Department and to coordinate statewide programs, services and operations.

For additional information, see:

Office of the Secretary

Office of the Secretary Budget Summary

	Prior Year Actuals 7 2016-2017	F	Enacted Y 2017-2018	xisting Oper Budget s of 12/01/17	Continuation Y 2018-2019	commended Y 2018-2019	Total commended ver/(Under) EOB
Means of Financing:							
State General Fund (Direct)	\$ 41,474,869	\$	44,941,018	\$ 45,900,305	\$ 47,121,024	\$ 45,260,966	\$ (639,339)
State General Fund by:							
Total Interagency Transfers	10,142,778		12,339,668	12,339,668	12,306,951	12,306,951	(32,717)
Fees and Self-generated Revenues	2,436,922		2,650,601	2,650,601	2,650,601	2,650,601	0
Statutory Dedications	3,111,074		1,373,390	1,373,390	1,308,723	1,308,723	(64,667)



Office of the Secretary Budget Summary

		Prior Year Actuals 7 2016-2017	F	Enacted Y 2017-2018	Existing Oper Budget as of 12/01/17	Continuation FY 2018-2019	Recommended FY 2018-2019	Total ecommended Over/(Under) EOB
Interim Emergency Board		0		0	0	0	0	0
Federal Funds		13,474,615		17,881,598	17,881,598	17,881,598	17,881,598	0
Total Means of Financing	\$	70,640,258	\$	79,186,275	\$ 80,145,562	\$ 81,268,897	\$ 79,408,839	\$ (736,723)
Expenditures & Request:								
Management and Finance	\$	70,640,258	\$	79,186,275	\$ 80,145,562	\$ 81,268,897	\$ 79,408,839	\$ (736,723)
Total Expenditures & Request	\$	70,640,258	\$	79,186,275	\$ 80,145,562	\$ 81,268,897	\$ 79,408,839	\$ (736,723)
Authorized Full-Time Equiva	lents:							
Classified		399		395	395	398	397	2
Unclassified		11		11	11	11	11	0
Total FTEs		410		406	406	409	408	2



307_1000 — Management and Finance

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

Program Description

The Louisiana Department of Health (LDH) is authorized under R.S. 36:251-259. It was created as one of twenty executive agencies of state government as provided in the Louisiana Constitution of 1974 (Article IV, Section I) and addresses the public health needs of the State as laid out in Article XII, Section 8 of the Constitution.

The mission of the Office of Management and Finance is to provide both quality and timely leadership and support to the various offices and programs within the Louisiana Department of Health 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 Office Management and Finance Program has five activities: Executive Administration and Program Support, Financial Services, Legal Services, Health Standards, and Internal Audit.

Executive Administration and Program Support activities:

- 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 Evaluation System, 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 Olympic style sporting events across the state that provide 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 and field. The Governor's Council on Physical Fitness and Sports also hosts "Own Your Own Health," a program that allows Louisianans to track their fitness and nutrition levels online by forming teams of two or more people for adults and ten or more 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. The Fitness Council also provides



training, teaching strategies, authentic assessment and best practice information to K-12 teachers in the areas of health and physical education. The primary purpose of this project called, Tour de Fitness is to inservice and equip teachers with developmentally appropriate information regarding smoking cessation, the dangers of tobacco (smokeless and smoking), techniques to make their physical education lessons more physically active, and assessment opportunities to measure physical fitness.

Financial Services activities:

- **Financial Management** performs accounting functions which includes depositing revenue into the State's Treasury, processing expenditures, preparing and issuing financial reports and maintenance of LDH's general ledger on the State's financial system.
- 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 analyses; 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 activities:

• The Bureau of Legal Services provides legal services, such as advice and counsel, litigation, administrative hearings, policy and contract review, recoupment, 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.

Health Standards activities:

Health Standards Section enforces state licensing standards and federal certification regulations through
licensing and certification surveys of health care providers; 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.

Internal Audit activities:

• Internal Audit is a unit of management that independently appraises activities, examines and evaluates the adequacy and effectiveness of controls within LDH and provides management with a level of assurance regarding risks to the organization and whether or not appropriate internal controls are in place and are functioning as intended.



Management and Finance Budget Summary

		Prior Year Actuals FY 2016-2017		Enacted FY 2017-2018		Existing Oper Budget as of 12/01/17		Continuation FY 2018-2019	ecommended Y 2018-2019	Total Recommended Over/(Under) EOB	
Means of Financing:											
State General Fund (Direct)	\$	41,474,869	\$	44,941,018	\$	45,900,305	\$	47,121,024	\$ 45,260,966	\$	(639,339)
State General Fund by:											
Total Interagency Transfers		10,142,778		12,339,668		12,339,668		12,306,951	12,306,951		(32,717)
Fees and Self-generated Revenues		2,436,922		2,650,601		2,650,601		2,650,601	2,650,601		0
Statutory Dedications		3,111,074		1,373,390		1,373,390		1,308,723	1,308,723		(64,667)
Interim Emergency Board		0		0		0		0	0		0
Federal Funds		13,474,615		17,881,598		17,881,598		17,881,598	17,881,598		0
Total Means of Financing	\$	70,640,258	\$	79,186,275	\$	80,145,562	\$	81,268,897	\$ 79,408,839	\$	(736,723)
Expenditures & Request:											
Personal Services	\$	40,922,020	\$	42,667,467	\$	42,672,216	\$	46,055,609	\$ 44,238,234	\$	1,566,018
Total Operating Expenses		1,329,873		1,319,539		1,361,539		1,398,308	1,361,539		0
Total Professional Services		3,120,050		2,170,804		2,170,804		2,170,804	2,170,804		0
Total Other Charges		25,268,315		33,028,465		33,941,003		31,644,176	31,638,262		(2,302,741)
Total Acq & Major Repairs		0		0		0		0	0		0
Total Unallotted		0		0		0		0	0		0
Total Expenditures & Request	\$	70,640,258	\$	79,186,275	\$	80,145,562	\$	81,268,897	\$ 79,408,839	\$	(736,723)
Authorized Full-Time Equiva	lents:										
Classified		399		395		395		398	397		2
Unclassified		11		11		11		11	11		0
Total FTEs		410		406		406		409	408		2

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 Governor's Office of Homeland Security for Emergency Preparedness for hurricane and disaster preparedness, Medical Vendor Administration for the Council on Physical Fitness, Fiscal Systems and Health Standards. Fees and Self-generated Revenues include Licensing and Miscellaneous receipts for Health Standards. The Statutory Dedications represent funding received from the Medical Assistance Program Fraud Detection Fund (R.S. 46:440.1), the Nursing Home Residents' Trust Fund (R.S.



40:2009.11) and the Telecommunications for the Deaf Fund (R.S. 47:1061; R.S. 47:301.1(F)). (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 funds for survey and certification activities for health care facilities participating in Title XIX, the Health and Human Services Hospital Preparedness Grant, Medicare Title XVIII, and the Technology Assistance Grant.

Management and Finance Statutory Dedications

Fund	Prior Year Actuals (2016-2017	F	Enacted Y 2017-2018	xisting Oper Budget s of 12/01/17	Continuation Y 2018-2019	ecommended Y 2018-2019	Total ecommended ver/(Under) EOB
Medical Assistance Programs Fraud Detection Fund	\$ 1,134,333	\$	1,223,390	\$ 1,223,390	\$ 1,158,723	\$ 1,158,723	\$ (64,667)
Nursing Home Residents' Trust Fund	0		150,000	150,000	150,000	150,000	0
Telecommunications for the Deaf Fund	1,976,741		0	0	0	0	0

Major Changes from Existing Operating Budget

General Fund	Т	otal Amount	Table of Organization	Description
\$ 959,287	\$	959,287	0	Mid-Year Adjustments (BA-7s):
\$ 45,900,305	\$	80,145,562	406	Existing Oper Budget as of 12/01/17
				Statewide Major Financial Changes:
327,093		327,093	0	2% General Increase Annualization Classified
5,541		5,541	0	2% General Increase Annualization Unclassified
60,129		60,129	0	Structural Annualization Classified
1,152,079		1,152,079	0	Market Rate Classified
623,135		623,135	0	Related Benefits Base Adjustment
1,158		1,158	0	Retirement Rate Adjustment
1,075,228		1,075,228	0	Salary Base Adjustment
(1,678,345)		(1,678,345)	0	Attrition Adjustment
(954,538)		(954,538)	0	Non-recurring Carryforwards
259		(32,458)	0	Risk Management
391,013		391,013	0	Legislative Auditor Fees
(168,258)		(168,258)	0	Rent in State-Owned Buildings
29,105		29,105	0	Maintenance in State-Owned Buildings
6,930		6,930	0	Capitol Park Security
33,661		33,661	0	Capitol Police
(420)		(420)	0	UPS Fees
(6,754)		(6,754)	0	Civil Service Fees
73,734		73,734	0	Office of Technology Services (OTS)
(1,944,165)		(1,944,165)	0	Administrative Law Judges
(19,703)		(19,703)	0	Office of State Procurement



Major Changes from Existing Operating Budget (Continued)

Ge	neral Fund	Total	Amount	Table of Organization	Description
	139,112		139,112	0	Topographic Mapping
					Non-Statewide Major Financial Changes:
					Mass Fatality/Cemetery Disruptions Up-front Readiness Fee. This is an annual fee required by vendors to contract with the state for a catastrophic mass fatality contract. Without funding for this contract, LDH does not have the expertise needed to carry out the duties assigned to them under Emergency Support Function #8 (Public Health and Medical Services) for the mass fatality function.
	150,000		150,000	0	
	0		0	2	Conversion of two job appointments expiring in FY19 to authorized T.O The job appointments are in the Legal Services section and are already funded.
	64,667		0	0	Means of financing substitution replacing Medical Assistance Programs Fraud Detection Fund with State General Fund (Direct) based on projected FY 19 balance.
\$	45,260,966	\$	79,408,839	408	Recommended FY 2018-2019
\$	0	\$	0	0	Less Supplementary Recommendation
\$	45,260,966	\$	79,408,839	408	Base Executive Budget FY 2018-2019
\$	45,260,966	\$	79,408,839	408	Grand Total Recommended

Professional Services

Amount	Description
	Professional Services
\$1,207,375	Provide legal representation and consultation to LDH 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.
\$165,000	Audit Contracts
\$65,500	Fiscal Contracts
\$457,929	A database contract to provide financial information of providers
\$80,000	Contracts associated with the monitoring, surveying and licensing health care facilities.
\$100,000	Covington & Burling
\$3,500	Children's Hospital - Ventilator Assisted Children
\$91,500	Governor's Office on Physical Fitness venues
\$2,170,804	TOTAL PROFESSIONAL SERVICES



Other Charges

Amount	Description
	Other Charges:
\$4,160,536	Disaster preparation from the HHS Hospital Preparedness Grant
\$4,999,910	From GOHSEP for reimbursements associated with hurricane funding from FEMA. This is pass-through payments to Hospitals and Nursing Homes for Sheltering
\$200,000	RSI, Inc Emergency Preparedness Staff Augumentation
\$739,828	LATAN
\$55,425	Fiscal managed contracts and Internal Audit contracts
\$2,009,631	For fraud initiatives in Legal and Audit
\$150,000	Mass Fatality/Cemetary Disruption Contract
\$201,190	Other Charge Acquisitions
\$169,000	Minority Health Initatives
\$827,500	Other Charges travel for licensing, certification and surveys of facilities
\$13,513,020	SUB-TOTAL OTHER CHARGES
	Interagency Transfers:
\$25,056	Division of Administration for Uniform Payroll Services
\$366,913	Department of Public Safety for Capitol Park Security
\$49,238	Capitol Police
\$18,524	Division of Administration for Comprehensive Public Employees' Training Program (CPTP)
\$173,731	Department of Civil Service Fees
\$581,940	Office of Risk Management for insurance costs
\$2,161,919	Legislative Auditor's Office for the performance of financial and program compliance audits
\$8,636,053	Office of Technology Services for data processing and support services
\$2,029,707	Division of Administration for rent in the Bienville Building and Galvez Parking Garage
\$33,867	Division of Administration for rent in the Brandywine Building and Galvez Bldg
\$4,076	Division of Administration for rent in Monroe for Health Standards Section
\$33,437	Maintenance to State owned buildings
\$73,551	Office of State Procurement
\$25,000	Executive Office for the Children's Cabinet per Act 833 of 1997
\$12,928	Department of Labor for Unemployment Compensation
\$45,000	Department of the Treasury for central banking services
\$1,625,873	Division of Administrative Law
\$139,112	Topographic Mapping
\$2,700	Division of Administration for State Printing Costs
\$1,886,617	Transfers to other State Agencies
\$200,000	Dept of Public Safety and Corrections - State Fire Marshal to inspect patient occupied facilities
\$18,125,242	SUB-TOTAL INTERAGENCY TRANSFERS
\$31,638,262	TOTAL OTHER CHARGES

Acquisitions and Major Repairs

Amount	Description
	This program does not have funding for Acquisitions and Major Repairs.



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 Inc	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Percentage of Office of the Secretary indicators meeting or exceeding established targets (LAPAS CODE - 10029)	85%	100%	90%	90%	90%	90%
S Percentage of the department's employees receiving Performance Evaluations System (PES) evaluations by the due date (LAPAS CODE - 24100)	90%	99%	90%	90%	90%	90%

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 Ind	licator 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 2016-2017	FY 2016-2017	FY 2017-2018	FY 2017-2018	FY 2018-2019	FY 2018-2019
S	Number of participants in						
	the Governoris Games						
	(LAPAS CODE - 24106)	240,000	252,851	250,000	250,000	250,000	250,000

3. (KEY) Through the Financial 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, accountability, and excellence in customer service.

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 l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Percentage of invoices paid within 90 days of receipt (LAPAS CODE - 24107)	95%	100%	95%	95%	95%	95%
K Percentage of budget related documents submitted in accordance with DOA and Legislative timelines (LAPAS CODE - 24108)	95%	100%	95%	95%	95%	95%

4. (KEY) Through the Bureau of Legal Services, to provide legal services to the various LDH 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 Inc	licator Values		
L e		Yearend		Performance Standard as	Existing	Performance At	Performance
V		Performance	Actual Yearend	Initially	Performance	Continuation	At Executive
e	Performance Indicator Name	Standard FY 2016-2017	Performance FY 2016-2017	Appropriated FY 2017-2018	Standard FY 2017-2018	Budget Level FY 2018-2019	Budget Level FY 2018-2019
•	rvainc	F 1 2010-2017	1 1 2010-2017	F 1 2017-2010	1 1 2017-2010	F1 2010-2017	T 1 2010-2017
K	Percentage of cases						
	litigated successfully						
	(LAPAS CODE - 10033)	85%	98%	85%	85%	85%	85%

Management and Finance General Performance Information

		Perfo	rma	nce Indicator V	alue	es		
Performance Indicator Name	rior Year Actual 2012-2013	Prior Year Actual 'Y 2013-2014		Prior Year Actual Y 2014-2015		Prior Year Actual Y 2015-2016	1	Prior Year Actual FY 2016-2017
Number of cases litigated (LAPAS CODE - 12050)	1,009	957		1,200		866		711
Amount recovered (LAPAS CODE - 12051)	\$ 12,650,903	\$ 9,307,552	\$	6,121,053	\$	5,169,337	\$	5,666,619

5. (KEY) Through the Health Standards activity, to perform at least 80% of required state licensing and at least 95% of complaint surveys of healthcare facilities and federally mandated certification of healthcare providers participation in Medicare and/or Medicaid.

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 Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Percentage of complaint investigations conducted within 30 days after receipt by the Health Standards section (LAPAS CODE - 16533)	95.0%	99.0%	95.0%	95.0%	95.0%	95.0%
S Percentage of abuse complaint investigations conducted within two days after receipt by the Health Standards section (LAPAS CODE - 16534)	97%	100%	95%	95%	97%	97%
K Percentage of licensing surveys conducted (LAPAS CODE - 16535)	80.0%	84.0%	80.0%	80.0%	80.0%	80.0%

Management and Finance General Performance Information

		Perfo	mance Indicator V	alues	
Performance Indicator Name	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016	Prior Year Actual FY 2016-2017
Number of facilities (unduplicated) (LAPAS CODE - 12031)	7,952	7,828	7,881	7,812	8,169
Number of licensing surveys conducted (LAPAS CODE - 16563)	1,265	1,465	1,461	1,508	1,371
Number of certified facilities (LAPAS CODE - 12032)	6,106	6,230	6,252	6,426	6,546
Number of licensed facilities (LAPAS CODE - 12033)	3,519	3,319	3,348	3,116	3,357
Number of Provider Exclusions (LAPAS CODE - 10009)	649	611	676	720	477
Number of facilities terminated (LAPAS CODE - 10011)	82	133	83	223	190
Percentage of facilities out of compliance (LAPAS CODE - 10012)	8.2%	7.8%	8.6%	9.2%	5.8%
Number of facilities sanctioned (LAPAS CODE - 10010)	296	243	188	547	409



6. (SUPPORTING)Through the Internal Audit activity, to independently appraise activities within LDH's programs and agency operations in an effort to safeguard the department against fraud, waste and abuse by completing at least 6 audits and 6 operational reviews each year.

Performance Indicators

				Performance Inc	dicator Values		
L e v e l	Performance Indicator Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
	Number of audit assessments (LAPAS CODE - 25605)	6	9	8	8	8	8
	Number of audit reviews (LAPAS CODE - 25606)	12	12	16	16	16	16



09-309 — South Central Louisiana Human Services Authority



Agency Description

The mission of the South Central Louisiana Human Services Authority (SCLHSA) is to promote overall health within the general population by increasing public awareness and access for individuals with behavioral health and developmental disabilities to integrated primary care and community based services while promoting wellness, recovery and independence through educations 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 accreditation from the Commission on Accreditation of Rehabilitation Facilities (CARF) by committing to quality improvement, focusing on the unique needs of each person we serve, and monitoring the results of services we provide.

For additional information, see:

South Central Louisiana Human Services Authority

South Central Louisiana Human Services Authority Budget Summary

	Prior Year Actuals 7 2016-2017	F	Enacted Y 2017-2018	isting Oper Budget of 12/01/17	Continuation FY 2018-2019	commended Y 2018-2019	Total commended ver/(Under) EOB
Means of Financing:							
State General Fund (Direct)	\$ 13,565,396	\$	14,749,757	\$ 14,749,757	\$ 15,947,474	\$ 15,383,850	\$ 634,093
State General Fund by:							
Total Interagency Transfers	4,149,658		4,582,068	4,582,068	4,359,554	4,359,554	(222,514)
Fees and Self-generated Revenues	1,779,586		2,841,180	2,841,180	2,841,180	2,841,180	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



South Central Louisiana Human Services Authority Budget Summary

	Prior Year Actuals FY 2016-2017		Existing Oper Enacted Budget FY 2017-2018 as of 12/01/17			Continuation FY 2018-2019			Recommended FY 2018-2019		Total Recommended Over/(Under) EOB	
Total Means of Financing	\$	19,494,640	\$	22,173,005	\$	22,173,005	\$	23,148,208	\$	22,584,584	\$	411,579
Expenditures & Request:												
South Central Louisiana Human Services Authority	\$	19,494,640	\$	22,173,005	\$	22,173,005	\$	23,148,208	\$	22,584,584	\$	411,579
Total Expenditures & Request	\$	19,494,640	\$	22,173,005	\$	22,173,005	\$	23,148,208	\$	22,584,584	\$	411,579
Authorized Full-Time Equiva	lents											
Classified		0		0		0		0		0		0
Unclassified		0		0		0		0		0		0
Total FTEs	Total FTEs			0		0		0		0		0



309_1000 — South Central Louisiana Human Services Authority

Program Authorization Louisiana revised statutes (LSA-RS): R.S.28:871-876; R.S.28:911-920, R.S.39:1533(A); R.S.28:771; R.S.36:254; R.S.36:258.

Program Description

The South Central Louisiana Human Services Authority provides the following activities:

- 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. SCLHSA shall make every effort to ensure that our client care and services treat each person as an individual, that we are responsive to our client's needs and wishes and that our services are of the highest possible quality within the resources available. Our intent is to remove barriers to treatment and service coordination by collaborating with public and private services, devising creative resource allocation and advocating for the provision of efficient, effective quality care to the people we serve.
- 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 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 operates five outpatient behavioral health settings which provide treatment and assessment services with a focus on increased access for services to our clients through a statewide managed care system. SCLHSA fiscal services focus on staff accountability and fiscal integrity of the agency and in service provision and billing processes. Developmental Disabilities has an increased focus on client outreach services and employment opportunities for individuals in the community. SCLHSA's Behavioral Health Centers and its Pharmacy have been accredited by the Commission on Accreditation of Rehabilitation Facilities



(CARF). SCLHSA is constantly looking for ways to improve the services the agency provides to its patients and CARF Accreditation provides the impetus for this process. CARF mandates that the agency maintain the goals and objectives that resulted in the accreditation process. Review of agency policy and procedures is required annually by the agency and patient/employee/stakeholder satisfaction surveys help SCLHSA to determine agency priorities for service provision.

Integrated Care – The integration of Primary Care in a Behavioral Health Care setting refers to the intentional, ongoing, and committed coordination and collaboration between all providers treating the individual. Behavioral Health and Primary Care Providers recognize and appreciate the interdependence they have with each other to positively impact healthcare outcomes. The goal of this integration is to improve and promote overall health within the general population. Both physical health and behavioral health benefit from prevention efforts, screening tests, routine check-ups, and treatment. SCLHSA recognizes the need for patients to take care of both their physical and behavioral health needs in an outpatient setting and is devoted to making these services available in a "one-stop shop" process. The Health Home Program emphasis is designed to deliver healthcare that focuses on the whole person and integrates primary care, behavioral health along with comprehensive care management, care coordination, wellness promotion, comprehensive transitional care, individual and family support services, referral and linkage to community and social services.

For additional information, see:

South Central Louisiana Human Services Authority

South Central Louisiana Human Services Authority Budget Summary

	Prior Year Actuals Y 2016-2017	F	Enacted Y 2017-2018	Existing Oper Budget as of 12/01/17	Continuation FY 2018-2019	Recommended FY 2018-2019	Total ecommended ver/(Under) EOB
Means of Financing:							
State General Fund (Direct)	\$ 13,565,396	\$	14,749,757	\$ 14,749,757	\$ 15,947,474	\$ 15,383,850	\$ 634,093
State General Fund by:							
Total Interagency Transfers	4,149,658		4,582,068	4,582,068	4,359,554	4,359,554	(222,514)
Fees and Self-generated Revenues	1,779,586		2,841,180	2,841,180	2,841,180	2,841,180	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	\$ 19,494,640	\$	22,173,005	\$ 22,173,005	\$ 23,148,208	\$ 22,584,584	\$ 411,579
Expenditures & Request:							
Personal Services	\$ 0	\$	0	\$ 0	\$ 0	\$ 0	\$ 0
Total Operating Expenses	1,759,942		2,343,065	2,343,065	2,346,862	2,343,065	0
Total Professional Services	0		0	0	0	0	0
Total Other Charges	17,734,698		19,790,057	19,790,057	20,752,520	20,241,519	451,462
Total Acq & Major Repairs	0		39,883	39,883	48,826	0	(39,883)



South Central Louisiana Human Services Authority Budget Summary

		Prior Year Actuals (2016-2017	F	Enacted FY 2017-2018	Existing Oper Budget as of 12/01/17	Continuation FY 2018-2019	Recommended FY 2018-2019	Total ecommended ver/(Under) EOB
Total Unallotted		0		0	0	0	0	0
Total Expenditures & Request	\$	19,494,640	\$	22,173,005	\$ 22,173,005	\$ 23,148,208	\$ 22,584,584	\$ 411,579
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, and Fees and Self-generated Revenues. The Interagency Transfers are from the Office of Behavioral Health, and Medical Vendor Payments - Title XIX. The Fees and Self-generated Revenues include fees for services provided to clients who are not eligible for Medicaid services through the Statewide Management Organization (SMO), fees for services provided to Medicare eligible clients, ineligible patient fees, urine screen copays and DWI copays.

Major Changes from Existing Operating Budget

Ge	eneral Fund	Т	otal Amount	Table of Organization	Description
\$	0	\$	0	0	Mid-Year Adjustments (BA-7s):
\$	14,749,757	\$	22,173,005	0	Existing Oper Budget as of 12/01/17
					Statewide Major Financial Changes:
	26,259		26,259	0	2% General Increase Annualization Classified
	317,584		317,584	0	Market Rate Classified
	53,292		53,292	0	Civil Service Training Series
	280,307		280,307	0	Related Benefits Base Adjustment
	247,558		247,558	0	Salary Base Adjustment
	(267,403)		(267,403)	0	Attrition Adjustment
	(137,631)		(137,631)	0	Personnel Reductions
	(39,883)		(39,883)	0	Non-Recurring Acquisitions & Major Repairs
	(12,923)		(12,923)	0	Risk Management
	7,819		7,819	0	Legislative Auditor Fees
	(811)		(811)	0	UPS Fees
	942		942	0	Civil Service Fees
	21,041		21,041	0	Office of Technology Services (OTS)
	311		311	0	Office of State Procurement
					Non-Statewide Major Financial Changes:
	0		(222,514)	0	South Central LA Human Services is reducing IAT revenue because there was a decrease in the allocation of Tobacco Tax Healthcare Fund.



Major Changes from Existing Operating Budget (Continued)

Ge	eneral Fund	Total Amount	Table of Organization	Description
	137,631	137,631	0	Realigning funds from personnel to Other Charges for needed operating expenses and contracts.
\$	15,383,850	\$ 22,584,584	0	Recommended FY 2018-2019
Ψ	15,505,050	22,301,301	v	
\$	0	\$ 0	0	Less Supplementary Recommendation
\$	15,383,850	\$ 22,584,584	0	Base Executive Budget FY 2018-2019
\$	15,383,850	\$ 22,584,584	0	Grand Total Recommended

Professional Services

Amount	Description
	This agency does not have funding for Professional Services.

Other Charges

Amount	Description		
	Other Charges:		
\$13,591,306	Salaries and related benefits for Other Charges positions.		
\$6,110,928	Contractual and operating costs of mental health, addictive disorders and developmental disability services		
\$19,702,234 SUB-TOTAL OTHER CHARGES			
	Interagency Transfers:		
\$49,625	Payments to the Department of Civil Service - Civil Service Fees		
\$157,634	Payments to the Division of Administration - Risk Management		
\$138,651	Payments to the Division of Administration - Telecommunications Management		
\$7,368	Payments to the Division of Administration - Uniform Payroll Services		
\$127,932	Payments to the Division of Administration - Technology Services		
\$3,390	Payments to the Division of Administration - Office of State Procurement		
\$42,544	Payments to the Legislative Auditor		
\$12,141	Miscellaneous commodities and services		
\$539,285	SUB-TOTAL INTERAGENCY TRANSFERS		
\$20,241,519	TOTAL OTHER CHARGES		



Acquisitions and Major Repairs

Amou nt Description

This agency does not have funding for Acquisitions and Major Repairs

Performance Information

1. (KEY) Through the Behavioral Health Services activity, South Central Louisiana Human Services Authority (SCLHSA) will provide treatment services, screening/assessment, plan of care and level of need determination for children, adolescent, adult and senior populations; SCLHSA shall make every effort to ensure that our client's care and the services we provide treat each person as an individual, are responsive to our client's needs an wishes, and that our services are of the highest possible quality within the resources available.

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): Healthy People 2020, The American Association of Intellectual and Developmental Disabilities (AAID), Substance Abuse Mental Health Services Administration's Center for Substance Abuse Prevention (CSAP), Substance Abuse Mental Health Services Administration's Center for Substance Abuse Treatment (CSAT).



			Performance Inc	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Percentage of adults and adolescents with an addictive disorder who successfully complete treatment (LAPAS CODE - 24510)	80%	96%	80%	80%	80%	80%
K Percentage of adults and adolescents with an addictive disorder who report improvement at discharge (LAPAS CODE - 24511)	80%	98%	80%	80%	80%	80%
K Number of crisis visits in all SCLHSA Behavioral Health Clinics (LAPAS CODE - 24123)	350	456	400	400	400	400
K Percentage of adults with depression who report improvement in disposition during and/or after treatment. (LAPAS CODE - 24513)	60%	84%	60%	60%	60%	60%
K Number of referrals received by SCLHSA outpatient centers from local stakeholders/ community behavioral health services (LAPAS CODE - 24514)	1,800	3,767	1,800	1,800	1,800	1,800

2. (KEY) Through the Developmental Disabilities activity, SCLHSA will 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): Healthy People 2020, The American Association of Intellectual and Developmental Disabilities (AAID), Substance Abuse Mental Health Services Administration's Center for Substance Abuse Prevention (CSAP), Substance Abuse Mental Health Services Administration's Center for Substance Abuse Treatment (CSAT).

Performance Indicators

			Performance Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Percentage of home- and community-based waiver assessments completed timely. (LAPAS CODE - 24118)	80%	100%	80%	80%	80%	80%
K Percentage of eligibility determinations determined to be valid according to the Flexible Family Fund provisions. (LAPAS CODE - 24512)	95%	100%	95%	95%	95%	95%

3. (KEY) To provide programmatic leadership and direction to the programs of Addictive Disorders (AD), Developmental Disabilities (DD) and Mental Health (MH) under SCLHSA; to continue the operational activity of the SCLHSA Central Office in relation to regulatory/licensure processes each year through June 30, 2022.

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): Healthy People 2020, The American Association of Intellectual and Developmental Disabilities (AAID), Substance Abuse Mental Health Services Administration's Center for Substance Abuse Prevention (CSAP), Substance Abuse Mental Health Services Administration's Center for Substance Abuse Treatment (CSAT).



			Performance Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Percentage of appointments kept for assessments and ongoing client appointments (LAPAS CODE - 25060)	75%	69%	75%	75%	75%	75%
K Percentage of clients who indicate they would continue to receive services at SCLHSA clinics if given the choice to go elsewhere (LAPAS CODE - 25061)	90%	96%	90%	90%	90%	90%
K Percentage of clients who indicate they would recommend SCLHSA services to family and friends (LAPAS CODE - 25062)	90%	97%	90%	90%	90%	90%

South Central Louisiana Human Services Authority General Performance Information

		Perfo	rmance Indicator V	alues	
Performance Indicator Name	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016	Prior Year Actual FY 2016-2017
Number of people receiving flexible family funds. (LAPAS CODE - 24120)	108	130	126	123	111
Total number of individuals served in the SCLHSA (Region 3) (LAPAS CODE - 24128)	26,221	24,766	30,208	24,997	27,796
Total number of individuals served by outpatient mental health in SCLHSA (LAPAS CODE - 24129)	8,983	8,466	9,914	9,704	10,172
Total number of individuals served by inpatient Addictive Disorders in SCLHSA (Region 3) (LAPAS CODE - 24130)	1,051	1,140	1,631	1,050	172
Total numbers of individuals served outpatient by Addictive Disorders in SCLHSA (Region 3) (LAPAS CODE - 24131)	2,671	1,789	1,566	1,134	1,211
Total number of individuals receiving individual and family support services in SCLHSA (Region 3) (LAPAS CODE - 24119)	208	239	233	228	401
The number of enrollees in prevention programs. (LAPAS CODE - 24115)	5,326	5,351	6,043	6,402	6,895



4. (KEY) To provide for the integration of Primary Care in a Behavioral Health Care setting by coordinating and collaborating between all providers treating an individual in order to positively impact healthcare outcomes and promote the overall health of our clients.

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): 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	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Number of patients seen per day by the Primary Care Team (LAPAS CODE - NEW)	32	44	32	32	32	32
K Average wait- time from check-in to provider start time (in minutes) (LAPAS CODE - NEW)	30	17	30	30	30	30



09-310 — Northeast Delta Human Services Authority



Agency Description

The Northeast Delta Human Services Authority was created as a special authority which, through its board, shall direct the operation and management of community-based programs and services relative to mental health, developmental disabilities, and addictive disorders services, for the parishes of Caldwell, East Carroll, Franklin, Jackson, Lincoln, Madison, Morehouse, Ouachita, Richland, Tensas, Union, and West Carroll. The mission of the Northeast Delta Human Services Authority is to serve as a catalyst for individuals with mental health, developmental disabilities, and addictive disorders to realize their full human potential by offering quality, excellent care with greater accessibility.

The goals of the Northeast Delta Human Services Authority are:

- I. Improve the outcomes of citizens by expanding access to a network of appropriate, quality prevention, behavioral health and developmental disability services.
- II. Provide integrated healthcare services that promotes holistic care through best practices and strategies; ensure a person centered approach through prevention, treatment, support, education, and advocacy.
- III. Evaluate and analyze outcomes to strengthen internal operations to accommodate trending healthcare environments and payments and electronic health records systems, and produce data-driven decisions that best maximize resources' efficiency and effectiveness.
- IV. Proactively address risks that impact the behavioral health of our citizens, using collaboration and sound communication practices, both internally and with key partners and providers.

Northeast Delta Human Services Authority Budget Summary

	Prior Actu FY 201	ials	nacted 017-2018]	sting Oper Budget of 12/01/17	ntinuation 2018-2019	commended 2018-2019	Total ommended er/(Under) EOB
Means of Financing:								
State General Fund (Direct)	\$ 8,	619,542	\$ 9,654,148	\$	9,654,148	\$ 10,843,265	\$ 10,296,034	\$ 641,886
State General Fund by:								
Total Interagency Transfers	3,	196,524	3,429,734		3,429,734	3,179,072	3,179,072	(250,662)
Fees and Self-generated Revenues		184,389	773,844		773,844	773,844	773,844	0



Northeast Delta Human Services Authority Budget Summary

		Prior Year Actuals 7 2016-2017	F	Enacted Y 2017-2018	Existing Oper Budget as of 12/01/17	Continuation FY 2018-2019	ecommended FY 2018-2019	Total ecommended Over/(Under) EOB
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	\$	12,000,455	\$	13,857,726	\$ 13,857,726	\$ 14,796,181	\$ 14,248,950	\$ 391,224
Expenditures & Request:								
Northeast Delta Human Services Authority	\$	12,000,455	\$	13,857,726	\$ 13,857,726	\$ 14,796,181	\$ 14,248,950	\$ 391,224
Total Expenditures & Request	\$	12,000,455	\$	13,857,726	\$ 13,857,726	\$ 14,796,181	\$ 14,248,950	\$ 391,224
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



310_1000 — Northeast Delta Human Services Authority

Organized under the provisions of ACT 373 of the 2008 Legislative Session and Louisiana revised statutes (LSA-RS) R.S.28:891-901; R.S.28:912-920; R.S.28:771; R.S.28:254; R.S.28:258.

Program Description

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

- Addiction/Substance Abuse Services Alcohol and drug abuse continues to be a major health problem in the state of Louisiana as well as in the Northeast Delta Human Services Authority catchment area. The Addiction/Substance Abuse Services 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 increase public awareness, treat adults and youth who need addictive disorder (AD) services and prevent the abuse of alcohol and drug addiction as well as compulsive gambling. Services include but are not limited to, comprehensive evaluation, outpatient substance abuse treatment and intensive outpatient substance abuse treatment through individual and group counseling. Contracted services provide inpatient and residential addiction treatment services along with outpatient gambling addiction treatment services. AD and prevention service providers focus their attention on providing comprehensive, integrated prevention and treatment services. Northeast Delta Human Services Authority actively seeks the assistance of partnerships and collaborations to fully meet the needs of individuals, families, and communities. 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.
- Intellectual and Development Disability Support Services 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 recipients who would otherwise require institutional care. The Family Support Program is designed to assist individuals whose needs exceed existing 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 education authority.



- Mental Health Services This program provides outpatient mental health 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 include administration, education, and screening for people with co-occurring disorders. Other services include, but are not limited to, Psychosocial Rehabilitation and Community Psychiatric Support Treatment, housing and employment assistance. Service delivery includes full participation in the Louisiana Behavioral Health Partnership and the Coordinated System of Care 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.
- Alcohol, Tobacco and Other Drugs Prevention Prevention aims to reduce risk and raise protective factors through a variety of accepted practices from school-based curriculums, to targeted environmental strategies. Saving money, families, lives, and other resources are at the heart of our targeted goals in the 12 parish area of the Northeast Delta Humans Services Authority service area. As prevention has become a sophisticated science we have prioritized services to not only prevent alcohol and other drug problems but have expanded to include mental health issues through bullying prevention, suicide intervention, and reducing other negative behaviors not affecting the quality of life. Through collaborations with coalitions, and other community-driven partnerships, Northeast Delta Human Services Authority strives to create a web of interwoven services through contractors, school systems, policy makers, educators, and law enforcement to reduce the use of Alcohol, Tobacco, and other drugs and continually guide maintenance of overall wellness.
- Administrative Functions The Louisiana Department of Health (LDH), 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 with frameworks 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 LDH shall not contract with a new LGE until LDH, in consultation with the Human Services Interagency Council (HSIC), has determined and confirmed in writing to the governor that LDH 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 631 of the 2006 Legislative Session for the parishes of Jackson, Lincoln, Union, Morehouse, West Carroll, East Carroll, Ouachita, Richland, Madison, Caldwell, Franklin, and Tensas. Northeast Delta Human Service Authority administrative functions support the management and operations related to mental health, addiction, prevention and treatment, and intellectual/developmental disabilities. To assist with administrative functions, Northeast Delta Human Services Authority implemented 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, standardization of forms/procedures, and data analysis.



