

# Louisiana Department of Health



## Department Description

For additional information, see:

[Louisiana Department of Health](#)

## Louisiana Department of Health Budget Summary

	Prior Year Actuals FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Means of Financing:</b>						
State General Fund (Direct)	\$ 2,481,088,826	\$ 2,813,258,033	\$ 2,813,725,201	\$ 2,863,501,431	\$ 2,576,724,967	\$ (237,000,234)
<b>State General Fund by:</b>						
Total Interagency Transfers	324,441,305	294,779,384	303,563,914	302,780,469	303,622,368	58,454
Fees and Self-generated Revenues	239,757,016	299,129,780	405,101,512	378,853,819	399,784,214	(5,317,298)
Statutory Dedications	543,111,476	713,618,626	713,618,626	841,975,080	861,060,681	147,442,055
Interim Emergency Board	0	0	0	0	0	0
Federal Funds	5,929,485,774	8,054,587,851	8,256,084,995	9,882,432,166	10,070,164,283	1,814,079,288
<b>Total Means of Financing</b>	<b>\$ 9,517,884,397</b>	<b>\$ 12,175,373,674</b>	<b>\$ 12,492,094,248</b>	<b>\$ 14,269,542,965</b>	<b>\$ 14,211,356,513</b>	<b>\$ 1,719,262,265</b>
<b>Expenditures &amp; Request:</b>						
Jefferson Parish Human Services Authority	\$ 17,850,720	\$ 18,856,071	\$ 18,702,183	\$ 19,002,591	\$ 18,398,658	\$ (303,525)
Florida Parishes Human Services Authority	16,912,790	19,160,285	19,028,398	19,543,334	18,488,684	(539,714)
Capital Area Human Services District	26,074,490	26,033,934	25,847,213	28,239,180	25,650,607	(196,606)
Developmental Disabilities Council	1,666,195	1,987,518	1,987,518	1,895,017	2,062,425	74,907
Metropolitan Human Services District	26,368,604	26,351,917	26,883,308	27,216,061	25,893,907	(989,401)
Medical Vendor Administration	247,742,567	410,136,178	410,316,767	462,407,955	523,535,861	113,219,094
Medical Vendor Payments	8,317,394,056	10,703,581,846	11,006,859,366	12,707,993,379	12,607,975,617	1,601,116,251
Office of the Secretary	74,503,650	81,424,638	83,588,629	83,640,004	78,807,564	(4,781,065)
South Central Louisiana Human Services Authority	20,373,967	22,079,494	21,952,879	22,587,464	21,984,045	31,166



## Louisiana Department of Health Budget Summary

	Prior Year Actuals FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
Northeast Delta Human Services Authority	12,831,625	15,149,236	15,066,923	13,612,437	13,698,005	(1,368,918)
Office of Aging and Adult Services	39,585,052	46,518,169	47,608,990	51,599,077	50,843,739	3,234,749
Louisiana Emergency Response Network Board	1,832,920	1,655,739	1,649,515	1,666,982	1,626,153	(23,362)
Acadiana Area Human Services District	15,770,488	18,773,454	18,671,647	18,303,951	17,912,628	(759,019)
Office of Public Health	326,832,179	375,244,152	377,621,204	385,602,635	387,961,090	10,339,886
Office of Behavioral Health	201,096,473	222,526,062	230,157,284	237,550,323	226,156,050	(4,001,234)
Office for Citizens w/ Developmental Disabilities	133,328,667	144,307,169	144,780,249	148,112,645	151,377,632	6,597,383
Imperial Calcasieu Human Services Authority	9,585,516	11,634,350	11,574,981	11,536,673	11,009,763	(565,218)
Central Louisiana Human Services District	14,005,837	15,156,851	15,083,052	15,430,464	14,845,250	(237,802)
Northwest Louisiana Human Services District	14,128,601	14,796,611	14,714,142	13,602,793	13,128,835	(1,585,307)
<b>Total Expenditures &amp; Request</b>	<b>\$ 9,517,884,397</b>	<b>\$ 12,175,373,674</b>	<b>\$ 12,492,094,248</b>	<b>\$ 14,269,542,965</b>	<b>\$ 14,211,356,513</b>	<b>\$ 1,719,262,265</b>
<b>Authorized Full-Time Equivalents:</b>						
Classified	5,420	5,489	5,648	5,817	5,705	57
Unclassified	82	83	84	84	83	(1)
<b>Total FTEs</b>	<b>5,502</b>	<b>5,572</b>	<b>5,732</b>	<b>5,901</b>	<b>5,788</b>	<b>56</b>



## 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 La R.S. 28:831, the enabling legislation establishing 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. Four members represent each of the disability areas. All members serve without compensation.

The Board operates under a policy governance model with an ends statement (i.e. mission) and means limitations policy 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 community 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.