Northeast Delta Human Services Authority Budget Summary

		rior Year Actuals 2016-2017	F	Enacted Y 2017-2018	xisting Oper Budget s of 12/01/17	Continuation FY 2018-2019	ecommended Y 2018-2019	Total commended ver/(Under) EOB
Means of Financing:								
State General Fund (Direct)	\$	8,619,542	\$	9,654,148	\$ 9,654,148	\$ 10,843,265	\$ 10,296,034	\$ 641,886
State General Fund by:								
Total Interagency Transfers		3,196,524		3,429,734	3,429,734	3,179,072	3,179,072	(250,662)
Fees and Self-generated Revenues		184,389		773,844	773,844	773,844	773,844	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	\$	12,000,455	\$	13,857,726	\$ 13,857,726	\$ 14,796,181	\$ 14,248,950	\$ 391,224
Expenditures & Request:								
Personal Services	\$	0	\$	0	\$ 0	\$ 0	\$ 0	\$ 0
Total Operating Expenses		0		0	0	28,070	0	0
Total Professional Services		0		0	0	74,531	0	0
Total Other Charges		12,000,455		13,857,726	13,857,726	14,619,492	14,248,950	391,224
Total Acq & Major Repairs		0		0	0	74,088	0	0
Total Unallotted		0		0	0	0	0	0
Total Expenditures & Request	\$	12,000,455	\$	13,857,726	\$ 13,857,726	\$ 14,796,181	\$ 14,248,950	\$ 391,224
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. The Interagency Transfers are from 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, for services provided to Medicare eligible clients, ineligible patient fees, urine drug screen co-pays and DWI co-pays.



Major Changes from Existing Operating Budget

Ge	neral Fund	T	otal Amount	Table of Organization	Description
\$	0	\$	0	0	Mid-Year Adjustments (BA-7s):
					, , ,
\$	9,654,148	\$	13,857,726	0	Existing Oper Budget as of 12/01/17
					Statewide Major Financial Changes:
	19,328		19,328	0	2% General Increase Annualization Classified
	187,760		187,760	0	Market Rate Classified
	70,149		70,149	0	Civil Service Training Series
	186,214		186,214	0	Related Benefits Base Adjustment
	545,578		545,578	0	Salary Base Adjustment
	(370,363)		(370,363)	0	Attrition Adjustment
	(997,172)		(997,172)	0	Personnel Reductions
	(46,770)		(46,770)	0	Non-Recurring Acquisitions & Major Repairs
	619		619	0	Risk Management
	723		723	0	Legislative Auditor Fees
	(780)		(780)	0	UPS Fees
	(483)		(483)	0	Civil Service Fees
	6,429		6,429	0	Office of Technology Services (OTS)
	294		294	0	Office of State Procurement
					Non-Statewide Major Financial Changes:
	0		(230,000)	0	Interagency Transfer adjustment from Louisiana Department of Health Office of Behavioral Health/Addictive Disorders to Northeast Delta Human Service Authority for the Louisiana Partnership for Success Grant.
	43,188		43,188	0	Technical adjustment to transfer funds from Office of Behavioral Health to Acadiana Area Human Services District, Northwest Louisiana Human Services District, Northeast Delta Human Services Authority, and Central Louisiana Human Services District for pharmaceutical supplies as a result of the closure of Shamrock Pharmacy on November 1, 2017.
	997,172		997,172	0	Realigning funds from personnel to Other Charges for needed operating expenses and contracts.
	0		(20,662)	0	OCDD IAT reduction.
\$	10,296,034	\$	14,248,950	0	Recommended FY 2018-2019
\$	0	\$	0	0	Less Supplementary Recommendation
\$	10,296,034	\$	14,248,950	0	Base Executive Budget FY 2018-2019
\$	10,296,034	\$	14,248,950	0	Grand Total Recommended



Professional Services

Amount	Description
	This agency does not have funding for Professional Services.

Other Charges

Amount	Description
	Other Charges:
\$9,279,667	Salaries and related benefits for Other Charges positions
\$4,177,892	Contractual and operating costs of mental health, addictive disorders and developmental disability services
\$13,457,559	SUB-TOTAL OTHER CHARGES
	Interagency Transfers:
\$33,318	Payments to the Department of Civil Service - Civil Service Fees
\$131,208	Payments to the Division of Administration - Risk Management
\$33,667	Payments to the Division of Administration-Technology Services
\$26,076	Payments to the Legislative Auditor
\$5,206	Payments to the Division of Administration - Uniform Payroll Services
\$14,811	Payments to the Division of Administration - Office of State Procurement
\$142,191	Miscellaneous commodities and services
\$386,477	SUB-TOTAL INTERAGENCY TRANSFERS
\$13,844,036	TOTAL OTHER CHARGES

Acquisitions and Major Repairs

Amo	
unt	Description
	This agency does not have funding for Acquisitions and Major Repairs.

Performance Information

1. (KEY) Northeast Delta Human Services Authority will provide and offer an integrated, comprehensive care of services for adults and adolescents with Behavioral Health diagnosis.



				Performance Inc	licator Values		
L e v e l	Performance Indicator Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K	Percentage of clients who indicate they would continue to receive services at NEDHSA clinics if given the choice to go elsewhere (LAPAS CODE - 25211)	87%	94%	87%	87%	87%	87%
K	Percentage of adults receiving mental health services who indicate that they would choose to continue services in NEDHSA clinics if given a choice to receive services elsewhere (LAPAS CODE - 25215)	87%	91%	87%	87%	87%	87%
K	Percentage of clients who indicate they would recommend NEDHSA services to family and friends (LAPAS CODE - 25212)	87%	92%	87%	87%	87%	87%
K	Percentage of mental health clients who would recommend NEDHSA services to others (LAPAS CODE - 25216)	87%	87%	87%	87%	87%	87%
K	Percentage of individuals successfully completing the 24-hour residential addictive disorders treatment program (LAPAS CODE - 25218)	65%	80%	80%	80%	65%	65%
K	Percentage of individuals successfully completing the Primary Inpatient Adult addictive disorders treatment program						
K	(LAPAS CODE - 25219) Number of adults receiving mental health services in all NEDHSA behavioral health clinics (LAPAS CODE - 25213)	4,500	6,096	4,500	4,500	5,000	5,000
K	Number of children/ adolescents receiving mental health services in all NEDHSA behavioral health clinics (LAPAS CODE - 25214)	250	648	250	250	250	250



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

Children's Budget Link: Northeast Delta Human Services Authority services for children are related to the 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 Indicators

			Performance Inc	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Percentage of eligibility determinations determined to be valid according to Flexible Family Fund provisions (LAPAS CODE - 25223)	95%	100%	90%	90%	95%	95%
K Percentage of completed monitoring of Individual and Family Support fund usage (in accordance with OCDD policy) (LAPAS CODE - 25965)	60%	100%	100%	100%	95%	95%



Performance Indicators (Continued)

			Performance Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Number of persons receiving individual and family support services (LAPAS CODE - 25221)	390	341	350	350	345	345
K Number of persons receiving Flexible Family Fund services (LAPAS CODE - 25222)	150	131	135	135	135	135
K Number of persons receiving developmental disabilities services (LAPAS CODE - 25224)	1,625	1,681	1,500	1,500	1,625	1,625
K Percentage of plans of care that address waiver participantsí personal goals (LAPAS CODE - 26126)	95%	100%	90%	90%	90%	90%

3. (KEY) NEDHSA will provide administrative support to management and operation services related to mental health, addiction prevention and treatment, and intellectual/developmental disabilities

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

Human Resource Policies Beneficial to Women and Families Link: The Northeast Delta Human Services Authority abides by all state Civil Services guidelines and procedures regarding equal opportunity for all staff and in particular woman and their families. The Northeast Delta Human Services Authority also addresses specific issues in respect to female employees and their families in the Human Resource policies for the agency and the Northeast Delta Human Services Authority Handbook. All policies are reviewed annually and changes/additions are made 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 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Number of referrals to NEDHSA partner agencies (LAPAS CODE - 26120)	Not Applicable	Not Applicable	150	150	150	150
S Number of NEDHSA partner agencies (LAPAS CODE - 26121)	Not Applicable	Not Applicable	15	15	10	10
S Percentage of compliant Performance Evaluation System (PES) evaluations completed within required timeframe (LAPAS CODE - 26123)	Not Applicable	Not Applicable	95%	95%	95%	95%
K Percentage of persons served who agree or strongly agree with the statement iMy beliefs and values about life and healing are respected during treatmentî (LAPAS CODE - 26124)	Not Applicable	Not Applicable	85%	85%	85%	85%
S Number of annual trainings offered (LAPAS CODE - 26125)	Not Applicable	Not Applicable	10	10	12	12
S Number of Behavioral Health services provided (LAPAS CODE - 26122)	Not Applicable	Not Applicable	17,000	17,000	17,000	17,000

4. (KEY) Northeast Delta Human Services Authority will support critical needs of our consumers by leveraging community-based services and programs that will encourage recovery and stabilization

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 Indicators

				Performance Inc	licator Values		
L e v e l	Performance Indicator Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K	Percentage of mental health Flexible Family Fund slots utilized (LAPAS CODE - 25217)	95%	100%	95%	95%	95%	95%

Northeast Delta Human Services Authority General Performance Information

		Perfor	rmance Indicator V	alues	
Performance Indicator Name	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016	Prior Year Actual FY 2016-2017
Total number of individuals served in the Northeast Delta Human Services Authority (LAPAS CODE - 25225)	5,099	6,227	9,230	16,382	7,767
Total number of individuals served by inpatient Addictive Disorders in Northeast Delta Human Services Authority (LAPAS CODE - 25227)	1,534	1,754	1,822	3,290	2,025
Total numbers of individuals served by outpatient Addictive Disorders in Northeast Delta Human Services Authority (LAPAS CODE - 25228)	813	1,132	789	3,290	6,718
Total number of individuals served by outpatient mental health in Northeast Delta Human Services Authority (LAPAS CODE - 25226)	1,286	3,163	8,441	11,352	1,048
Total number of enrollees in prevention programs (LAPAS CODE - 25229)	7,477	12,534	10,249	7,191	7,918
Number of persons reached through prevention community engagements in Northeast Delta Human Services Authority. (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	989,360
This is a new performance indicator for FY 18/	19.				



09-320 — Office of Aging and Adult Services



Agency Description

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 Louisiana Department of Health (LDH). 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 residential state operated nursing home, 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 Office of Aging and Adult Services mission is to provide access to quality long-term services and supports for the elderly and people with adult-onset disabilities in a manner that supports choice, informal caregiving, and effective use of public resources.

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

- I. To promote and develop health and Long Term Supports and Services (LTSS) delivery systems that improve care and outcomes for the high risk, high cost population served by OAAS and achieve LTSS rebalancing consistent with the Americans with Disabilities Act (ADA) and the U.S. Supreme Court's decision in Olmstead v. L.C.
- II. To timely complete investigations of abuse, neglect, exploitation and extortion of vulnerable adults.
- III. To administer and manage resident care programs at Villa Feliciana Medical Complex in a manner that ensures compliance with applicable standards of care; and to promote policies and practices that improve the quality and cost-effectiveness of privately-owned nursing facilities.
- IV. To administer and operate OAAS programs in a cost-effective manner while achieving high quality outcomes.

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.

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 7 2016-2017	F	Enacted Y 2017-2018	Existing Oper Budget s of 12/01/17	Continuation FY 2018-2019	ecommended Y 2018-2019	Total commended ver/(Under) EOB
Means of Financing:								
State General Fund (Direct)	\$	15,417,577	\$	16,872,515	\$ 15,726,608	\$ 21,215,629	\$ 19,787,462	\$ 4,060,854
State General Fund by:								
Total Interagency Transfers		22,961,709		29,690,835	29,690,835	30,585,848	29,660,503	(30,332)
Fees and Self-generated Revenues		760,540		1,197,437	1,197,437	1,197,437	1,197,437	0
Statutory Dedications		1,221,385		3,334,428	3,334,428	3,334,428	3,334,428	0
Interim Emergency Board		0		0	0	0	0	0
Federal Funds		0		868,196	452,991	452,991	452,991	0
Total Means of Financing	\$	40,361,211	\$	51,963,411	\$ 50,402,299	\$ 56,786,333	\$ 54,432,821	\$ 4,030,522
Expenditures & Request:								
Administration Protection and Support	\$	21,295,351	\$	29,536,637	\$ 27,975,525	\$ 31,900,299	\$ 31,004,311	\$ 3,028,786
Villa Feliciana Medical Complex		19,053,728		22,366,774	22,366,774	24,826,034	23,368,510	1,001,736
Auxiliary Account		12,132		60,000	60,000	60,000	60,000	0
Total Expenditures & Request	\$	40,361,211	\$	51,963,411	\$ 50,402,299	\$ 56,786,333	\$ 54,432,821	\$ 4,030,522
Authorized Full-Time Equiva	lents:							
Classified		384		380	368	384	379	11
Unclassified		3		3	3	3	3	0
Total FTEs		387		383	371	387	382	11



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 Louisiana Department of Health and Hospitals (LDH). 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 residential state-operated nursing home, Villa Feliciana Medical Complex, the protective services program, the long-term supports and services programs, as well as other related programs of the State.

Program Description

The Administration, Protection and Support program mission is to provide access to quality long-term services and supports in a manner that supports choice, informal caregiving and effective use of public resources.

The goals of the Administration, Protection and Support are:

- I. Achieve and maintain a legally compliant and appropriately balanced Long Term Supports and Services (LTSS) system which assures choice within a sustainable, cost-effective continuum of community-based services and facility-based services.
- II. Improve access, quality and outcomes for populations receiving and at risk of needing long term supports and services.
- III. Ensure vulnerable adults are protected from abuse and neglect while living in community settings.
- IV. Provide specialized facility-based care to persons whose needs are difficult to meet in private facilities.
- V. Administer and operate OAAS programs in a cost-effective manner while achieving high quality outcomes.

The Administration, Protection, and Support Program includes five activities: Executive Administration, Elderly and Adults with Disabilities Long-Term Care, 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 LDH programs for the elderly and persons with adult onset disabilities. These programs include a 24-hour facility (Villa Feliciana Medical Complex), Protective Services, Traumatic Head and Spinal Cord Injury Trust Fund, and operation of several community-based long term care programs which expend over \$293 million in Medicaid funds (SFY 16). OAAS also performs medical certification for nursing home care totaling over \$980 million in Medicaid funds (SFY 16). The Executive Administration activity is also responsible for providing programmatic expertise on aging and disability issues to LDH Executive Management, carrying out legislative directives, and directing implementation of long term supports and services (LTSS) reforms and program improvements. Not listed as separate activities but still within the purview of Executive Administration, OAAS also manages a non-Medicaid independent living services programs and oversees the leasing of the John J. Hainkel Home in New Orleans.



- Elderly and Adults with Disabilities Long-Term Care activity: Manages and operates communitybased long term care programs for people with adult-onset disabilities, including Medicaid Home and Community Based Services (HCBS) waivers, Medicaid Long Term Personal Care Services (LTPCS), the Program of All-inclusive Care for the Elderly (PACE), the LDH Permanent Supportive Housing Program, the Nursing Home Resident Trust Fund, the Compliance and Audit Team and the Money Follows the Person Demonstration Grant. This activity also operates nursing home admissions, i.e., certification of individual applicants for nursing home care. This activity provides 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. Elderly and Adults with Disabilities Long-Term Care activity, optimizes the use of community-based care while decreasing reliance on more expensive nursing home care. It does so by operating a variety of home and community-based long term care programs that serve Medicaid participants at a lower average cost per person than Medicaid nursing home care. A challenge addressed by this activity is that demand for community-based LTSS will continue to grow as the population ages; therefore, expenditures on programs operated through this activity are subject to increase. For this reason, the goal in delivering LTSS services to this population is to slow the rate of increase rather than seeking net decreases in spending, and to serve as many people as possible within available resources. Maximization of federal funding is also an important strategy for addressing increased demand for the services provided through this Activity. This activity is also responsible for researching, developing, and implementing more integrated approaches to care delivery for the high risk populations of individuals dually eligible for Medicare and Medicaid and persons with adult-onset disabilities.
- 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. OAAS operates the PSH program under a Cooperative Endeavour Agreement with the Louisiana Office of Community Development (OCD) Louisiana Housing Corporation. Louisiana's PSH program is a cross-disability program that facilitates access to stable housing and preventive services for a population that otherwise makes disproportionate use of high cost emergency and nursing home services. Louisiana's PSH program is considered a model for cross-disability implementation at the state level and has been evaluated by the Robert Wood Johnson Foundation and others for purposes of replication in other states and communities.
- Traumatic Head and Spinal Cord Injury (THSCI) Trust Fund 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 specially designed medical beds, maintenance therapies, and remote in-home client monitoring systems that prevent or delay the onset or progression of diseases and excess disability associated with such injuries. The THSCI Trust Fund was established in the 1993 Regular Session of the Louisiana Legislature as a special fund in the state treasury consisting of monies collected from an additional fee imposed on three specific motor vehicle violations (DWI, reckless operation, and speeding).



• Protective Services activity: Assists and enables vulnerable adults ages 18 to 59, and emancipated minors, to live free from harm due to abuse, neglect, exploitation, or extortion. Protective services include but are not limited to: Receiving and screening information on allegations of abuse, neglect, exploitation and/or extortion; conducting investigations and assessments of those allegations to determine if the situation and condition of the alleged victim warrants corrective or other action; stabilizing the situation; developing and implementing plans for preventive or corrective actions; referring for necessary on-going services and/or to case management; ensuring services are obtained; initiating and/or referring for necessary civil legal remedies; and referring cases as needed or required to law enforcement and/or the district attorney and cooperating in any court proceedings.

Administration Protection and Support Budget Summary

		Prior Year Actuals FY 2016-2017		Enacted FY 2017-2018		Existing Oper Budget as of 12/01/17		Continuation FY 2018-2019	ecommended FY 2018-2019	Total Recommended Over/(Under) EOB	
Means of Financing:											
State General Fund (Direct)	\$	15,417,577	\$	16,872,515	\$	15,726,608	\$	20,446,908	\$ 19,784,299	\$	4,057,691
State General Fund by:											
Total Interagency Transfers		4,656,389		8,914,489		8,914,489		8,118,963	7,885,584		(1,028,905)
Fees and Self-generated Revenues		0		0		0		0	0		0
Statutory Dedications		1,221,385		3,334,428		3,334,428		3,334,428	3,334,428		0
Interim Emergency Board		0		0		0		0	0		0
Federal Funds		0		415,205		0		0	0		0
Total Means of Financing	\$	21,295,351	\$	29,536,637	\$	27,975,525	\$	31,900,299	\$ 31,004,311	\$	3,028,786
Expenditures & Request:											
Personal Services	\$	13,396,228	\$	14,529,137	\$	13,540,236	\$	16,569,287	\$ 15,328,866	\$	1,788,630
Total Operating Expenses		623,623		1,221,222		1,221,222		1,900,985	1,866,302		645,080
Total Professional Services		2,960		714,958		514,958		653,588	653,588		138,630
Total Other Charges		7,272,540		13,071,320		12,699,109		12,776,439	13,155,555		456,446
Total Acq & Major Repairs		0		0		0		0	0		0
Total Unallotted		0		0		0		0	0		0
Total Expenditures & Request	\$	21,295,351	\$	29,536,637	\$	27,975,525	\$	31,900,299	\$ 31,004,311	\$	3,028,786
Authorized Full-Time Equiva	lonte										
Classified	ients:	165		161		149		165	160		11
Unclassified		103		101		149		103	100		0
Total FTEs		166		162		150		166	161		11



Source of Funding

The Administration Protection and Support program is funded from State General Fund, Interagency Transfers and Statutory Dedications. The Interagency Transfers are from the Office of Community Development for the Permanent Supportive Housing and Disaster Case Management Programs and Medicaid Vendor Administration for the Money Follows the Person Grant and other Medicaid functions and programs. The Statutory Dedications listed are for 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).

Administration Protection and Support Statutory Dedications

Fund	rior Year Actuals 2016-2017	Enacted Y 2017-2018	xisting Oper Budget s of 12/01/17	Continuation Y 2018-2019	ecommended Y 2018-2019	Total ecommended ever/(Under) EOB
Nursing Home Residents' Trust Fund	\$ 350,344	\$ 1,400,000	\$ 1,400,000	\$ 1,400,000	\$ 1,400,000	\$ 0
Traumatic Head & Spinal Cord Injury Trust Fund	871,041	1,934,428	1,934,428	1,934,428	1,934,428	0

Major Changes from Existing Operating Budget

G	eneral Fund	7	Total Amount	Table of Organization	Description
\$	(1,145,907)	\$	(1,561,112)	(12)	Mid-Year Adjustments (BA-7s):
\$	15,726,608	\$	27,975,525	150	Existing Oper Budget as of 12/01/17
					Statewide Major Financial Changes:
	115,434		115,434	0	2% General Increase Annualization Classified
	320,818		320,818	0	Structural Annualization Classified
	368,448		368,448	0	Market Rate Classified
	2,013		2,013	0	Civil Service Training Series
	520,101		520,101	0	Related Benefits Base Adjustment
	998,571		998,571	0	Salary Base Adjustment
	(600,691)		(600,691)	0	Attrition Adjustment
	(49,658)		(49,658)	0	Non-recurring Carryforwards
	(55,739)		(55,739)	0	Risk Management
	(4,826)		(4,826)	0	Rent in State-Owned Buildings
	(29,917)		(29,917)	0	Maintenance in State-Owned Buildings
	3,978		3,978	0	Capitol Police
	(573)		(573)	0	UPS Fees
	(8,992)		(8,992)	0	Civil Service Fees
	0		25,807	0	Office of Technology Services (OTS)
	(10,845)		(10,845)	0	Office of State Procurement

Non-Statewide Major Financial Changes:



Major Changes from Existing Operating Budget (Continued)

				Table of	
Ge	eneral Fund	T	otal Amount	Organization	Description
	2,077,507		2,077,507	2	Annualization of expenses for transition and diversion activities related to the use of nursing facilities by persons with Serious Mental Illness (SMI). These expenses include development and implementation of a tracking system to support diversion and transitions, project monitoring and training to improve compliance with screening requirements, 100 rental subsidies for the SMI population, and two additional authorized T.O. to support these activities.
	0		0	2	Transferring 2 Non-T.O. job appointment positions to authorized classified positions for the Compliance and Audit Team (CATS) due their appointments ending in FY19. The CATS team assess cases to ensure participants meet program eligibility requirements and detect any potential fraud.
	(2,920)		(2,920)	0	Transferring funding to the Governor's Office of Elderly Affairs as part of the transfer of the Elderly Protective Services Program from the Office of Aging and Adult Services to the Governor's Office of Elderly Affairs which took place in FY18.
	821,333		0	12	Transfer 12 Other Charge positions which support the Money Follows the Person activity to authorized Classified positions. These positoins have been supported by the Federal Money Follows the Person grant since 2009; however, this grant will end December 2018. The state is expected to maintain these transition activities and help maintain the efforts to assist individuals with Serious Mental Illness (SMI) who are currently in nursing facilities to transition to the setting most appropriate for their needs.
	(406,351)		(639,730)	(5)	Reduction of Staff used to monitor and manage the programs in Long Term Personal Care Services Program (LT-PCS).
\$	19,784,299	\$	31,004,311	161	Recommended FY 2018-2019
\$	0	\$	0	0	Less Supplementary Recommendation
\$	19,784,299	\$	31,004,311	161	Base Executive Budget FY 2018-2019
_					
\$	19,784,299	\$	31,004,311	161	Grand Total Recommended
Ф	17,/04,499	Φ	31,004,311	101	Granu Total Recommended

Professional Services

Amount	Description
	Professional Services
\$96,088	Professional contracts needed to provide clinical monitoring and oversight for managed long term supports and services.
\$300,000	Monitoring of nursing home transition and diversion activities for individuals with serious mental illness required by consent decree.
\$250,000	Training to improve compliance with federal Pre-Admission Screening and Resident Review (PASRR) requirements to support diversion and transition activities associated with transitioning individuals with Serious Mental Illness into the least restrictive environment appropriate for their needs.
\$7,500	Professional contracts needed to provide legal and interpreting services for protective services cases.
\$653,588	TOTAL PROFESSIONAL SERVICES



Other Charges

Amount	Description
	Other Charges:
\$3,675,608	'Permanent Supportive Housing Initiative- Under this program, housing developers who have received GO-Zone Low Income Housing Credits built and set aside a percentage of affordable rental housing for elderly and adults with disabilities in the parishes affected by Hurricanes Katrina and Rita.
\$1,276,136	Annualization of expenses for transition and diversion activities related to the use of nursing facilities by persons with Serious Mental Illness (SMI)
\$1,765,266	Traumatic Head and Spinal Cord Injury Trust Fund- Under this program, services and supports are provided to individuals with Traumatic Head and Spinal Cord Injuries.
\$1,800,000	Nursing Home Resident Trust Fund- Projects are selected that focus on existing state and national metrics of quality in Louisiana's nursing facilities.
\$490,290	Independent Living Program- Manages services for the state personal assistance program.
\$1,296,056	Disaster Case Management Grant (DCM) - Grant provides responsible oversight for Federal Emergency Management Agency (FEMA) reporting, and support of the community non-profits providing disaster case management to affected households and individuals.
\$75,777	Louisiana Guardianship Services- provides money management and guardianship services to certain Protective Services clients that are in need of this service.
\$819,410	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.
\$11,198,543	SUB-TOTAL OTHER CHARGES
	Interagency Transfers:
\$306,416	Rent in State-Own Buildings
\$38,530	Rent in the Northeast Louisiana State Office Building
\$48,363	Civil Service and CPTP Fees
\$54,116	LEAF
\$5,815	Capitol Police
\$1,867	DOA - Office of Computing Services
\$92,241	DOA- Office of State Procurement
\$128,010	Office of Telecommunications Management (OTM)
\$725,000	Office of Technology Services - Participant Tracking System
\$431,622	Office of Technology Services
\$77,301	Office of Risk Management Premiums
\$26,428	Maintenance State-Owned Buildings
\$21,303	Office of State Uniform Payroll
\$1,957,012	SUB-TOTAL INTERAGENCY TRANSFERS
\$13,155,555	TOTAL OTHER CHARGES

Acquisitions and Major Repairs

Amount	Description	
	This program does not have funding for Acquisitions and Major Repairs.	



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 LTSS in a sustainable way, reaching or exceeding appropriate national benchmarks by June 30, 2022.

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

Performance Indicators

			Performance Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Percentage of OAAS performance indicators that meet or exceed performance standards (LAPAS CODE - 24134)	80%	92%	80%	80%	85%	85%
K Administrative cost as percentage of service cost (LAPAS CODE - 24135)	1.00%	0.20%	1.00%	1.00%	1.00%	1.00%

2. (KEY) Through the Elderly and Adults with Disabilities Long-Term Care activity, to optimize the use of community-based care while decreasing reliance on more expensive nursing home care to meet or exceed national averages for nursing home versus community-based spending by June 30, 2022.

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 Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
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)	25%	22%	25%	25%	25%	25%
K Percentage of participants receiving Medicaid long term care in the community rather than nursing homes (LAPAS CODE - 25059)	25%	22%	25%	25%	25%	25%
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)	46%	38%	46%	46%	40%	40%
S Program operation cost as a percentage Medicaid of service cost (LAPAS CODE - 24139)	1%	1%	1%	1%	1%	1%

3. (KEY) Through the Elderly and Adults with Disabilities Long-Term Care activity, expedite access to a flexible array of home and community-based services through June 30, 2022.

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 Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Executive Budget Level FY 2018-2019	
K Number on registries for OAAS HCBS waivers (LAPAS CODE - 24144)	37,000	28,215	30,000	30,000	30,000	30,000
K Percentage on registry for OAAS HCBS waivers who are receiving other Medicaid LTC (LAPAS CODE - 24145)	30%	28%	27%	27%	28%	28%
S Number served in all OAAS HCBS programs (LAPAS CODE - 24146)	30,000	19,668	25,000	25,000	23,000	23,000

4. (KEY) Through the Elderly and Adults with Disabilities Long-Term Care activity, to facilitate timely access to nursing facilities for eligible applicants through June 30, 2022.

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

Performance Indicators

				Performance In	Performance Indicator Values						
L e v e l	Performance Indicator Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019				
	Percentage of nursing home admissions applications processed within established timeframes (LAPAS CODE - 24143)	96%	99%	96%	96%	96%	96%				



5. (KEY) Through statewide expansion of the Permanent Supportive Housing Activity, stabilize and reduce acute and institutional care for 3,500 households of elders and persons with disabilities through June 30, 2022.

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

Performance Indicators

			Performance Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Percentage of participants who remain stabilized in the community (LAPAS CODE - 24148)	90%	93%	90%	90%	93%	93%
K Percentage of participants who obtain a source of or increase in income (LAPAS CODE - 24149)	50%	54%	50%	50%	53%	53%

6. (KEY) Through the Traumatic Head and Spinal Cord Injury (THSCI) Trust Fund Activity, to enable survivors of traumatic head and/or spinal cord injury to return to a greater level of functioning and independent living in their community; and to serve as many as possible at the current level of funding via improved mission alignment.

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



			Performance Indicator Values						
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019			
K Percentage of THSCI Trust Fund expenditures going to direct services (LAPAS CODE - 25158)	85%	82%	85%	85%	85%	85%			
S Number of people served by THSCI Trust Fund (LAPAS CODE - 3367)	676	634	720	720	720	720			

Administration Protection and Support General Performance Information

	Performance Indicator Values								
Performance Indicator Name	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016	Prior Year Actual FY 2016-2017				
Number of people on waiting list for THSCI Trust Fund assistance (LAPAS CODE - 8294)	196	324	306	294	185				

7. (KEY) The Protective Services Activity, through the application of best practice standards and the policies established by LDH through June 30, 2022, will promote safety, independence, and quality-of-life for adults with disabilities who are being mistreated or in danger of being mistreated and who are unable to protect themselves.

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 Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Percentage of investigations completed within established timeframes (LAPAS CODE - 7995)	75%	76%	75%	75%	75%	75%
K Number of clients served (LAPAS CODE - 7994)	6,690	6,774	1,685	1,685	1,685	1,685
K Percentage of cases requiring service plans that were closed (LAPAS CODE - 25607)	80%	84%	80%	80%	80%	80%

Administration Protection and Support General Performance Information

	Performance Indicator Values									
Performance Indicator Name	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016	Prior Year Actual FY 2016-2017					
Number of cases assigned to investigators (statewide) (LAPAS CODE - 12052)	3,529	6,926	6,642	4,506	7,013					
Number of Adult Protective Services reports received (LAPAS CODE - 350)	4,172	4,843	5,364	5,262	5,513					
Number of Adult Protective Services cases closed (LAPAS CODE - 353)	3,592	4,989	4,574	4,262	5,121					



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 Louisiana Department of Health (LDH). 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 home, Villa Feliciana Medical Complex, the protective 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 residents.

The goals of the Villa Feliciana Medical Complex Program are:

- I. Provide management leadership and administrative support necessary for the delivery of resident care services.
- II. Administer and manage resident care in a manner that ensures compliance with applicable standards of care.
- III. Provide quality health care services to residents through the identification of need as well as efficient and effective delivery of services.

Villa is a 24-hour long-term care facility that provides quality, comprehensive in-house health care services. Villa works to prevent the progression of diseases through medical care, proper nutrition, exercise, therapy, regular check-ups and routine screenings.

Villa contributes to the state goals by decreasing the percentage of avoidable expenditures for the care of citizens who have acute and chronic medical conditions through the provision of comprehensive facility-based services. Villa reduces fragmentation of care, duplication of efforts and unnecessary medical treatments, emergency room visits, and hospitalizations. Villa serves as a training site for students from several Louisiana Technical Colleges, thereby helping to address healthcare labor shortages.

Villa serves as a safety net facility. Many residents have no other placement options due their acuity level and their need for effective disease management not generally offered by private long term care facilities. Villa also provides care to Eastern Louisiana Mental Health System (ELMHS) including forensics patients who require more medical care than ELMHS can provide. Villa is also frequently named in court-ordered placements for individuals on parole or on medical leave from the Department of Corrections.

Villa also provides on-site medical services specifically structured to meet special health care needs such as:



Villa provides care to residents under judicial commitment who require long-term care in a secure environment.

Villa is the only facility in Louisiana that provides in-patient care for clients with tuberculosis. Most of Villa's TB residents have been court-ordered to Villa due to their non-compliance with their treatment regimen in their local community. They remain at Villa until their treatment is complete and they are no longer a public health threat.

Villa Feliciana Medical Complex Budget Summary

						_				
		Prior Year Actuals 7 2016-2017	F	Enacted FY 2017-2018	Existing Oper Budget Continuation as of 12/01/17 FY 2018-2019		Recommended FY 2018-2019		Total Recommended Over/(Under) EOB	
Means of Financing:										
State General Fund (Direct)	\$	0	\$	0	\$	0	\$ 768,721	\$ 3,163	\$	3,163
State General Fund by:										
Total Interagency Transfers		18,305,320		20,776,346		20,776,346	22,466,885	21,774,919		998,573
Fees and Self-generated Revenues		748,408		1,137,437		1,137,437	1,137,437	1,137,437		(
Statutory Dedications		0		0		0	0	0		C
Interim Emergency Board		0		0		0	0	0		C
Federal Funds		0		452,991		452,991	452,991	452,991		0
Total Means of Financing	\$	19,053,728	\$	22,366,774	\$	22,366,774	\$ 24,826,034	\$ 23,368,510	\$	1,001,736
Expenditures & Request:										
Personal Services	\$	14,285,146	\$	16,578,465	\$	16,578,465	\$ 18,388,430	\$ 17,400,601	\$	822,136
Total Operating Expenses		2,665,695		3,704,691		3,704,691	4,553,221	4,109,981		405,290
Total Professional Services		158,617		290,000		290,000	290,000	290,000		0
Total Other Charges		1,757,606		1,588,167		1,588,167	1,489,383	1,462,928		(125,239)
Total Acq & Major Repairs		186,664		205,451		205,451	105,000	105,000		(100,451)
Total Unallotted		0		0		0	0	0		0
Total Expenditures & Request	\$	19,053,728	\$	22,366,774	\$	22,366,774	\$ 24,826,034	\$ 23,368,510	\$	1,001,736
Authorized Full-Time Equiva	lents:									
Classified		219		219		219	219	219		0
Unclassified		2		2		2	2	2		0
Total FTEs		221		221		221	221	221		0



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 include: (1) Title XIX reimbursement for services provided to Medicaid eligible patients received through the Louisiana Department of Health (LDH) Medical Vendor Payments; (2) payment for patient services provided to Eastern Louisiana Mental Health System Forensic Division and the Louisiana War Veterans Home. Fees and Self-generated Revenues include: (1) payment from patients for their cost of services provides; (2) rent from the John J. Hainkel, Jr. Home & Rehabilitation Center; (3) miscellaneous income, such as funds received from individuals for copies of patient medical records. Federal Funds are from Title XVIII Medicare for services provided to Medicare eligible patients.

Major Changes from Existing Operating Budget

General Fund				Table of Organization	Description			
\$	0	\$	0	0	Mid-Year Adjustments (BA-7s):			
\$	0	\$	22,366,774	221	Existing Oper Budget as of 12/01/17			
					Statewide Major Financial Changes:			
	0		91,160	0	2% General Increase Annualization Classified			
	0		22,328	0	Structural Annualization Classified			
	0		276,575	0	Market Rate Classified			
	0		11,555	0	Civil Service Training Series			
	0		151,019	0	Related Benefits Base Adjustment			
	0		61	0	Retirement Rate Adjustment			
	0		228,277	0	Salary Base Adjustment			
	0		(567,829)	0	Attrition Adjustment			
	0		105,000	0	Acquisitions & Major Repairs			
	0		(205,451)	0	Non-Recurring Acquisitions & Major Repairs			
	0		(163,676)	0	Risk Management			
	3,163		3,163	0	Office of Technology Services (OTS)			
					Non-Statewide Major Financial Changes:			
	0		21,714	0	Increase food service contract by 2% in FY19 based on normal annual increases in food and equipment costs.			



Major Changes from Existing Operating Budget (Continued)

Gei	neral Fund	1	Total Amount	Table of Organization	Description
	0		1,027,840	0	Interagency Transfers funding from the Office of Behavioral Health for eight additional beds at the Office of Aging and Adult Services, Villa Feliciana Medical Complex (OAAS-Villa) for hospital-based physical care service beds for clients of the Eastern Louisiana Mental Health System.
\$	3,163	\$	23,368,510	221	Recommended FY 2018-2019
\$	0	\$	0	0	Less Supplementary Recommendation
\$	3,163	\$	23,368,510	221	Base Executive Budget FY 2018-2019
\$	3,163	\$	23,368,510	221	Grand Total Recommended

Professional Services

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

Other Charges

Amount	Description					
	Other Charges:					
	This program does not have funding for Other Charges.					
	Interagency Transfers:					
\$552,336	Office of Risk Management (ORM)					
\$12,126	IAT Data Processing - Fees for Internet Service					
\$100,071	Civil Service Fees					
\$6,106	Comprehensive Public Training Program (CPTP) Fees					
\$10,082	State Uniform Payroll Charges					
\$21,500	Legislative Auditors					
\$68,020	East Louisiana Hospital - Utilities (Natural Gas)					
\$585,468	Administrative Costs - Bed Tax					
\$56,394	Office of Telecommunications Management (OTM) Fees					
\$50,825	Office of Technology Services					
\$1,462,928	SUB-TOTAL INTERAGENCY TRANSFERS					
\$1,462,928	TOTAL OTHER CHARGES					



Acquisitions and Major Repairs

Amount	Description				
	Acquisitions and Major Repairs				
\$105,000	Provides funding for replacement equipment and major repairs for this 24-hour healthcare facility's standard of care.				
\$105,000	TOTAL ACQUISITIONS AND MAJOR REPAIRS				

Performance Information

1. (KEY) To provide high quality medical services and achieve excellent resident outcomes in a cost effective manner through June 30, 2022.

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 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 Indicator Values					
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019		
K Percent compliance with CMS certification standards (LAPAS CODE - 8010)	95%	99%	95%	95%	95%	95%		
S Staff/client ratio (LAPAS CODE - 2287)	1.40	1.35	1.40	1.40	1.40	1.40		

2. (KEY) 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 each year through June 30, 2022.

Human Resource Policies Beneficial to Women and Families Link: Villa Feliciana Medical Complex has implemented more flexible work hours that are helpful 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 Indicator Values							
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019		
S Cost per client day (LAPAS CODE - 2289)	\$ 361	\$ 332	\$ 345	\$ 345	\$ 340	\$ 340		
K Average daily census (LAPAS CODE - 2292)	150	154	150	150	154	154		
K Total clients served (LAPAS CODE - 10052)	200	216	200	200	200	200		
K Occupancy rate (LAPAS CODE - 2288)	93%	96%	93%	93%	95%	95%		

Villa Feliciana Medical Complex General Performance Information

	Performance Indicator Values					
Performance Indicator Name	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016	Prior Year Actual FY 2016-2017	
Number of staffed beds (LAPAS CODE - 11214)	160	160	160	160	160	



320_4000 — Auxiliary Account

Program Description

The mission of the Auxiliary Account is to provide specialized rehabilitative services to medically complex residents.

The goal of the Auxiliary Account is to provide quality therapeutic services to the residents we serve.

The Auxiliary Account includes the following activities:

• Auxiliary Services - Provides residents with opportunities to participate in therapeutic activities as approved by their treatment teams including parties, games, recreational outings, etc. that simulate a home-like atmosphere.

Auxiliary Account Budget Summary

	rior Year Actuals 2016-2017	I	Enacted FY 2017-2018	existing Oper Budget s of 12/01/17	Continuation FY 2018-2019	commended Y 2018-2019	Total ecommended ever/(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	12,132		60,000	60,000	60,000	60,000	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	\$ 12,132	\$	60,000	\$ 60,000	\$ 60,000	\$ 60,000	\$ 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	12,132		60,000	60,000	60,000	60,000	0
Total Acq & Major Repairs	0		0	0	0	0	0
Total Unallotted	0		0	0	0	0	0
Total Expenditures & Request	\$ 12,132	\$	60,000	\$ 60,000	\$ 60,000	\$ 60,000	\$ 0



Auxiliary Account Budget Summary

	Prior Year Actuals FY 2016-2017	Enacted FY 2017-2018	Existing Oper Budget as of 12/01/17	Continuation FY 2018-2019	Recommended FY 2018-2019	Total Recommended Over/(Under) EOB
Authorized Full-Time E	quivalents:					
Classified	0	0	0	0	0	0
Unclassified	0	0	0	0	0	0
Total F	TEs 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 vending machines.

Major Changes from Existing Operating Budget

Genera	ıl Fund	Т	Total Amount	Table of Organization	Description
\$	0	\$	0	0	Mid-Year Adjustments (BA-7s):
\$	0	\$	60,000	0	Existing Oper Budget as of 12/01/17
					Statewide Major Financial Changes:
					Non-Statewide Major Financial Changes:
\$	0	\$	60,000	0	Recommended FY 2018-2019
\$	0	\$	0	0	Less Supplementary Recommendation
\$	0	\$	60,000	0	Base Executive Budget FY 2018-2019
\$	0	\$	60,000	0	Grand Total Recommended

Professional Services

Amount	Description
	This program does not have funding for Professional Services.

Other Charges

Amount	Description
	Other Charges:



Other Charges (Continued)

Amount	Description								
\$60,000	Sale of merchandise in the patient canteen, donations, etc.								
\$60,000	SUB-TOTAL OTHER CHARGES								
	Interagency Transfers:								
	This program does not have funding for Interagency Transfers.								
\$60,000	TOTAL OTHER CHARGES								

Acquisitions and Major Repairs

Amount	Description
	This program does not have funding for Acquisitions and Major Repairs.



09-324 — Louisiana Emergency Response Network Board



Agency Description

The mission of the Louisiana Emergency Response Network (LERN) 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.

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 goals of LERN are to:

- I. Decrease risk adjusted time sensitive illness (stroke/STEMI) and trauma related deaths and incidents of morbidity and mortality due to trauma and time-sensitive illness 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 networks for both trauma and time sensitive related illnesses (Stroke and STEMI).
- IV. Establish and codify protocols that specify the role of LERN in Emergency Support Function 8 (ESF-8) activities.

STATEMENT OF AGENCY STRATEGIES FOR DEVELOPMENT AND IMPLEMENTATION OF HUMAN RESOURCE POLICIES THAT ARE HELPFUL AND BENEFICIAL TO WOMEN AND FAMILIES

LERN follows the Louisiana Department of Health (LDH) Human Resources policies as they relate to:

The LDH Family and Medical Leave Policy provides up to 12 work weeks 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 Sexual Harassment Policy and the Equal Employment Opportunity Policy. In addition, flexibility in work schedules assists both women and their families. LDH Policy 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.



The LDH Accrual and Use of Leave for Classified Employees Policy credits and grants leave in accordance with Civil Service Rules and provisions of the LDH leave policy. Leave is administered as uniformly and equitably as possible without regard to gender and non-merit factors. Time and Attendance Policy permits 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 and prohibits the use of gender and other non-merit factors.

For additional information, see:

Department of Health and Hospitals

American College of Surgeons Committee on Trauma

Louisiana Emergency Response Network Board Budget Summary

		rior Year Actuals 2016-2017	F	Enacted Y 2017-2018	Existing Oper Budget as of 12/01/17	Continuation FY 2018-2019	decommended FY 2018-2019	Total commended ver/(Under) EOB
Means of Financing:								
State General Fund (Direct)	\$	1,451,935	\$	1,583,085	\$ 1,583,085	\$ 1,653,508	\$ 1,637,234	\$ 54,149
State General Fund by:								
Total Interagency Transfers		33,718		49,900	74,900	49,900	49,900	(25,000)
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	\$	1,485,653	\$	1,632,985	\$ 1,657,985	\$ 1,703,408	\$ 1,687,134	\$ 29,149
Expenditures & Request:								
Louisiana Emergency Response Network Board	\$	1,485,653	\$	1,632,985	\$ 1,657,985	\$ 1,703,408	\$ 1,687,134	\$ 29,149
Total Expenditures & Request	\$	1,485,653	\$	1,632,985	\$ 1,657,985	\$ 1,703,408	\$ 1,687,134	\$ 29,149
Authorized Full-Time Equiva	lents:							
Classified		5		5	5	5	5	0
Unclassified		2		2	2	2	2	0
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 (LERN) 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.

The goals of the Louisiana Emergency Response Network are to:

- I. Decrease risk adjusted time sensitive illness (stroke/STEMI) and trauma related deaths and incidents of morbidity and mortality due to trauma and time-sensitive illness 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: LERN Central Office, 9 regional commissions and Call Center Operations.

The Louisiana Emergency Response Network has one program: Louisiana Emergency Response Network Board. LERN Program Activities consist of:

LERN remains dedicated to providing access services – connecting patients in need of time-sensitive trauma, stroke and STEMI services with declared preventative medical care. These resources are tracked via the LERN Resource Management screen in the ESF-8 Portal. The LERN Communications Center located in Baton Rouge, continues to offer state of the art communications that directs the transport of traumatically injured patients to definitive care facilities within the "golden hour". In 2014 LERN expanded the scope of the LERN Communication Center to include directing transport of stroke and STEMI patients as needed across the state. These services are provided 24/7/365 across the entire state of Louisiana. LERN routed 16,651 patients in CY 2015. The LERN Communication Center also serve 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. LERN has assumed the additional responsibility of managing the EMS Tactical Operation Center during a state declared disaster.

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 American College of Surgeons (ACS) Trauma Center verification. There are currently 4 hospitals either in the application process or exploring Trauma Center verification. The LERN team is currently working on the 5 year goal of adding 1 additional Level 2 or Level 3 trauma center in each region of the state. This year the state gained an ACS Level II Verified Trauma Center. Now there are 5 trauma centers in Louisiana: Two Level 1 trauma centers with one located in Region 1 (University Medical Center - New Orleans) and the other in Region 7 (University



Health Shreveport). There are 3 Level 2 trauma Centers located: Region 6 (Rapides Regional Medical Center-Alexandria), Region 2 (Our Lady of the Lake - Baton Rouge) and most recently Region 9 (North Oaks Medical Center - Hammond). Lafayette General Medical Center in Region 4 is scheduled for a Level 2 Trauma Center review by the ACS in fall of 2017. Lakeview Regional Medical Center (Region 9) is working towards level 3 Trauma Center Status and will be reviewed by the ACS in summer of 2017. With verified trauma centers, there is an increase in the level of care that supports a decrease in morbidity and mortality. With expansion of the trauma center network we make progress on implementing the Health and Human Services model for statewide trauma systems of care. Currently 55.4% (2,509,289) of the population has access to a trauma center within 1 hour drive time. Once Lafayette General and Lakeview are verified by the ACS, 67.4% of the population will have access to a trauma center within 1 hour drive time.

In addition to trauma, LERN is building systems of care for stroke and STEMI. Our legislation requires that LERN work with the department to develop stroke and ST segment elevation myocardial infarction (STEMI) systems that are designed to promote rapid identification of, and access to, appropriate stroke and STEMI resources statewide. To this end, the LERN Board has established requirements for STEMI Receiving Centers, STEMI Referral Centers, and requirements for Stroke Centers: levels 1-4. Every CEO in Louisiana has attested to these levels thus defining STEMI and Stroke hospital capability across the state. This information is used by EMS providers to ensure that when citizens in Louisiana suffer from these conditions, they seek access at the appropriate resourced hospital. The LERN Board has also adopted destination protocols for EMS to follow to ensure that patients suffering a stroke or STEMI receive care at the closest most appropriate hospital. LERN also promulgated LAC 48:I.Chapters 187 and 189 which establishes requirements for Stroke Center Recognition and STEMI Receiving/Referral Centers Recognition. LERN also promulgated LAC 48:I. Chapters 191, 193, and 195 Trauma destination protocol, Stroke destination protocol and STEMI destination protocol. LERN also promulgated LAC 48:I, Chapter 197, Sections 19701-19701 Trauma Program Recognition.

An education video for the public was also developed to provide the public with important information about stroke symptoms, LERN stroke levels and hospital access. This is posted to the LERN website at www.lern.la.gov. An 11 part stroke webinar series was developed and implemented this calendar year. These educational webinars are also posted on the LERN Website.

LERN's Communication Center is the "first call" help desk and 24/7/365 information coordinator for unfolding events in the state. In this role, LERN provides timely information that helps hospitals, other health care providers and relevant stakeholder agencies prepare for and manage response to the emergency events they face.

Louisiana Emergency Response Network Board Budget Summary

	Prior Year Actuals Y 2016-2017	F	Enacted FY 2017-2018	Existing Oper Budget as of 12/01/17	Continuation FY 2018-2019	ecommended TY 2018-2019	Total commended ver/(Under) EOB
Means of Financing:							
State General Fund (Direct)	\$ 1,451,935	\$	1,583,085	\$ 1,583,085	\$ 1,653,508	\$ 1,637,234	\$ 54,149
State General Fund by:							
Total Interagency Transfers	33,718		49,900	74,900	49,900	49,900	(25,000)



Louisiana Emergency Response Network Board Budget Summary

		Prior Year Actuals Y 2016-2017	F	Enacted Y 2017-2018	Existing Oper Budget as of 12/01/17	Continuation FY 2018-2019	Recommended FY 2018-2019	Total ecommended Over/(Under) EOB
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	\$	1,485,653	\$	1,632,985	\$ 1,657,985	\$ 1,703,408	\$ 1,687,134	\$ 29,149
Expenditures & Request:								
Personal Services	\$	881,741	\$	873,818	\$ 873,818	\$ 916,509	\$ 916,509	\$ 42,691
Total Operating Expenses		208,994		239,261	239,261	244,247	239,261	0
Total Professional Services		244,999		337,531	337,531	348,819	337,531	0
Total Other Charges		149,919		179,467	204,467	187,396	187,396	(17,071)
Total Acq & Major Repairs		0		2,908	2,908	6,437	6,437	3,529
Total Unallotted		0		0	0	0	0	0
Total Expenditures & Request	\$	1,485,653	\$	1,632,985	\$ 1,657,985	\$ 1,703,408	\$ 1,687,134	\$ 29,149
Authorized Full-Time Equiva	lents	:						
Classified		5		5	5	5	5	0
Unclassified		2		2	2	2	2	0
Total FTEs		7		7	7	7	7	0

Source of Funding

The Louisiana Emergency Response Network Board program is funded with State General Fund (Direct) and Interagency Transfers from the Louisiana Highway Safety Commission.

Major Changes from Existing Operating Budget

Ge	neral Fund	Т	otal Amount	Table of Organization	Description
\$	0	\$	25,000	0	Mid-Year Adjustments (BA-7s):
\$	1,583,085	\$	1,657,985	7	Existing Oper Budget as of 12/01/17
					Statewide Major Financial Changes:
	6,757		6,757	0	2% General Increase Annualization Classified
	18,253		18,253	0	Market Rate Classified
	6,757		6,757	0	Civil Service Training Series
	2,037		2,037	0	Related Benefits Base Adjustment
	8,887		8,887	0	Salary Base Adjustment



Major Changes from Existing Operating Budget (Continued)

Gen	eral Fund	Total Amount	Table of Organization	Description
	(2,908)	(2,908)	0	Non-Recurring Acquisitions & Major Repairs
	1,384	1,384	0	Risk Management
	(27)	(27)	0	UPS Fees
	507	507	0	Civil Service Fees
	5,669	5,669	0	Office of Technology Services (OTS)
	6,833	6,833	0	Office of State Procurement
				Non-Statewide Major Financial Changes:
	0	(25,000)	0	Non-Recurring adjustments for Grant for Injury Scaling Course.
\$	1,637,234	\$ 1,687,134	7	Recommended FY 2018-2019
\$	0	\$ 0	0	Less Supplementary Recommendation
\$	1,637,234	\$ 1,687,134	7	Base Executive Budget FY 2018-2019
\$	1,637,234	\$ 1,687,134	7	Grand Total Recommended

Professional Services

Amount	Description
	Professional Services:
\$25,000	Legal services to provide support and guidance on matters related to the development of the system
\$83,747	Management consulting support and strategic planning for ongoing implementation of Louisiana Emergency Response Network
\$29,779	Other educational contracts to secure Advanced Trauma Life Support (ATLS), PreHospital Trauma Life Support (PHTLS), Rural Trauma Team Development Course (RTTDC), American Trauma Society and trauma registries in rural areas
\$199,005	Medical Services; medical directors and other doctors provide consultation related to trauma, stroke and STEMI
\$337,531	Total Professional Services

Other Charges

Amount	Description
	Other Charges:
\$49,900	Grant provided by the Louisiana Highway Safety Commission (LHSC)
\$49,900	SUB-TOTAL OTHER CHARGES
	Interagency Transfers:
\$25,211	Office of Risk Management
\$50,876	Office of Technology Services (OTS)
\$3,077	Civil Service Fees
\$19,224	Office of State Procurement



Other Charges (Continued)

Amount	Description
\$318	Office of State Uniform Payroll (UPS)
\$800	Office of State Register
\$1,860	Office of State Mail Operations
\$36,130	Office of Telecommunications Management (OTM)
\$137,496	SUB-TOTAL INTERAGENCY TRANSFERS
\$187,396	TOTAL OTHER CHARGES

Acquisitions and Major Repairs

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mo
unt Description
This agency does not have funding for Acquisitions and Major Repairs

Performance Information

1. (KEY) To continue the operational activity of the LERN Office and LERN Communications Center to encompass 100% of the citizens of Louisiana in directing the transport of traumatically injured patients or time sensitive patients to definitive care within 60 minutes of injury/illness.

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	dicator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Percentage of hospitals having emergency room services that participate in the LERN Network (LAPAS CODE - 22965)	95%	98%	95%	95%	98%	98%
K Percentage of EMS Agencies that participate in LERN (LAPAS CODE - 22328)	75%	57%	75%	75%	75%	75%
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)	90%	97%	90%	90%	95%	95%
K Percentage of EMS agencies that submit data to the State EMS Registry (LAPAS CODE - 25347)	55%	56%	55%	55%	63%	63%

Louisiana Emergency Response Network Board General Performance Information

		Perfor	mance Indicator V	alues	
Performance Indicator Name	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016	Prior Year Actual FY 2016-2017
Percentage of Louisiana citizens with access to a Level I, II, or III trauma center within a 60 minute drive time. (LAPAS CODE - 26127)	Not Available	Not Available	Not Available	53%	55%
This is a new performance indicator for FY201	7-18 and there is no	prior year information	on available.		
Number of state designated trauma center (LAPAS CODE - 26128)	Not Available	Not Available	Not Available	5	5
Number of hospitals participating in the STEMI regional report (LAPAS CODE - 26129)	Not Available	Not Available	Not Available	11	11
This is a new performance indicator for FY201	7-18 and there is no	prior year information	on available.		
Number of Primary Stroke Centers in the state (LAPAS CODE - 26130)	Not Available	Not Available	Not Available	12	16
This is a new performance indicator for FY201	7-18 and there is no	prior year information	on available.		
Percentage of LDH regions participating with LERN in regional MCI drills. (LAPAS CODE - 26131)	Not Available	Not Available	Not Available	4%	67%



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 development 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. To this end, a comprehensive system of care is offered which provides research-based prevention, early intervention, treatment and recovery support services to citizens of Acadia, Evangeline, Iberia, Lafayette, St. Landry, St. Martin, and Vermilion parishes, directly and through community collaborations.

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

- 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, co-occurring disorders, and/or developmental disabilities.
- II. To improve individual outcomes through effective implementation of evidenced-based and best practices and data-driven decision-making.
- 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 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.

For additional information, see:

DHH: Acadiana Area Human Services District



Acadiana Area Human Services District Budget Summary

		rior Year Actuals 2016-2017	F	Enacted Y 2017-2018	existing Oper Budget s of 12/01/17	Continuation Y 2018-2019	commended Y 2018-2019	Total ecommended ver/(Under) EOB
Means of Financing:								
State General Fund (Direct)	\$	13,100,938	\$	13,774,898	\$ 13,794,103	\$ 15,656,359	\$ 14,947,361	\$ 1,153,258
State General Fund by:								
Total Interagency Transfers		2,074,821		2,793,071	2,793,071	2,923,045	2,923,045	129,974
Fees and Self-generated Revenues		188,549		1,536,196	1,536,196	1,536,196	1,536,196	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	\$	15,364,308	\$	18,104,165	\$ 18,123,370	\$ 20,115,600	\$ 19,406,602	\$ 1,283,232
Expenditures & Request:								
Acadiana Area Human Services District	\$	15,364,308	\$	18,104,165	\$ 18,123,370	\$ 20,115,600	\$ 19,406,602	\$ 1,283,232
Total Expenditures & Request	\$	15,364,308	\$	18,104,165	\$ 18,123,370	\$ 20,115,600	\$ 19,406,602	\$ 1,283,232
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, R.S. 28:912-920.

Program Description

The Acadiana Area Human Services District is one program comprised of administration, behavioral health, and developmental disabilities.

- Administration: The Louisiana Department of Health (LDH), 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 LDH shall not contract with a new LGE until LDH, in consultation with the Human Services Interagency Council (HSIC), has determined and confirmed in writing to the governor that LDH is prepared to contract the provision of services to the LGE after the LGE has successfully completed the Readiness Assessment. 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. A ten member board was seated in January of 2010 and an Executive Director was hired in November 2011. The Acadiana Area Human Services District will participate in the statewide initiative to transition from the statewide SMO to the five Bayou Health companies 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. Acadiana Area Human Services District is seeking national reaccreditation with CARF for its 5 behavioral clinics sites within the region.
- Behavioral Health:
- Mental Health Acadiana Area Human Services District provides Mental Health outpatient clinic services for children, adolescents, and adults. Core services include screening, assessment, crisis evaluation, individual/group/family therapy, medication management (which includes administration and education), and screening for persons with co-occurring disorders. Contracted services include evidence-based practice (Assertive Community Treatment) and Case Management Services for adults and children/adolescents, as well as housing and employment assistance and assistance in application for Supplemental Security Income (SSI). Service delivery includes full participation in the Healthy Louisiana (formerly Bayou Health) initiative.
- Addictive Disorders Acadiana Area Human Services District provides Addictive Disorders outpatient
 clinic services for adolescents and adults and contracts with community vendors to provide Prevention services to children and adolescents. Core services include orientation/screening, referral, assessment; education, outpatient, intensive outpatient, and aftercare group modalities, treatment for gambling addiction,
 drug screens, HIV/STD/TB services, and medical history/mental status exams. Addictive Disorders and
 Prevention service providers focus their attention on providing comprehensive, fully integrated prevention
 and treatment services and actively seek the assistance of partnerships and collaborations to fully meet the
 needs of individuals, families, and communities.



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.

Acadiana Area Human Services District Budget Summary

		Prior Year Actuals Y 2016-2017	F	Enacted Y 2017-2018	existing Oper Budget s of 12/01/17	Continuation FY 2018-2019	ecommended Y 2018-2019	Total commended ver/(Under) EOB
Means of Financing:								
State General Fund (Direct)	\$	13,100,938	\$	13,774,898	\$ 13,794,103	\$ 15,656,359	\$ 14,947,361	\$ 1,153,258
State General Fund by:								
Total Interagency Transfers		2,074,821		2,793,071	2,793,071	2,923,045	2,923,045	129,974
Fees and Self-generated Revenues		188,549		1,536,196	1,536,196	1,536,196	1,536,196	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	\$	15,364,308	\$	18,104,165	\$ 18,123,370	\$ 20,115,600	\$ 19,406,602	\$ 1,283,232
Expenditures & Request:								
Personal Services	\$	0	\$	0	\$ 0	\$ 0	\$ 0	\$ 0
Total Operating Expenses		76,662		176,100	176,100	176,100	176,100	0
Total Professional Services		0		0	0	0	0	0
Total Other Charges		15,287,646		17,906,065	17,947,270	19,548,483	19,093,510	1,146,240
Total Acq & Major Repairs		0		22,000	0	391,017	136,992	136,992
Total Unallotted		0		0	0	0	0	0
Total Expenditures & Request	\$	15,364,308	\$	18,104,165	\$ 18,123,370	\$ 20,115,600	\$ 19,406,602	\$ 1,283,232



Acadiana Area Human Services District Budget Summary

	Prior Year Actuals FY 2016-2017	Enacted FY 2017-2018	Existing Oper Budget as of 12/01/17	Continuation FY 2018-2019	Recommended FY 2018-2019	Total Recommended Over/(Under) EOB
Authorized Full-Time Equ	ivalents:					
Classified	0	0	0	0	0	0
Unclassified	0	0	0	0	0	0
Total FTI	E s 0	0	0	0	0	0

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 of Behavioral Health. 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, ineligible patient fees, Medical Vendor Payments - Title XIX, for services provided to Medicare eligible clients, urine drug screen copays, DWI copays, and Medicaid enrollment fees.

Major Changes from Existing Operating Budget

Ge	neral Fund	T	Total Amount	Table of Organization	Description
\$	19,205	\$	19,205	0	Mid-Year Adjustments (BA-7s):
\$	13,794,103	\$	18,123,370	0	Existing Oper Budget as of 12/01/17
					Statewide Major Financial Changes:
	75,182		75,182	0	2% General Increase Annualization Classified
	49,245		49,245	0	Structural Annualization Classified
	279,557		279,557	0	Market Rate Classified
	515,212		515,212	0	Related Benefits Base Adjustment
	412,864		412,864	0	Salary Base Adjustment
	(454,973)		(454,973)	0	Attrition Adjustment
	(892,956)		(892,956)	0	Personnel Reductions
	(22,000)		(22,000)	0	Non-Recurring Acquisitions & Major Repairs
	(19,205)		(19,205)	0	Non-recurring Carryforwards
	(129)		(129)	0	Risk Management
	1,393		1,393	0	Legislative Auditor Fees
	(649)		(649)	0	UPS Fees
	(2,705)		(2,705)	0	Civil Service Fees
	133,761		133,761	0	Office of Technology Services (OTS)
	10,445		10,445	0	Office of State Procurement
					Non-Statewide Major Financial Changes:



Major Changes from Existing Operating Budget (Continued)

G	eneral Fund	Т	otal Amount	Table of Organization	Description
	175,260		175,260	0	Technical adjustment to transfer funds from Office of Behavioral Health (OBH) to Acadiana Area Human Services District (AAHSD), Central Louisiana Human Services District (CLHSD), Northwest Louisiana Human Services District (NLHSD), and Northeast Delta Human Services Authority (NDHSA) for pharmaceutical supplies as a result of the closure of Shamrock Pharmacy on November 1, 2017.
	0		129,974	0	Interagency Transfer adjustment from Louisiana Department of Health Office of Behavioral Health/Addictive Disorders to Acadiana Area Human Services Authority.
	892,956		892,956	0	Realigning funds from personnel to Other Charges for needed operating expenses and contracts.
\$	14,947,361	\$	19,406,602	0	Recommended FY 2018-2019
\$	0	\$	0	0	Less Supplementary Recommendation
\$	14,947,361	\$	19,406,602	0	Base Executive Budget FY 2018-2019
\$	14,947,361	\$	19,406,602	0	Grand Total Recommended

Professional Services

Amount	Description
	This agency does not have funding for Professional Services.

Other Charges

Amount	Description
	Other Charges:
\$10,741,534	Salaries and related benefits for Other Charges positions.
\$7,853,789	Contractual and operating costs of mental health, addictive disorders and developmental disability services
\$18,595,323	SUB-TOTAL OTHER CHARGES
	Interagency Transfers:
\$34,689	Payments to the Department of Civil Service - Civil Service Fees
\$193,986	Payments to the Division of Administration - Risk Management
\$7,273	Payments to the Division of Administration - Uniform Payroll Services
\$94,294	Payments to the Division of Administraion- Technology Services
\$17,173	Payments to the Division of Administration - Office of State Procurement
\$29,269	Payments to the Legislative Auditor
\$121,503	Miscellaneous Commodities and Services
\$498,187	SUB-TOTAL INTERAGENCY TRANSFERS
\$19,093,510	TOTAL OTHER CHARGES



Acquisitions and Major Repairs

Amoun	t	Description
\$13	36,992	Replacement Computers and Software Upgrade
\$13	36,992	TOTAL ACQUISITIONS AND MAJOR REPAIRS

Performance Information

1. (KEY) To provide programmatic leadership and direction to the programs of behavioral health (addictive disorders and mental health) and developmental disabilities services under AAHSD; to continue the operational activity of the AAHSD administrative office in relation to the Readiness Assessment Criteria and other regulatory/licensure processes and according to the terms of the Memorandum of Understanding (MOU) each year through June 30, 2022.

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 2020, The American Association of Intellectual and Developmental Disabilities (AAID), Substance Abuse Mental Health Services Administration's Center for Substance Abuse Prevention (CSAP), Substance Abuse Mental Health Services Administration's Center for Substance Abuse Treatment (CSAT).



Performance Indicators

			Performance Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Percentage of clients who indicate they would continue to receive services at AAHSD clinics if given the choice to go elsewhere (LAPAS CODE - 25057)	90%	97%	90%	90%	90%	90%
K Percentage of clients who indicate they would recommend AAHSD services to family and friends (LAPAS CODE - 25058)	90%	97%	90%	90%	90%	90%

Acadiana Area Human Services District General Performance Information

		Perfo	rmance Indicator V	alues	
Performance Indicator Name	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016	Prior Year Actual FY 2016-2017
Total number of individuals served in the Acadiana Area Human Services District (LAPAS CODE - 25043)	81,549	3,583	15,841	14,891	14,853
Total number of individuals served by outpatient mental health in Acadiana Area Human Services District (LAPAS CODE - 25044)	5,043	1,276	4,938	5,772	5,332
Total numbers of individuals served by outpatient Addictive Disorders in Acadiana Area Human Services District (LAPAS CODE - 25046)	1,101	283	1,222	675	1,229
Total number of enrollees in prevention programs (LAPAS CODE - 25047)	75,122	1,531	9,681	8,444	8,292

2. (KEY) Each year through June 30, 2022, AAHSD will work as part of the Stateis continuum of care that centers on behavioral disorders, addictive disorders, and co-occurring disorders.

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: The 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 2020, The American Association of Intellectual and Developmental Disabilities (AAID), Substance Abuse Mental Health Services Administration's Center for Substance Abuse Prevention (CSAP), Substance Abuse Mental Health Services Administration's Center for Substance Abuse Treatment (CSAT).

Performance Indicators

			Performance Inc	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Number of adults receiving mental health services in all AAHSD behavioral health clinics (LAPAS CODE - 25052)	5,000	4,870	5,000	5,000	5,000	5,000
K Number of children/ adolescents receiving mental health services in all AAHSD behavioral health clinics (LAPAS CODE - 25053)	725	462	725	725	725	725
K Percentage of adults receiving mental health services who indicate that they would choose to continue to receive services from AAHSD if given the choice to receive services elsewhere (LAPAS CODE - 25054)	90%	97%	90%	90%	90%	90%



Performance Indicators (Continued)

			Performance Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Percentage of mental health clients who would recommend AAHSD services to others (LAPAS CODE - 25055)	90%	97%	90%	90%	90%	90%
K Percentage of mental health cash subsidy slots utilized (LAPAS CODE - 25056)	94%	100%	94%	94%	94%	94%
K Percentage of individuals successfully completing the 24-hour residential addictive disorders treatment program (LAPAS CODE - 25040)	60%	60%	60%	60%	60%	60%
K Percentage of individuals successfully completing the Primary Inpatient Adult addictive disorders treatment program (LAPAS CODE - 25041)	85%	85%	85%	85%	85%	85%

3. (KEY) Through the Developmental Disabilities activity, AAHSD will foster and facilitate independence for citizens with disabilities through the availability of home- and community-based services each year through June 30, 2022.

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: The 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 2020, The American Association of Intellectual and Developmental Disabilities (AAID), Substance Abuse Mental Health Services Administration's Center for Substance Abuse Prevention (CSAP), Substance Abuse Mental Health Services Administration's Center for Substance Abuse Treatment (CSAT).



Performance Indicators

			Performance Inc	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Number of persons receiving individual and family support services (LAPAS CODE - 25048)	250	230	240	240	240	240
K Number of persons receiving Flexible Family Funds (LAPAS CODE - 25049)	207	202	202	202	202	202
K Percentage of eligibility determinations determined to be valid according to Flexible Family Fund provisions (LAPAS CODE - 25050)	95%	95%	95%	95%	95%	95%
K Number of persons receiving developmental disabilities services (LAPAS CODE - 25051)	2,400	2,350	2,350	2,350	2,350	2,350



09-326 — Office of Public Health



Agency Description

Mission Statement:

The mission of the Louisiana Department of Health (LDH) Office of Public Health (OPH) is to protect and promote the health and wellness of all individuals and communities in Louisiana.

Vision Statement:

The LDH OPH characterized by a trained and highly motivated workforce, will employ science-based best practices to ensure that all people in Louisiana have the opportunity to grow, develop, and live in an environment that promotes the physical, behavioral and social health of individuals, families and communities.

Goals and Objectives:

- 1) Increase financial stability by more efficient utilization of resources and increased revenue.
- 2) Operate as a cross-functional, cohesive agency throughout all programs, services, and regions, while being reliable and responsive and meeting national standards.
- 3) OPH attracts and retains a competent and diverse staff throughout our workforce to maximize productivity, deliver high quality service, and improve outcomes.
- 4) Lead and continually improve a public health system that identifies and reduces inequities to improve health outcomes and quality of life in Louisiana.
- Adopt and maintain an up-to-date IT infrastructure to ensure a well-equipped workforce that has the tools to meet or exceed performance standards and funding requirements.

Core Values:

- · OPH values health as physical, mental, and social well-being.
- · We are dedicated to assisting and serving everyone with compassion and dignity.
- · We value and respect diversity.
- · We value individuals and communities as core partners in protecting and promoting health.
- · We value the unique perspectives and contributions of all employees.
- · We are committed to fostering an environment where all employees are empowered to challenge current processes and assumptions in an effort to continually improve quality and performance.
- · We are committed to excellence through continuous performance improvement based on best practices and available science.
- · We demonstrate integrity, accountability, professionalism, and transparency



OPH is dedicated to the development, implementation and management of public health services for the citizens of Louisiana. The agency will continue to deliver Maternal Child Health Services, Nutrition Services (Women, Infants and Children, WIC Services), Family Planning Services, Children Special Health Services, Early Steps Program Services, Immunization Services, Tuberculosis Services and Genetic Disease Monitoring Services. OPH 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 2016-2017	F	Enacted Y 2017-2018	xisting Oper Budget s of 12/01/17	Continuation Y 2018-2019	ecommended Y 2018-2019	Total commended ver/(Under) EOB
Means of Financing:								
State General Fund (Direct)	\$	42,172,926	\$	47,423,885	\$ 47,461,019	\$ 55,858,678	\$ 50,967,685	\$ 3,506,666
State General Fund by:								
Total Interagency Transfers		5,022,218		7,955,554	7,955,554	5,032,183	5,032,183	(2,923,371)
Fees and Self-generated Revenues		36,009,471		47,923,983	47,923,983	48,303,276	48,303,276	379,293
Statutory Dedications		7,040,956		8,764,759	8,764,759	9,427,749	11,346,982	2,582,223
Interim Emergency Board		0		0	0	0	0	0
Federal Funds		212,744,891		277,052,526	277,144,352	278,022,719	278,022,719	878,367
Total Means of Financing	\$	302,990,462	\$	389,120,707	\$ 389,249,667	\$ 396,644,605	\$ 393,672,845	\$ 4,423,178
Expenditures & Request:								
Public Health Services	\$	302,990,462	\$	389,120,707	\$ 389,249,667	\$ 396,644,605	\$ 393,672,845	\$ 4,423,178
Total Expenditures & Request	\$	302,990,462	\$	389,120,707	\$ 389,249,667	\$ 396,644,605	\$ 393,672,845	\$ 4,423,178
Authorized Full-Time Equiva	lents	:						
Classified		1,190		1,188	1,188	1,200	1,200	12
Unclassified		14		14	14	14	14	0
Total FTEs		1,204		1,202	1,202	1,214	1,214	12



326 2000 — Public Health Services

PROGRAM AUTHORIZATION: Statutory Authority for Public Health Services: Statutory Authority is inclusive of programs within the five operating areas: Vital Records and Statistics R.S. 40:32 et. seq, R.S. 40:37, Data Release R.S. 40:41, Registration of Vital Events R.S. 40:34 et. seq., Marriage Licenses R.S. 9:201 et. seq. Putative Father Registry R.S. 9:400 et. seq.; Maternal and Child Health Services Chapter 8, Part I L.R.S. 46:971-972; R.S. 17:2111-2112, R.S. 33:1563, Hearing Impairment R.S. 46; 2261-2267, Adolescent Pregnancy R.S. 46:973-974 (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; Social Security Act ñ Maternal and child health block Grant 42 U.S.C. 701β501, Personal Responsibility and Work Opportunity Reconciliation act of 1996 ñ Temporary Assistance to Needy Families Block Grant Federal Pub.L. 104-193, Patient Protection and Affordable Care Act of 2010 42 U.S.C. 701 β Section 511(b), Medicaid Targeted Case Management 42 U.S.C. 701 β 1905(a)(19), β 1915(g), LAC Title 50 Part XV Subpart 7, Violent Crime Control and Law Enforcement Act of 1994 Federal H.R. 3355, Pub.L. 103-322, Child Death Investigation L.S.A. RS 40:2019;

Family Planning Title X of the Public Health Service Act, 42 U.S.C. 300 et. seq., 42 CFR part 59, subpart A, Subpart B, 42 CFR part 50 subpart B; 42 CFR 59.1; OPA 99-1: Compliance with State reporting laws: FY 1999 Omnibus Appropriations bill P.L. 105-277 β 219; Louisiana Children Code Art. 609A; Abortion Alternatives R.S.40.1299.35ί 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 Through P.L. 110ñ246, Effective October 1, 2008, R.S. 46:447.1; Title V Maternal and Child Health; β 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; Sexually Transmitted Disease, RS 40:1061 thru 1068 and 1091 thru 1093, LRS 40:4(A)(2) and RS 40:5(10); Vaccines for Children, Section 1928 of the Social Security Act, Vaccine Adverse Event Reporting System 42 U.S.C. β300aa-25;

Women Infants and Children ß17 of the Child Nutrition Act of 1966, WIC Breastfeeding Peer Counseling, Child Nutrition and Reauthorization Act of 2004; Health, Hunger Free Kids Act of 2010; Commodity Supplemental Food Program Section 4(a) of the Agriculture and Consumer Protection Act of 1973; 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; 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. Childrenís Special Health Services R.S.40:1299.111-120 (Childrenís Special Health Services). Title 48; Public Health General; Part V; subpart 17; ß\$4901-5903 /LAC:48:V.4901-5903; Title V of the Social Security Act sections 701-710, subchapter V chapter VII, title 42; Birth Defects LAC Title 48:V.Chapters 161 and 163; Newborn Screening: RS 40:1299 ñ 1299.4, 1299.6, Hemophilia: RS 40:1299.5; LAC 48.V.7101, Childhood Lead Poisoning Prevention: RS 40:1299.21-29; LAC 51:IV.101-111), LAC Title 48:V.ß 7005; Newborn Heel Stick RS 40:1299-1299.4, 1299.6, LAC title 48.V.6303; Hearing, Speech and Vision R.S. 46:2261 et. seq. LAC Title 48, Public Health General, Part V, subpart 7, Chapter 22; Section 399M of the Public Health Service Act 42 USC section 280g-1; Early Hearing Detection and Intervention Act of 2010;



Individuals with Disabilities Education Act (IDEA), Part C, Early Intervention Program for Infants and Toddlers with Disabilities, final regulations 2011, 34 CFR Part 303 RIN 1820-AB 59; Infectious Disease Epidemiology LAC Title 51, Part II. The Control of Diseases 105, LAC Title 51 Part III. The Control of Rabies and other Zoonotic Diseases 101-111; Tuberculosis, LA R.S. 40:3, 40:4, 40:5 Public Health Sanitary Code, (LAC TITLE 51): Chapter II, '115, '117, '119, '121, '125, '503, '505; Adolescent School Health Initiative, LA, R.S. 40:31.3; R.S. 40:1, et seq., R.S. 4- 6, R.S. 8- 9 et seq., 1141-51, 1152-1156, 2701-19, 2817 et. Seq; Commercial Body Art Regulation Act (Act 393 of 1999) R.S. 40:2831 - 40:2834, LAC 51 (Public Health ñ Sanitary Code-Parts 1-28); Chapter 32 of Title 40 of the Louisiana Revised Statutes of 1950, as amended (La. R.S. 40:2821 - 2826);

Safe Drinking Water Program, L.R.S. 40:4.A(7),(8)&(11)); 40:4.B; 40:4.11, 40:4.12; 40:5(5),(6)&(20); 40:5.6-9; 40:6; 40:8; Safe Drinking Water Administration Fee R.S. 40:31.33.LAC 51: Part I and Parts XII (Water Supplies), XIV (Plumbing), XXIV (Swimming Pools); and LA R.S. 40:32 et seq., LA R.S. 40:1299.80 et seq; Building and Premises RS36:258; Commercial Seafood LAC Title 51: Part IX; LRS 40:5.3, National Shellfish Sanitation Program, USFDA Interstate Certified Shellfish Shippers List; Infectious Waste RS 40:4 (b)(i); Milk and Dairy LAC Title 51, Part 7, U.S. Food and Drug Administration Pasteurized Milk Ordinance, 2011 Revision; Retail Food LAC Title 51Part XXIII Chapter 307, Chapter 501; Food and Drug R.S. 40:601 et. sep., 2701-2719, and 2831 et seq, RS 40:717; Operator Certification RS 40:1141-1151, Title 48, Part V, Chapter 73, 42 U.S.C. 300f, et seq. 40 CFR Parts 141-143; Emergency Medical Services, R.S. 40:1231-1236., R.S. 40:1300.102-105; Emergency Preparedness sections 319C-1 and 319C-2 of the Public Health Service (PHS) Act as amended by the Pandemic and All-Hazards Preparedness Act (PAHPA) of 2006, Presidential Policy Directive 8: National Preparedness; Medicare Rural Hospital Flexibility Balanced Budget Act of 1997, Section 4201, P.L. 105-33, LA Act 162 of 2002;

Primary Care Office and Health Professional Workforce Public Health Act, Title III, ß 333D, Section 220ß of the Immigration and Nationality Technical Corrections Act of 1994, Public Health Services Act, Title III, ß 339 (O), 338I, and 338 and 338B(g)(1); Health Professional Shortage Area 42 CFR, Chapter 1, Part 5, ß215 of the Public Health Service Act, 58 Stat. 690, 42 U.S.C. 216, ß 332 of the Public Health Service Act, 90 Stat. 2270-2272, 42 U.S.C. 245e.