For additional information, see:

[Jefferson Parish Human Services Authority](#)

### Jefferson Parish Human Services Authority Budget Summary

	Prior Year Actuals FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Means of Financing:</b>						
State General Fund (Direct)	\$ 13,834,790	\$ 14,052,782	\$ 13,898,894	\$ 14,199,302	\$ 13,320,369	\$ (578,525)
<b>State General Fund by:</b>						
Total Interagency Transfers	1,612,205	2,303,289	2,303,289	2,303,289	2,303,289	0
Fees and Self-generated Revenues	2,403,725	2,500,000	2,500,000	2,500,000	2,775,000	275,000
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
<b>Total Means of Financing</b>	<b>\$ 17,850,720</b>	<b>\$ 18,856,071</b>	<b>\$ 18,702,183</b>	<b>\$ 19,002,591</b>	<b>\$ 18,398,658</b>	<b>\$ (303,525)</b>
<b>Expenditures &amp; Request:</b>						
Jefferson Parish Human Services Authority	\$ 17,850,720	\$ 18,856,071	\$ 18,702,183	\$ 19,002,591	\$ 18,398,658	\$ (303,525)
<b>Total Expenditures &amp; Request</b>	<b>\$ 17,850,720</b>	<b>\$ 18,856,071</b>	<b>\$ 18,702,183</b>	<b>\$ 19,002,591</b>	<b>\$ 18,398,658</b>	<b>\$ (303,525)</b>
<b>Authorized Full-Time Equivalents:</b>						
Classified	0	0	0	0	0	0
Unclassified	0	0	0	0	0	0
<b>Total FTEs</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>



## 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

	Prior Year Actuals FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Means of Financing:</b>						
State General Fund (Direct)	\$ 13,834,790	\$ 14,052,782	\$ 13,898,894	\$ 14,199,302	\$ 13,320,369	\$ (578,525)
<b>State General Fund by:</b>						
Total Interagency Transfers	1,612,205	2,303,289	2,303,289	2,303,289	2,303,289	0
Fees and Self-generated Revenues	2,403,725	2,500,000	2,500,000	2,500,000	2,775,000	275,000
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
<b>Total Means of Financing</b>	<b>\$ 17,850,720</b>	<b>\$ 18,856,071</b>	<b>\$ 18,702,183</b>	<b>\$ 19,002,591</b>	<b>\$ 18,398,658</b>	<b>\$ (303,525)</b>
<b>Expenditures &amp; Request:</b>						
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	17,850,720	18,856,071	18,702,183	19,002,591	18,398,658	(303,525)
Total Acq & Major Repairs	0	0	0	0	0	0
Total Unallotted	0	0	0	0	0	0
<b>Total Expenditures &amp; Request</b>	<b>\$ 17,850,720</b>	<b>\$ 18,856,071</b>	<b>\$ 18,702,183</b>	<b>\$ 19,002,591</b>	<b>\$ 18,398,658</b>	<b>\$ (303,525)</b>
<b>Authorized Full-Time Equivalents:</b>						
Classified	0	0	0	0	0	0
Unclassified	0	0	0	0	0	0
<b>Total FTEs</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

## 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 State-wide 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

General Fund	Total Amount	Table of Organization	Description
\$ (153,888)	\$ (153,888)	0	<b>Mid-Year Adjustments (BA-7s):</b>
\$ 13,898,894	\$ 18,702,183	0	<b>Existing Oper Budget as of 12/01/16</b>
<b>Statewide Major Financial Changes:</b>			
290,425	290,425	0	Related Benefits Base Adjustment
198,154	198,154	0	Retirement Rate Adjustment
378,778	378,778	0	Salary Base Adjustment
(587,102)	(587,102)	0	Attrition Adjustment
(12,336)	(12,336)	0	Risk Management
229	229	0	UPS Fees
(2,788)	(2,788)	0	Civil Service Fees
9,714	9,714	0	Office of Technology Services (OTS)
<b>Non-Statewide Major Financial Changes:</b>			
			Annualization of the FY 17 Mid-year Reduction for pharmacy savings, specialized IT network support, vehicle maintenance, non-medical supply costs, elimination of the remainder of the Behavioral Health Individual Family Support Fund and a means of financing substitution replacing State General Fund (Direct) with Fees and Self-generated Revenues to fund six positions as well as ongoing Performance and Quality Initiatives.
(626,719)	(351,719)	0	
(60,472)	(60,472)	0	FY 18 contract reductions.
			Means of financing substitution replacing State General Fund (Direct) with Fees and Self-generated Revenues for one position and a Community Psychiatric and Support Treatment contract.
(75,995)	(75,995)	0	
(90,413)	(90,413)	0	Additional FY 18 attrition savings.
\$ 13,320,369	\$ 18,398,658	0	<b>Recommended FY 2017-2018</b>
\$ 0	\$ 0	0	<b>Less Supplementary Recommendation</b>
\$ 13,320,369	\$ 18,398,658	0	<b>Base Executive Budget FY 2017-2018</b>
\$ 13,320,369	\$ 18,398,658	0	<b>Grand Total Recommended</b>

## Professional Services

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



### Other Charges

Amount	Description
	<b>Other Charges:</b>
\$13,964,735	Salaries and related benefits for Other Charges positions
\$4,187,890	Contractual and operating costs of mental health, addictive disorders and developmental disability services
<b>\$18,152,625</b>	<b>SUB-TOTAL OTHER CHARGES</b>
	<b>Interagency Transfers:</b>
\$45,035	Payments to the Department of Civil Service - Civil Service Fees
\$159,926	Payments to the Division of Administration - Risk Management
\$8,982	Payments to the Division of Administration - Uniform Payroll Services
\$32,090	Payments to the Division of Administration- Technology Services
<b>\$246,033</b>	<b>SUB-TOTAL INTERAGENCY TRANSFERS</b>
<b>\$18,398,658</b>	<b>TOTAL OTHER CHARGES</b>