Program Description

The mission of Public Health Services is to protect and improve the health and well-being of Louisiana's residents, visitors, and native-born Louisianans who no longer reside in the state, by

- § Improving the Health of Louisiana's residents by promoting healthy lifestyles, providing preventive health education and data necessary to enable individuals and communities to assume responsibility for their own health, and assuring the availability of essential preventive health services.
- § Operating a centralized vital event registry that provides efficient access to, collection and archival of vital event records.
- § Collecting, analyzing, and reporting statistics needed to determine and improve population health status.
- § Protecting the health of Louisiana citizens and its visitors by providing the educational resources, regulatory oversight and preventive measures necessary to reduce the incidence of food/water-borne illnesses and other preventable diseases/conditions most commonly associated with unsafe food, water, milk, seafood, molluscan shellfish, drugs, cosmetics, onsite wastewater, biomedical waste, public institutions, commercial body art, commercial tanning, and beach recreational waters.



- § Preventing illness and death that can occur from waterborne disease outbreaks or exposure to contaminated drinking water or raw sewage.
- § Improving the health of Louisiana citizens by assisting public water systems with delivering safe and affordable drinking water.

The goals of Public Health Services are to:

- § Promote health through education and programs that utilize evidence-based public health and disease prevention strategies.
- § Study the distribution and determinants of morbidity and mortality in Louisiana in order to monitor the health of communities, guide program and policy development, and provide leadership for the prevention and control of disease, injury, and disability in the state.
- § Assure access to essential preventive health services for all Louisiana citizens.
- § Coordinate, empower and mobilize community partnerships to identify and solve health problems.
- § Facilitate the timely filing of high quality vital record documents prepared by hospitals, physicians, coroners, funeral directors, Clerks of the Court, and others by providing responsive public services, analyzing and disseminating health information in support of health and social planning efforts, and maintaining and operating the Louisiana Putative Father Registry and the Louisiana Acknowledgment Repository.
- § Improve the health status of Louisiana residents in rural and underserved areas by building the capacity of community health systems in order to provide integrated, efficient and effective health care services.
- § Reduce the incidence of food/water-borne illnesses through improved inspection.
- § Promote health through education that emphasizes the importance of food/water safety.
- § Enforce regulations which protect the food/water supply and investigate food/water borne illness outbreaks.
- § Ensure that all food products produced and/or marketed in Louisiana are adequately, truthfully and informatively labeled.
- § Provide regulatory oversight over commercial body art and tanning facilities to confirm that all tattoos, body piercings, and permanent cosmetic procedures are performed safely and effectively throughout the state; and that tanning facilities adhere to proper sanitary procedures and standards for equipment and practices to protect the public consumer in Louisiana.
- § Provide comprehensive drinking water protection for the citizens and visitors of Louisiana.
- § Provide low-interest loans and technical assistance to community drinking water systems in Louisiana, enabling them to comply with state and federal drinking water regulations.
- § Certify all water and wastewater operators to operate public systems by giving examinations and issuing certifications of competency.
- § Regulate sewage treatment, sanitary sewage disposal, and other water and wastewater matters.



Public Health Services Budget Summary

		Prior Year Actuals Y 2016-2017	F	Enacted Y 2017-2018	xisting Oper Budget s of 12/01/17	Continuation FY 2018-2019	ecommended Y 2018-2019	Total commended ver/(Under) EOB
Means of Financing:								
State General Fund (Direct)	\$	42,172,926	\$	47,423,885	\$ 47,461,019	\$ 55,858,678	\$ 50,967,685	\$ 3,506,666
State General Fund by:								
Total Interagency Transfers		5,022,218		7,955,554	7,955,554	5,032,183	5,032,183	(2,923,371)
Fees and Self-generated Revenues		36,009,471		47,923,983	47,923,983	48,303,276	48,303,276	379,293
Statutory Dedications		7,040,956		8,764,759	8,764,759	9,427,749	11,346,982	2,582,223
Interim Emergency Board		0		0	0	0	0	0
Federal Funds		212,744,891		277,052,526	277,144,352	278,022,719	278,022,719	878,367
Total Means of Financing	\$	302,990,462	\$	389,120,707	\$ 389,249,667	\$ 396,644,605	\$ 393,672,845	\$ 4,423,178
Expenditures & Request:								
Personal Services	\$	102,581,838	\$	113,564,054	\$ 113,601,188	\$ 121,245,625	\$ 116,373,440	\$ 2,772,252
Total Operating Expenses		24,537,076		28,984,355	31,607,090	31,689,673	31,703,973	96,883
Total Professional Services		26,738,077		36,338,923	36,338,923	36,057,673	37,758,906	1,419,983
Total Other Charges		148,347,351		209,457,187	206,926,278	206,871,006	207,074,706	148,428
Total Acq & Major Repairs		786,120		776,188	776,188	780,628	761,820	(14,368)
Total Unallotted		0		0	0	0	0	0
Total Expenditures & Request	\$	302,990,462	\$	389,120,707	\$ 389,249,667	\$ 396,644,605	\$ 393,672,845	\$ 4,423,178
Authorized Full-Time Equiva	lents							
Classified		1,190		1,188	1,188	1,200	1,200	12
Unclassified		14		14	14	14	14	0
Total FTEs		1,204		1,202	1,202	1,214	1,214	12

Source of Funding

This program is funded with State General Fund (Direct), 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 patient fees or third party reimbursements received for medical services rendered; local funds generated by parish mileage or contributions for parish health units; and fees for testing charged in the Emergency Medical Services activity and fees for statutorily required permitting and certifications. 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; the Maternal and Child Health Grant; the Preventive Health Grant; the Sexually Transmitted Disease Control Grant; Engineering Services Grants; CDC Grant for Infectious Epidemiology; Primary Care and Health Promotions Grants; Emergency Medical Services for Children Grant; Food & Drug Administration Grants; and a Vital Statistics Cooperative Grant. Statutory Dedications are from the Louisiana Fund (R.S.39:98.6.(8)), the Oyster Sanitation Fund (R.S. 40:5.10), the Vital Records Conversion Fund (R.S. 40:39, 1 (B)(2)), and the Emergency Medical Technician Fund (R.S.40:1236.5), see table below for a listing of expenditures out of each Statutory Dedication Fund.)

Public Health Services Statutory Dedications

Fund	A	rior Year Actuals 2016-2017	F	Enacted Y 2017-2018	existing Oper Budget s of 12/01/17	Continuation FY 2018-2019	ecommended Y 2018-2019	Total commended ver/(Under) EOB
Vital Records Conversion Fund	\$	155,404	\$	155,404	\$ 155,404	\$ 155,404	\$ 155,404	\$ 0
Telecommunications for the Deaf Fund		0		1,723,803	1,723,803	2,386,793	4,306,026	2,582,223
Louisiana Fund		6,821,260		6,821,260	6,821,260	6,821,260	6,821,260	0
Emergency Medical Technician Fund		9,000		9,000	9,000	9,000	9,000	0
Oyster Sanitation Fund		55,292		55,292	55,292	55,292	55,292	0

Major Changes from Existing Operating Budget

•	General Fund	T	otal Amount	Table of Organization	Description
\$	37,134	\$	128,960	0	Mid-Year Adjustments (BA-7s):
\$	47,461,019	\$	389,249,667	1,202	Existing Oper Budget as of 12/01/17
					Statewide Major Financial Changes:
	841,897		841,897	0	2% General Increase Annualization Classified
	43,323		43,323	0	2% General Increase Annualization Unclassified
	595,464		595,464	0	Structural Annualization Classified
	2,853,890		2,853,890	0	Market Rate Classified
	2,194,964		(90,429)	0	Related Benefits Base Adjustment
	1,189		1,189	0	Retirement Rate Adjustment
	2,865,776		3,399,103	0	Salary Base Adjustment
	(4,872,185)		(4,872,185)	0	Attrition Adjustment
	0		761,820	0	Acquisitions & Major Repairs
	(70,179)		(776,188)	0	Non-Recurring Acquisitions & Major Repairs
	0		(91,826)	0	Non-recurring Carryforwards
	(136,316)		(136,316)	0	Risk Management
	(187,577)		(187,577)	0	Rent in State-Owned Buildings
	(976)		(976)	0	Maintenance in State-Owned Buildings
	1,244		1,244	0	Capitol Park Security



Major Changes from Existing Operating Budget (Continued)

General Fund	7	otal Amount	Table of Organization	Description
				<u> </u>
(20,854)		(20,854)	0	Capitol Police UPS Fees
(4,203) 1,364		(4,203)	0	Civil Service Fees
431		1,364	0	
		431	0	State Treasury Fees
141,164		673,771	0	Office of Technology Services (OTS)
1,531		1,531	0	Administrative Law Judges
(80,291)		(80,291)	0	Office of State Procurement
				Non-Statewide Major Financial Changes:
0		229,738	0	Provide Severe Combined Immunodeficiency (SCID) screening, for newborn babies on Medicaid, as part of the Newborn Screening panel. SCID is a primary immune deficiency that if not detected early may be fatal in the first year of life, but with early detection and treatment could save the child's life. In FY19 OPH intends to collect the Medicaid funding via Fees and Self-generated revenue from the MCO's rather than via IAT.
(662,990)		1,919,233	0	Increase Telecommunication for the Deaf fund due to implementation of Act 273 of the 2017 Regular Legislative Session which imposed the telecommunication tax to be levied on wireless lines. These additional funds will replace State General Fund which was added in the FY18 budget to backfill projected shortfall of the Statutory Dedication, and provide for additional services under the charge of the Louisiana Commission for the Deaf.
0		0	12	Convert 12 job appointments scheduled to end in FY19 to authorized classified positions. These positions are necessary to support continued activities in Parish Health Units, the Vital Records program and LDH's Emergency Operations Center.
0		(639,975)	0	Non-recur funding added as Interagency Transfers for Severe Combined Immunodeficiency (SCID) screening in the FY18 budget. This funding was cut from Medicaid's budget in FY18.
\$ 50,967,685	\$	393,672,845	1,214	Recommended FY 2018-2019
\$ 0	\$	0	0	Less Supplementary Recommendation
\$ 50,967,685	\$	393,672,845	1,214	Base Executive Budget FY 2018-2019
\$ 50,967,685	\$	393,672,845	1.214	Grand Total Recommended
50,507,003	φ	373,072,043	1,214	Orang Islan Recommended

Professional Services

Amount	Description						
	Professional Services:						
\$6,934,214	Management and Consulting contracts for WIC strategic planning in the Vendor Integrity Section; coordination activities to support statewide HIV/AIDS prevention, surveillance, Ryan White Care services, and contract staff support to the Office of Public Health Center for Population Health and Informatics; provide healthcare associated infection related training to healthcare providers, physicians, and pharmacists to support the Office of Public Health Infectious Disease Epidemiology Program.						
\$121,920	Engineering & Architectural services for Operations and Support Services and Engineering Services.						



Professional Services (Continued)

Amount	Description
\$1,831,285	Medical & Dental Services for (but not limited to): Sickle Cell patient support services; clinical genetic evaluations and counseling; Cystic Fibrosis confirmatory consultation and lab testing; specialized physician services for children and youth with special healthcare needs in healthcare shortage areas of the state; tuberculosis treatment, consultation, x-ray services, and site visits throughout the state; Severe Combined Immunodeficiency (SCID) testing of newborns who are Medicaid eligible.
\$28,831,487	Other professional services for (but not limited to): Administration services to the Commodity Supplemental Food Program (CSFP); Student Loan Repayment Program that provides medical professionals in health professional shortage areas of the state; toxic disease investigations and surveys, interpretation of data, and review of health assessments; various healthcare related services to the Office of Public Health Bureau of Family Health Program such as (but not limited to); mental health support and evaluation, program support and expansion services to the Nurse Family Partnership Program, and improvement of maternal, infant, and child mortality and morbidity rates by providing regional leadership, surveillance, health education, and preventive health services statewide; reproductive health integrated with primary care services for patients of reproductive age; City Readiness Initiative planning for mass dispensing in Special Needs Shelters; provide sign language and telecommunication interpretation services for the hearing impaired, and various environmental and community outreach strategic planning services.
\$40,000	Legal services for public water system loans.
\$37,758,906	TOTAL PROFESSIONAL SERVICES

Other Charges

Amount	Description						
	Other Charges:						
\$40,745,789	Contract for Pharmacy Benefit Management (PBM) services and medications for the HIV/AIDS Drug Assistance Program (ADAP); provide health and dental insurance premiums and co-payments to ensure continuation of private insurance coverage.						
\$250,000	Contract to provide early detection cancer screenings.						
\$140,000	Provision of foreign language interpretation through language line services.						
\$156,018	EMS Examination and Oversight Services.						
\$11,777,997	Maternal & Child Health services for primary care, counseling, referral and social services for pregnant adolescents and adults; contracts for Nurse Family Partnership Nurses statewide to serve at risk populations.						
\$86,227,314	WIC services for issuance of WIC food vouchers statewide.						
\$12,959,319	Contracts with various providers statewide to provide WIC services to eligible clients, nutrition education; operational costs associated with the WIC settlement initiative; PHAME/MIS technology enhancements and WIC EBT/MIS initiatives; WIC banking system services; and transportation services for eligible WIC participants.						
\$599,036	Contracts for specialized Sickle Cell care and Cystic Fibrosis; lead poisoning prevention outreach; genetic laboratory testing; and family relocation services during home remediation of environmental hazards (mold, lead-based paint, etc.).						
\$1,474,064	Children's Special Health Services statewide for provision of hearing, vision, dental and orthodontist services; Physician Services for high risk pediatric patients statewide; hospitalization medical services; database maintenance and support for the Louisiana Electronic Event Registration (LEERS) system; EDHI database and ZIKA related birth defects monitoring surveillance; and Children's Special Health Services Program Director.						
\$15,000	Vouchers for medical institutions where sterilization procedures are performed for the Office of Public Health Reproductive Health Program.						
\$56,400	Tuberculosis Medical Services.						
\$464,650	Contract to provide maintenance for the Louisiana Electronic Events System (LEERS) for the Vital Records Registry.						
\$362,495	Upgrade to the StarLIMS laboratory information system; laboratory service fees for the referral of Tuberculosis cultures to the Texas State TB Reference Lab.						
\$500,000	Contract for individual parishes to establish mosquito vector control.						
\$49,500	contract to provide Human Papillomavirus (HPV) immunization initiatives.						



Other Charges (Continued)

Amount	Description
\$115,000	Contract to provide the implementation of the StarLIMS system for chemical and microbiological water sample management; the Louisiana Safe Drinking Water Information System (SDWIS), and the Environmental Protection Agency (EPA) compliance monitoring portal.
\$18,379,558	HIV/AIDS education, outreach, and prevention services.
\$568,443	Contracts and supplies related to ZIKA outbreak and response activities throughout the state.
\$1,088,930	Contract to provide annual licensing and support for the Electronic Health Records (HER) system in the parish health units, as well as costs for revenue collection.
\$216,794	Contract to provide training for the Bureau of Primary Care on coding, revenue cycle management, and cost reporting.
\$771,741	Contracts to assist rural hospitals throughout the state as well as training to rural facility staff; provide quality improvement and feasibility assessments; provide direct billing, coding, and technical support; provide speakers and venues for Critical Access Hospitals; and provide health conference, recruitment, and retention training.
\$500,000	Contract to provide water sample testing per Act 605, as well as monthly technical services to Louisiana water systems.
\$20,000	Contracts for training to small water systems, wastewater systems, and their operators to comply with the Safe Drinking Water regulations; continued regional amoeba testing of water systems statewide.
\$30,000	Amoeba testing supplies and continued regional amoeba testing of statewide water systems.
\$155,531	Molluscan Shellfish program technical support; Oyster Water analysis, beach monitoring, GIS mapping and field surveys, Beach Warning Sign maintenance at Fontainebleau State Park, Grand Isle State Park and Grand Isle Beach Monitoring Program.
\$140,000	Contracts to provide training to public water system decision makers; provide technical assistance and guidance to water system operators; provide semi-annual billing to collect principal and interest for loans made from the Drinking Water Revolving Loan Program; and marketing services as mandated by the Environmental Protection Agency.
\$4,223,714	Contracts with various providers to support program services and grant deliverable to all programs statewide within the Office of Public Health.
\$181,987,293	SUB-TOTAL OTHER CHARGES
	Interagency Transfers:
\$440,532	Civil Service Fees
\$7,297	Treasurer's Office
\$41,961	Comprehensive Public Training Program (DOA)
\$64,736	Uniform Payroll System (UPS)
\$559,341	Office of State Procurement
\$354,676	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.
\$94,140	Dept. of Public Safety - Capitol Area Police
\$154,396	Capitol Park Security
\$1,097,928	Office of Risk Management Premium (ORM)
\$7,640,123	Office of State Grounds
\$74,308	Office of State Grounds for Shreveport (Region 7)
\$2,149,280	Office of Telecommunications Management (OTM)
\$4,499,491	Office of Technology Services (OTS)
\$1,288,756	Capital Area Human Services Authority for Nurse Family Partnership Services
\$867,571	Jefferson Parish Human Services Authority for Nurse Family Partnership Services
\$931,545	Louisiana Health Care Quality Forum
\$9,000	Department of Culture Recreation and Tourism- Beach monitoring sign maintenance
\$189,035	Department of Agriculture and Forestry



Other Charges (Continued)

Amount	Description
\$51,060	Medical Vendor Administration
\$76,500	Technology Engineers for ongoing maintenance for the LEEDS Infectious Disease Epi surveillance system
\$464,650	DB Sysgraph, Inc. for ongoing maintenance for LEERS
\$41,500	Office of Behavioral Health for Nurse Family Partnership
\$100,000	DOA- LPAA
\$1,531	Department of Administrative Law
\$118,081	Telecommunications for the Deaf
\$3,769,975	Services to be provided for OPH programs
\$25,087,413	SUB-TOTAL INTERAGENCY TRANSFERS

Acquisitions and Major Repairs

Amount	Description
\$761,820	Replacement and purchase of various IT and NON IT equipment used by the Office of Public Health statewide.
\$761.820	TOTAL ACOUISITIONS AND MAJOR REPAIRS

Performance Information

1. (SUPPORTING)Public Health Services, through its vital records and statistics activity, will process Louisiana vital event records and requests for certified copies of document services annually through June 30, 2022.

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): 2014 Department of Health and Hospitals Business Plan

Explanatory Note: 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.



Performance Indicators

			Performance Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
S Percentage of walk-in customers served within 30 minutes (LAPAS CODE - 2547)	85%	89%	88%	88%	85%	85%
S Percentage of emergency document service requests filled within 24 hours (LAPAS CODE - 2549)	98%	98%	98%	98%	98%	98%
S Percent of mail requests filled within two weeks (LAPAS CODE - 2548)	90%	91%	90%	90%	90%	90%

Public Health Services General Performance Information

	Performance Indicator Values				
Performance Indicator Name	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016	Prior Year Actual FY 2016-2017
Birth record intake (LAPAS CODE - 11227)	62,630	65,499	65,287	66,713	62,882
Death record intake (LAPAS CODE - 11229)	48,374	44,043	44,159	42,008	44,862
Marriage record intake (LAPAS CODE - 11231)	29,039	33,163	32,387	35,302	35,491
Divorce record intake (LAPAS CODE - 11232)	15,825	15,332	16,088	13,921	13,964
Abortion record intake (LAPAS CODE - 11234)	9,710	11,450	9,364	10,733	10,165
Fetal death record intake (LAPAS CODE - 11235)	405	498	435	359	470
Total number of birth, death, fetal death, marriage, divorce, abortion and still birth certificates accepted (LAPAS CODE - 11236)	165,578	169,487	167,720	169,036	167,834
Total number of birth, death, fetal death, marriage, divorce, abortion and still birth certificates sold (LAPAS CODE - 20430)	532,981	495,879	527,190	525,392	534,976

2. (SUPPORTING)Public Health Services, through its emergency medical services activity, will 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, 2022.

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): 2014 Department of Health and Hospitals Business Plan

Performance Indicators

			Performance Inc	dicator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
S Percent increase of EMS workforce in Louisiana (LAPAS CODE - 24154)	0.5%	1.0%	1.0%	1.0%	1.0%	1.0%
S Number of EMS personnel newly certified (LAPAS CODE - 24155)	3,500	3,875	3,500	3,500	3,500	3,500
The number of EMS personn	el newly certified de	monstrates the actua	al number of licenses	s issued.		
S Number of EMS personnel re-certified (LAPAS CODE - 24156)	5,500	7,490	5,500	5,500	5,500	5,500
S Total number of EMS Workforce (LAPAS CODE - 24157)	20,000	23,921	20,000	20,000	20,000	20,000

3. (SUPPORTING)Public Health Services, through its community preparedness activity, will build healthy, resilient communities and enhance Louisianaís 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, 2022.

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): 2014 Department of Health and Hospitals Business Plan.

Performance Indicators

				Performance Indicator Values			
L e v e l	Performance Indicator Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
S	Obtain a 43% Metropolitan Composite Mass Dispensing and Distribution Score (LAPAS CODE - 24158)	100%	100%	100%	100%	100%	100%



4. (KEY) Public Health Services, through its Bureau of Family Health will promote optimal health for all Louisiana women, children, teens and families each year through June 30, 2022.

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 2. 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): 2014 Department of Health and Hospitals Business Plan

Explanatory Note: The LDH OPH Maternal and Child Health program is now called the Bureau of Family Health. This new bureau covers activities related to mother's and infant and family planning.

Performance Indicators

			Performance Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Number of Maternal, Infant & Early Childhood home visits, including Nurse- Family Partnership (NFP) and Parents as Teachers (PAT) (LAPAS CODE - 20139)	38,000	41,143	38,000	38,000	46,897	46,897
K Number of students with access to School Based Health Center services (LAPAS CODE - 24162)	62,500	46,458	46,897	62,500	46,897	46,897

ASHP has consistently reported the number of students with access to SBHCs. However, a review of the numbers has indicated some discrepency in the process of reporting. In addition, the number of students who have access does not indicate the number of students who actually utilized the services. Some Sponsors have used the SBHC as a method to excuse students from school. Some Sponsors also do not recruit students to register for SBHCs because this will increase the number of students that need to be serviced. This number does not assist in budgeting. Prior years defined access as all students who were enrolled in schools that housed school-base health centers. The total for FY16 defines access as the number of students who have a signed consent form to receive services in the SBHC.



Performance Indicators (Continued)

			Performance Ind	icator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
S Percentage of patients receiving a preventive health visit at least once in the last measurement year. (LAPAS CODE - 26132)	Not Applicable	17%	10%	10%	10%	10%
Last measurement year is on This is a new indicator for	•		ard provided is an est	imate.		
K Percentage of students who receive an annual risk assessment (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	55%	55%	55%

This is a new indicator for FY18-19. The existing performance standard provided is an estimate. The National School-Based Health Alliance is encouraging states to report the number of students who receive an annual risk assessment, beginning FY 18. In anticipation of this requirement, during FY 17, Adolescent School Health Program will report the percentage of students who receive an annual risk assessment, to establish a baseline. School-Based Health Centers will report the percentage of unduplicated School-Based Health Center clients with at least one age-appropriate annual risk assessment during the school year.

Public Health Services General Performance Information

		Perfo	rmance Indicator V	/alues	
Performance Indicator Name	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016	Prior Year Actual FY 2016-2017
Percent of infants born to mothers beginning prenatal care in the first trimester (LAPAS CODE - 13749)	74.00%	71.00%	69.00%	70.00%	70.30%
Percentage of children with special health care needs receiving care in a Medical Home (LAPAS CODE - 24164)	40%	40%	42%	42%	42%
Number of adolescent School-Based Health Centers (LAPAS CODE - 2368)	64	62	62	63	63
Average cost per visit to adolescent School- Based Health Centers (LAPAS CODE - 10053)	\$ 58.00	\$ 59.00	\$ 67.00	\$ 67.00	\$ 55.00



Public Health Services General Performance Information (Continued)

	Performance Indicator Values						
Performance Indicator Name	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016	Prior Year Actual FY 2016-2017		
Number of continuous quality improvement visits to school-based health centers (LAPAS CODE - 25628)	Not Applicable	Not Applicable	9	11	11		
Number of students who received a comprehensive well visit at the SBHC (LAPAS CODE - 26133)	Not Available	Not Available	9,321	8,176	8,450		
The National School-Based Health Alliance is encouraging states to report the number of students who receive a comprehensive well visit, beginning FY 18. In addition, the ASHP is reporting the number of adolescent 12 - 17 year old well visits as part of National Performance Measure 10 for the Title V Maternal Child Block Grant. The Adolescent Health Initiative originally indicated that SBHC were to be located on Middle and High School campuses. Over the years, SBHCs have been housed on elementary and Early Childhood campuses. Given the inconsistent locations							

of SBHCs, an annual count of comprehensive well visits will show greater impact.

Number of patient visits to Adolescent School-					
Based Health Centers (LAPAS CODE - 13744)	130,327	114,359	105,014	114,184	134,541

5. (KEY) Public Health Services, through its Immunization Program activity, will control or eliminate preventable diseases by providing vaccine to susceptible persons each year through June 30, 2022.

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 to and provision of primary and preventive health care services to women, infants, children.

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): 2014 Department of Health and Hospitals Business Plan



			Performance Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
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)	88%	88%	88%	88%	88%	88%

^{1.} DTaP = Diphtheria, Tetanus, Pertussis; VAR=Varicella; HBV=Hepatitis B, MMR = Measles, Mumps, Rubella.

6. (KEY) Public Health Services, through its Nutrition Services activity, will provide supplemental foods 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, 2022.

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): 2014 Department of Health and Hospitals Business Plan

Explanatory Note: The Women Infants and Children and Commodity Supplemental Food Program are operated through the LDH OPH Nutrition Services unit.



^{2.} The National Immunization Survey (NIS) is a CDC survey conducted by CDC in assessing immunization rates. This tool is used to assess statewide immunization rates. The Office of Public Health collects and analyzes immunization data from the state Immunization Information System, Louisiana Immunization Network for Kids Statewide (LINKS).

				Performance Ind	icator Values		
L e v e Pe	erformance Indicator Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
part	nber of monthly WIC icipants (LAPAS DE - 2384)	134,000	121,164	128,000	128,000	125,000	125,000
Con Foo	nber of monthly nmodity Supplemental d Program participants PAS CODE - 24168)	63,165	55,727	60,172	60,172	60,172	60,172
The Commodity Supplemental Food Program (CSFP) works to improve the health of low-income elderly persons at least 60 years of age by supplementing their diets with nutritious USDA Foods. Women, infants, and children who were certified and receiving CSFP benefits as of February 6, 2014 can continue to receive assistance until they are no longer eligible under the program rules in effect on February 6, 2014. Due to this rule change, the program has experienced a decline in participation among Women, infants, and children. Nutrition Services has increased its outreach efforts to enhance its caseload of eligible Seniors.							
	centage of postpartum nen enrolled in WIC						

who breastfeed (LAPAS CODE - 25608)

23% 22% 25% 25% 25% 25%

Public Health Services General Performance Information

	Performance Indicator Values							
Performance Indicator Name	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016	Prior Year Actual FY 2016-2017			
Percentage of WIC eligible clients served (LAPAS CODE - 10857)	53.00%	54.00%	63.00%	61.00%	56.00%			
Number of WIC vendor fraud investigations (LAPAS CODE - 10858)	34.00	45.00	21.00	21.00	0			

Vendor management staff shortages has not allowed investigations during the year. No investigations were conducted as a result of suspicion or reported fraudulent activity.

7. (KEY) Public Health Services, through its Communicable Diseases Control activities, will 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, 2022.

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): 2014 Department of Health and Hospitals Business Plan

Explanatory Note: Not Applicable

Performance Indicators

			Performance Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Percentage of TB infected contacts who complete treatment (LAPAS CODE - 24170)	72%	72%	72%	72%	72%	72%
S Percentage of culture confirmed cases completing treatment within 12 months (LAPAS CODE - 25609)	90%	87%	90%	90%	90%	90%
S Percentage of pulmonary culture confirmed cases converting sputum culture within two months (LAPAS CODE - 25610)	60%	55%	60%	60%	60%	60%
S Increase the proportion of newly diagnosed HIV patients linked to HIV- related clinic medical care within 3 months of diagnosis (LAPAS CODE - 25039)	87%	84%	87%	87%	87%	87%
S Percentage of persons living with HIV whose most recent viral load in the past 12 months was <=200 copies/mL (LAPAS CODE - 25611)	56%	60%	60%	60%	60%	60%
S Percentage of primary and secondary syphilis cases treated within 14 days of specimen collection (LAPAS CODE - 25612)	80%	84%	83%	83%	83%	83%



Public Health Services General Performance Information

	Performance Indicator Values						
Performance Indicator Name	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016	Prior Year Actual FY 2016-2017		
Number of HIV tests conducted at publicly-funded sites							
(LAPAS CODE - 2325)	94,860	87,141	101,542	104,336	108,016		
Number of primary and secondary syphilis cases (LAPAS CODE - 25613)	360	492	548	729	754		
Number of people living with HIV in Louisiana (LAPAS CODE - 25614)	18,710	19,640	20,274	19,365	21,546		
Number of new HIV diagnoses in Louisiana (LAPAS CODE - 25615)	1,200	1,469	1,312	1,195	1,236		

8. (SUPPORTING)Public Health Services, through the Infectious Disease Epidemiology (IDEpi) activity, will conduct surveillance of infectious diseases to decrease the burden of infectious diseases (besides TB, STD and HIV), carry out outbreak investigations and maintain public health preparedness against infectious diseases each year through June 30, 2022.

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): 2014 Department of Health and Hospitals Business Plan



			Performance Ind	icator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
S Completed case classifications within 10 working days of date of report (LAPAS CODE - 25616)	85%	84%	96%	96%	85%	85%
S Issue recommendations within five working days on selected conditions. (LAPAS CODE - 25617)	80%	89%	96%	96%	89%	89%
S Conduct follow up on recommendations on all outbreak investigations within 15 working days (LAPAS CODE - 25618)	85%	83%	97%	97%	87%	87%

9. (KEY) Personal Health Servcies, through its Laboratory Servcies activity, will 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, 2022.

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 (2014 Business Plan)



			Performance Ind	icator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Number of lab tests/ specimens tested (LAPAS CODE - 17387)	200,000	251,545	230,000	230,000	230,000	230,000
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)	95%	100%	95%	95%	95%	95%

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 to material being tested for is and therefore this varies from test to test.

10. (SUPPORTING)Public Health Services, through its Environmental Epidemiology and Toxicology activity (SEET), will 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 public understanding of the health effects of chemicals in the environment each year through June 30, 2022.

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): 2014 Department of Health and Hospitals Business Plan



				Performance Inc	licator Values		
e v e l	Performance Indicator Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
S	Number of health consults and technical assists (LAPAS CODE - 24198)	1,000	402	750	750	750	750

The number of health consults and technical assists are dependent on the number of requests that are received by the Section of Environmental Epidemiology and Toxicology. Several federally funded programs that contributed to this number were not renewed.

S Number of emergency						
reports screened from the						
Louisiana State Police and						
National Response Center						
(LAPAS CODE - 24199)	9,000	9,538	9,000	9,000	9,000	9,000

Public Health Services General Performance Information

	Performance Indicator Values				
Performance Indicator Name	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016	Prior Year Actual FY 2016-2017
Number of Indoor Air Quality phone consults (LAPAS CODE - 24196)	722	554	706	686	573

11. (KEY)Public Health Services, through its Bureau of Primary Care and Rural Health's Health Systems Development Unit activity, will provide support to communities, federally qualified health centers, physician practices, rural health clinics, small rural hospitals, and school-based health services in order to expand and sustain access to primary and preventive health services in rural and underserved communities of Louisiana each year through June 30, 2022.

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): 2014 Department of Health and Hospitals Business Plan

Explanatory Note: The Bureau of Primary Care and Rural Health also includes information for the BPCRH Adolescent School Health Program and School-based Health Centers. The operational plan spreadsheet for the latter has been merged with the BPCRH operational plan. The objective was modified to include school-based health services.



				Performance Inc	dicator Values		
L e v e l	Performance Indicator Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
	Number of providers that have received education through conferences or BPCRH trainings (LAPAS CODE - 25619)	500	919	500	500	500	500

The number of providers that have received education through conferences or Bureau of Primary Care and Rural Health trainings in 2015 - 2016 includes a count of new trainings offered to prepare the workforce for a new version of the International Statistical Classification of Diseases and Related Health Problems (ICD); from ICD-9 to ICD-10. ICD is the foundation for the identification of health trends and statistics globally, and the international standard for reporting diseases and health conditions. It is the diagnostic classification standard for all clinical and research purposes. ICD defines the universe of diseases, disorders, injuries and other related health conditions, listed in a comprehensive, hierarchical fashion that allows for: 1) easy storage, retrieval and analysis of health information for evidenced-based decision-making; 2) sharing and comparing health information between hospitals, regions, settings and countries; and 3) - data comparisons in the same location across different time periods. The level at continuation budget level is expected to decrease as the workforce becomes trained and is able to implement the new ICD-10 version. October 1, 2015, the new ICD-10 was implemented.