### 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.



## Performance Indicators

Level	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Number of adults who receive primary care services (LAPAS CODE - 25521)	2,000	3,034	10,000	10,000	10,000	10,000
K	Number of children and adolescents who receive primary care services (LAPAS CODE - 25526)	250	90	250	250	250	250
K	Number of adults who receive behavioral health services (LAPAS CODE - 25522)	5,000	7,594	7,500	7,500	7,500	7,500
K	Number of children and adolescents who receive behavioral health services (LAPAS CODE - 25527)	1,700	2,195	2,200	2,200	2,200	2,200
K	Number of individuals assisted with submission of applications through the Health Insurance Marketplace or the Louisiana Medicaid portals (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	Not Available	1,200	1,200
This is a new performance indicator for FY 2017-2018.							
K	Number of individuals who have documented contact with a care coordinator (LAPAS CODE - 25523)	1,000	1,880	2,000	2,000	2,000	2,000
K	Percent of individuals who report improvement in or maintenance of depressive symptoms (LAPAS CODE - 25524)	45%	55%	50%	50%	50%	50%
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)	40%	50%	50%	50%	50%	50%
K	Percent of children and adolescents who report improvement in or maintenance of attention deficit symptoms (LAPAS CODE - 25529)	60%	74%	70%	70%	70%	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**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
		K	Percent of adults receiving community-based services who remain in the community without a hospitalization (LAPAS CODE - 25519)	85%	88%	85%	85%
K	Percent of adults receiving community-based services who remain in stable housing (LAPAS CODE - 25520)	85%	97%	87%	87%	87%	87%
S	Percent of individuals completing Multi-Systemic Therapy (MST) living in the home (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	Not Available	90%	90%

This is a new performance indicator for FY 2017-2018.



**Performance Indicators (Continued)**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
S	Percent of individuals completing Functional Family Therapy (FFT) living in the home (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	Not Available	90%	90%
This is a new performance indicator 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 - NEW)	Not Applicable	Not Applicable	Not Applicable	Not Available	5%	5%
This is a new performance indicator for FY 2017-2018.							

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

Performance Indicator Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Percent of youth showing a decrease in positive attitude and an increase in perception of harm toward substance use/abuse (LAPAS CODE - NEW)	Not Available	Not Available	Not Available	Not Available	13%
This is a new performance indicator for FY 2017-2018.					
Percent of individuals completing Multi-Systemic Therapy (MST) free from arrests (LAPAS CODE - 23818)	88%	68%	92%	89%	87%
Percent of individuals completing Multi-Systemic Therapy (MST) in school or working (LAPAS CODE - 23819)	96%	86%	96%	84%	87%
Percent of youth who completed Functional Family Therapy (FFT) showing improvement in behavioral problems (LAPAS CODE - 23821)	69%	72%	95%	85%	79%

**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**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
		K	Percent of new system entry applications received and completed within 45 calendar days (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	Not Available
	This is a new performance indicator for FY 2017-2018.						
K	Total unduplicated number of individuals receiving developmental disabilities community-based services (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	Not Available	1,760	1,760
	This is a new performance indicator 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%	7%	8%	8%	8%	8%

**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**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Average number of days from date of service to claim submission (LAPAS CODE - 25515)	14	4	5	5	5	5

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

Performance Indicator Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Percent compliance with Performance Evaluation System (PES) evaluations completed within required timeframe (LAPAS CODE - 25530)	Not Available	100%	100%	100%	100%
Percent of JPHSA Annual Performance & Quality Improvement Initiatives achieved (LAPAS CODE - 25532)	100%	100%	100%	86%	78%
Percent compliance with recommended frequency of documented individual supervision per Staff Development & Supervision Guidelines (LAPAS CODE - NEW)	Not Available	Not Available	Not Available	Not Available	80%

This is a new performance indicator for FY 2017-2018.



## 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 FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Means of Financing:</b>						
State General Fund (Direct)	\$ 10,101,230	\$ 11,958,620	\$ 11,826,733	\$ 12,312,421	\$ 11,257,771	\$ (568,962)
<b>State General Fund by:</b>						
Total Interagency Transfers	4,737,920	4,894,040	4,894,040	4,976,625	4,976,625	82,585
Fees and Self-generated Revenues	2,073,640	2,284,525	2,284,525	2,254,288	2,254,288	(30,237)
Statutory Dedications	0	0	0	0	0	0
Interim Emergency Board	0	0	0	0	0	0
Federal Funds	0	23,100	23,100	0	0	(23,100)
<b>Total Means of Financing</b>	<b>\$ 16,912,790</b>	<b>\$ 19,160,285</b>	<b>\$ 19,028,398</b>	<b>\$ 19,543,334</b>	<b>\$ 18,488,684</b>	<b>\$ (539,714)</b>
<b>Expenditures &amp; Request:</b>						
Florida Parishes Human Services Authority	\$ 16,912,790	\$ 19,160,285	\$ 19,028,398	\$ 19,543,334	\$ 18,488,684	\$ (539,714)
<b>Total Expenditures &amp; Request</b>	<b>\$ 16,912,790</b>	<b>\$ 19,160,285</b>	<b>\$ 19,028,398</b>	<b>\$ 19,543,334</b>	<b>\$ 18,488,684</b>	<b>\$ (539,714)</b>
<b>Authorized Full-Time Equivalents:</b>						
Classified	0	0	0	0	0	0
Unclassified	0	0	0	0	0	0
<b>Total FTEs</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>