		•					
S	Percentage of State Loan Repayment Program funds awarded to new and existing health care providers recruited and retained to work in Louisiana Health professional shortage areas (LAPAS CODE - 25620)	100%	100%	100%	100%	100%	100%
S	Percentage of health professional shortage areas analyzed and submitted to the Health Resources and Services Administration by the federal deadline. (LAPAS CODE - 25621)	100%	100%	100%	100%	100%	100%
K	Number of National Health Services Corp providers practicing in Louisiana (LAPAS CODE - 12219)	114	108	110	110	110	110
K	Number of healthcare providers receiving practice management technical assistance regarding revenue sustainability. (LAPAS CODE - 24271)	120	120	120	120	120	120



Public Health Services General Performance Information

	Performance Indicator Values				
Performance Indicator Name	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016	Prior Year Actual FY 2016-2017
Number of critical access hospitals (CAHs) reporting HCAHPS data (LAPAS CODE - 25860)	9	9	27	13	17
Number of parishes and/ or areas designated as Health Professional Shortage Areas by the Federal government (LAPAS CODE - 12218)	444	446	342	63	9
Percentage of underserved communities receiving technical assistance in developing rural health clinics (LAPAS CODE - 26134)	Not Available	Not Available	Not Available	20%	20%
This was a new performance indicator for FY 2	2017-18 and there is	no prior year inform	ation available.		
Percentage of underserved communities receiving technical assistance in developing federally qualified health centers (LAPAS CODE - 26135)	Not Available	Not Available	Not Available	20%	20%
This was a new performance indicator for FY 2	2017-18 and there is a	no prior year inform	ation available.		

12. (SUPPORTING) Public Health Services, through its Health Promotion activity, will improve the health of Louisiana by preventing chronic diseases and their risk factors through promoting healthy behaviors, utilizing evidence based interventions and leveraging resources through collaborative private, public partnerships to maximize health outcomes among our citizens each year through June 30, 2022.

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): 2014 Department of Health and Hospitals Business Plan

Explanatory Note: This information was previously tied to the Bureau of Primary Care and Rural Health Chronic Disease Prevention and Control Unit. The former Chronic Disease unit has been reorganized and is under the Office of the Assistant Secretary. The unit is now called the Health Promotion unit.



	Performance Indicator Values						
e v e l	Performance Indicator Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
S	Number of registered callers to the Louisiana Tobacco Quitline (LAPAS CODE - 25624)	2,500	2,232	2,500	2,500	2,500	2,500

¹⁾ Monthly Caller is defined as caller who calls the Quitline but chooses not to register for services. A monthly Registered Caller is defined as a caller who calls the Quitline and registers for cessation services. The program prefers to evaluate the number of monthly Registered Callers vs Monthly Callers.

Public Health Services General Performance Information

	Performance Indicator Values					
Performance Indicator Name	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016	Prior Year Actual FY 2016-2017	
Percentage of worksites implementing worksite wellness programs (LAPAS CODE - 25626)	Not Available	29%	29%	35%	35%	
1. This was a new performance indicator in FY	2014-15 and no price	or year data is availa	ble.			
Percentage of school districts reporting implementation of comprehensive school wellness policies (physical activity, nutrition, tobacco-free campus) (LAPAS CODE - 25625)	75%	86%	Not Available	5%	69%	
Data is incomplete for this fiscal year.						

13. (KEY)Public Health Services, through its sanitarian services activity, will protect public health through regulatory oversight and preventative measures which include education of the public, plans review, inspection, sampling, and enforcement activities each year through June 30, 2022.

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): 2014 Department of Health and Hospitals Business Plan

Explanatory Note: Not Applicable

Performance Indicators

			Performance Inc	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Yearly mortality count attributed to unsafe water, food and sewage (LAPAS CODE - 24201)	0	0	0	0	0	0
K Percentage of permitted facilities in compliance quarterly due to inspections (LAPAS CODE - 24202)	90%	91%	90%	90%	90%	90%
S Percentage of required samples in compliance (LAPAS CODE - 24207)	95%	95%	95%	95%	95%	95%
S Percentage of sewerage systems properly installed (LAPAS CODE - 24204)	100%	100%	100%	100%	100%	100%

Public Health Services General Performance Information

		Perfo	rmance Indicator V	alues	
Performance Indicator Name	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016	Prior Year Actual FY 2016-2017
Number of existing sewage systems inspections (LAPAS CODE - 24209)	15,947	11,285	12,062	10,421	8,028
Number of food, water, sewage-borne illnesses reported (LAPAS CODE - 24211)	2	12	11	7	0
Percentage of establishments/facilities in compliance (LAPAS CODE - 11886)	90%	94%	94%	95%	90%
Number of inspections of permitted establishments/facilities (LAPAS CODE - 2485)	100,726	113,556	111,860	115,292	44,426
Food related complaints received from the public (LAPAS CODE - 11215)	1,527	620	620	253	653
Number of sewage system applications taken (LAPAS CODE - 24210)	10,887	10,173	9,973	8,965	7,566
Number of plans reviewed (LAPAS CODE - 24205)	12,725	12,408	12,826	11,689	6,599



Public Health Services General Performance Information (Continued)

	Performance Indicator Values					
Performance Indicator Name	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016	Prior Year Actual FY 2016-2017	
Number of samples taken (LAPAS CODE - 24206)	19,093	15,006	8,754	8,505	8,060	
In FY's 2012, 2013 and 2014, samples taken in	ncluded British Petrol	eum (BP) samples.	FY15 are normal sa	mple activity data.		
Number of new sewage systems properly installed (LAPAS CODE - 24208)	8,673	8,441	12,976	12,392	6,129	
In FY's 2015 and 2016, increased due flooding in Red River Valley and Florida Parishes which forced installation of new systems.						

14. (KEY)Public Health Services, through its engineering and loan activities, will provide a regulatory framework to assure that the public is not exposed to contaminated drinking water or to raw sewage by contact or inhalation, which can cause mass illness or deaths each year through June 30, 2022.

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): 2014 Department of Health and Hospitals Business Plan



	Performance Indicator Values					
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Percent of the population served by community water systems that receive drinking water that meets all applicable health-based drinking water standards. (LAPAS CODE - 2497)	90%	90%	90%	90%	90%	90%
K Percentage of community water systems that have undergone a Class 1 sanitary survey within the past 3 years as required by state and federal regulations. (LAPAS CODE - 24521)	98%	96%	98%	98%	98%	98%
S Percentage of water and sewer plans reviewed within 60 days of receipt of submittal (LAPAS CODE - 25629)	95%	98%	95%	95%	95%	95%
S Number of Louisiana public water systems provided financial and technical assistance (LAPAS CODE - 24523)	300	512	300	300	300	300

Public Health Services General Performance Information

	Performance Indicator Values				
Performance Indicator Name	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016	Prior Year Actual FY 2016-2017
Total number of CEU hours received by certified public water and community sewage operators from LDH approved training courses (LAPAS CODE - 24522)	85,774	104,806	95,669	106,274	68,019
Percentage of Surface Water Public Water Systems monitored annually for chemical compliance (LAPAS CODE - 24520)	100%	100%	95%	100%	100%



Public Health Services General Performance Information (Continued)

	Performance Indicator Values										
Performance Indicator Name	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016	Prior Year Actual FY 2016-2017						
Number of low-interest loans made (LAPAS CODE - 24524)	4	10	13	4	8						
Number of public water systems provided technical assistance (LAPAS CODE - 24525)	583	449	274	430	273						
Number of water systems provided capacity development technical assistance (LAPAS CODE - 24526)	164	209	274	380	231						
Number of public water systems in Louisiana (LAPAS CODE - 11225)	1,377	1,354	1,354	1,346	1,334						



09-330 — Office of Behavioral Health



Agency Description

The mission of the Office of Behavioral Health is to work collaboratively with partners to develop and implement a comprehensive integrated system of behavioral health and healthcare, social support, and prevention services that promote recovery and resilience for all citizens of Louisiana. OBH assures public behavioral health services are accessible, family-driven, 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 providing oversight and guidance of behavioral health services in the Medicaid Healthy Louisiana plans.
- II. To assure that all Louisiana citizens with serious behavioral health challenges have access to needed forensic, residential, and other "safety net" services 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 and provides direct care through the operation of the state's two free-standing psychiatric inpatient facilities: Central Louisiana State Hospital (CLSH) in Pineville and Eastern Louisiana Mental Health System (ELMHS) in Jackson; which in total provide 398 civil (278 ELMHS and 120 CLSH), and 363 forensic (ELMHS) hospital beds. 157 beds (ELMHS) are available for community placement. ELMHS is the only one of the state's freestanding psychiatric facilities that includes a division solely designated for the provision of inpatient psychiatric treatment to forensic clients who are deemed Not Guilty By Reason of Insanity (NGBRI) or who are ordered to receive hospital-based competency restoration services. OBH maintains agreements through public/private partnerships to provide safety net beds for the treatment of indigent clients with behavioral health disorders.

LDH maintains memorandum of understanding with Jefferson Parish Human Services Authority (09-300), Florida Parishes Human Services Authority (09-301), Capital Area Human Services District (09-302), Metropolitan Human Services District (09-304), South Central Louisiana Human Services Authority (09-309), Northeast Delta Louisiana Human Services Authority (09-310), the Acadiana Area Human Services District (09-325), Imperial Calcasieu Human Services Authority (09-375), Central Louisiana Human Services District (09-376), and Northwest Louisiana Human Services District (09-377) for behavioral health services within their respective districts. All services are integrated within a statewide system of care.



STATEMENT OF AGENCY STRATEGIES FOR DEVELOPMENT AND IMPLEMENTATION OF HUMAN RESOURCE POLICIES THAT ARE HELPFUL AND BENEFICIAL TO WOMEN AND FAMILIES

The LDH Internet site includes the following human resources policies that are helpful and beneficial to women and children:

The Family Medical Leave Act Policy (29.2), the Sexual Harassment Policy (56.2) and the Equal Employment Opportunity Policy (34.2). In addition, flexibility in work schedules assists both women and their families.

LDH Policy 34.2 Equal Employment Opportunity 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 on-merit factors. OBH follows the LDH Family and Medical Leave Act Policy (#29.2) 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.

OBH follows the Leave Policy for Classified Employees (28.4) to credit and grant leave in accordance with Civil Service Rules and provisions of the LDH leave policy. Leave is administered as uniformly and equitable as possible without regard to gender and other non-merit factors.

Time and Attendance Policy permits the use of flexible time schedules for employees as approved by the supervisor and management.

The OBH Affirmative Action Plan requires 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 on-merit factors.

For additional information, see:

Office of Behavioral Health

Office of Behavioral Health Budget Summary

			Enacted Y 2017-2018	Existing Oper Budget as of 12/01/17		Continuation FY 2018-2019		Recommended FY 2018-2019		Total Recommended Over/(Under) EOB	
Means of Financing:											
State General Fund (Direct)	\$ 104,604,667	\$	102,037,883	\$	103,136,438	\$	115,800,519	\$	110,254,984	\$	7,118,546
State General Fund by:											
Total Interagency Transfers	73,623,705		70,940,335		72,268,384		97,377,627		87,411,901		15,143,517
Fees and Self-generated											
Revenues	45,661		505,309		505,309		505,309		505,309		0
Statutory Dedications	4,868,643		6,588,445		6,588,445		6,585,704		6,585,704		(2,741)
Interim Emergency Board	0		0		0		0		0		0
Federal Funds	32,188,385		54,289,061		54,289,061		54,187,907		53,881,627		(407,434)



Office of Behavioral Health Budget Summary

	Prior Year Actuals FY 2016-2017		Enacted FY 2017-2018		Existing Oper Budget as of 12/01/17		Continuation FY 2018-2019		ecommended Y 2018-2019	Total Recommended Over/(Under) EOB	
Total Means of Financing	\$	215,331,061	\$	234,361,033	\$	236,787,637	\$	274,457,066	\$ 258,639,525	\$	21,851,888
Expenditures & Request:											
Administration and Support	\$	5,777,284	\$	6,946,074	\$	6,948,762	\$	7,510,473	\$ 7,499,900	\$	551,138
Behavioral Health Community		61,576,831		70,159,603		72,413,150		73,314,901	71,980,340		(432,810)
Hospital Based Treatment		147,975,721		157,235,356		157,405,725		193,611,124	179,139,285		21,733,560
Auxiliary Account		1,225		20,000		20,000		20,568	20,000		0
Total Expenditures & Request	\$	215,331,061	\$	234,361,033	\$	236,787,637	\$	274,457,066	\$ 258,639,525	\$	21,851,888
Authorized Full-Time Equiva	lents	:									
Classified		1,407		1,395		1,404		1,569	1,634		230
Unclassified		15		15		15		15	15		0
Total FTEs		1,422		1,410		1,419		1,584	1,649		230



330_1000 — Administration and Support

Program Authorization: R.S. 36:258(C); R.S. 28:1-726

Program Description

The Office of Behavioral Health (OBH) Administration and Support Program mission consists of results-oriented managerial, fiscal and supportive functions, including business intelligence, quality management, and evaluation and research, which are necessary to advance state behavioral health care goals, adhere to state and federal funding requirements, monitor the operations of Medicaid-related specialized behavioral health services (SBHS) and support the provision of behavioral health services for non-Medicaid adults and children not within the scope of Healthy Louisiana.

The goals of the Administration and Support Program are:

I. The Administration Program will ensure that Louisiana citizens receive appropriate public behavioral health services through fiscal and programmatic oversight and monitoring activities, including the assurance that critical functions of specialized behavioral health services administered in a Medicaid managed care environment are being performed within expected standards.

The Office of Behavioral Health Administration and Support Activities:

- Behavioral Health Financial Operations and Crisis Response Planning, budget, and fiscal support
 staff are responsible for budget preparation, monitoring, and forecasting revenue and expenditures for the
 OBH state office and, two 24/7 psychiatric hospitals, business plan development, and adhering to all
 requirements of Title 39 including strategic planning. OBH staff are responsible for development of fiscal
 impact statements in response to legislative requests, public records requests, and requests from the Legislative Auditor.
- Grant / Contract / Audit Fiscal Support As the single state-appointing agency, OBH is the recipient of all federal dollars earmarked for the behavioral health population. Although the majority of these dollars are sent via IAT to the Local Governing Entities (LGEs), OBH is still responsible for compliance, reporting and tracking expenditures at a statewide level. There are ten LGEs statewide, and they do not have like or coordinated fiscal and reporting systems. OBH assists each of the LGEs to ensure adherence to federal rules and regulations.
- Behavioral Health Fiscal Accountability and Provider Sufficiency Partners with the Medicaid fiscal teams to ensure the five managed care organizations (MCOs) maintain fiscal accountability by conducting several monitoring and audit assessment activities, including: analyzing the Annual Audit report; quarterly review of Financial Reporting packages to assess revenue vs. expenditures and cash reserves (financial solvency); monitoring timeliness of claims payments; on-site financial reviews in collaboration with MCOs and an independent company reviewing for compliance issues; meeting monthly on financial reporting and budget items; reviewing the Independent Audit Report for material issues and financial viability; reviewing, researching and approving allowable waiver-specific recoupments for waiver services provided without supporting documentation; reviewing all proposed recoupments; reviewing/approval of administrative payments for Coordinated System of Care (CSoC); and auditing and reviewing for accuracy of encounter data submission.



- Medical and Behavioral Health Policy Oversight Activity staff provide for direction for agency programs and services, and for the development of agency policies and procedures. OBH staff ensure accountability of efficient and effective services through quality and performance measures, statewide standards for monitoring quality of service and performance, and reporting of quality of service and performance information; creation and implementation of minimum service delivery standards; coordination of integration of behavioral health and primary healthcare and continued collaboration with agency contract providers, advocacy groups, Local Governing Entities (LGEs), regional support networks, and public and private agencies; implementation of a system of reimbursement by the Medical Assistance Program; and performance monitoring and evaluation.
- Data Analytics and Reporting The OBH Business Intelligence Analytics (BI-A) Section serves to provide information management and data standards development, decision support, and analytics support for performance improvement initiatives, and strives to transform data into actionable information for purposes of behavioral health service planning, quality improvement, and performance accountability. Activity staff collects and reports on SAMHSA required client-level data as outlined in the agency's contract with the Behavioral Health Services Information System. Additionally, the BI-A team regularly provides information and technical assistance to Local Governing Entities (LGEs) and staff/personnel of state hospitals and state office on how to access, report, and utilize program data.

Administration and Support Budget Summary

	Prior Year Actuals Y 2016-2017	F	Enacted Y 2017-2018	existing Oper Budget as of 12/01/17	Continuation FY 2018-2019	ecommended FY 2018-2019	Total ecommended Over/(Under) EOB
Means of Financing:							
State General Fund (Direct)	\$ 5,134,567	\$	5,192,289	\$ 5,194,977	\$ 5,756,688	\$ 5,746,115	\$ 551,138
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	72,285		54,289	54,289	54,289	54,289	0
Interim Emergency Board	0		0	0	0	0	0
Federal Funds	570,432		1,699,496	1,699,496	1,699,496	1,699,496	0
Total Means of Financing	\$ 5,777,284	\$	6,946,074	\$ 6,948,762	\$ 7,510,473	\$ 7,499,900	\$ 551,138
Expenditures & Request:							
Personal Services	\$ 4,450,835	\$	5,483,527	\$ 5,486,215	\$ 6,064,542	\$ 6,061,406	\$ 575,191
Total Operating Expenses	68,191		94,271	94,271	96,946	94,271	0
Total Professional Services	11,612		147,918	147,918	152,119	147,918	0
Total Other Charges	1,246,646		1,220,358	1,220,358	1,196,866	1,196,305	(24,053)
Total Acq & Major Repairs	0		0	0	0	0	0
Total Unallotted	0		0	0	0	0	0
Total Expenditures & Request	\$ 5,777,284	\$	6,946,074	\$ 6,948,762	\$ 7,510,473	\$ 7,499,900	\$ 551,138



Administration and Support Budget Summary

	Prior Year Actuals FY 2016-2017	Enacted FY 2017-2018	Existing Oper Budget as of 12/01/17	Continuation FY 2018-2019	Recommended FY 2018-2019	Total Recommended Over/(Under) EOB
Authorized Full-Time	Equivalents:					
Classified	39	40	40	41	41	1
Unclassified	2	2	2	2	2	0
Total	I FTEs 41	42	42	43	43	1

Source of Funding

The Administration and Support Program is funded with State General Fund, Statutory Dedications and Federal Funds. Federal funds are derived from the Substance Abuse Prevention and Treatment block grant. The Statutory Dedication is from the Tobacco Tax Health Care Fund (R.S. 47:841.1).

Administration and Support Statutory Dedications

Fund	Prior Year Actuals Fund FY 2016-2017		Existing Oper Enacted Budget FY 2017-2018 as of 12/01/17			Continuation FY 2018-2019			ecommended Y 2018-2019	Total Recommended Over/(Under) EOB	
Tobacco Tax Health Care											
Fund	\$	72,285	\$ 54,289	\$	54,289	\$	54,289	\$	54,289	\$	0

Major Changes from Existing Operating Budget

Gei	neral Fund	Т	otal Amount	Table of Organization	Description
\$	2,688	\$	2,688	0	Mid-Year Adjustments (BA-7s):
\$	5,194,977	\$	6,948,762	42	Existing Oper Budget as of 12/01/17
					Statewide Major Financial Changes:
\$	39,075	\$	39,075	0	2% General Increase Annualization Classified
\$	5,177	\$	5,177	0	Structural Annualization Classified
\$	127,198	\$	127,198	0	Market Rate Classified
\$	126,673	\$	126,673	0	Related Benefits Base Adjustment
\$	277,068	\$	277,068	0	Salary Base Adjustment
\$	2,935	\$	2,935	0	Risk Management
\$	(9,843)	\$	(9,843)	0	Rent in State-Owned Buildings
\$	1,840	\$	1,840	0	UPS Fees
\$	(18,985)	\$	(18,985)	0	Office of State Procurement
					Non-Statewide Major Financial Changes:



Major Changes from Existing Operating Budget (Continued)

Ge	neral Fund	T	otal Amount	Table of Organization	Description
					Annualization of the FY 18 BA-7 moving one Table of Organization (T.O.) position from Medical Vendor Administration to the Office of Behavioral Health.
\$	0	\$	0	1	
\$	5,746,115	\$	7,499,900	43	Recommended FY 2018-2019
\$	0	\$	0	0	Less Supplementary Recommendation
\$	5,746,115	\$	7,499,900	43	Base Executive Budget FY 2018-2019
\$	5,746,115	\$	7,499,900	43	Grand Total Recommended

Professional Services

Amount	Description
	Professional Services:
\$147,918	Travel related to professional services
\$147,918	TOTAL PROFESSIONAL SERVICES

Other Charges

Amount	Description
	Other Charges:
\$19,746	Other operating services, supplies and in-state travel
\$19,746	SUB-TOTAL OTHER CHARGES
	Interagency Transfers:
\$261,078	Payments to the Division of Administration - Office of Risk Management
\$21,897	Payments to the Department of Civil Service - Civil Service Fees
\$4,223	Payments to the Division of Administration - Uniform Payroll Services
\$206,368	Payments to the Division of Administration - Office of State Procurement
\$376,039	Rental of Bienville Building
\$306,954	Transfers to other State Agencies
\$1,176,559	SUB-TOTAL INTERAGENCY TRANSFERS
\$1,196,305	TOTAL OTHER CHARGES



Acquisitions and Major Repairs

Amount	Description
	This program does not have funding for Acquisitions and Major Repairs.

Performance Information

1. (KEY) Through FY 2022, 90% of clean claims will be paid within 15 days, and 99% of clean claims will be paid within 30 days of receipt.

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 Louisiana Department of Health policies.

Performance Indicators

			Performance Ind	icator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Percentage of clean claims processed within 15 days of receipt (LAPAS CODE - NEW)	Not Applicable	Not Applicable	90%	90%	97%	97%
K Percentage of clean claims processed within 30 days of receipt (LAPAS CODE - 25230)	95%	100%	99%	99%	99%	99%

2. (KEY) By FY 2022, network access and sufficiency will achieve an annual positive outcome of 90% in accessibility standards

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 Louisiana Department of Health policies.



			Performance Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Percentage of providers who meet urban/rural access standards for specialized behavioral health services (LAPAS CODE - 26138)	Not Applicable	Not Applicable	90%	90%	90%	90%
K Percentage of providers who meet overall emergent appointment availability standards (LAPAS CODE - 26139)	Not Applicable	Not Applicable	90%	90%	90%	90%
K Percentage of providers who meet overall urgent appointment availability standards (LAPAS CODE - 26140)	Not Applicable	Not Applicable	90.00%	90.00%	90.00%	90.00%
K Percentage of providers who meet overall routine appointment availability standards (LAPAS CODE - 26141)	Not Applicable	Not Applicable	70%	70%	70%	70%
K Percentage of overall member satisfaction (LAPAS CODE - 26142)	Not Applicable	Not Applicable	83%	83%	83%	83%

3. (KEY) Through FY 2022, quality of care for managed care members with specialized behavioral health needs will be improved through care delivery, as measured by the health plans meeting at least the national 50th percentile on established HEDIS measures and achieving at least at 90% compliance rate on federal managed care standards and waiver assurances, and through enhanced member experience of care, as measured by meeting at least an 85% satisfaction rate on established survey metrics.

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 Louisiana Department of Health policies.



			Performance Ind	licator Values		
Yearend Performance Performance Indicator Name FY 2016-2017		Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Percent of initial quality reports accepted (LAPAS CODE - 26144)	Not Applicable	73.0%	90.0%	90.0%	80.0%	80.0%
S Percent of CMS waiver assurances satisfactorily met (LAPAS CODE - 26145)	Not Applicable	87%	90%	90%	90%	90%

4. (KEY) Through the Behavioral Health Services Reform activity, to increase access to a full array of evidence-based in home and community-based behavioral health services, in order to improve health outcomes, and decrease reliance on institutional care by State Fiscal Year 2022.

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 ensuring 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 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Number of recipients with a primary mental health diagnosis receiving community-based services (LAPAS CODE - 25561)	143,842	250,164	135,700	135,700	5,774	5,774
K Percentage change in the number of recipients with a primary mental health diagnosis receiving community-based services (LAPAS CODE - 25562)	6%	27%	6%	6%	4%	4%



330_2000 — Behavioral Health Community

Program Authorization: R.S. 36:258(C); R.S. 28:1 et. seq.

Program Description

The mission of the Behavioral Health Community Program is to monitor and manage a comprehensive system of contemporary, innovative, and evidence-based prevention, treatment and recovery support services for Louisiana citizens with serious behavioral health challenges, as well as external monitoring of specialized behavioral health services through clinical analysis and behavioral health subject matter expertise. Additional functions include quality strategy and compliance, planning, monitoring, and providing accountability in the delivery of mental health and addictive disorders services by statewide partners.

The goals of the Behavioral Health Community Program are as follows:

- I. OBH will ensure the effectiveness and quality of behavioral health services for Louisiana citizens not covered under Medicaid managed care.
- II. OBH will ensure that effective and efficient prevention services are provided statewide to promote overall wellness and to delay the initiation and progression of behavioral health disorders by increasing knowledge, awareness, and healthy behaviors.

Behavioral Health Community Program Activities consist of:

- Adult Consumer Recovery and Membership Services The Adult Consumer Recovery and Membership Services section of OBH is responsible for the management and oversight of activities and programs to assist persons with behavioral health disorders receive community-based treatment and supportive services necessary to maintain their recovery and successfully live in the community.
- Continued Stay Review (CSR) The CSR process includes both adults and youth who have been denied coverage by Medicaid for one of two reasons: 1) the patient meets medical necessity and is considered uninsured (i.e. indigent, insufficient private insurance coverage, self-pay) or 2) the patient does not meet acute medical necessity, but must remain in the hospital due to placement issues, judicial commitment (longer term hospitalization wait-list), and/or court order. OBH staff review requests from the OBH Cooperative Endeavor Agreement (CEA) facilities.
- Court Reporting Compliance -The Louisiana Children's Code (CHC 837) requires that LDH develop a curriculum that is used to train and certify juvenile competency restoration providers throughout the state. These certified providers will provide competency restoration to juveniles determined by the court to be incompetent to stand trial.
- Mental Health and Substance Abuse Block Grant and Federal Crisis Counseling Programs The
 Mental Health Block Grant (MHBG) and Substance Abuse Prevention and Treatment Block Grant (SAPT
 BG) are federal block grants that have been awarded to OBH by the Substance Abuse and Mental Health
 Services Administration (SAMHSA). MHBG funds are used to finance community-based mental health
 services that help to address service gaps and needs in every geographical service area of the state, and
 SAPT BG funds are used for the statewide provision of substance use prevention and treatment services, to



include the priority populations of pregnant women, women with dependent children, and IV drug users. These funds also ensure the provision of tuberculosis and HIV early intervention services for substance use treatment clients. Additionally, this activity provides for the Louisiana Spirit Crisis Counseling Program (CCP), which assists individuals and communities with the behavioral health effects of presidentially-declared disasters.

- Non-Medicaid Substance Use and Mental Illness Services and Populations OBH provides access to
 substance use disorder, problem gaming, and tobacco cessation services through a statewide network of
 providers that work together in a seamless system of recovery- oriented care, with a range of services
 accessed according to the assessment of severity of an individual's needs. OBH funds a full continuum of
 services from brief screening and intervention to detoxification to residential and outpatient levels of care.
- Preadmission Screening and Resident Review (PASRR) PASRR is a program conducted within LDH
 to screen persons being placed or that are currently placed in a nursing facility level of care. OBH has the
 responsibility as the Level II State Mental Health Authority to ensure individuals with a suspected mental
 illness are evaluated and determinations are made regarding appropriateness for nursing facility placement
 and services.
- Quality Strategy and Compliance OBH provides for the oversight and monitoring of services and contract deliverables for the Coordinated System of Care (CSoC) wavier program and specialized behavioral health services under the Healthy Louisiana Plans. With integration, OBH has employed different strategies to ensure appropriate oversight for these activities, including external monitoring, clinical analysis, quality and performance monitoring, reporting, and compliance with federal requirements.
- Residential Behavioral Health Support and Services OBH provides oversight, surveillance and technical assistance to OBH state operated/contracted adult 24-hour residential programs to assure implementation and adherence with OBH stated goals and objectives, policies and procedures, federal block grants, and strategic and operational plans. These monitoring processes are required efforts and utilized to ensure compliance with federal requirements, LDH Accountability Implementation Contractual Agreement and by the Department of Children and Family Services (DCFS).
- Wraparound Services for Children Medicaid waiver wraparound services are designed to serve children and youth age birth through 21 who have significant behavioral health challenges and who are in or at imminent risk of out-of-home placement. The purposes of the Medicaid waiver wraparound services are to create and oversee a service delivery system that is better integrated, has enhanced service offerings and achieves improved outcomes by ensuring families who have children with severe behavioral health challenges get the right support and services, at the right level of intensity, at the right time, for the right amount of time, from the right provider, to ultimately keep or return children home or to their home communities. Combining all services into one coordinated plan allows for better communication and collaboration among families, youth, state agencies, providers and others who support the family.
- Youth Substance Use/Co-Occurring Disorder Treatment Enhancement and Dissemination The primary function of Louisiana State Adolescent and Transitional Aged Youth Treatment Enhancement and Dissemination Implementation Cooperative Agreement [State Youth Treatment Implementation (SYT-I)] is to improve treatment for adolescents and transitional aged youth (16-25 years old) with substance use disorders (SUD) and/or co-occurring substance use and mental disorders. This will be accomplished by assuring youth access to evidence-based assessments, treatment models, and recovery services supported



by the strengthening of the existing infrastructure system. This federal grant is designed to bring together stakeholders across the systems serving the population of focus to strengthen an existing coordinated network that will enhance and expand treatment services, develop policies, expand workforce capacity, disseminate evidence-based practices, and implement financial mechanisms and other reforms to improve the integration and efficiency of substance use disorders treatment, and the recovery support system.

Behavioral Health Community Budget Summary

		Prior Year Actuals FY 2016-2017		Existing Oper Enacted Budget FY 2017-2018 as of 12/01/17		Continuation Recommended FY 2018-2019 FY 2018-2019			Total Recommended Over/(Under) EOB			
Means of Financing:												
State General Fund (Direct)	\$	15,947,012	\$	10,544,832	\$	11,470,330	\$	12,341,157	\$	11,312,876	\$	(157,454)
State General Fund by:												
Total Interagency Transfers		9,949,050		3,109,903		4,437,952		4,572,771		4,572,771		134,819
Fees and Self-generated Revenues		0		0		0		0		0		0
Statutory Dedications		4,796,358		4,900,477		4,900,477		4,897,736		4,897,736		(2,741)
Interim Emergency Board		0		0		0		0		0		0
Federal Funds		30,884,411		51,604,391		51,604,391		51,503,237		51,196,957		(407,434)
Total Means of Financing	\$	61,576,831	\$	70,159,603	\$	72,413,150	\$	73,314,901	\$	71,980,340	\$	(432,810)
Expenditures & Request:												
Personal Services	\$	7,098,395	\$	7,083,260	\$	7,799,968	\$	8,508,116	\$	7,692,307	\$	(107,661)
Total Operating Expenses		108,967		714,375		714,375		452,948		400,583		(313,792)
Total Professional Services		192		57,276		189,026		167,903		157,796		(31,230)
Total Other Charges		54,369,277		62,304,692		63,709,781		64,185,934		63,729,654		19,873
Total Acq & Major Repairs		0		0		0		0		0		0
Total Unallotted		0		0		0		0		0		0
Total Expenditures & Request	\$	61,576,831	\$	70,159,603	\$	72,413,150	\$	73,314,901	\$	71,980,340	\$	(432,810)
Authorized Full-Time Equiva	lanta											
Classified	ients:	41		28		37		37		32		(5)
Unclassified		0		0		0		0		0		(5)
Total FTEs		41		28		37		37		32		(5)



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 the Department of Children and Family Services for Temporary Assistance for Needy Families (TANF); the Office of the Secretary for bioterrorism preparedness; and Medical Vendor Administration. 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: Substance Abuse Prevention and Treatment (SAPT) Block Grant, Community Mental Health Services (CMHS) Block Grant; Partnership for Success (PFS); Projects to Assist in Transition from Homelessness (PATH); Cooperative Agreement to Benefit Homeless Individuals (CABHI); State Adolescent and Transitional Aged Youth (SYT-I); Medication Assisted Treatment-Prescription Drug & Opioid Addiction (MAT-PDOA); and Louisiana Strategic Prevention Framework for Prescription Drugs (LaSPF Rx). Additional Federal Funds are received from the U.S. Department of Homeland Security, Federal Emergency Management Agency for the Crisis Counseling Program. The Statutory Dedications are from the Tobacco Tax Health Care Fund (R.S. 47:841.1) and the Compulsive & Problem Gaming Fund [R.S. 27:85(B)(2), R.S. 27:92(B)(2)(a), R.S. 27:260(D), R.S. 27:270(A)(2), R.S. 27:392(B)(2)(a), R.S. 27:437(B)(2)(a), R.S. 27:443(A)(2), R.S. 47:9029(B)(2)].

Behavioral Health Community Statutory Dedications

Fund	Prior Year Actuals 7 2016-2017	F	Enacted Y 2017-2018	xisting Oper Budget s of 12/01/17	Continuation Y 2018-2019	ecommended Y 2018-2019	Total ecommended ver/(Under) EOB
Tobacco Tax Health Care Fund	\$ 2,241,462	\$	2,316,604	\$ 2,316,604	\$ 2,313,863	\$ 2,313,863	\$ (2,741)
Compulsive and Problem Gaming Fund	2,554,896		2,583,873	2,583,873	2,583,873	2,583,873	0

Major Changes from Existing Operating Budget

				Table of	
Ge	neral Fund	To	otal Amount	Organization	Description
\$	925,498	\$	2,253,547	9	Mid-Year Adjustments (BA-7s):
\$	11,470,330	\$	72,413,150	37	Existing Oper Budget as of 12/01/17
					Statewide Major Financial Changes:
	28,228		28,228	0	2% General Increase Annualization Classified
	7,703		7,703	0	Structural Annualization Classified
	92,126		92,126	0	Market Rate Classified
	(515,579)		(515,579)	0	Related Benefits Base Adjustment
	587,629		587,629	0	Salary Base Adjustment
	(174,407)		(174,407)	0	Attrition Adjustment
	(16,859)		(118,013)	0	Risk Management
	(18,131)		(18,131)	0	Civil Service Fees
	61,564		61,564	0	Office of Technology Services (OTS)
					Non-Statewide Major Financial Changes:



Major Changes from Existing Operating Budget (Continued)

Ge	neral Fund	Total Amount	Table of Organization	Description
	266,614	266,614	0	Annualization of the FY18 Mid-Year adjustment in response to the Department of Justice findings related to the needs for improvement in the areas of identifying and transitioning adults with Serious Mental Illness (SMI) out of nursing facilities, when appropriate, through the development of a System of Care.
	0	134,819	0	Projected increase in the Pre-Admission Screening and Resident Review (PASRR) expenses incurred by the Office of Behavioral Health (OBH). Based on a Memorandum of Understanding between the Medical Vendor Administration (MVA) and OBH, MVA will reimburse OBH for PASRR related activities.
	114,398	114,398	1	One additional Classified Table of Organization (T.O.) position for Community Transition and Diversion- Serious Mental Illness (SMI). This position is being created based on FY 18 Department of Justice (DOJ) findings. The position will provide coordination, policy, and procedure development, oversight and management of the transition and diversion activities associated with OBH.
	(284,460)	(284,460)	0	Technical adjustment to transfer funds from OBH to Acadiana Area Human Services District, Northwest Louisiana Human Services District, Northeast Delta Human Services Authority, and Central Louisiana Human Services District for pharmaceutical supplies as a result of the closure of Shamrock Pharmacy on November 1, 2017.
	0	(2,741)	0	Tobacco Tax Health Care Fund updated based on Revenue Estimate Conference projection.
	(172,009)	(344,018)	(4)	Reduction of Staff used to monitor and manage the Specialized Behavioral Health Service program.
	(134,271)	(268,542)	(2)	Reduction of Staff used to monitor and manage the Private Partners Program.
\$	11,312,876	\$ 71,980,340	32	Recommended FY 2018-2019
\$	0	\$ 0	0	Less Supplementary Recommendation
\$	11,312,876	\$ 71,980,340	32	Base Executive Budget FY 2018-2019
\$	11,312,876	\$ 71,980,340	32	Grand Total Recommended

Professional Services

Amount	Description	
\$157,796	Legal, accounting and other professional services	
\$157,796	TOTAL PROFESSIONAL SERVICES	

Other Charges

Amount Description Other Charges:							
\$20,516,839 Specialized community, family, educational, residential, crisis, respite and other contracted services							



Other Charges (Continued)

Amount	Description
\$164,905	Preadmission Screening and Resident Review(PASRR)
\$554,788	Outpatient children's psychiatry and psychology services in Midtown New Orleans
\$1,288,069	Prevention Services
\$23,112,809	SUB-TOTAL OTHER CHARGES
	Interagency Transfers:
\$94,272	Payments to the Department of Civil Service - Civil Service Fees
\$1,588,898	Payments to the Division of Administration - Technology Services
\$4,924	Payments to the Division of Administration - Uniform Payroll Services
\$172,096	Payments to the Division of Administration - Risk Management
\$37,728	Payments to other state agencies
\$1,837,592	Jefferson Parish Human Services Authority
\$4,587,774	Florida Parishes Human Services Authority
\$5,242,539	Capital Area Human Services District
\$6,062,024	Metropolitan Human Services District
\$4,279,554	South Central Louisiana Human Services Authority
\$3,385,072	Northeast Delta Human Services Authority
\$2,838,045	Acadiana Area Human Services District
\$2,028,284	Imperial Calcasieu Human Services Authority
\$3,925,420	Central Louisiana Human Services District
\$4,532,623	Northwest Louisiana Human Services District
\$40,616,845	SUB-TOTAL INTERAGENCY TRANSFERS
\$63,729,654	TOTAL OTHER CHARGES

Acquisitions and Major Repairs

Amount	Description
	This program does not have funding for Acquisitions and Major Repairs.