## 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 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 four of the five parishes. Also included is the prevention gambling initiative, “Kid’s Don’t Gamble... Wanna Bet?”.
- 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. 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 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Means of Financing:</b>						
State General Fund (Direct)	\$ 10,101,230	\$ 11,958,620	\$ 11,826,733	\$ 12,312,421	\$ 11,257,771	\$ (568,962)
<b>State General Fund by:</b>						
Total Interagency Transfers	4,737,920	4,894,040	4,894,040	4,976,625	4,976,625	82,585
Fees and Self-generated Revenues	2,073,640	2,284,525	2,284,525	2,254,288	2,254,288	(30,237)
Statutory Dedications	0	0	0	0	0	0
Interim Emergency Board	0	0	0	0	0	0
Federal Funds	0	23,100	23,100	0	0	(23,100)
<b>Total Means of Financing</b>	<b>\$ 16,912,790</b>	<b>\$ 19,160,285</b>	<b>\$ 19,028,398</b>	<b>\$ 19,543,334</b>	<b>\$ 18,488,684</b>	<b>\$ (539,714)</b>
<b>Expenditures &amp; Request:</b>						
Personal Services	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
Total Operating Expenses	813,669	848,315	820,218	838,795	795,314	(24,904)
Total Professional Services	127,652	181,946	0	0	0	0
Total Other Charges	15,971,469	17,920,469	18,208,180	18,704,539	17,693,370	(514,810)
Total Acq & Major Repairs	0	209,555	0	0	0	0
Total Unallotted	0	0	0	0	0	0
<b>Total Expenditures &amp; Request</b>	<b>\$ 16,912,790</b>	<b>\$ 19,160,285</b>	<b>\$ 19,028,398</b>	<b>\$ 19,543,334</b>	<b>\$ 18,488,684</b>	<b>\$ (539,714)</b>
<b>Authorized Full-Time Equivalents:</b>						
Classified	0	0	0	0	0	0
Unclassified	0	0	0	0	0	0
<b>Total FTEs</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>



## 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

General Fund	Total Amount	Table of Organization	Description
\$ (131,887)	\$ (131,887)	0	<b>Mid-Year Adjustments (BA-7s):</b>
\$ 11,826,733	\$ 19,028,398	0	<b>Existing Oper Budget as of 12/01/16</b>
<b>Statewide Major Financial Changes:</b>			
874	874	0	Related Benefits Base Adjustment
183,218	183,218	0	Retirement Rate Adjustment
837,358	837,358	0	Salary Base Adjustment
(1,187,052)	(1,187,052)	0	Attrition Adjustment
3,254	3,254	0	Risk Management
10,878	10,878	0	Legislative Auditor Fees
(382)	(382)	0	UPS Fees
(3,536)	(3,536)	0	Civil Service Fees
(3,367)	(3,367)	0	Office of Technology Services (OTS)
(9,764)	(9,764)	0	Office of State Procurement
<b>Non-Statewide Major Financial Changes:</b>			
0	50,771	0	Increase in Interagency Transfers (IAT) from the Louisiana Department of Health (LDH), Office of Behavioral Health, Addictive Disorders.
0	31,814	0	Increase in Interagency Transfers (IAT) from the Louisiana Department of Health (LDH), Office of Behavioral Health, Mental Health.
0	(53,337)	0	Adjusts Fees & Self-generated Revenues based on a history of collections and/or adjustments due to Medicaid Expansion.
(115,000)	(115,000)	0	Annualization of the FY 17 Mid-year Reduction to reduce funding for replacement computers.
(285,443)	(285,443)	0	Reduction to Travel and Operating Services, as well as cancelling plans to open a full-time Denham Springs clinic.
\$ 11,257,771	\$ 18,488,684	0	<b>Recommended FY 2017-2018</b>
\$ 0	\$ 0	0	<b>Less Supplementary Recommendation</b>
\$ 11,257,771	\$ 18,488,684	0	<b>Base Executive Budget FY 2017-2018</b>
\$ 11,257,771	\$ 18,488,684	0	<b>Grand Total Recommended</b>



### Professional Services

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

### Other Charges

Amount	Description
	<b>Other Charges:</b>
\$14,328,688	Salaries and related benefits for Other Charges positions
\$2,840,658	Contractual and operating costs of mental health, addictive disorders and developmental disabilities services
<b>\$17,169,346</b>	<b>SUB-TOTAL OTHER CHARGES</b>
	<b>Interagency Transfers:</b>
\$47,598	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
\$211,588	Payments to the Division of Administration - Risk Management
\$12,500	Payments to Louisiana Workforce Commission- Unemployment Compensation
\$9,343	Payments to the Division of Administration - Uniform Payroll Services
\$43,557	Payments to the Legislative Auditor
\$1,069	Payments to the Division of Administration - Office of State Procurement
\$115,181	Transfers to other state agencies (Office of Telecommunications, Office of State Police/Dept. of Public Safety and Services, etc.)
<b>\$524,024</b>	<b>SUB-TOTAL INTERAGENCY TRANSFERS</b>
<b>\$17,693,370</b>	<b>TOTAL OTHER CHARGES</b>

### 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

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
		K	Percentage of adult service recipients remaining in outpatient substance use disorders treatment for at least six weeks (LAPAS CODE - 25516)	65%	45%	65%	65%
Both the addictive disorders services and mental health services performance indicators have been combined into one new program activity, "Behavioral Health Services". Change in performance indicator wording from "addictive disorders" to "substance use disorder" and/or add the wording "compulsive problem gambling". This performance standard was decreased based on FY 16 actual year-end; however, it is set at an increase from the FY 16 actual year-end, but with a more realistic goal.							
K	Percentage of individuals successfully completing the Level III.5 Adult residential treatment program (FTC/ADU) (LAPAS CODE - 21038)	80%	76%	80%	80%	80%	80%
Both the addictive disorders services and mental health services performance indicators have been combined into one new program activity, "Behavioral Health Services".							
S	Average daily census - Level III.5 Adult residential treatment program (FTC/ADU) (LAPAS CODE - 21039)	31	33	34	34	34	34
Both the addictive disorders services and mental health services performance indicators have been combined into one new program activity, "Behavioral Health Services".							