Performance Information

1. (KEY) By FY 2022, increase by 5% the number of individuals referred to tobacco cessation services among those diagnosed with behavioral health conditions within each Local Governing Entities (LGEs) and Healthy Louisiana plans.

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 Louisiana Department of Health policies.



			Performance Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
S Number of individuals with positive tobacco screenings (LAPAS CODE - 26150)	Not Applicable	9,400	9,494	9,494	9,400	9,400
S Number of individuals screened for tobacco use (LAPAS CODE - 26151)	Not Applicable	39,476	39,871	39,871	39,800	39,800
K Number of individuals with positive tobacco screenings referred to tobacco cessation services (LAPAS CODE - 26152)	Not Applicable	2,658	2,685	2,685	2,600	2,600

2. (SUPPORTING)By FY 2022, the number of individuals enrolled in Medication Assisted Treatment (MAT) will be increased by 5%, from a baseline of 3,998.

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 Louisiana Department of Health policies.

Performance Indicators

L e v e Performance Indicator	Yearend Performance Standard	Actual Yearend Performance	Performance Ind Performance Standard as Initially Appropriated	icator Values Existing Performance Standard	Performance At Continuation Budget Level	Performance At Executive Budget Level
1 Name	FY 2016-2017	FY 2016-2017	FY 2017-2018	FY 2017-2018	FY 2018-2019	FY 2018-2019
S Number of individuals enrolled in MAT, including those with Substance Use Disorders (LAPAS CODE - 26153)	Not Applicable	Not Applicable	4,055	4,055	3,891	3,891
K Percent increase in number of individuals enrolled in MAT, including those with Substance Use Disorders (LAPAS CODE - 26154)	Not Applicable	Not Applicable	1.43%	1.43%	1.04%	1.04%



3. (KEY) By FY 2022, the number of individuals served for problem gambling will be increased by 5%, from a baseline of 440, and gambling treatment completion rates will be maintained at 65%.

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 Louisiana Department of Health policies.

Performance Indicators

			Performance Ind	icator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Percent increase in the number of individuals served for problem gambling. (LAPAS CODE - 26155)	Not Applicable	1%	1%	1%	1%	1%
K Percent of individuals discharged from gambling treatment reporting a decrease in the frequency of gambling activities (LAPAS CODE - 26156)	Not Applicable	89%	89%	89%	89%	89%
K Percent of individuals discharged from gambling treatment that completed treatment. (LAPAS CODE - 26157)	Not Applicable	57%	65%	65%	65%	65%

Behavioral Health Community General Performance Information

	Performance Indicator Values						
Performance Indicator Name	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016	Prior Year Actual FY 2016-2017		
Number of individuals screened for gambling within LGEs and Healthy Louisiana plans (LAPAS CODE - 26158)	12,550	10,606	10,038	31,917	3,100		



Behavioral Health Community General Performance Information (Continued)

	Performance Indicator Values						
Performance Indicator Name	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016	Prior Year Actual FY 2016-2017		
Number of individuals with positive problem gambling screenings within LGEs and Healthy Louisiana plans (LAPAS CODE - 26159)	756	538	610	1,284	1,200		
Number of individuals admitted for gambling treatment (inpatient and outpatient) (LAPAS CODE - 26160)	357	358	392	342	350		

From FY13 - FY17, the number of individuals admitted for gambling treatment was only reported for clients admitted with a primary diagnosis of gambling disorder. Beginning in FY18, the number of admissions for which gambling is the primary, secondary, or tertiary diagnosis will be reported in order to maintain consistency with the objective.

Total number of intake calls to the Gamblers					
Helpline (LAPAS CODE - 26161)	1,132	1,206	1,107	1,086	1,000

4. (KEY) Through FY 2022, OBH will continue to provide to provide evidence-based prevention programs in school based settings.

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 Louisiana Department of Health policies.

Performance Indicators

	Performance Indicator Values					
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
S Number of individuals served by evidence-based prevention programs (LAPAS CODE - 25245)	44,900	38,594	44,900	44,900	80,000	80,000
K Percentage of individuals served, ages 12-17, who reported that they used alcohol, tobacco and marijuana during the last 30 days (LAPAS CODE - 25246)	20%	8%	20%	20%	20%	20%

5. (KEY) Through FY 2022, the state will achieve an annual tobacco non-compliance rate of 10% or less.

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 Louisiana Department of Health policies.

Performance Indicators

	Performance Indicator Values						
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019	
K Annual tobacco non- compliance rate (LAPAS CODE - 25247)	10%	14%	10%	10%	10%	10%	

6. (SUPPORTING)Through FY 2022, OBH will continue to provide Suicide Prevention education and awareness activities.

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 Louisiana Department of Health policies.

Performance Indicators

	Performance Indicator Values						
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019	
S Number of suicide prevention trainings (LAPAS CODE - 26168)	Not Applicable	20	20	20	20	20	
S Number of individuals who participated in suicide prevention trainings (LAPAS CODE - 26169)	Not Applicable	500	500	500	500	500	



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 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. The Hospital-Based Treatment Program will promote recovery through the efficient use of evidence-informed care and successful transition to community-based services.
- II. Through the Hospital-Based Treatment Program, OBH will provide services to individuals involved with the court system in compliance with the Forensic consent decree ruling.

Hospital Based Treatment Services refer to the State Psychiatric Hospital Program, which provides 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. 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.

The Hospital Based Treatment Program operates two hospitals: Central Louisiana State Hospital (CLSH) and Eastern Louisiana Mental Health System (ELMHS).

Hospital Based Treatment Activities consist of:

- Civil Intermediate Clients admitted to civil intermediate meet criteria for intensive inpatient treatment.
 The treatment team assigned to the patient works with the individual patient and other involved parties including the court system if appropriate, to coordinate discharge planning that would enable them to transition into the community setting with appropriate follow up.
- Forensic Services ELMHS is the only one of the state's freestanding psychiatric facilities that includes a division solely designated for the provision of inpatient psychiatric treatment to forensic clients. The state is required to provide psychiatric treatment to forensic clients; and in the case of those requiring competency restoration services, within 15 days from the date of the court order, or two days if the client's needs are determined to be emergent. Although forensic clients make up the majority of the beds, clients may also be ordered through the civil court system to the civil intermediate program.
- **Hospital Administration and Oversight** The administration of the hospital system and the provision of the necessary support services are critical to meet the demands of the clients while maintaining licensure, accreditation, life safety, and therapeutic mandates.



• Hospital-Affiliated Community Services - The ELMHS Community Forensic Services Department (CFS) provides for the supervision and community tracking of over 400 clients in the Conditional Release Program (Con-Rep). The court has ordered that clients who are involved in this program must be monitored and tracked by CFS in order to be conditionally released into the community; otherwise, they would be returned to the inpatient forensic hospital. Specific services available for Con-Rep clients include daily living skills, preparation for vocational adjustment, re-entry into the community, and medication and symptoms management. ICF-ID Community Group Homes are Medicaid-funded facilities that provide an additional pathway to transition clients from the inpatient psychiatric hospital into the community.

Hospital Based Treatment Budget Summary

		Prior Year Actuals Y 2016-2017	F	Enacted 'Y 2017-2018	Existing Oper Budget s of 12/01/17	Continuation Y 2018-2019	ecommended Y 2018-2019	Total ecommended ver/(Under) EOB
Means of Financing:								
State General Fund (Direct)	\$	83,523,088	\$	86,300,762	\$ 86,471,131	\$ 97,702,106	\$ 93,195,993	\$ 6,724,862
State General Fund by:								, ,
Total Interagency Transfers		63,674,655		67,830,432	67,830,432	92,804,856	82,839,130	15,008,698
Fees and Self-generated Revenues		44,436		485,309	485,309	485,309	485,309	(
Statutory Dedications		0		1,633,679	1,633,679	1,633,679	1,633,679	(
Interim Emergency Board		0		0	0	0	0	C
Federal Funds		733,542		985,174	985,174	985,174	985,174	C
Total Means of Financing	\$	147,975,721	\$	157,235,356	\$ 157,405,725	\$ 193,611,124	\$ 179,139,285	\$ 21,733,560
Expenditures & Request:								
Personal Services	\$	103,356,378	\$	110,092,512	\$ 110,093,265	\$ 140,216,983	\$ 128,854,701	\$ 18,761,436
Total Operating Expenses		16,748,988		20,493,534	19,425,887	20,638,603	19,838,706	412,819
Total Professional Services		6,245,479		7,188,999	6,882,189	7,483,512	7,117,954	235,765
Total Other Charges		20,540,324		19,172,012	20,716,085	22,785,038	21,580,040	863,955
Total Acq & Major Repairs		1,084,552		288,299	288,299	2,486,988	1,747,884	1,459,585
Total Unallotted		0		0	0	0	0	C
Total Expenditures & Request	\$	147,975,721	\$	157,235,356	\$ 157,405,725	\$ 193,611,124	\$ 179,139,285	\$ 21,733,560
Authorized Full-Time Equiva	lents	s:						
Classified		1,327		1,327	1,327	1,491	1,561	234
Unclassified		13		13	13	13	13	22.4
Total FTEs		1,340		1,340	1,340	1,504	1,574	234



Source of Funding

The Hospital Based Treatment program is funded with State General Fund, Interagency Transfers, Fees and Self-generated Revenues, 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 the Community Mental Health Services (CMHS) Block Grant for community forensic outreach.

Hospital Based Treatment Statutory Dedications

Fund	Prior Year Actuals FY 2016-2017	Enacted FY 2017-2018	Existing Oper Budget as of 12/01/17	Continuation FY 2018-2019	Recommended FY 2018-2019	Total Recommended Over/(Under) EOB
Health Care Facility Fund	\$ 0	\$ 1,633,679	\$ 1,633,679	\$ 1,633,679	\$ 1,633,679	\$ 0

Major Changes from Existing Operating Budget

G	eneral Fund	Т	otal Amount	Table of Organization	Description
\$	170,369	\$	170,369	0	Mid-Year Adjustments (BA-7s):
\$	86,471,131	\$	157,405,725	1,340	Existing Oper Budget as of 12/01/17
					Statewide Major Financial Changes:
\$	435,297	\$	669,688	0	2% General Increase Annualization Classified
\$	221,940	\$	270,966	0	Structural Annualization Classified
\$	769,590	\$	2,198,829	0	Market Rate Classified
\$	70,595	\$	108,608	0	Civil Service Training Series
\$	228,988	\$	376,441	0	Related Benefits Base Adjustment
\$	1,317,311	\$	2,026,632	0	Salary Base Adjustment
\$	(2,409,066)	\$	(3,706,256)	0	Attrition Adjustment
\$	0	\$	400,863	0	Acquisitions & Major Repairs
\$	(55,444)	\$	(288,299)	0	Non-Recurring Acquisitions & Major Repairs
\$	(169,616)	\$	(169,616)	0	Non-recurring Carryforwards
\$	(158,396)	\$	(2,086,545)	0	Risk Management
					Non-Statewide Major Financial Changes:
\$	45,483	\$	66,354	0	Increase food service contract by 2% in FY 19 to accommodate for the annual increase for the cost of meals, nutritional supplement, and items used to support medication administration.
\$	(5,386,181)	\$	(5,386,181)	0	Transfer state match from Eastern Louisiana Mental Health System (ELMHS) to Medical Vendor Payments (MVP). This is a companion request with OBH. ELMHSi budget maintains the State General Fund (Direct) (SGFD) match for a portion of federal funds that is in the MVP budget, which allows ELMHS to only request the federal funds for Phase I of the facility expansion in FY 2017. By transferring the SGFD to MVP and receiving a like amount of Interagency Transfer (IAT) revenue, the Office of Behavioral Health (OBH) will be able to more clearly identify and track actual IAT.



Major Changes from Existing Operating Budget (Continued)

Ge	neral Fund	Т	otal Amount	Table of Organization	Description
\$	0	\$	5,386,181	0	Transfer state match from Eastern Louisiana Mental Health System (ELMHS) to Medical Vendor Payments (MVP). ELMHSi budget maintains the State General Fund (Direct) (SGF) match for a portion of federal funds that is in the MVP budget, which allows ELMHS to only request the federal funds for Phase I of the facility expansion in FY 2017. By transferring the SGFD to MVP and receiving a like amount of Interagency Transfer (IAT) revenue, the Office of Behavioral Health (OBH) will be able to more clearly identify and track actual IAT
\$	0	\$	0	1	CLSH Conversion of one Job Appointment to an Authorized Position. This job appointment expires on June 29, 2018. This position is require to ensure that the hospital switchboard is staffed 24/7. Funds will be moved from Other Compensation to Salaries (State General) for this position.
\$	4,549,032	\$	9,047,987	117	For compliance with the Cooper/Jackson Settlement implementation of phase II: 52 new civil intermedicate and 20 Forensic Supervised Transitional Residential Aftercare (FSTRA) community beds will be added to Eastern Louisiana Mental Health System (ELMHS) Facility expansion. This expansion will add 117 new Authorized Classifed positions to OBH-ELMHS.
\$	1,683,910	\$	2,669,872	0	Funding to implement a \$2/hour premium pay for Correction Guard Therapeutic and Registered and Licensed Practical Nurses at Eastern Louisiana Mental Health System (ELMHS) to be used as a retention and recruitment tool to maintain adequate staffing.
\$	3,385,850	\$	6,156,092	92	Ninety-two (92) additional Classified Table of Organization (T.O.) position for Eastern Louisiana Mental Health System (ELMHS). OBH was cited by the Centers for Medicare and Medicaid Services (CMS) Health Standards in February 2017 for failure to provide adequate Correctional Guard Therapeutic (CGT) coverage to ensure the safety and security of patients.
\$	949,161	\$	1,725,747	24	Funding for twenty four (24) Table of Organization (T.O.) Licensed Practical Nursing (LPN) positions for Louisiana Mental Health System (ELMHS). OBH was cited by the Centers for Medicare and Medicaid Services (CMS) Health Standards in February 2017 for failure to provide adequate nursing coverage to ensure bedside care for all patients. In order to stay in compliance with The Joint Commission, CMS, and Louisiana Department of Health Standards these additional positions are needed.
\$	275,000	\$	500,000	0	Funding for a nursing contract to ensure adequate nursing coverage at Louisiana Mental Health System (ELMHS). This contract would be an emergency back-up plan in order to provide for adequate coverage at all times
\$	565,312	\$	1,027,840	0	Funding is for hospital-based physical care services for Eastern Louisiana Mental Health System (ELMHS) clients. ELMHS need eight (8) additional acute care beds from Villa to efficiently and appropriately move patients through the system of care and allow for compliance with Cooper/Jackson Settlement.
\$	406,096	\$	738,357	0	Provides for rewiring of information technology infrastructure and network support for Eastern Louisiana Mental Health System (ELMHS) client care, administrative, and administrative shop buildings.
¢	93,195,993	¢	179,139,285	1,574	Recommended FY 2018-2019
\$	73,173,773	φ	179,139,203	1,3/4	Accommended F 1 2010-2017
\$	0	\$	0	0	Less Supplementary Recommendation
\$	93,195,993	\$	179,139,285	1,574	Base Executive Budget FY 2018-2019
\$	93,195,993	\$	179,139,285	1,574	Grand Total Recommended



Professional Services

Amount	Description
\$235,765	ELMHS Cooper Jackson
\$90,256	Dental services
\$23,363	Optometry
\$15,000	Librarian
\$161,214	Cost Reporting
\$4,800	Infection Control Consultant
\$15,250	Neurological Services
\$64,310	Nursing Services
\$5,739,740	Psychiatry & Psychology Services (Tulane and LSU)
\$768,256	Other Professional services /consultants
\$7,117,954	TOTAL PROFESSIONAL SERVICES

Other Charges

Amount	Description
	Other Charges:
\$2,793,665	ELMHS Cooper Jackson
\$15,600	Provide vocational rehabilitation for Community Home Residents at ELMHS through job coaching
\$5,321,659	Group Homes in the community for severely/persistently mentally ill
\$38,019	LSU Student Health Center and ELMHS will jointly direct a Doctoral Psychology Program
\$1,033,813	Other professional services
\$9,202,756	SUB-TOTAL OTHER CHARGES
	Interagency Transfers:
\$168,612	Department of Civil Service - Civil Service Fees
\$8,405,162	Division of Administration - Risk Management
\$74,675	Division of Administration - Uniform Payroll Services
\$45,600	Dixon Correctional Institute - Inmate Labor
\$2,638,845	Villa Feliciana - Medical services
\$90,000	Villa Feliciana - Water
\$467,349	Telephone and Telegraph
\$487,041	Payments to other State Agencies
\$12,377,284	SUB-TOTAL INTERAGENCY TRANSFERS
\$21,580,040	TOTAL OTHER CHARGES

Acquisitions and Major Repairs

Amount	Description
\$175,863	Acquisitions
\$225,000	Major Repairs
\$223,664	ELMHS Cooper Jackson Acquisitions
\$385,000	ELMHS Cooper Jackson Repairs



Acquisitions and Major Repairs (Continued)

Amount	Description
\$738,357	ELMHS Network
\$1,747,884	TOTAL ACQUISITIONS AND MAJOR REPAIRS

Performance Information

1. (KEY) Through FY 2022, OBH will improve behavioral health outcomes of inpatient care by maintaining an annual 30 days readmission rate within the national norm of 5.16%.

Human Resource Policies Beneficial to Women and Families Link: Linked to relevant Department of Health and Hospitals policies.

Performance Indicators

Performance Indicator Values								
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019		
K Percentage of adults discharged from a state hospital and readmitted within 30 days of discharge (Statewide) (LAPAS								
CODE - 24230)	1.5%	0.4%	1.5%	1.5%	1.5%	1.5%		

2. (SUPPORTING)During FY 18-22, the rate of the use of physical restraints will be below national norm of .4792, as reported by ORYX annually.

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 Inc	dicator Values		
L e v e l		Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
S	Ratio of inpatient restraint hours to inpatient days (Statewide) (LAPAS CODE - 25249)	0.4	0.1	0.4	0.4	0.4	0.4



3. (KEY) Through FY 2022, OBH will maintain substantial compliance with the forensic 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 Indicators

L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Inc Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Percentage of compliance with Federal consent decree (LAPAS CODE - 25250)	90%	93%	90%	90%	90%	90%

^{1.} A lawsuit against the Louisiana Department of Health was resolved with a federal consent decree which put in place specific timeframes within which competency restoration activities must be completed for individuals referred from the judicial system.

Hospital Based Treatment General Performance Information

	Performance Indicator Values							
Performance Indicator Name	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016	Prior Year Actual FY 2016-2017			
Inpatient Care (Adults ñ East Louisiana Mental Health System-Civil, including Acute) - Total adults served (LAPAS CODE - 11761)	325	341	356	283	515			
Inpatient Care (Adults - East Louisiana Mental Health System-Civil, including Acute) - Average daily census (LAPAS CODE - 11763)	169	215	217	217	251			
Inpatient Care (Adults - East Louisiana Mental Health System-Civil, including Acute) - Average length of stay in days (LAPAS CODE - 11766)	251	73	78	92	166			
Inpatient Care (Adults - East Louisiana Mental Health System-Civil, including Acute) - Average daily occupancy rate (LAPAS CODE - 11764)	99%	99%	100%	100%	97%			



^{2.} The agreement between the Office of Behavioral Health and the Court stipulated that The Office of Behavioral Health will maintain "substantial" compliance with the consent decree.

Hospital Based Treatment General Performance Information (Continued)

		Perfo	rmance Indicator V	alues	
Performance Indicator Name	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016	Prior Year Actual FY 2016-2017
Inpatient Care (Adults - Feliciana Forensic Facility) - Total adults served (LAPAS CODE - 26170)	1,521	1,624	1,548	1,438	513
Inpatient Care (Adults - Feliciana Forensic Facility) - Average daily census (LAPAS CODE - 11769)	257	258	258	258	231
Inpatient Care (Adults - Feliciana Forensic Facility - Average length of stay in days (LAPAS CODE - 11772)	263	675	675	598	943
Inpatient Care (Adults - Feliciana Forensic Facility) - Average daily occupancy rate (LAPAS CODE - 11770)	100%	101%	100%	100%	98%
Inpatient Care (East Louisiana Mental Health System-Civil, including Acute and Feliciana Forensic Facility) - Total adults served (LAPAS CODE - 26171)	126	156	144	176	1,028
Inpatient Care (East Louisiana Mental Health System-Civil, including Acute and Feliciana Forensic Facility) - Average daily census (LAPAS CODE - 17030)	139	473	475	475	482
Inpatient Care (East Louisiana Mental Health System-Civil, including Acute and Feliciana Forensic Facility) - Average length of stay in days (LAPAS CODE - NEW)	401	417	399	424	455
Inpatient Care (East Louisiana Mental Health System-Civil, including Acute and Feliciana Forensic Facility) - Average length of stay in days (LAPAS CODE - 17031)	100%	100%	100%	100%	98%
Inpatient Care (Adults-Central Louisiana State Hospital) - Total adults served (LAPAS CODE - 11467)	162	175	174	178	160

The total number served in the Adult inpatient care at Central LA State Hospital is 162 for fiscal year 2013. When compared to the prior year actual number served in Adult inpatient care of 101, the result is a positive (60.40%) variance. The total number of adults served increased due to the increase in the staffing of 60 additional beds and admitting of additional patients to the hospital. The number of staffed beds has increased from 60 to 120 Central LA State Hospital.

Inpatient Care (Adults-Central Louisiana State					
Hospital) - Average daily census (LAPAS					
CODE - 10124)	89.90	112.51	118.24	119.11	118.70

The average daily census for Adult inpatient care at Central LA State Hospital is 89.88 for fiscal year 2013. When compared to the prior year actual average daily census of 61.36, the result is a positive (46.48%) variance. The average daily census increased due to the increase in the number of adult inpatient days occurring with the admittance of additional patients as the number of staffed beds increased from 60 to 120 beds.

Inpatient Care (Adults-Central Louisiana State Hospital) - Average length of stay in days (LAPAS CODE - 10123)	202.50	234.70	248.00	245.00	271.00
(LAIAS CODE - 10125)	202.50	234.70	248.00	243.00	2/1.00
Inpatient Care (Adults-Central Louisiana State Hospital) - Average daily occupancy rate (LAPAS CODE - 10125)	87.20%	93.80%	98.50%	99.30%	98.90%



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 treatment teams.

Auxiliary Account Budget Summary

	Prior Year Actuals FY 2016-2017	Actuals Enacted		Existing Oper Budget as of 12/01/17	Continuation FY 2018-2019	Recommended FY 2018-2019	Total Recommended Over/(Under) EOB	
Means of Financing:								
State General Fund (Direct)	\$ 0	\$	0	\$ 0	\$ 568	\$ 0	\$ 0	
State General Fund by:								
Total Interagency Transfers	0		0	0	0	0	0	
Fees and Self-generated Revenues	1,225	20,	,000	20,000	20,000	20,000	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	\$ 1,225	\$ 20,	,000,	\$ 20,000	\$ 20,568	\$ 20,000	\$ 0	
Expenditures & Request:								
Personal Services	\$ 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	1,225	20,	,000	20,000	20,568	20,000	0	
Total Acq & Major Repairs	0		0	0	0	0	0	
Total Unallotted	0		0	0	0	0	0	
Total Expenditures & Request	\$ 1,225	\$ 20,	,000	\$ 20,000	\$ 20,568	\$ 20,000	\$ 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 from Fees and Self-generated Revenues. Self-generated Revenues are generated by donations, the sale of patients' goods, and fees from the annual symposium, and must be used for educational purposes.

Major Changes from Existing Operating Budget

Gener	al Fund	Total Amount	Table of Organization	Description
\$	0	\$ 0	0	Mid-Year Adjustments (BA-7s):
\$	0	\$ 20,000	0	Existing Oper Budget as of 12/01/17
				Statewide Major Financial Changes:
				Non-Statewide Major Financial Changes:
\$	0	\$ 20,000	0	Recommended FY 2018-2019
\$	0	\$ 0	0	Less Supplementary Recommendation
\$	0	\$ 20,000	0	Base Executive Budget FY 2018-2019
\$	0	\$ 20,000	0	Grand Total Recommended



09-340 — Office for Citizens w/Developmental Disabilities



Agency Description

The mission of the Office for Citizens with Developmental Disabilities is to provide programmatic leadership necessary in the design and development of services to afford people with developmental disabilities and their families a seamless services system that is responsive to both individual needs and desires. The Office for Citizens with Developmental Disabilities is authorized by R.S. 28:451.1 through 455.2 and R.S. 28:821-824.

The goals of the Office for Citizens with Developmental Disabilities are:

- I. To provide a developmental disabilities services system which affords people access to information about what services and supports are available and how to access those services and supports.
- II. To provide a person-centered system that supports person-centered thinking and planning approaches such that supports identified via needs-based assessments are provided in a manner 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, data-driven quality enhancement system.
- VI. To rebalance the developmental disabilities services system in an efficient and equitable manner to ensure that 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:

- Central Office Administrative Services Program This program includes one activity for administration
 and management, education and training, policy and procedures, accounting and budget control, procurement, property control, travel and fleet coordination, and emergency preparedness functions for the
 agency.
- Community-Based Supports Program This program includes three activities: Central Office function for waiver services management, clinical services, regional operations and oversight, quality, and business analytics; the EarlySteps program; and the Money Follows the Person program.
- Pinecrest Supports and Services Center This program includes three activities: the Pinecrest Facility, the statewide Resource Center, and the ongoing costs associated with the closed / privatized former Supports and Services Centers and the Intermediate Care Facility for Individuals with Intellectual / Developmental Disabilities (ICF/IID) Programmatic Unit.



 Auxiliary Account - This program provides the funding mechanism to provide the residents of the Pinecrest Supports and Services Center with both paid work opportunities and/or therapeutic activities as recommended by an individual's support team.

Statement of Agency Strategies for the 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 LDH 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 LDH Leave for Classified Employees Policy to credit and grant leave in accordance with Civil Service Rules and provisions of the LDH leave policy. Leave is administered as uniformly and equitable as possible without 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 Y 2016-2017	F	Enacted Y 2017-2018	xisting Oper Budget s of 12/01/17	Continuation FY 2018-2019	ecommended Y 2018-2019	Total commended ver/(Under) EOB
Means of Financing:							
State General Fund (Direct)	\$ 24,709,895	\$	22,881,051	\$ 22,882,664	\$ 23,699,454	\$ 22,906,138	\$ 23,474
State General Fund by:							
Total Interagency Transfers	109,555,762		118,451,809	118,451,809	122,865,220	119,578,989	1,127,180
Fees and Self-generated Revenues	1,460,505		4,114,964	4,114,964	4,241,876	4,233,786	118,822
Statutory Dedications	0		0	0	0	0	0
Interim Emergency Board	0		0	0	0	0	0
Federal Funds	0		6,755,851	6,755,851	6,822,055	6,822,055	66,204



Office for Citizens w/Developmental Disabilities Budget Summary

		Prior Year Actuals Y 2016-2017	F	Enacted Y 2017-2018	existing Oper Budget s of 12/01/17	Continuation Y 2018-2019	ecommended Y 2018-2019	Total commended ver/(Under) EOB
Total Means of Financing	\$	135,726,162	\$	152,203,675	\$ 152,205,288	\$ 157,628,605	\$ 153,540,968	\$ 1,335,680
Expenditures & Request:								
Administration and General Support	\$	2,705,921	\$	2,835,239	\$ 2,835,239	\$ 2,891,821	\$ 2,890,262	\$ 55,023
Community-Based		25,029,800		24,981,870	24,981,870	25,451,343	25,031,482	49,612
Pinecrest Supports and Services Center		107,541,396		123,808,481	123,810,094	128,680,444	125,022,317	1,212,223
Auxiliary Account		449,045		578,085	578,085	604,997	596,907	18,822
Total Expenditures & Request	\$	135,726,162	\$	152,203,675	\$ 152,205,288	\$ 157,628,605	\$ 153,540,968	\$ 1,335,680
Authorized Full-Time Equiva	lents	:						
Classified		1,371		1,452	1,452	1,452	1,450	(2)
Unclassified		35		35	35	35	35	0
Total FTEs		1,406		1,487	1,487	1,487	1,485	(2)



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 Central Office Administrative Services 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 and their families to receive information, opportunities for choice, and quality services and supports.

The goal of the Central Office Administrative Services Program is:

I. To provide system design, policy direction, and operational oversight to the developmental disabilities services system in a manner which promotes person-centeredness, evidence-based practices, accountability, cost-effectiveness, and system responsiveness.

The Administrative Services Program activities include the following:

- The activity centralizes the management functions, including waiver services, and provides direction and oversight in carrying out both legislative mandates and programmatic responsibilities on behalf of people with developmental disabilities and their families.
- The activity further manages the administrative support functions including accounting and budget control, procurement, contracts, property control, travel and fleet coordination, communications, and information systems management.
- This activity also provides leadership to both the state-operated Pinecrest Supports and Services Center and the statewide resource center functions.

Administration and General Support Budget Summary

	Prior Year Actuals 7 2016-2017	F	Enacted Y 2017-2018	xisting Oper Budget s of 12/01/17	Continuation FY 2018-2019	ecommended 'Y 2018-2019	Total ommended er/(Under) EOB
Means of Financing:							
State General Fund (Direct)	\$ 2,705,921	\$	2,835,239	\$ 2,835,239	\$ 2,891,821	\$ 2,890,262	\$ 55,023
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	0		0	0	0	0	0



Administration and General Support Budget Summary

		rior Year Actuals 2016-2017	F	Enacted FY 2017-2018	Existing Oper Budget as of 12/01/17	Continuation FY 2018-2019	ecommended FY 2018-2019	Total ecommended ever/(Under) EOB
Total Means of Financing	\$	2,705,921	\$	2,835,239	\$ 2,835,239	\$ 2,891,821	\$ 2,890,262	\$ 55,023
Expenditures & Request:								
Personal Services	\$	2,225,791	\$	2,337,065	\$ 2,337,065	\$ 2,373,437	\$ 2,373,437	\$ 36,372
Total Operating Expenses		29,360		54,901	54,901	56,460	54,901	0
Total Professional Services		0		0	0	0	0	0
Total Other Charges		450,770		443,273	443,273	461,924	461,924	18,651
Total Acq & Major Repairs		0		0	0	0	0	0
Total Unallotted		0		0	0	0	0	0
Total Expenditures & Request	\$	2,705,921	\$	2,835,239	\$ 2,835,239	\$ 2,891,821	\$ 2,890,262	\$ 55,023
Authorized Full-Time Equiva	lents:							
Classified		12		12	12	12	12	0
Unclassified		1		1	1	1	1	0
Total FTEs		13		13	13	13	13	0

Source of Funding

The Administration and General Support Program is funded with State General Fund (Direct).

Major Changes from Existing Operating Budget

Ge	neral Fund	Total Amoun	Table of Organization	Description
\$	0	\$	0 0	Mid-Year Adjustments (BA-7s):
\$	2,835,239	\$ 2,835,2	39 13	Existing Oper Budget as of 12/01/17
				Statewide Major Financial Changes:
	13,703	13,7	0	2% General Increase Annualization Classified
	2,887	2,8	0	Structural Annualization Classified
	42,919	42,9	19 0	Market Rate Classified
	(23,419)	(23,41	9) 0	Related Benefits Base Adjustment
	282	2	32 0	Salary Base Adjustment
	50,170	50,1	70 0	Risk Management
	(5,496)	(5,49	6) 0	Rent in State-Owned Buildings
	(137)	(13	7) 0	Civil Service Fees
	(25,886)	(25,88	6) 0	Office of State Procurement



Major Changes from Existing Operating Budget (Continued)

(General Fund	Т	otal Amount	Table of Organization	Description
					Non-Statewide Major Financial Changes:
\$	2,890,262	\$	2,890,262	13	Recommended FY 2018-2019
\$	0	\$	0	0	Less Supplementary Recommendation
\$	2,890,262	\$	2,890,262	13	Base Executive Budget FY 2018-2019
\$	2,890,262	\$	2,890,262	13	Grand Total Recommended

Professional Services

Amount	Description
	This program does not have funding for Professional Services.

Other Charges

Amount	Description
	Other Charges
	This program does not have funding for Other Charges.
	Interagency Transfers:
\$27,800	Office of Telecommunications Management (OTM) Fees
\$827	Uniform Payroll System (UPS) Fees
\$23,575	Civil Services (CPTP)
\$77,923	Rent in State-Own Buildings
\$14,600	Maintenance in State-Own Buildings
\$126,337	Office of State Procurement
\$190,862	Office of Risk Management (ORM)
\$461,924	SUB-TOTAL INTERAGENCY TRANSFERS
\$461,924	TOTAL OTHER CHARGES

Acquisitions and Major Repairs

Amount	Description
	This program does not have funding for 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 citizens' needs and results in effective and efficient delivery of 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 a supports and services center; 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 with 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	dicator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Percentage of New Opportunities Waiver (NOW) participants making progress toward or achieving personal goals (from quarterly quality review tool) (LAPAS CODE - 24643)	90%	99%	90%	90%	98%	98%
K Percentage of Support Coordinator Supervisors achieving and/or maintaining certification(s) as determined by OCDD (LAPAS CODE - 24644)	85%	88%	85%	85%	85%	85%
K Percentage of budgeted community funding expended (LAPAS CODE - 24647)	98%	98%	98%	98%	98%	98%
K Total number of HCBS and ICF/DD recipients (LAPAS CODE - 25634)	17,060	16,628	17,060	17,060	17,060	17,060



Performance Indicators (Continued)

			Performance In	dicator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Total HCBS and ICF/DD expenditures (LAPAS CODE - 25635)	\$ 896,287,769	\$ 850,050,797	\$ 896,287,769	\$ 896,287,769	\$ 896,287,769	\$ 896,287,769
K Percentage of recipients of HCBS (LAPAS CODE - 25636)	71%	71%	75%	75%	75%	75%
K Percentage of recipients of ICF/DD services (LAPAS CODE - 25637)	29%	29%	25%	25%	25%	25%
S Percentage of expenditures for HCBS (LAPAS CODE - 25638)	54%	56%	60%	60%	60%	60%
S Percentage of expenditures for ICF/DD services (LAPAS CODE - 25639)	46%	44%	40%	40%	40%	40%
S Number of re-admissions to an institutional setting (public or private ICF/DD, nursing facility, acute care hospital, psychiatric hospital) for more than 30 days within one year of transition as My Place Louisiana participant (LAPAS CODE - 25640)	4	4	2	2	2	2
S Percentage of individuals transitioned as a My Place Louisiana participant who do not return to an institutional setting (public or private ICF/DD, nursing facility, acute care hospital, psychiatric hospital) for more than 30 days within one year of transition (LAPAS CODE - 25641)	85%	91%	85%	85%	85%	85%
S Percentage of progress toward My Place Louisiana transitions annual benchmark of number of persons transitioned						
(LAPAS CODE - 25642)	85%	98%	85%	85%	85%	85%



2. (KEY) To provide administrative and support functions to Louisiana's Developmental Disabilities Services System in a manner that is responsive to citizens' needs and results in effective and efficient delivery of 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 a supports and services center; 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 with Real Wages; Sustainable Home and Community-Based Supports and Services - Moving from a Service to a Community Life; and Systems Rebalancing for People with Developmental Disabilities - Promoting Community, Affordability and Sustainability.

Performance Indicators

			Performance Inc	dicator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Percentage of months in the designated period that monthly expenditure reports were delivered accurately and timely (LAPAS CODE - 24653)	100%	100%	100%	100%	100%	100%



Performance Indicators (Continued)

			Performance Inc	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
S Percentage of people surveyed reporting an overall satisfaction with services received (LAPAS CODE - 22461)	90%	94%	90%	90%	90%	90%
S Percentage of people surveyed reporting that they had choice in the services they received (LAPAS CODE - 22462)	90%	94%	90%	90%	90%	90%
S Percentage of Local Governing Entities (LGEs) receiving an annual validation visit (from review of report of validation visits) (LAPAS CODE - 24654)	100%	100%	100%	100%	100%	100%
S Percentage of months in the fiscal year that a monthly contract report was produced reflecting status of Office contracts (LAPAS CODE - 24655)	95%	92%	95%	95%	95%	95%



DEPARTMENT ID: 09 - LOUISIANA DEPARTMENT OF HEALTH AGENCY ID: 340 - Office For Citizens With Developmental Disabilities PROGRAM ID: Program 1000 - Administration PROGRAM ACTIVITY: OCDD Central Office Administration

GENERAL PERFORMANCE INFORMATION:						
SOUTHERN STATE COMPARISON						
	Percentage of Individuals served in Out-of-Home Residential					
Placements in 1-6 Bed S	Settings (June 30, 2013)					
STATE						
Alabama	80.0%					
Arkansas	90.0%					
Florida	74.0%					
Georgia	94.0%					
Kentucky	91.0%					
Louisiana	57.0%					
Maryland	95.0%					
Mississippi	15.0%					
North Carolina	63.0%					
Oklahoma	73.0%					
South Carolina	67.0%					
Tennessee	85.0%					
Texas	81.0%					
Virginia	69.0%					
West Virginia	66.0%					
AVERAGE	73.3%					

Source: Residential Services for Persons with Developmental Disabilities: Status and Trends Through 2013, from the Research and Training Center on Community Living College of Education and Human Development, University of Minnesota. (Retrieved from http://rtc.umn.edu/publications/index.asp#risp) (Note: Most recent published data.)