**Performance Indicators (Continued)**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Total number of persons registered in evidence-based educational (prevention) programming (enrollees). (LAPAS CODE - 25517)	8,310	8,282	8,310	8,310	6,300	6,300
<p>Both the addictive disorders services and mental health services performance indicators have been combined into one new program activity, "Behavioral Health Services". This performance standard was decreased due to the evidence-based educational program not being available in St. Tammany Parish schools due to the schools not conducting the survey that provides data to support the program.</p>							
K	Total unduplicated number of individuals served in substance use disorders and compulsive problem gambling outpatient services (includes screening/assessment and treatment). (LAPAS CODE - 25952)	Not Applicable	Not Applicable	740	740	840	840
<p>Both the addictive disorders services and mental health services performance indicators have been combined into one new program activity, "Behavioral Health Services". Change in performance indicator wording from "addictive disorders" to "substance use disorder" and/or add the wording "compulsive problem gambling". This performance indicator is new effective FY 2016-2017; therefore, data for FY 2015-2016 is not applicable. This performance standard is being increased based on the current data that can now be captured with the new electronic health record. It is anticipated the data now being captured is a more accurate reflection of services provided.</p>							
K	Total unduplicated number of individuals considered active in substance use disorders and compulsive problem gambling outpatient services. (LAPAS CODE - 25953)	Not Applicable	Not Applicable	400	400	500	500
<p>Both the addictive disorders services and mental health services performance indicators have been combined into one new program activity, "Behavioral Health Services". Change in performance indicator wording from "addictive disorders" to "substance use disorder" and/or add the wording "compulsive problem gambling". This performance indicator is new effective FY 2016-2017; therefore, data for FY 2015-2016 is not applicable. This performance standard is being increased based on the current data that can now be captured with the new electronic health record. It is anticipated the data now being captured is a more accurate reflection of services provided.</p>							
K	Total unduplicated number of individuals served in the Level III.5 adult residential treatment program (ADU/FTC). (LAPAS CODE - 25954)	Not Applicable	Not Applicable	630	630	630	630

Both the addictive disorders services and mental health services performance indicators have been combined into one new program activity, "Behavioral Health Services". This performance indicator is new effective FY 2016-2017; therefore, data for FY 2015-2016 is not applicable.



**Performance Indicators (Continued)**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Total unduplicated number of individuals served in mental health outpatient services (includes screening/assessment and treatment). (LAPAS CODE - 25956)	Not Applicable	Not Applicable	3,450.0	3,450.0	4,000.0	4,000.0
<p>Both the addictive disorders services and mental health services performance indicators have been combined into one new program activity, "Behavioral Health Services". This performance indicator is new effective FY 2016-2017; therefore, data for FY 2015-2016 is not applicable. This performance standard is being increased based on the current data that can now be captured with the new electronic health record. It is anticipated the data now being captured is a more accurate reflection of services provided.</p>							
K	Total unduplicated number of individuals considered active in mental health outpatient services. (LAPAS CODE - 25957)	Not Applicable	Not Applicable	3,300	3,300	3,300	3,300
<p>Both the addictive disorders services and mental health services performance indicators have been combined into one new program activity, "Behavioral Health Services". This performance indicator is new effective FY 2016-2017; therefore, data for FY 2015-2016 is not applicable.</p>							

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

Performance Indicator Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Average cost per client day (Level III.5 Adult residential treatment program)(FTC/ADU) (LAPAS CODE - 21045)	\$ 154	\$ 160	\$ 176	\$ 174	\$ 190
<p>Both the addictive disorders services and mental health services performance indicators have been combined into one new program activity, "Behavioral Health Services".</p>					
Average cost per individual served in outpatient substance use disorders and compulsive problem gambling treatment services. (LAPAS CODE - 23828)	\$ 1,463	\$ 1,575	\$ 1,659	\$ 2,919	\$ 2,587
<p>Both the addictive disorders services and mental health services performance indicators have been combined into one new program activity, "Behavioral Health Services". Change in performance indicator wording from "addictive disorders" to "substance use disorder" and/or add the wording "compulsive problem gambling".</p>					
Average cost per individual served in Level III.5 Adult (FTC/ADU) substance use disorders residential treatment services. (LAPAS CODE - 23829)	\$ 3,481	\$ 3,952	\$ 3,883	\$ 3,594	\$ 3,911
<p>Both the addictive disorders services and mental health services performance indicators have been combined into one new program activity, "Behavioral Health Services". Change in performance indicator wording from "addictive disorders" to "substance use disorder" and/or add the wording "compulsive problem gambling".</p>					



**Florida Parishes Human Services Authority General Performance Information (Continued)**

Performance Indicator Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Average cost per individual served in prevention substance use disorders and prevention gambling programs (LAPAS CODE - 23830)	\$ 12	\$ 24	\$ 17	\$ 11	\$ 16
Both the addictive disorders services and mental health services performance indicators have been combined into one new program activity, "Behavioral Health Services". Change in performance indicator wording from "addictive disorders" to "substance use disorder" and/or add the wording "compulsive problem gambling".					
Total number of individuals served in prevention programs (LAPAS CODE - 23825)	54,823	27,733	38,474	63,357	43,646
Both the addictive disorders services and mental health services performance indicators have been combined into one new program activity, "Behavioral Health Services".					
Total number of merchants educated through Synar services (LAPAS CODE - 23831)	662	746	705	523	243
Both the addictive disorders services and mental health services performance indicators have been combined into one new program activity, "Behavioral Health Services".					
Cost per registered enrollee in evidence-based educational (prevention) programs. (LAPAS CODE - 23832)	\$ 63	\$ 54	\$ 64	\$ 60	\$ 52
Both the addictive disorders services and mental health services performance indicators have been combined into one new program activity, "Behavioral Health Services".					
Average cost per person served through FPHSA community-based mental health services (LAPAS CODE - 21034)	\$ 1,093	\$ 2,034	\$ 1,613	\$ 2,100	\$ 1,393
Both the addictive disorders services and mental health services performance indicators have been combined into one new program activity, "Behavioral Health Services".					
Percentage of Mental Health Services/ Flexible Family Fund recipients who remain in the community (vs. institution) (LAPAS CODE - 25848)	96.55%	96.29%	100.00%	93.30%	97.00%
Both the addictive disorders services and mental health services performance indicators have been combined into one new program activity, "Behavioral Health Services".					

**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

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Total unduplicated number of individuals receiving community-based developmental disabilities services (LAPAS CODE - 21022)	402	379	402	402	402	402
K	Total unduplicated number of individuals receiving Individual and Family Support services. (LAPAS CODE - 21023)	170	142	170	170	170	170
K	Total unduplicated number of individuals receiving Flexible Family Fund services. (LAPAS CODE - 23833)	193	174	170	170	180	180

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.

**Performance Indicators (Continued)**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Total unduplicated number of individuals receiving Individual and Family Support Crisis services. (LAPAS CODE - 23834)	60	41	60	60	60	60
K	Total unduplicated number of individuals receiving Pre-Admission Screening and Resident Review (PASRR) services. (LAPAS CODE - 23835)	25	25	25	25	25	25
K	Percentage of Waiver participants with a current Statement of Approval (LAPAS CODE - 24950)	95%	100%	95%	95%	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%	0.40%	0.40%

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

Performance Indicator Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Average cost per individual receiving Individual and Family Support services. (LAPAS CODE - 23837)	\$ 2,141	\$ 1,346	\$ 1,386	\$ 2,514	\$ 2,850
Average cost per individual receiving Flexible Family Funds. (LAPAS CODE - 23838)	\$ 2,636	\$ 2,531	\$ 2,519	\$ 2,543	\$ 2,958
Average cost per individual receiving individual and family support crisis services. (LAPAS CODE - 23839)	\$ 934	\$ 698	\$ 680	\$ 1,042	\$ 945



### Florida Parishes Human Services Authority General Performance Information (Continued)

Performance Indicator Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Average cost per individual receiving Pre-admission Screening and Resident Review (PASRR) services. (LAPAS CODE - 23840)	\$ 537	\$ 410	\$ 557	\$ 407	\$ 357
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%	100%	98%
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)	1,433	1,255	1,288	1,365	1,381

**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**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Percentage of new employees completing mandatory online training courses within 90 days of employment (LAPAS CODE - 23847)	95%	100%	95%	95%	97%	97%
K	Percentage of agency's Performance Indicators within (+ / -) 5% of target (LAPAS CODE - 23848)	70%	66%	70%	70%	70%	70%
K	Percentage of information technology (IT) work orders closed within 6 business days of work request (LAPAS CODE - 25534)	95%	90%	95%	95%	95%	95%
K	Percentage of contract invoices for which payment is issued within 30 days of agency receipt. (LAPAS CODE - 25535)	90%	92%	90%	90%	90%	90%



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

Performance Indicator Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Percentage of Performance Evaluation System (PES) completed annually. (LAPAS CODE - 23844)	Not Available	Not Available	100%	100%	0
Even though the PES performance year ends on 6/30 annually, the reportable data is not available for LAPAS reporting until after the CS evaluation period ends on 8/30 annually.					
Executive Administration expenditures as a percentage of agency's budget. (LAPAS CODE - 23850)	12%	11%	14%	12%	14%
Percentage of agency's moveable property accounted for annually. (LAPAS CODE - 23851)	100%	100%	100%	100%	100%
Total number of individuals served by Florida Parishes Human Services Authority. (LAPAS CODE - 23852)	66,454	34,844	46,323	70,084	51,896



## 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

	Prior Year Actuals FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Means of Financing:</b>						
State General Fund (Direct)	\$ 16,435,518	\$ 16,239,476	\$ 16,052,755	\$ 18,303,271	\$ 15,709,022	\$ (343,733)
<b>State General Fund by:</b>						
Total Interagency Transfers	6,388,972	6,388,477	6,388,477	6,388,477	6,388,477	0
Fees and Self-generated Revenues	3,250,000	3,405,981	3,405,981	3,547,432	3,553,108	147,127
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
<b>Total Means of Financing</b>	<b>\$ 26,074,490</b>	<b>\$ 26,033,934</b>	<b>\$ 25,847,213</b>	<b>\$ 28,239,180</b>	<b>\$ 25,650,607</b>	<b>\$ (196,606)</b>
<b>Expenditures &amp; Request:</b>						
Capital Area Human Services District	\$ 26,074,490	\$ 26,033,934	\$ 25,847,213	\$ 28,239,180	\$ 25,650,607	\$ (196,606)
<b>Total Expenditures &amp; Request</b>	<b>\$ 26,074,490</b>	<b>\$ 26,033,934</b>	<b>\$ 25,847,213</b>	<b>\$ 28,239,180</b>	<b>\$ 25,650,607</b>	<b>\$ (196,606)</b>
<b>Authorized Full-Time Equivalents:</b>						
Classified	0	0	0	0	0	0
Unclassified	0	0	0	0	0	0
<b>Total FTEs</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>