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DEPARTMENT ID: 09 - LOUISIANA DEPARTMENT OF HEALTH AGENCY ID: 340 - Office For Citizens With Developmental Disabilities PROGRAM ID: Program 1000 - Administration PROGRAM ACTIVITY: OCDD Central Office Administration

GENERAL PERFORMANO	E INFORMATION:				
SOUTHERN STATE COMPARISON					
STATE INSTITUTION (16+) PER DIEM (June 30, 2013)					
STATE PER DIEM					
Alabama	N/A				
Arkansas	N/A				
Florida	\$335				
Georgia	N/A				
Kentucky	DNF				
Louisiana	\$725				
Maryland	DNF				
Mississippi	\$329				
North Carolina	\$569				
Oklahoma	\$563				
South Carolina	DNF				
Tennessee	\$1,120				
Texas	\$648				
Virginia	\$779				
West Virginia	\$379				
AVERAGE	\$605				

DNF=Did not furnish

N/A=No facilities of this type

Source: Residential Services for Persons with Developmental Disabilities: Status and Trends Through 2013, from the Research and Training Center on Community Living College of Education and Human Development, University of Minnesota. (Retrieved from http://rtc.umn.edu/publications/index.asp#risp) (Note: Most recent published data.)

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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 Supports Program is to effectively and efficiently implement 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 through an array of services and supports that include utilization of natural supports.

The goals of the Community-Based Supports Program are:

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 relationships.

II. To increase community capacity and competence in a manner consistent with evidence-based 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 Supports Program includes the following activities:

- The Central Office Community Program Development and Management activity provides state-wide oversight and management of the delivery of individualized community-based supports and services, including Home and Community-Based (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 and programs include, but are not limited to, Flexible Family Funds, Individual and Family Support, State-Funded Case Management, Pre-Admission Screening and Resident Review (PASRR), Intermediate Care Facility for Persons 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).
- The Community Programs Oversight activity provides regional level oversight of the delivery of individualized community-based supports and services.
- The EarlySteps activity identifies and provides services to infants and toddlers with disabilities. This activity provides for Louisiana's early intervention system for children ages birth to three years of age with disabilities and/or developmental delay. Services provided include: audiology, speech-language 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.
- The Money Follows the Person activity provides for the administration of the Money Follows the Person Rebalancing Demonstration Grant. Functions include direct contact with persons in facilities to discuss transition options, facilitate planning for transition, provide financial supports and linkages for transition, and to monitor the service recipient after transition for one year, measuring and ensuring goals related to health, welfare, and quality of life are met.



Community-Based Budget Summary

		Prior Year Actuals 7 2016-2017	F	Enacted Y 2017-2018	Existing Oper Budget s of 12/01/17	Continuation FY 2018-2019	ecommended Y 2018-2019	Total ecommended ver/(Under) EOB
Means of Financing:								
State General Fund (Direct)	\$	22,003,974	\$	15,994,802	\$ 15,994,802	\$ 16,440,732	\$ 16,020,871	\$ 26,069
State General Fund by:								
Total Interagency Transfers		2,493,878		1,813,717	1,813,717	1,671,056	1,671,056	(142,661)
Fees and Self-generated Revenues		531,948		417,500	417,500	517,500	517,500	100,000
Statutory Dedications		0		0	0	0	0	0
Interim Emergency Board		0		0	0	0	0	0
Federal Funds		0		6,755,851	6,755,851	6,822,055	6,822,055	66,204
Total Means of Financing	\$	25,029,800	\$	24,981,870	\$ 24,981,870	\$ 25,451,343	\$ 25,031,482	\$ 49,612
Expenditures & Request:								
Personal Services	\$	5,065,738	\$	6,107,651	\$ 6,107,651	\$ 6,312,215	\$ 6,007,363	\$ (100,288)
Total Operating Expenses		125,471		352,255	352,255	362,259	352,255	0
Total Professional Services		3,675,458		3,697,348	3,697,348	3,802,353	3,697,348	0
Total Other Charges		16,151,270		14,802,746	14,802,746	14,974,516	14,974,516	171,770
Total Acq & Major Repairs		11,863		21,870	21,870	0	0	(21,870)
Total Unallotted		0		0	0	0	0	0
Total Expenditures & Request	\$	25,029,800	\$	24,981,870	\$ 24,981,870	\$ 25,451,343	\$ 25,031,482	\$ 49,612
Authorized Full-Time Equiva	lents:							
Classified		47		47	47	47	45	(2)
Unclassified		1		1	1	1	1	0
Total FTEs		48		48	48	48	46	(2)

Source of Funding

The Community-Based Support Program is funded from the State General Fund (Direct), Interagency Transfers, Federal Funds, and Fees and Self-generated Revenues. Interagency Transfers include Title XIX funds received from the Louisiana Department of Health, Medical Vendor Payments Program, for services provided to Medicaid-eligible individuals. These funds support the Money Follows the Person Demonstration Grant activities. The Federal Funds are available from Part C of the Individuals with Disabilities Education Improvement Act (IDEA). The Fees and Self-generated Revenues are derived from two sources: Early Steps Family Cost Participation receipts, and the sale of Lions Club license plates.



Major Changes from Existing Operating Budget

Ge	eneral Fund	7	Total Amount	Table of Organization	Description
\$	0	\$	0	0	Mid-Year Adjustments (BA-7s):
\$	15,994,802	\$	24,981,870	48	Existing Oper Budget as of 12/01/17
					Statewide Major Financial Changes:
	43,288		43,288	0	2% General Increase Annualization Classified
	31,593		31,593	0	Structural Annualization Classified
	149,502		149,502	0	Market Rate Classified
	3,841		3,841	0	Related Benefits Base Adjustment
	209		209	0	Retirement Rate Adjustment
	(23,869)		(23,869)	0	Salary Base Adjustment
	(211,975)		(211,975)	0	Attrition Adjustment
	(21,870)		(21,870)	0	Non-Recurring Acquisitions & Major Repairs
	(410)		(410)	0	Civil Service Fees
	21,048		21,048	0	Office of Technology Services (OTS)
					Non-Statewide Major Financial Changes:
	(66,204)		0	0	Means of financing substitution replacing State General Fund (Direct) with Federal Funds due to an increased allocation from a federal grant from the U.S. Department of Education (USDOE). Each year the allocation is adjusted based on the population of children ages birth to three years old.
	(100,000)		0	0	Means of financing substitution replacing State General Fund (Direct) with Fees and Self-generated Revenues based on anticipated receipts from Family Cost Participation.
	649,947		649,947	0	Adjustment in service costs due to an increased number of eligible children being served based on an increased number of referrals to the EarlySteps Program. As more physicians and agencies (such as DCFS) have become aware of Early Steps program services in recent years, and due to changes in federal requirements, the agency anticipates an increase in program participants for the request year.
	(106,154)		(248,815)	0	Adjusted funding to account for changes in Request for Services Registry (RFSR) screening initiative allocation from FY 18 to FY 19. The intent of the screenings is to allow persons with more critical needs for services to more rapidly gain access to needed services.
	(50,070)		(50,070)	(1)	Children's Choice Waiver Staff Reduction
	(42,807)		(42,807)	(1)	Supports Waiver Staff Reduction
	(250,000)		(250,000)	0	Non-recur one-time funding.
\$	16,020,871	\$	25,031,482	46	Recommended FY 2018-2019
\$	0	\$	0	0	Less Supplementary Recommendation
\$	16,020,871	\$	25,031,482	46	Base Executive Budget FY 2018-2019
\$	16,020,871	\$	25,031,482	46	Grand Total Recommended



Professional Services

Amount	Description
	Professional Services
\$3,697,348	EarlySteps - Direct support and therapy services to children and families enrolled in Louisiana's EarlySteps Program.
\$3,697,348	TOTAL PROFESSIONAL SERVICES

Other Charges

Amount	Description
	Other Charges:
\$213,262	Central Office, Request for Services Registry (RFSR) Screenings - This expenditure provides for urgency of need screenings for persons on the Request for Services Registry to determine a prioritization for access for 1915c Home and Community Based Services. This initiative for both OCDD and LDH was established based on feedback from stakeholder groups, collaboration with internal LDH stakeholders, and research on best practices.
\$55,906	Central Office, Supports Intensity Scale (SIS) Screenings - This expenditure item provides for provides assessments of individuals for the allocation of New Opportunities Waiver (NOW) program resources based on need. The resource allocation model is implemented pursuant to HR 190 and SR 180 of 2008 RS. The General Appropriation Act further requires continued implementation of cost containment strategies in NOW.
\$184,215	Central Office, Transitional Expenses Planning and Approval (TEPA) - TEPA expenditures provide for one-time transitional expenses used to assist people aged 18 years or older who have chosen to move from a public or private ICF/DD to a home or apartment of their own with New Opportunities Waiver (NOW) waiver services. These transitional expenses have a lifetime cap of \$3,000 and provide for expenses necessary for individuals to successfully transition to community living including moving expenses, bedroom/living room furniture, eating utensils, cleaning, pest control, and similar transitional expenses.
\$181,994	Central Office, Specialized Services - These services include those that assist people diagnosed with an Autism Spectrum disorder and their families, services that transition individuals from institutions who want to live in the community. Services also promote a strategic approach to providing 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. Other specialized services include statutory funding from Lions Club license plate sales for Louisiana Lions Eye Foundation in New Orleans and the Louisiana Lions Camp in Leesville.
\$61,613	Central Office - advocacy, peer monitoring and support services, training services.
\$155,090	Central Office, Guardianship Services - These services protect 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 serve as the spokesperson for individuals with developmental disabilities, in order to protect legal rights, when no family member is available.
\$12,860,754	EarlySteps - EarlySteps is Louisiana's early intervention system for children ages birth to three years of age with disabilities and/or developmental delays. Supports are provided according to the requirements of the Individuals with Disabilities Education Improvement Act (IDEA), Part C. 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.
\$730,875	Money Follows the Person – These funds represent services provided directly to individuals with developmental disabilities in transitioning from an institution to a home or community-based living setting. Services are provided to individuals who qualify for assistance under the federal Money Follows the Person (MFP) Rebalancing Demonstration Grant, first awarded to Louisiana in 2007. The Louisiana implementation of this grant is made via My Place Louisiana. The funds are available to OCDD as IAT-Revenues from Medicaid. The Federal program is designed to assist Medicaid in improving both the long-term care system and the transition process. The Medicaid program office works with both OCDD and the Office of Aging and Adult Services to implement the demonstration program. Louisiana is one of forty participating states and the District of Columbia.
\$14,443,709	SUB-TOTAL OTHER CHARGES
	Interagency Transfers:
\$159,034	Office of Telecommunications Management (OTM) Fees
\$45	Uniform Payroll System (UPS) Fees
\$113,859	Governor's Office - State Interagency Coordinating Council for Early Steps
\$32,336	Civil Services Fees
\$73,526	Office of State Buildings and Grounds



Other Charges (Continued)

Amount	Description
\$8,256	Unemployment Compensation
\$143,751	Office of Technology Services
\$530,807	SUB-TOTAL INTERAGENCY TRANSFERS
\$14,974,516	TOTAL OTHER CHARGES

Acquisitions and Major Repairs

Amount	Description
	This program does not have funding for Acquisitions and Major Repairs.

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 natural and 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 a supports and services center; 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 with Real Wages; Sustainable Home and Community-Based Supports and Services - Moving from a Service to a Community Life; and Systems Rebalancing for People with Developmental Disabilities - Promoting Community, Affordability and Sustainability.



Performance Indicators

			Performance Ind	icator Values		
L e v e Performance Indicator I Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Percentage of funded Residential Options Waiver (ROW) opportunities utilized (LAPAS CODE - 22479)	95%	12%	95%	95%	95%	95%
K Percentage of available Supports Waiver (SW) opportunities utilized (LAPAS CODE - 22478)	95%	87%	95%	95%	95%	95%
K Percentage of available Children's Choice (CC) waiver opportunities utilized (LAPAS CODE - 22476)	95%	74%	95%	95%	95%	95%
K Percentage of available New Opportunities Waiver (NOW) opportunities utilized (LAPAS CODE - 22477)	95%	95%	95%	95%	95%	95%
S Percentage of waiver participants who remain in the community and do not require admission to a more restrictive setting (LAPAS CODE - 24660)	97.0%	0.2%	97.0%	97.0%	97.0%	97.0%
Performance Indicator reword	ed in FY 16-17; prev	vious performance fi	gure does not match	updated wording.		
S Number of individuals participating in HCBS Waivers who utilize self- direction (LAPAS CODE - 25036)	330	810	700	700	700	700
S Number of persons in individual integrated employment (LAPAS CODE - 25035)	225	1,005	225	225	225	225
K Number of years on Request for Services Registry until offered a New Opportunities Waiver (NOW) opportunity (LAPAS CODE - 24648)	8.9	12.9	8.9	8.9	8.9	8.9



Performance Indicators (Continued)

				Performance In	dicator Values		
L				Performance			
e		Yearend		Standard as	Existing	Performance At	Performance
\mathbf{v}		Performance	Actual Yearend	Initially	Performance	Continuation	At Executive
e	Performance Indicator	Standard	Performance	Appropriated	Standard	Budget Level	Budget Level
1	Name	FY 2016-2017	FY 2016-2017	FY 2017-2018	FY 2017-2018	FY 2018-2019	FY 2018-2019

As of FY 18-19, the number of years is based on only those individuals who have been identified as having "emergent" or "urgent" needs.

As of 1 1 10-17, the number of	y cars is cased on only a		o 114 / 0 0 0 0 11 14 0 11 11 11 11 1	a us having emerge	ne or ungene need	
K Number of years on Request for Services Registry until offered a Children's Choice (CC) opportunity (LAPAS CODE - 24649)	8.3	11.0	8.3	8.3	8.3	8.3
K Number of years on Request for Services Registry until offered a Supports Waiver (SW) opportunity (LAPAS CODE - 24650)	1.7	2.4	1.7	1.7	1.7	1.7
K Number of individuals with developmental disabilities supported through HCBS Waivers (LAPAS CODE - 25034)	11,859	11,489	11,859	11,859	11,859	11,859

Community-Based General Performance Information

		Perfo	mance Indicator V	alues	
Performance Indicator Name	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016	Prior Year Actual FY 2016-2017
Number of allocated New Opportunities Waiver (NOW) slots (LAPAS CODE - 7964)	8,832	8,832	8,832	9,032	9,032
Number of allocated Children's Choice waiver slots (LAPAS CODE - 12055)	1,475	1,475	1,475	1,475	1,475
Number of allocated Supports Waiver slots (LAPAS CODE - 22240)	2,050	2,188	2,050	2,050	2,050
Number of allocated Residential Options Waiver (ROW) slots (LAPAS CODE - 22265)	210	210	210	210	210

2. (KEY) To provide support 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 a supports and services center; 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 with Real Wages; Sustainable Home and Community-Based Supports and Services - Moving from a Service to a Community Life; and Systems Rebalancing for People with Developmental Disabilities - Promoting Community, Affordability and Sustainability.

Performance Indicators

			Performance Inc	dicator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Percentage of infants and toddlers in the state that are identified as eligible for EarlySteps (LAPAS CODE - 24663)	2%	3%	2%	2%	2%	2%
S Percentage of Individual Family Services Plans developed within 45 days of referral for eligible infants and families (LAPAS CODE - 24664)	97%	99%	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)	94%	95%	94%	94%	94%	94%
K Percentage of families referred for entry to developmental disability services whose applications are processed by Local Governing Entities (LAPAS CODE - 24666)	95%	100%	95%	95%	98%	98%



Performance Indicators (Continued)

S Percentage of families reporting that early intervention improved their ability to help their child develop and learn. (LAPAS CODE - 26178) Not Applicable Not Applicable 95% 95% 95% This Performance Indicator was new in FY 17-18. S Percentage of children enrolled in EarlySteps who are able to access, participate in and receive supports in early care and education settings when identified as a family priority (LAPAS CODE -	L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Ind Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
S Percentage of children enrolled in EarlySteps who are able to access, participate in and receive supports in early care and education settings when identified as a family priority (LAPAS CODE -	reporting that early intervention improved their ability to help their child develop and learn.			95%	95%	95%	95%
enrolled in EarlySteps who are able to access, participate in and receive supports in early care and education settings when identified as a family priority (LAPAS CODE -	This Performance Indicator w	as new in FY 17-18.					
New) Not Applicable Not Applicable Not Applicable 95.0%	enrolled in EarlySteps who are able to access, participate in and receive supports in early care and education settings when identified as a family	Not Applicable	Not Applicable	Not Applicable	Not Applicable	95.0%	95.0%



340_6000 — Pinecrest Supports and Services Center

Program Authorization: R.S. 28:451.1-455.2, 28:451.4, and 40:2180-2180.5

Program Description

The Pinecrest Supports and Services Center / Resource Center Program provides for three budget activities: (1) Residential Services (Pinecrest Supports and Services Center), (2) the statewide Resource Center, and (3) Closed Facilities Cost and ICF/IID Programmatic Unit.

The mission of Residential Services is to support people with intellectual and developmental disabilities to reach treatment goals and to return to more integrated community living settings. The Residential Services activity specializes in the treatment of people with comorbid intellectual and developmental disabilities and complex medical, behavioral, and psychiatric support needs.

The goals of the Residential Services activity are:

- I. To provide specialized residential services to individuals with intellectual and developmental disabilities and comorbid complex medical, behavioral, and psychiatric needs in a manner that supports the goal of returning or transitioning individuals to community-based service options.
- II. To provide services in a manner that is efficient, effective and supports choice, dignity, and quality of life.

The Residential Services activity manages the only state-operated supports and services center, a 24-hour active treatment facility, as 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 facility. Following Title XIX (Medicaid) regulations, the center's comprehensive services and supports are administered by direct support, professional, health care, support and administrative staff and contracted specialty medical services. This activity supports the effort to re-balance expenditures inclusive of emphasis on shifting from institutional to community services consistent with national norms.

The mission of the statewide Resource Center activity is to collaborate with private providers to assist with identification of support needs, as well as develop activities/interventions/products that improve their ability to achieve positive outcomes for persons with developmental disabilities.

The goal of the Resource Center 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.

The Resource Center activity directs and manages the activities of clinicians statewide, including the Community Support Teams and Psychologists, who provide training, consultation, technical assistance to service and caregiver resources in the community (i.e., private support staff agencies, community homes, families, and schools) to meet the complex medical, behavior and psychiatric support needs of persons 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 individuals with developmental disabilities and complex support needs.



The Closed Facilities Cost and ICF/IID Programmatic Unit activity represents two functions: (1) the legacy costs associated with public Intermediate Care Facilities for Persons with Developmental Disabilities (ICF/DD) that have been closed or whose operations have been privatized; and (2) a programmatic oversight function to partner with ICF/DD provider agencies and provide training, technical assistance, and monitoring to these facilities.

The first function, Closed Facilities Cost, provides for legacy costs associated with public Intermediate Care Facilities for Persons with Developmental Disabilities that have been closed or whose operations have been privatized, as well as maintenance costs for remaining properties. An ICF/DD is a facility that provides 24-hour personal care, habilitation, developmental, and supportive health services to individuals with developmental disabilities whose primary need is for developmental services and who may have a recurring, but intermittent, need for skilled nursing services. Historically, OCDD operated nine such ICF/DD facilities. Three of the original state-operated facilities were privatized through Cooperative Endeavor Agreements; two of these facilities remain open today and are actively engaging in a downsizing plan. Six of the original facilities have been closed. The costs funded through this activity may include group insurance for retirees from closed or privatized facilities, risk management costs associated with those facilities, and certain operating and maintenance costs.

The second function, ICF/IID Programmatic Unit, is intended to ensure that supports and services are planned and provided in a person-centered manner and to ensure supports and services are having the desired outcomes for people who reside in private ICF/IID facilities, as well as those operated under a Cooperative Endeavor Agreement. This includes 529 facilities and close to 3,900 recipients state-wide. The unit will provide technical assistance, clinical guidance, and training to facilitate the successful partnering with ICF/DD provider agencies.

Pinecrest Supports and Services Center Budget Summary

	Prior Year Actuals Y 2016-2017	1	Enacted FY 2017-2018	Existing Oper Budget as of 12/01/17	Continuation FY 2018-2019	ecommended Y 2018-2019	Total ecommended Over/(Under) EOB
Means of Financing:							
State General Fund (Direct) State General Fund by:	\$ 0	\$	4,051,010	\$ 4,052,623	\$ 4,366,901	\$ 3,995,005	\$ (57,618)
Total Interagency Transfers	107,061,884		116,638,092	116,638,092	121,194,164	117,907,933	1,269,841
Fees and Self-generated Revenues	479,512		3,119,379	3,119,379	3,119,379	3,119,379	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	\$ 107,541,396	\$	123,808,481	\$ 123,810,094	\$ 128,680,444	\$ 125,022,317	\$ 1,212,223
Expenditures & Request:							
Personal Services	\$ 83,748,669	\$	96,998,576	\$ 97,000,189	\$ 100,755,342	\$ 97,469,111	\$ 468,922
Total Operating Expenses	9,624,946		9,721,901	10,321,901	10,661,539	10,379,178	57,277
Total Professional Services	1,176,195		2,640,443	2,640,443	2,729,978	2,640,443	0



Pinecrest Supports and Services Center Budget Summary

	Prior Year Actuals FY 2016-2017	Enacted FY 2017-2018	Existing Oper Budget as of 12/01/17	Continuation FY 2018-2019	Recommended FY 2018-2019	Total Recommended Over/(Under) EOB
Total Other Charges	11,921,523	13,181,035	12,581,035	13,292,772	13,292,772	711,737
Total Acq & Major Repairs	1,070,063	1,266,526	1,266,526	1,240,813	1,240,813	(25,713)
Total Unallotted	0	0	0	0	0	0
Total Expenditures & Request	\$ 107,541,396	\$ 123,808,481	\$ 123,810,094	\$ 128,680,444	\$ 125,022,317	\$ 1,212,223
Authorized Full-Time Equival	ents:					
Classified	1,308	1,389	1,389	1,389	1,389	0
Unclassified	33	33	33	33	33	0
Total FTEs	1,341	1,422	1,422	1,422	1,422	0

Source of Funding

The Pinecrest Supports and Services Center Program is funded from the State General Fund (Direct), Interagency Transfers, and Fees and Self-generated Revenue. Interagency Transfers include Title XIX funds received from the Louisiana Department of Health, Medical Vendor Payments Program, as reimbursement for services to Medicaid-eligible residents. Fees and Self-generated Revenue includes non-Medicaid dental and Early Steps, rental of buildings, training, and Ineligible Patient Fees. Ineligible Patient Fees are determined by unearned income plus countable wages.

Major Changes from Existing Operating Budget

Gei	neral Fund	Т	otal Amount	Table of Organization	Description
\$	1,613	\$	1,613	0	Mid-Year Adjustments (BA-7s):
\$	4,052,623	\$	123,810,094	1,422	Existing Oper Budget as of 12/01/17
					Statewide Major Financial Changes:
	0		592,990	0	2% General Increase Annualization Classified
	1,882		1,882	0	2% General Increase Annualization Unclassified
	0		172,706	0	Structural Annualization Classified
	0		2,013,295	0	Market Rate Classified
	0		257,557	0	Civil Service Training Series
	0		1,039,659	0	Related Benefits Base Adjustment
	0		(322,936)	0	Salary Base Adjustment
	0		(3,286,231)	0	Attrition Adjustment
	0		1,240,813	0	Acquisitions & Major Repairs
	(59,500)		(1,266,526)	0	Non-Recurring Acquisitions & Major Repairs
	0		552,963	0	Risk Management
	0		(2,093)	0	UPS Fees
	0		(2,186)	0	Civil Service Fees



Major Changes from Existing Operating Budget (Continued)

Gei	neral Fund	Т	otal Amount	Table of Organization	Description
	0		163,053	0	Office of Technology Services (OTS)
					Non-Statewide Major Financial Changes:
	0		57,277	0	Increase in the food service contract by 2%. This increase is factored into the contract and is based on normal annual increase in food and equipment costs.
\$	3,995,005	\$	125,022,317	1,422	Recommended FY 2018-2019
\$	0	\$	0	0	Less Supplementary Recommendation
\$	3,995,005	\$	125,022,317	1,422	Base Executive Budget FY 2018-2019
\$	3,995,005	\$	125,022,317	1,422	Grand Total Recommended

Professional Services

Amount	Description
	Professional Services
\$389,887	Pinecrest Facility - personal services contracts including medical sitter services, interpreter/sign language, and speech language therapy and dysphagia services at the facility.
\$959,691	Pinecrest Facility - professional medical services including orthopedic clinics, epileptology/neurology clinic and services, medical consultation, gastroenterology, autopsy, podiatry, psychiatric, neuropsychological, comprehensive and on-call dental, psychological services for the facility.
\$37,657	Pinecrest Facility - professional non-medical services relative to compliance including waste water treatment and engineering services for the sewer treatment plant at the facility.
\$1,074,504	Pinecrest Facility - other professional, personal and consulting services related to conditions of participation.
\$11,600	Pinecrest Facility - management and consulting services related to facility accreditation and training.
\$71,000	Pinecrest Facility - Accreditation Quality Review.
\$51,000	Pinecrest Facility - direct care staff training needs.
\$16,104	Resource Centers - specialty medical services provided through the statewide Resource Centers activity.
\$29,000	Closed Facilities Cost - contracted engineering services associated with facilities closed and privatized.
\$2,640,443	TOTAL PROFESSIONAL SERVICES

Other Charges

Amount	Description
	Other Charges:
\$2,600,496	Pinecrest Facility - long-term care provider fees paid to the Louisiana Department of Health based on the number of occupied beds.
\$279,321	Pinecrest Facility - other services required for the care of individuals, including medical and professional services and therapies, and expenditures associated with conditions of participation in the ICF/DD program.



Other Charges (Continued)

Amount	Description
\$471,452	Pinecrest Facility - Client wages expenses to provide compensation to facility residents who perform jobs for the Pinecrest facility.
\$71,978	Pinecrest Facility - recreational activities, relative to quality of life conditions for certification, consistent with a resident's comprehensive assessment and plan of care. Includes facility-sponsored group and individual activities and independent activities that encourage both independence and community interaction.
\$201,266	Closed Facility Costs - court mandated costs associated with the medical expenses of an individual.
\$3,624,513	SUB-TOTAL OTHER CHARGES
	Interagency Transfers:
\$129,610	Office of Telecommunications Management (OTM) Fees
\$77,146	Uniform Payroll System (UPS) Fees
\$10,595	Department of Corrections work crews
\$6,171,203	Office of Risk Management (ORM)
\$717,321	Department of Education-Special School District #1
\$51,146	Department of Civil Service (CPTP Program)
\$2,967	Division of Administration-Statewide Mail Service
\$477,172	Unemployment Insurance and Closeout Cost
\$287,245	Department of Civil Service Fees
\$1,743,854	Office of Technology Services
\$9,668,259	SUB-TOTAL INTERAGENCY TRANSFERS
\$13,294,958	TOTAL OTHER CHARGES

Acquisitions and Major Repairs

Amount	Description
	Acquisitions and Major Repairs
\$1,240,813	Provides funding to implement and enable the facility to have the equipment and resources necessary to meet required standards of care.
\$1,240,813	TOTAL ACQUISITIONS AND MAJOR REPAIRS

Performance Information

1. (KEY) To further decrease reliance on public residential supports and 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 a 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.

Performance Indicators

			Performance Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Number of people transitioned to private provider community options according to assessment/support team recommendations (LAPAS CODE - 22522)	25	39	25	25	35	35
K Number of re-admissions to center within one year of transition (LAPAS CODE - 24697)	1	4	1	1	4	4
K Percentage of Conditions of Participation in compliance during Health Standard Reviews (LAPAS CODE - 22519)	100%	100%	100%	100%	100%	100%

2. (KEY) To increase successful re-entry into traditional community settings for individuals with developmental disabilities who require specialized therapeutic, psychiatric and behavioral supports/stabilization.

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 a 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.



			Performance Inc	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Percentage of individuals discharged who do not return to therapeutic program within one year (LAPAS CODE - 24703)	85%	92%	85%	85%	85%	85%
K Average length of stay (years) in the therapeutic program for individuals admitted within the last five years (LAPAS CODE - 25643)	4	2	4	4	2	2

3. (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 a 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.



				Performance Inc	dicator Values		
	ance Indicator Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
served by to centers' me allied healt behavioral professional in their mo	dical/nursing, h, and	90%	97%	90%	90%	90%	90%
reporting sa across the I Quality (PI	Partners in Q) assessed tions (LAPAS	90%	93%	90%	90%	90%	90%
reporting sa across the I Quality (PI	Partners in Q) assessed reas (LAPAS	90%	100%	90%	90%	90%	90%
_	providers Lesource Center LAPAS CODE -	490	552	490	490	550	550
	resource center ents (LAPAS 692)	266	191	266	266	200	200
technical as	resource center ssistance APAS CODE -	120	328	120	120	348	348
	resource center ns (LAPAS 695)	760	613	760	760	600	600
resource ce	of customers satisfaction with nter services ODE - 24696)	90%	98%	90%	90%	98%	98%
This perfor	mance indicator pre	eviously included or	nly "training offered	l." It now includes al	ll resource center ser	vices.	



340_A000 — Auxiliary Account

Program Authorization: R.S. 451.1-455.2.

Program Description

The mission of the Auxiliary Account activity is to support people with developmental disabilities residing in Pinecrest Supports and Services Center 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 the residents of the state-operated supports and services center through a growing and diverse range of community options and resources.

The Auxiliary Account includes the following single activity:

 The Auxiliary Services program provides the funding mechanism to provide residents of the state-operated supports and services center with both paid work opportunities and/or therapeutic activities as recommended by their support teams.

Auxiliary Account Budget Summary

	Prior Year Actuals 7 2016-2017	1	Enacted FY 2017-2018	Existing Oper Budget as of 12/01/17	Continuation FY 2018-2019	tecommended FY 2018-2019	Total decommended 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	449,045		578,085	578,085	604,997	596,907	18,822
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	\$ 449,045	\$	578,085	\$ 578,085	\$ 604,997	\$ 596,907	\$ 18,822
Expenditures & Request:							
Personal Services	\$ 142,571	\$	192,246	\$ 192,247	\$ 219,159	\$ 211,069	\$ 18,822
Total Operating Expenses	0		0	0	0	0	0



Auxiliary Account Budget Summary

	Prior Year Actuals FY 2016-2017	Enacted FY 2017-2018	Existing Oper Budget as of 12/01/17	Continuation FY 2018-2019	Recommended FY 2018-2019	Total Recommended Over/(Under) EOB
Total Professional Services	0	0	0	0	0	0
Total Other Charges	306,474	385,839	385,838	385,838	385,838	0
Total Acq & Major Repairs	0	0	0	0	0	0
Total Unallotted	0	0	0	0	0	0
Total Expenditures & Request	\$ 449,045	\$ 578,085	\$ 578,085	\$ 604,997	\$ 596,907	\$ 18,822
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 from Fees and Self-generated Revenues. Fees and Self-generated Revenues are derived from the sale of merchandise in the patient canteen to finance the operation of the Patient Recreation Fund activities.

Major Changes from Existing Operating Budget

Genera	al Fund	Total Amount		Table of Organization	Description
\$	0	\$	0	0	Mid-Year Adjustments (BA-7s):
\$	0	\$	578,085	4	Existing Oper Budget as of 12/01/17
					Statewide Major Financial Changes:
	0		970	0	2% General Increase Annualization Classified
	0		2,989	0	Market Rate Classified
	0		(10,490)	0	Related Benefits Base Adjustment
	0		33,443	0	Salary Base Adjustment
	0		(8,090)	0	Attrition Adjustment



Major Changes from Existing Operating Budget (Continued)

Genera	l Fund	Т	otal Amount	Table of Organization	Description
					Non-Statewide Major Financial Changes:
\$	0	\$	596,907	4	Recommended FY 2018-2019
\$	0	\$	0	0	Less Supplementary Recommendation
Ф	0	¢.	507.007	4	B E (B I (EV 2010 2010
\$	0	\$	596,907	4	Base Executive Budget FY 2018-2019
\$	0	\$	596,907	4	Grand Total Recommended
•		*	,		

Professional Services

Amount	Description
	This program does not have funding for Professional Services.

Other Charges

Amount	Description
	Other Charges:
\$385,839	Auxiliary - Provides for opportunities to engage residents of Pinecrest Supports and Services Center in paid work, vocational skills training, and other therapeutic activities in accordance with Interdisciplinary Team recommendations, as part of the residents' active treatment programs.
\$385,839	SUB-TOTAL OTHER CHARGES

Acquisitions and Major Repairs

Amount	Description
	This program does not have funding for Acquisitions and Major Repairs.



Performance Information

1. (KEY) To provide the residents of the state-operated supports and services center (Pinecrest) with opportunities for paid work and/or therapeutic activities, 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 a supports and services center; 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 to a Community Life; and Systems Rebalancing for People with Developmental Disabilities - Promoting Community, Affordability and Sustainability.

Performance Indicators

I e v		Yearend Performance Standard	Actual Yearend Performance	Performance In Performance Standard as Initially Appropriated	dicator Values Existing Performance Standard	Performance At Continuation Budget Level	Performance At Executive Budget Level
1	Name	FY 2016-2017	FY 2016-2017	FY 2017-2018	FY 2017-2018	FY 2018-2019	FY 2018-2019
ŀ	C Percentage of residents of the state-operated supports and services center who have paid work and/or therapeutic activities as recommended by their support teams (LAPAS						
	CODE - 24264)	95%	95%	95%	95%	95%	95%



09-375 — Imperial Calcasieu Human Services Authority

Agency Description

The mission of Imperial Calcasieu Human Services Authority (ImCal HSA) is to ensure that citizens with mental health, addictions, and developmental challenges residing in the parishes of Allen, Beauregard, Calcasieu, Cameron, and Jefferson Davis are empowered, and self-determination is valued such that individuals live satisfying, hopeful, and contributing lives.

The Imperial Calcasieu Human Services Authority shall adhere to the principles of effectiveness, efficiency, and egalitarianism. The ImCal HSA shall maintain objective data derived from evidence-based practices and implementation efforts that rationally explain its efforts to maximize all resources within its control.

Individuals receiving services will have access to evidence based services that are responsive to their needs and cost effective so that:

- I. Individuals with acute illnesses are able to rapidly resume optimal functioning;
- II. Individuals with chronic illness may live in a safe environment that encourages personal growth;
- III. Youth and Families strengths and resilience are enhanced;
- IV. The voice of and collaboration with Individuals in the community is enhanced

ImCal HSA will make use of best practices in implementing, evaluating, monitoring, modifying existing services so that quality is assured, services meet the needs of those served, and the variety of services available adequately address the range of behavioral health issues identified, or that services are further developed to address service gaps.

For additional information, see:

DHH: Imperial Calcasieu Human Services Authority

Imperial Calcasieu Human Services Authority Budget Summary

	Prior Year Actuals 7 2016-2017	F	Enacted FY 2017-2018	Existing Oper Budget as of 12/01/17	Continuation FY 2018-2019	ecommended FY 2018-2019	Total commended ver/(Under) EOB
Means of Financing:							
State General Fund (Direct)	\$ 7,311,222	\$	7,580,900	\$ 7,580,900	\$ 8,620,008	\$ 8,087,821	\$ 506,921
State General Fund by:							
Total Interagency Transfers	1,339,957		2,088,939	2,088,939	2,088,939	2,088,939	0
Fees and Self-generated							
Revenues	0		1,091,337	1,091,337	1,091,337	1,091,337	0
Statutory Dedications	0		0	0	0	0	0
Interim Emergency Board	0		0	0	0	0	0



Imperial Calcasieu Human Services Authority Budget Summary

		Prior Year Actuals / 2016-2017	F	Enacted Y 2017-2018	Existing Oper Budget as of 12/01/17	Continuation FY 2018-2019	ecommended 'Y 2018-2019	Total ecommended ever/(Under) EOB
Federal Funds		0		399,949	399,949	399,949	399,949	0
Total Means of Financing	\$	8,651,179	\$	11,161,125	\$ 11,161,125	\$ 12,200,233	\$ 11,668,046	\$ 506,921
Expenditures & Request:								
Imperial Calcasieu Human Services Authority	\$	8,651,179	\$	11,161,125	\$ 11,161,125	\$ 12,200,233	\$ 11,668,046	\$ 506,921
Total Expenditures & Request	\$	8,651,179	\$	11,161,125	\$ 11,161,125	\$ 12,200,233	\$ 11,668,046	\$ 506,921
Authorized Full-Time Equiva	lents:							
Classified		0		0	0	0	0	0
Unclassified		0		0	0	0	0	C
Total FTEs		0		0	0	0	0	0



375_1000 — Imperial Calcasieu Human Services Authority

Program Description

The Imperial Calcasieu Human Services Authority program includes the following activities:

- Administration 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. LDH, 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 governing entities (LGEs). The ImCal HSA local governing entity operates within a framework with clear policy objectives, well-defined local roles and responsibilities, and measures to assure accountability, effectiveness and efficiency in the delivery of quality services to individuals within the ImCal HSA service area.
- Behavioral Health ImCal HSA provides a comprehensive system of services addressing the ongoing Behavioral Health needs of individuals with mental, substance use or emotional/behavioral disorders in the community via direct program operation or provision of funding for services through contractual agreements. ImCal HSA operates outpatient and intensive outpatient behavioral health programs which provide mental health and addictive disorder services for children, adolescents and adults. The scope of core services provided within these programs include screening, triage, and referral; psychosocial assessment and psychiatric evaluation; person-centered treatment planning; individual and group counseling; psycho-education; medication management; peer support groups, comprehensive transition and discharge planning. Contracted services include substance abuse prevention, intensive and non-intensive residential addiction services, case management, housing, crisis intervention and referral, community based treatment and support services, outreach and referral for homeless or other underserved populations, and consumer care resources to provide financial support to clients and families. All Behavioral Health clinics in the Imperial Calcasieu Human Services Authority participate as Medicaid Application Centers for persons requesting services.
- Developmental Disabilities ImCal HSA provides core services for individuals with Developmental Disabilities which 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. DD services include the assessment of needs for support and services, development of individual plans of support, making applicable referrals, and providing ongoing coordination for the individual'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.



Imperial Calcasieu Human Services Authority Budget Summary

		rior Year Actuals 2016-2017	F	Enacted Y 2017-2018	Existing Oper Budget as of 12/01/17		Continuation FY 2018-2019		Recommended FY 2018-2019		Total ecommended Over/(Under) EOB
Means of Financing:											
State General Fund (Direct)	\$	7,311,222	\$	7,580,900	\$	7,580,900	\$	8,620,008	\$	8,087,821	\$ 506,921
State General Fund by:											
Total Interagency Transfers		1,339,957		2,088,939		2,088,939		2,088,939		2,088,939	0
Fees and Self-generated Revenues		0		1,091,337		1,091,337		1,091,337		1,091,337	0
Statutory Dedications		0		0		0		0		0	0
Interim Emergency Board		0		0		0		0		0	0
Federal Funds		0		399,949		399,949		399,949		399,949	0
Total Means of Financing	\$	8,651,179	\$	11,161,125	\$	11,161,125	\$	12,200,233	\$	11,668,046	\$ 506,921
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		8,651,179		11,161,125		11,161,125		12,200,233		11,668,046	506,921
Total Acq & Major Repairs		0		0		0		0		0	0
Total Unallotted		0		0		0		0		0	0
Total Expenditures & Request	\$	8,651,179	\$	11,161,125	\$	11,161,125	\$	12,200,233	\$	11,668,046	\$ 506,921
	_										
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, and Federal Funds. The Interagency Transfers are from the Office of Behavioral Health, and Medical Vendor Payments - Title XIX. The Fees and Self-generated Revenues are from patient copays, the collection of fees for services provided to clients who are not eligible for Medicaid services through the Statewide Management Organization, collection of fees for services provided to Medicare-eligible clients, urine screen copays, and DWI copays. Federal Funds are from a grant from the Substance Abuse and Mental Health Services Administration for the provision and integration of primary care services within the Authority's behavioral health clinics.



Major Changes from Existing Operating Budget

G	General Fund 1		otal Amount	Table of Organization	Description
\$	0	\$	0	0	Mid-Year Adjustments (BA-7s):
\$	7,580,900	\$	11,161,125	0	Existing Oper Budget as of 12/01/17
					Statewide Major Financial Changes:
	44,576		44,576	0	2% General Increase Annualization Classified
	26,591		26,591	0	Structural Annualization Classified
	150,733		150,733	0	Market Rate Classified
	21,772		21,772	0	Related Benefits Base Adjustment
	641,003		641,003	0	Salary Base Adjustment
	(383,342)		(383,342)	0	Attrition Adjustment
	(5,136)		(5,136)	0	Risk Management
	(1,460)		(1,460)	0	Legislative Auditor Fees
	(159)		(159)	0	UPS Fees
	(1,618)		(1,618)	0	Civil Service Fees
	13,961		13,961	0	Office of Technology Services (OTS)
					Non-Statewide Major Financial Changes:
\$	8,087,821	\$	11,668,046	0	Recommended FY 2018-2019
\$	0	\$	0	0	Less Supplementary Recommendation
\$	8,087,821	\$	11,668,046	0	Base Executive Budget FY 2018-2019
\$	8,087,821	\$	11,668,046	0	Grand Total Recommended

Professional Services

Amount	Description								
This agency does not have funding for Professional Services.									

Other Charges

Amount	Description
	Other Charges:
\$6,387,317	Salaries and related benefits for Other Charges positions
\$5,046,511	Contractual and operating costs of mental health, addictive disorders and developmental disability services



Other Charges (Continued)

Amount	Description
\$11,433,828	SUB-TOTAL OTHER CHARGES
	Interagency Transfers:
\$21,152	Payments to the Department of Civil Service - Civil Service Fees
\$83,681	Payments to the Division of Administration - Risk Management
\$32,334	Payments to the Legislative Auditor
\$50,276	Payments to the Division of Administration - Technology Services
\$4,244	Payments to the Division of Administration - Uniform Payroll Services
\$42,531	Miscellaneous Commodities and Services
\$234,218	SUB-TOTAL INTERAGENCY TRANSFERS
\$11,668,046	TOTAL OTHER CHARGES

Acquisitions and Major Repairs

Amount	Description	
	This agency does not have funding for Acquisitions and Major Repairs.	

Performance Information

1. (KEY) Through the Administration activity, Imperial Calcasieu Human Services Authority (ImCal HSA) will provide for the management and operational activities of services for addictive disorders, developmental disabilities and mental 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).



L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Ind Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Percentage of clients who indicate they would continue to receive services at ImCal HSA clinics if given the choice to go elsewhere (LAPAS CODE - 25259)	90%	96%	90%	90%	90%	90%
K Percentage of clients who indicate they would recommend ImCal HSA services to family and friends (LAPAS CODE - 25260)	90%	96%	90%	90%	90%	90%

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

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 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Number of adults receiving mental health services in all ImCal HSA behavioral health clinics (LAPAS CODE - 25264)	2,100	3,159	3,000	3,000	3,000	3,000
K Number of children/ adolescents receiving mental health services in all ImCal HSA behavioral health clinics (LAPAS CODE - 25265)	200	471	500	500	500	500
K Percentage of mental health cash subsidy slots utilized (LAPAS CODE - 25268)	100%	100%	100%	100%	100%	100%
K Percentage of individuals successfully completing the 24-hour residential addictive disorders treatment program (LAPAS CODE - 25269)	70%	65%	70%	70%	70%	70%
S Number of clients enrolled in primary care services provided through the ImHealthy Program at LCBHC (LAPAS CODE - 25966)	160	331	200	200	200	200

3. (KEY) Through the Developmental Disabilities activity, to provide core services for individuals with Developmental Disabilities which 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.

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 Indicators

			Performance Inc	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Number of persons receiving individual and family support services (LAPAS CODE - 25275)	230	138	200	200	140	140
K Number of Flexible Family Fund slots utilized (LAPAS CODE - 25276)	100%	100%	100%	100%	100%	100%
K Percentage of eligibility determinations determined to be valid according to Flexible Family Fund provisions (LAPAS CODE - 25277)	95%	100%	100%	100%	100%	100%
K Number of persons receiving developmental disabilities services (LAPAS CODE - 25278)	1,908	1,947	1,700	1,700	1,700	1,700

Imperial Calcasieu Human Services Authority General Performance Information

	Performance Indicator Values								
Performance Indicator Name	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016	Prior Year Actual FY 2016-2017				
Total number of individuals served in the Imperial Calcasieu Human Services Authority (LAPAS CODE - 25279)	13,308	12,326	12,873	10,142	13,415				
Total number of individuals served by outpatient mental health in Imperial Calcasieu Human Services Authority (LAPAS CODE - 25280)	3,488	3,811	4,295	3,973	3,630				
Total number of individuals served by inpatient Addictive Disorders in Imperial Calcasieu Human Services Authority (LAPAS CODE - 25281)	1,198	1,029	1,109	1,210	823				
Total numbers of individuals served by outpatient Addictive Disorders in Imperial Calcasieu Human Services Authority (LAPAS CODE - 25282)	988	914	845	718	759				
Total number of enrollees in prevention programs (LAPAS CODE - 25283)	6,196	4,814	4,583	3,476	5,292				



09-376 — Central Louisiana Human Services District

Agency Description

The mission of the Central 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. Central Louisiana Human Services provides behavioral health and developmental disabilities services for the parishes of Grant, Winn, LaSalle, Catahoula, Concordia, Avoyelles, Rapides and Vernon.

The goals of the Central 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.

For additional information, see:

DHH: Central Louisiana Human Services District

Central Louisiana Human Services District Budget Summary

	rior Year Actuals 2016-2017	F	Enacted Y 2017-2018	xisting Oper Budget s of 12/01/17	Continuation FY 2018-2019	commended Y 2018-2019	Total commended er/(Under) EOB
Means of Financing:							
State General Fund (Direct)	\$ 8,783,277	\$	9,442,822	\$ 9,442,822	\$ 10,052,211	\$ 9,672,970	\$ 230,148
State General Fund by:							
Total Interagency Transfers	3,538,720		4,055,251	4,055,251	3,816,387	3,816,387	(238,864)
Fees and Self-generated Revenues	0		1,502,783	1,502,783	1,502,783	1,502,783	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



Central Louisiana Human Services District Budget Summary

		Prior Year Actuals Y 2016-2017	F	Enacted Y 2017-2018	xisting Oper Budget s of 12/01/17	Continuation Y 2018-2019	ecommended Y 2018-2019	Total ecommended ver/(Under) EOB
Total Means of Financing	\$	12,321,997	\$	15,000,856	\$ 15,000,856	\$ 15,371,381	\$ 14,992,140	\$ (8,716)
Expenditures & Request:								
Central Louisiana Human Services District	\$	12,321,997	\$	15,000,856	\$ 15,000,856	\$ 15,371,381	\$ 14,992,140	\$ (8,716)
Total Expenditures & Request	\$	12,321,997	\$	15,000,856	\$ 15,000,856	\$ 15,371,381	\$ 14,992,140	\$ (8,716)
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



376_1000 — Central Louisiana Human Services District

Organized under the following provisions of the Louisiana revised statutes (LSA-RS) R.S. 373; R.S. 28:912-920.

Program Description

The Central Louisiana Human Services District program includes the following activities:

The Central Louisiana Human Services District was created by Act 373 in the 2008 Legislative Session for the parishes of Grant, Winn, LaSalle, Catahoula, Concordia, Avoyelles, Rapides and Vernon. Central Louisiana Human Services District has received 3 year national accreditation with CARF for its behavioral clinics sites within the region and seeks to maintain the standards of care that are set forth by the CARF accreditation agency for the programs that have been approved for accreditation. The mission of the Administration Activity is to ensure the functioning of the organization at an optimum level of performance in administrative and programmatic quality, while meeting federal, state and other regulatory authorities' guidelines. The Goal of the Administration activity is to oversee and direct the provision of behavioral health and developmental disabilities services in the District. The framework for LGEs consists of clear policies, goals and objectives, well-defined local roles and responsibilities, performance measures that assure accountability for the quality of service delivery and are instrumental in assessing the relative efficiency and effectiveness of public systems. In addition to the management for quality performance of the organization, the administrative activity provides management of fiscal, human resource, technology, safety, and risk management oversite activities of the organization.

Behavioral Health is an activity that includes services provided to Mental Health and Addictive Disorders populations. All Behavioral Health clinics in the Central Louisiana Human Services District serve as Medicaid Application Centers for persons requesting services. CLHSD provides behavioral health and developmental disability services for the residents of Avoyelles, Catahoula, Concordia, Grant, LaSalle, Rapides, Vernon and Winn parishes.

- Behavioral Health (Mental Health) The current budget for mental health services in the Central 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: Intensive Case Management Services, assistance with application for SSI, evidence-based practices such as Assertive Community Treatment, housing and employment assistance.
- Behavioral Health (Addictive Disorders) The District provides Outpatient and Intensive Outpatient (IOP) services for children and Adolescents. Inpatient services are offered via contracted programs serving adults and there is one adolescent inpatient program. Prevention services for addictive populations are implemented by contract providers. The mission of the Behavioral Health Activity is to provide the people we serve with access to comprehensive, integrated, person-family centered system of prevention and treatment services that promote recovery and resilience, have a positive impact on the individual and its community and are culturally and clinically competent and are delivered in partnership with all stakeholders.



The mission of the Developmental Disabilities activity is to assess the need for support and services of developmentally disabled clients and to develop individual plans that will meet those needs, including referrals and coordination of appropriate services. 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.

Central Louisiana Human Services District Budget Summary

	Prior Year Actuals 7 2016-2017	F	Enacted Y 2017-2018		existing Oper Budget s of 12/01/17		Continuation FY 2018-2019		ecommended 'Y 2018-2019		Total ecommended ver/(Under) EOB
Means of Financing:											
		•		•		•		•		•	
State General Fund (Direct)	\$ 8,783,277	\$	9,442,822	\$	9,442,822	\$	10,052,211	\$	9,672,970	\$	230,148
State General Fund by:											
Total Interagency Transfers	3,538,720		4,055,251		4,055,251		3,816,387		3,816,387		(238,864)
Fees and Self-generated Revenues	0		1,502,783		1,502,783		1,502,783		1,502,783		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	\$ 12,321,997	\$	15,000,856	\$	15,000,856	\$	15,371,381	\$	14,992,140	\$	(8,716)
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	12,321,997		15,000,856		15,000,856		15,371,381		14,992,140		(8,716)
Total Acq & Major Repairs	0		0		0		0		0		0
Total Unallotted	0		0		0		0		0		0



Central Louisiana Human Services District Budget Summary

		rior Year Actuals 2016-2017	F	Enacted Y 2017-2018	Existing Oper Budget as of 12/01/17	Continuation FY 2018-2019	ecommended Y 2018-2019	Total commended ver/(Under) EOB
Total Expenditures & Request	\$	12,321,997	\$	15,000,856	\$ 15,000,856	\$ 15,371,381	\$ 14,992,140	\$ (8,716)
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. The Interagency Transfers are from the Office of Behavioral Health, and Medical Vendor Payments - Title XIX. The Fees and Self-generated Revenues are from patient copays and the collection of fees for services provided to clients who are not eligible for Medicaid services through the Statewide Management Organization and collection of fees for services provided to Medicare-eligible clients.

Major Changes from Existing Operating Budget

Ge	General Fund T		ount	Table of Organization	Description
\$	0	\$	0	0	Mid-Year Adjustments (BA-7s):
\$	9,442,822	\$ 15,00	00,856	0	Existing Oper Budget as of 12/01/17
					Statewide Major Financial Changes:
	57,262	5	57,262	0	2% General Increase Annualization Classified
	28,503	2	28,503	0	Structural Annualization Classified
	51,448	5	51,448	0	Market Rate Classified
	136,558	13	36,558	0	Market Rate Unclassified
	1,449		1,449	0	Civil Service Training Series
	137,355	13	37,355	0	Related Benefits Base Adjustment
	4,657		4,657	0	Retirement Rate Adjustment
	(63,036)	(63	3,036)	0	Salary Base Adjustment
	(141,899)	(14)	1,899)	0	Attrition Adjustment
	(134,843)	(134	4,843)	0	Personnel Reductions
	(3,555)	(3	3,555)	0	Risk Management
	16,408	1	16,408	0	Legislative Auditor Fees
	(637)		(637)	0	UPS Fees
	(1,102)	(1	1,102)	0	Civil Service Fees
	3,698		3,698	0	Office of Technology Services (OTS)
					Non-Statewide Major Financial Changes:



Major Changes from Existing Operating Budget (Continued)

Ge	neral Fund	Tot	tal Amount	Table of Organization	Description
	3,039		3,039	0	Technical adjustment to transfer funds from Office of Behavioral Health (OBH) to Acadiana Area Human Services District, Northwest Louisiana Human Services District, Northeast Delta Human Services Authority, and Central Louisiana Human Services District for pharmaceutical supplies as a result of the closure of Shamrock Pharmacy on November 1, 2017.
	0		(238,864)	0	Reduction of Interagency Transfers funding received from Office of Behavioral Health (OBH) due to adjustments in the allocation of Federal grants and Statutory Dedication funding OBH is intending to send to Central Louisiana Human Services District (CLHSD) in FY19.
	134,843		134,843	0	Realigning funds from personnel to Other Charges for needed operating expenses and contracts.
Φ.	0.670.070	Φ.	14.002.140	0	D
\$	9,672,970	\$	14,992,140	0	Recommended FY 2018-2019
\$	0	\$	0	0	Less Supplementary Recommendation
\$	9,672,970	\$	14,992,140	0	Base Executive Budget FY 2018-2019
\$	9,672,970	\$	14,992,140	0	Grand Total Recommended

Professional Services

Amount	Description
	This agency does not have funding for Professional Services.

Other Charges

Amount	Description
	Other Charges:
\$7,000,885	Salaries and related benefits for Other Charges positions
\$7,932,280	Contractual and operating costs of mental health, addictive disorders and developmental disability services
\$14,933,165	SUB-TOTAL OTHER CHARGES
	Interagency Transfers:
\$39,578	Payments to the Division of Administration - Technology Services
\$19,397	Miscellaneous Commodities and Services
\$58,975	SUB-TOTAL INTERAGENCY TRANSFERS
\$14,992,140	TOTAL OTHER CHARGES



Acquisitions and Major Repairs

Amount	Description
	This agency does not have funding for Acquisitions and Major Repairs.

Performance Information

1. (KEY) Through the Administration activity, Central Louisiana Human Services District (CLHSD) will oversee and direct the management and operational activities of Behavioral Health (Mental Health and Addictive Disorders) and Developmental Disabilities.

Children's Budget Link: Central 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 Central Louisiana Human Services District agency's budget.

Human Resource Policies Beneficial to Women and Families Link: The Central 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 Central 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 Central 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 Indicators

L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Ind Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Percentage of CLHSD clients who state they would continue to receive services at our programs if given the choice to go elsewhere. (LAPAS CODE - 25284)	90%	92%	90%	90%	90%	90%
K Percentage of CLHSD clients who state they would recommend our programs to family and friends (LAPAS CODE - 25285)	90%	96%	90%	90%	90%	90%



2. (KEY) The Central Louisiana Human Services District will utilize technology to maintain and advance efficiency of program services, administrative functions and fiscal operations of the district by using performance improvement strategies that include performance analysis, measurement, and reporting.

Children's Budget Link: Central 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 Central Louisiana Human Services District agency's budget.

Human Resource Policies Beneficial to Women and Families Link: The Central Louisiana Human Services District abides by all state Civil Service guidelines and procedures regarding equal opportunities for staff and in particular women and their families. The Central 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 in the Central Louisiana Human Services District Personnel Handbook. Applicable policies are: the Family Medical Leave Policy (29.1), the Sexual Harassment Policy (56.1) and the Equal Employment Opportunity/ Complaints Policy (34.1).

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 Indicator Values							
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019				
S Number of district clinics using the TOMS website to manage satisfaction surveys and programmatic outcomes. (LAPAS CODE - 26173)	Not Available	Not Available	4	4	4	4				
S Number of Tele-medicine sites Districtwide. (LAPAS CODE - 26174)	Not Available	Not Available	4	4	4	4				



		_				
Central Louisian	a Human	Services	District	General	Performance	Information

		Perfo	rmance Indicator V	alues	
Performance Indicator Name	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016	Prior Year Actual FY 2016-2017
Total number of individuals served in the Central Louisiana Human Services District (LAPAS CODE - 25298)	20,337	39,234	18,882	18,165	20,527
Percentage of Behavioral Health Clinics that are in compliance with state standareds of care (LAPAS CODE - 25864)	Not Available	100%	100%	100%	100%
Percentage of District programs using an electronic Health Record (E.H.R.) to manage/improve programmatic outcomes (monitor billing and clinical performance). (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	100%	100%

3. (KEY) Through the Behavioral Health activity, Central Louisiana Human Services District (CLHSD) will provide quality behavioral health services to children, adolescents, adults and their families in the District (including prevention and flexible family funds). Also, the CLHSD will monitor behavioral health services (outpatient and inpatient) including contract providers, to insure quality standards are met throughout the continuum of care. Customer feedback will be used as one of the measuring tools.

Children's Budget Link: Central 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 Central Louisiana Human Services District agency's budget.

Human Resource Policies Beneficial to Women and Families Link: The Central Louisiana Human Services District abides by all state Civil Services guidelines and procedures regarding equal opportunity for staff and in particular women and their families. The Central 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 in the Central Louisiana Human Services District Personnel Handbook. Applicable policies are: the Family Medical Leave Policy (29.1), the Sexual Harassment Policy (56.1) and the Equal Employment Opportunity/Complaints Policy (34.1)

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 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Number of adults receiving Mental Health services in all CLHSD behavioral health programs (LAPAS CODE - 25286)	2,392	3,230	2,704	2,704	2,811	2,811
K Number of children/ adolescents receiving Mental Health services in all CLHSD behavioral health program (LAPAS CODE - 25287)	306	258	306	306	306	306
K Percentage of adults receiving mental health services who indicate they would choose to continue to receive services from CLHSD if given a choice to receive services elsewhere (LAPAS CODE - 25288)	90%	96%	90%	90%	90%	92%
K Percentage of mental health clients who indicate they would recommend CLHSD services to others (LAPAS CODE - 25289)	90%	97%	90%	90%	90%	90%
K Percentage of mental health cash subsidy slots utilized (LAPAS CODE - 25290)	96%	100%	96%	96%	96%	96%
K Percentage of individuals successful completions (24-hour residential programs)- AD Program (LAPAS CODE - 25291)	75%	82%	83%	83%	75%	75%
K Percentage of individuals successfully completing the Primary Inpatient Adult addictive disorders treatment program (LAPAS CODE - 25292)	75%	82%	84%	84%	75%	75%
K Primary Inpatient Adolescent: Percentage of individuals successfully completing the program-AD programs (LAPAS CODE - 25293)	70%	83%	75%	75%	70%	70%
K Number of adults served in Outpatient Addictive Disorders programs in the CLHSD (LAPAS CODE - 25861)	1,000	1,302	1,000	1,000	900	900



Central Louisiana Human Services District General Performance Information

		Perfo	rmance Indicator V	alues	
Performance Indicator Name	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016	Prior Year Actual FY 2016-2017
Total number of individuals served by outpatient mental health in Central Louisiana Human Services District (LAPAS CODE - 25299)	3,612	2,889	2,760	3,227	3,488
Total number of individuals served by inpatient Addictive Disorders in Central Louisiana Human Services District (LAPAS CODE - 25300)	2,195	2,940	2,527	1,570	1,359
Total numbers of individuals served by outpatient Addictive Disorders in Central Louisiana Human Services District (LAPAS CODE - 25301)	2,870	1,584	1,157	1,561	1,433
Figures reported during FY 2012-2013 appear unduplicated.	to have been calculate	ed using a duplicate	ed count for outreach	programs. The curr	ent numbers are
Total number of enrollees in prevention programs (LAPAS CODE - 25302)	10,210	9,967	9,932	8,395	10,760

4. (KEY) Through the Developmental Disabilities activity the CLHSD will promote and facilitate independence for citizens with disabilities via the availability of home and community based services.

Children's Budget Link: Central 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 Central Louisiana Human Services District agency's budget.

Human Resource Policies Beneficial to Women and Families Link: The Central Louisiana Human Services District abides by all state Civil Services guidelines and procedures regarding equal opportunity for staff and in particular women and their families. The Central 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 in the Central Louisiana Human Services District Personnel Handbook. Applicable policies are: the Family Medical Leave Policy (29.1), the Sexual Harassment Policy (56.1) and the Equal Employment Opportunity/Complaints Policy (34.1)

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 Inc	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Number of persons receiving individual and family support services (LAPAS CODE - 25294)	192	173	192	192	175	175
K Number of persons receiving Flexible Family Fund services (LAPAS CODE - 25295)	102	114	102	102	102	102
K Percentage of eligibility determinations determined valid according to Flexible Family Fund promulgation (LAPAS CODE - 25296)	90%	97%	90%	90%	90%	90%
K Number of individuals certified for waiver services (LAPAS CODE - 25863)	799	799	799	799	799	799

Central Louisiana Human Services District General Performance Information

		Performance Indicator Values									
Performance Indicator Name	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016	Prior Year Actual FY 2016-2017						
Number of persons receiving DD services CLHSD (LAPAS CODE - 25297)	Not Applicable	1,095	1,118	1,109	1,086						



09-377 — Northwest Louisiana Human Services District

Agency Description

The mission of the Northwest Louisiana Human Services District (NLHSD) 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 assure the services of the NLHSD are being performed within the expectations set forth in the NLHSD Board Governance Policy Manual. This includes assuring individuals have access to evidence-based, cost-effective services that are responsive to their needs so that:
- Individuals with acute illnesses can rapidly resume optimal functioning.
- Individuals with chronic illness may focus on hope, empowerment, and personal growth so that selfdetermination leads to safe choices and positive lifestyle decisions.
- Youth, adults and family strengths are emphasized and recovery and resilience are enhanced.
- The voice of and collaboration with Individuals in the Community are enhanced.
- II. Maintain a trained and effective leadership team at the Board and District level
- III. Maintain Commission on Accreditation of Rehabilitation Facilities (CARF) accreditation to ensure quality outcomes for the persons we serve, maintain ability to receive Medicaid reimbursement and utilize techniques that are efficient, cost-effective, and based on outcomes and consumer satisfaction.
- IV. Maximize financial viability so that the District is less dependent on State General Funds (SGF) and Block Grant Funds for the provision of services.
- V. Ensure the health and safety of individuals receiving home and community based waiver services.
- VI. Increase the number of individuals receiving funding for vocational services through State General Funds.

For additional information, see:

DHH: Northwest Louisiana Human Services District



Northwest Louisiana Human Services District Budget Summary

		rior Year Actuals 2016-2017	F!	Enacted Y 2017-2018	xisting Oper Budget s of 12/01/17	Continuation FY 2018-2019	ecommended FY 2018-2019	Total commended ver/(Under) EOB
Means of Financing:								
State General Fund (Direct)	\$	7,029,952	\$	7,330,614	\$ 7,330,614	\$ 7,987,133	\$ 7,670,686	\$ 340,072
State General Fund by:		.,,.		. , ,-	.,,.	., ,	.,,	
Total Interagency Transfers		4,146,393		4,440,555	4,440,555	4,532,623	4,532,623	92,068
Fees and Self-generated Revenues		890,129		1,500,000	1,500,000	1,500,000	1,500,000	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	\$	12,066,474	\$	13,271,169	\$ 13,271,169	\$ 14,019,756	\$ 13,703,309	\$ 432,140
Expenditures & Request:								
Northwest Louisiana Human Services District	\$	12,066,474	\$	13,271,169	\$ 13,271,169	\$ 14,019,756	\$ 13,703,309	\$ 432,140
Total Expenditures & Request	\$	12,066,474	\$	13,271,169	\$ 13,271,169	\$ 14,019,756	\$ 13,703,309	\$ 432,140
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



377_1000 — Northwest Louisiana Human Services District

Program Description

The Northwest Louisiana Human Services District program includes the following activities:

- Administration The Louisiana Department of Health, its program offices, and the Louisiana Legislature 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, required that LDH not contract with a new LGE until LDH, in consultation with the Human Services Interagency Council (HSIC), had determined and confirmed in writing to the governor that LDH is prepared to contract the provision of services to the LGE after the LGE successfully completed the Readiness Assessment. The Northwest Louisiana Human Services District completed said Readiness Assessment on May 19th, 2014 and received written confirmation dated June 18th, 2014. Northwest Louisiana Human Services District was created by Act 373 in the 2008 Legislative Session to serve the parishes of Caddo, Bossier, Webster, Claiborne, Bienville, Red River, Desoto, Sabine and Natchitoches. The Northwest Louisiana Human Services District participates 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 Northwest Louisiana Human Services District catchment area provides for mental health outpatient clinic services for children over the age of six, adolescents, adults and those with co-occurring disorders. Clinic based services include Information/Referral, Screening/Assessment/Evaluation, Community Psychiatric Supports and Treatment (CPST), Individual, Family and Group Counseling, Medication Management, Nursing Services, Peer Support and Wellness Recovery Action Plan (Wrap) Services, Pharmacy Services and Interagency Service Coordination. Contracted services include evidence-based practice Assertive Community Treatment Services, Case Management Services, Homeless Outreach, Mobile Crisis Services, Consumer Care Resources, Benefits/Entitlement Assistance, Transportation, and Supported Housing. Service delivery includes full participation in the specialized behavioral health services through the Healthy Louisiana Plans. All Behavioral Health clinics in the Northwest Louisiana Human Services District 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. Clinic based services provided include Information/Referral, Screening/Assessment, Nursing Services, Individual, Group and Intensive Outpatient Treatment and Transportation. Contract services include Primary Prevention, Medical Detox, Residential Adult Treatment, Inpatient Adolescent Treatment and Gambling Treatment (Outpatient, Intensive Outpatient and Inpatient).

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.

Northwest Louisiana Human Services District Budget Summary

	Prior Year Actuals Y 2016-2017	F	Enacted Y 2017-2018	sting Oper Budget of 12/01/17	Continuation FY 2018-2019	ecommended Y 2018-2019	Total commended ver/(Under) EOB
Means of Financing:							
State General Fund (Direct)	\$ 7,029,952	\$	7,330,614	\$ 7,330,614	\$ 7,987,133	\$ 7,670,686	\$ 340,072
State General Fund by:							
Total Interagency Transfers	4,146,393		4,440,555	4,440,555	4,532,623	4,532,623	92,068
Fees and Self-generated Revenues	890,129		1,500,000	1,500,000	1,500,000	1,500,000	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



Northwest Louisiana Human Services District Budget Summary

		Prior Year Actuals Y 2016-2017	F	Enacted FY 2017-2018	xisting Oper Budget s of 12/01/17	Continuation FY 2018-2019	ecommended 'Y 2018-2019	Total commended ver/(Under) EOB
Total Means of Financing	\$	12,066,474 \$		13,271,169	\$ 13,271,169	\$ 14,019,756	\$ 13,703,309	\$ 432,140
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		12,066,474		13,271,169	13,271,169	14,019,756	13,703,309	432,140
Total Acq & Major Repairs		0		0	0	0	0	0
Total Unallotted		0		0	0	0	0	0
Total Expenditures & Request	\$	12,066,474	\$	13,271,169	\$ 13,271,169	\$ 14,019,756	\$ 13,703,309	\$ 432,140
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 and Federal Funds. The Interagency Transfers are from the Office of Behavioral Health, and Medical Vendor Payments - Title XIX. The Fees and Self-generated Revenues are from patient copays, and the collection of fees for services provided to clients who are not eligible for Medicaid services through the Statewide Management Organization, inelligible patient fees, urine drug screen copays, and DWI copays. Federal Funds are from collection of fees for services provided to Medicare-eligible clients.

Major Changes from Existing Operating Budget

Ge	eneral Fund	Т	otal Amount	Table of Organization	Description
\$	0	\$	0	0	Mid-Year Adjustments (BA-7s):
\$	7,330,614	\$	13,271,169	0	Existing Oper Budget as of 12/01/17
					Statewide Major Financial Changes:
	14,088		14,088	0	2% General Increase Annualization Classified
	178,074		178,074	0	Market Rate Classified
	52,228		52,228	0	Civil Service Training Series
	93,579		93,579	0	Related Benefits Base Adjustment
	108,819		108,819	0	Salary Base Adjustment
	(165,343)		(165,343)	0	Attrition Adjustment



Major Changes from Existing Operating Budget (Continued)

Ger	ieral Fund	То	tal Amount	Table of Organization	Description
	(84,270)		(84,270)	0	•
	(1,875)		(1,875)	0	Risk Management
	5,386		5,386	0	Legislative Auditor Fees
	(903)		(903)	0	UPS Fees
	(1,852)		(1,852)	0	Civil Service Fees
	(5,311)		(5,311)	0	Office of Technology Services (OTS)
	209		209	0	Office of State Procurement
					Non-Statewide Major Financial Changes:
	62,973		62,973	0	Technical adjustment to transfer funds from OBH to Acadiana Area Human Services District, Northwest Louisiana Human Services District, Northeast Delta Human Services Authority, and Central Louisiana Human Services District for pharmaceutical supplies as a result of the closure of Shamrock Pharmacy on November 1, 2017.
	0		92,068	0	Increase of Interagency Transfers funding received from Office of Behavioral Health (OBH) due to adjustments in the allocation of Federal grants and Statutory Dedication funding OBH is intending to send to Northwest Louisiana Human Services District (NLHSD) in FY19.
	84,270		84,270	0	Realigning funds from personnel to Other Charges for needed operating expenses and contracts.
\$	7,670,686	\$	13,703,309	0	Recommended FY 2018-2019
\$	0	\$	0	0	Less Supplementary Recommendation
\$	7,670,686	\$	13,703,309	0	Base Executive Budget FY 2018-2019
\$	7,670,686	\$	13,703,309	0	Grand Total Recommended

Professional Services

Amount	Description
	This agency does not have funding for Professional Services.

Other Charges

Amount	Description
	Other Charges:
\$8,151,139	Salaries and related benefits for Other Charges positions
\$5,225,067	Contractual and operating costs of mental health, addictive disorders and developmental disability services
\$13,376,206	SUB-TOTAL OTHER CHARGES
	Interagency Transfers:
\$26,705	Payments to the Department of Civil Service - Civil Service Fees



Other Charges (Continued)

Amount	Description
\$92,395	Payments to the Division of Administration - Risk Management
\$47,254	Payments to the Division of Administration - Technology Services
\$36,507	Payments to the Legislative Auditor
\$1,552	Payments to the Division of Administration - Office of State Procurement
\$5,355	Payments to the Division of Administration - Uniform Payroll Services
\$117,335	Miscellaneous Commodities and Services
\$327,103	SUB-TOTAL INTERAGENCY TRANSFERS
\$13,703,309	TOTAL OTHER CHARGES

Acquisitions and Major Repairs

Amount	Description	
	This agency does not have funding for Acquisitions and Major Repairs.	

Performance Information

1. (KEY) Through the Administration activity, the Northwest Louisiana Human Services District (NLHSD) 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 I Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Percentage of clients who indicate they would continue to receive services at NLHSD clinics if given the choice to go elsewhere (LAPAS CODE - 25303)	90%	98%	90%	90%	90%	90%
K Percentage of clients who indicate they would recommend NLHSD clinics to family and friends (LAPAS CODE - 25304)	90%	99%	90%	90%	90%	90%

2. (KEY) To ensure access to quality wellness and recovery oriented mental health, substance use and prevention services for children, adolescents and adults in the NLHSD service area through use of strong partnership with providers, use of best practices and use of utilization management data such that access to care and client satisfaction thresholds are achieved.

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	Performance Indicator Values					
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2016-2017	Actual Yearend Performance FY 2016-2017	Performance Standard as Initially Appropriated FY 2017-2018	Existing Performance Standard FY 2017-2018	Performance At Continuation Budget Level FY 2018-2019	Performance At Executive Budget Level FY 2018-2019
K Number of adults receiving mental health services in all NLHSD behavioral health clinics (LAPAS CODE - 25305)	2,300	1,243	1,500	1,500	1,500	1,500
K Number of children/ adolescents receiving mental health services in all NLHSD behavioral health clinics (LAPAS CODE - 25306)	600	242	250	250	250	250
K Percentage of adults receiving mental health services who report that they would choose to continue to receive services from NLHSD if given a choice to receive services elsewhere (LAPAS CODE - 25307)	90%	98%	90%	90%	90%	90%
K Percentage of mental health clients who would recommend NLHSD services to others (LAPAS CODE - 25308)	90%	99%	90%	90%	90%	90%
K Percentage of mental health cash subsidy slots utilized (LAPAS CODE - 25309)	99%	100%	99%	99%	99%	99%
K Percentage of individuals successfully completing the 24-hour residential addictive disorders treatment program (LAPAS CODE - 25310)	65%	59%	65%	65%	65%	65%
K Percentage of individuals successfully completing the Primary Inpatient Adult addictive disorders treatment program (LAPAS CODE - 25311)	75%	91%	75%	75%	75%	75%
K Percentage of individuals successfully completing the Primary Inpatient Adolescent addictive disorders treatment program (LAPAS CODE -	60%	5/0/	60%	60%	60%	COD /
25312)	0070	56%	0070	0070	0070	60%



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.

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Performance Indicators

		Performance Indicator Values				
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K Number of persons receiving individual and family support services (LAPAS CODE - 25313)	350	313	350	350	350	350
K Number of persons receiving Flexible Family Fund services (LAPAS CODE - 25314)	170	170	165	165	165	165
K Percentage of eligibility determinations determined to be valid according to Flexible Family Fund promulgation (LAPAS CODE - 25315)	95%	100%	95%	95%	95%	95%
K Number of persons receiving developmental disabilities services (LAPAS CODE - 25316)	450	458	450	450	450	450



Northwest Louisiana Human Services District General Performance Information

	Performance Indicator Values				
Performance Indicator Name	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016	Prior Year Actual FY 2016-2017
Total number of individuals served in the Northwest Louisiana Human Services District (LAPAS CODE - 25317)	Not Applicable	6,840	21,559	19,470	15,143
Total number of individuals served by outpatient mental health in Northwest Louisiana Human Services District (LAPAS CODE - 25318)	Not Applicable	4,385	2,106	2,035	1,485
Total number of individuals served by inpatient Addictive Disorders in Northwest Louisiana Human Services District (LAPAS CODE - 25319)	Not Applicable	424	1,100	1,447	1,714
Total numbers of individuals served by outpatient Addictive Disorders in Northwest Louisiana Human Services District (LAPAS CODE - 25320)	Not Applicable	914	698	626	377
Total number of enrollees in prevention programs (LAPAS CODE - 25321)	Not Applicable	12,214	16,038	14,344	9,996



LDH - 328 Supporting Document