## 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 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Means of Financing:</b>						
State General Fund (Direct)	\$ 16,435,518	\$ 16,239,476	\$ 16,052,755	\$ 18,303,271	\$ 15,709,022	\$ (343,733)
<b>State General Fund by:</b>						
Total Interagency Transfers	6,388,972	6,388,477	6,388,477	6,388,477	6,388,477	0
Fees and Self-generated Revenues	3,250,000	3,405,981	3,405,981	3,547,432	3,553,108	147,127
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
<b>Total Means of Financing</b>	<b>\$ 26,074,490</b>	<b>\$ 26,033,934</b>	<b>\$ 25,847,213</b>	<b>\$ 28,239,180</b>	<b>\$ 25,650,607</b>	<b>\$ (196,606)</b>
<b>Expenditures &amp; Request:</b>						
Personal Services	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
Total Operating Expenses	775,998	827,574	827,574	845,938	827,574	0
Total Professional Services	39,360	42,000	42,000	42,924	42,000	0
Total Other Charges	25,259,132	25,164,360	24,977,639	27,350,318	24,781,033	(196,606)
Total Acq & Major Repairs	0	0	0	0	0	0
Total Unallotted	0	0	0	0	0	0
<b>Total Expenditures &amp; Request</b>	<b>\$ 26,074,490</b>	<b>\$ 26,033,934</b>	<b>\$ 25,847,213</b>	<b>\$ 28,239,180</b>	<b>\$ 25,650,607</b>	<b>\$ (196,606)</b>
<b>Authorized Full-Time Equivalents:</b>						
Classified	0	0	0	0	0	0
Unclassified	0	0	0	0	0	0
<b>Total FTEs</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

## 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

General Fund	Total Amount	Table of Organization	Description
\$ (186,721)	\$ (186,721)	0	<b>Mid-Year Adjustments (BA-7s):</b>
\$ 16,052,755	\$ 25,847,213	0	<b>Existing Oper Budget as of 12/01/16</b>
<b>Statewide Major Financial Changes:</b>			
819,753	819,753	0	Related Benefits Base Adjustment
261,699	261,699	0	Retirement Rate Adjustment
392,227	392,227	0	Salary Base Adjustment
(578,494)	(578,494)	0	Attrition Adjustment
4,151	4,151	0	Risk Management
14,427	14,427	0	Legislative Auditor Fees
(13,969)	(13,969)	0	Rent in State-Owned Buildings
328	328	0	UPS Fees
2,370	2,370	0	Civil Service Fees
(29,505)	(29,505)	0	Office of Technology Services (OTS)
(9,931)	(9,931)	0	Office of State Procurement
<b>Non-Statewide Major Financial Changes:</b>			
			Annualization of the FY 17 Mid-year Reduction reducing pharmacy and lab contracts based on projected savings due to Medicaid Expansion, elimination of funding for four vacant positions, and a means of financing substitution replacing State General Fund (Direct) with Fees and Self-generated Revenues associated with the Capital Area
(1,020,484)	(620,484)	0	Recovery Program (CARP).
(64,238)	(96,026)	0	FY 18 contract reductions.
(122,067)	(343,152)	0	Reduction of four positions and an agency-wide furlough.
\$ 15,709,022	\$ 25,650,607	0	<b>Recommended FY 2017-2018</b>
\$ 0	\$ 0	0	<b>Less Supplementary Recommendation</b>
\$ 15,709,022	\$ 25,650,607	0	<b>Base Executive Budget FY 2017-2018</b>
\$ 15,709,022	\$ 25,650,607	0	<b>Grand Total Recommended</b>

### Professional Services

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



## Other Charges

Amount	Description
	<b>Other Charges:</b>
\$20,298,173	Salaries and related benefits for Other Charges positions
\$2,852,688	Contractual and operating costs of mental health, public health, addictive disorders and developmental disability services
<b>\$23,150,861</b>	<b>SUB-TOTAL OTHER CHARGES</b>
	<b>Interagency Transfers:</b>
\$75,120	Payments to the Department of Civil Service
\$90,171	Payments to the Division of Administration - Technology Services
\$265,793	Payments to the Division of Administration - Risk Management
\$175,449	Payments to the Division of Administration - Telecommunications Management
\$12,892	Payments to the Division of Administration - Uniform Payroll Services
\$1,309	Payments to the Division of Administration - Office of State Procurement
\$44,398	Payments to the Legislative Auditor
\$277,056	Payments to Capitol Police
\$687,781	Rent in State Owned Buildings
\$203	Miscellaneous commodities and services
<b>\$1,630,172</b>	<b>SUB-TOTAL INTERAGENCY TRANSFERS</b>
<b>\$24,781,033</b>	<b>TOTAL OTHER CHARGES</b>

## Acquisitions and Major Repairs

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

## Performance Information

- (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**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
		K Percentage of staff Performance Appraisals conducted in compliance with Civil Service guidelines (LAPAS CODE - 23989)	100%	100%	100%	100%	100%
K Percentage of state assets in the Asset Management system located/accounted for annually (LAPAS CODE - 23990)	100%	100%	100%	100%	100%	100%	
K Percentage score on annual Civil Service ISIS Human Resources Data Integrity Report Card (LAPAS CODE - 23991)	100%	100%	100%	100%	100%	100%	
K Percentage of LaPAS indicators that meet target within (+/-) 4.9% or exceed target (LAPAS CODE - 23992)	90%	85%	90%	90%	90%	90%	
K Number of findings in Legislative Auditor Report resulting from misappropriation of resources, fraud, theft or other illegal or unethical activity (LAPAS CODE - 23993)	0	0	0	0	0	0	

**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

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
S	Percentage of those surveyed reporting that they had choice in the services they received (LAPAS CODE - 15703)	75%	89%	75%	75%	75%	75%
S	Percentage of those surveyed reporting they had overall satisfaction with the services received (LAPAS CODE - 15704)	95%	91%	95%	95%	95%	95%
K	Percentage of those surveyed reporting that the Individual and Family Support services contributed to maintaining themselves or their family member in their own home (LAPAS CODE - 15707)	80%	93%	80%	80%	80%	80%
S	Total persons served (LAPAS CODE - 25518)	4,730	4,124	4,730	4,730	4,730	4,730

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

Performance Indicator Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Number of available Family Flexible Fund slots (LAPAS CODE - 11189)	201	155	198	262	190
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)	0	430	221	0	196

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**

Level	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Total number of home visits completed (LAPAS CODE - 25074)	3,829	3,183	3,829	3,829	3,829	3,829
K	Number of families served in program (LAPAS CODE - 25075)	370	308	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 de-escalation and resolution of potential crisis in the home and preventing out-of-home placement and Inter-agency 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 Indicators**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
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%	100%	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%



### Capital Area Human Services District General Performance Information

Performance Indicator Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Percentage increase in desired knowledge, perceptions, resilience and behaviors related to youth substance use and measured by the Prevention Impact score (LAPAS CODE - 15713)	2%	6%	18%	20%	16%
Number of children/adolescents admitted per year who are provided publicly supported behavioral services in their parish of residence (LAPAS CODE - 24001)	1,304	679	690	756	750
Number of child/adolescents admitted per year for behavioral health services (LAPAS CODE - 24002)	1,334	705	708	795	805
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)	13	11	10	10	8
Number of parishes in which child/adolescent substance abuse primary prevention programs exist (LAPAS CODE - 11323)	6	7	7	7	7
Percentage of child/adolescent mental health prevalence population served (LAPAS CODE - 15687)	10.0%	14.0%	13.0%	15.0%	17.3%
Total children/adolescents served (LAPAS CODE - 24004)	7,786	12,393	9,497	9,516	12,280
Average cost per person served in the community (LAPAS CODE - 24005)	\$ 605	\$ 384	\$ 502	\$ 448	\$ 360

**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**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
S	Annual percentage of adults reporting satisfactory access to services (LAPAS CODE - 15683)	85%	94%	85%	85%	85%	85%
S	Annual percentage of adults reporting positive service quality (LAPAS CODE - 15684)	90%	94%	90%	90%	90%	90%
K	Percentage of clients successfully completing outpatient treatment program (Addiction Recovery Services) (LAPAS CODE - 9976)	65%	70%	65%	65%	65%	65%
K	Percentage of persons successfully completing residential addictions (CARP 28 day inpatient) treatment program (LAPAS CODE - 11284)	85%	76%	85%	85%	85%	85%
S	Percentage of adults with major mental illness served in the community receiving new generation medications (LAPAS CODE - 15680)	95%	91%	95%	95%	95%	95%



### Capital Area Human Services District General Performance Information

Performance Indicator Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Total adults served in CAHSD (Mental Health) (LAPAS CODE - 24006)	7,573	8,097	7,668	8,324	8,967
Average cost per person served in the community (Mental Health) (LAPAS CODE - 24007)	\$ 1,134	\$ 1,820	\$ 1,808	\$ 1,069	\$ 896
Percentage of adult mental health prevalence population served (LAPAS CODE - 15686)	33%	50%	59%	63%	68%
Number of Community Mental Health Centers operated in CAHSD (LAPAS CODE - 15688)	3	3	3	3	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)	Not Applicable	1,394	1,536	2,330	2,123
Average cost per person served in the community (Addiction Recovery Services) (LAPAS CODE - 25538)	\$ Not Applicable	\$ 1,820	\$ 1,808	\$ 2,265	\$ 2,510
Numbers of persons provided Social Detoxification Services (LAPAS CODE - 24008)	753	500	266	213	145
Average daily census (Detoxification) (LAPAS CODE - 11241)	10	35	20	23	6
Average length of stay in days (Detoxification) (LAPAS CODE - 11250)	4.90	6.30	6.00	6.00	6.37
Number of beds (Detoxification) (LAPAS CODE - 11297)	10	37	20	37	35
Percentage of positive responses on client survey (Detoxification) (LAPAS CODE - 15700)	100%	51%	Not Available	97%	95%
Number of beds Residential (Inpatient) (LAPAS CODE - 11301)	40	32	32	32	32
Average daily census Residential (Inpatient) (LAPAS CODE - 15698)	31	28	30	31	26
Number of persons provided Residential (28 day Inpatient) services (LAPAS CODE - 24009)	423	223	445	479	424
Number of persons provided Community-Based Residential services (LAPAS CODE - 24010)	312	95	156	421	354
Average daily census (Community-Based Residential) (LAPAS CODE - 15695)	49	23	64	64	84
Number of beds (Community-Based Residential) (LAPAS CODE - 15696)	55	46	64	66	78



**Capital Area Human Services District General Performance Information (Continued)**

Performance Indicator Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Number of persons provided Outpatient Addiction Recovery Services (LAPAS CODE - 24011)	2,116	1,671	2,519	2,897	2,766
Number of services provided (Outpatient Addiction Recovery services) (LAPAS CODE - 11294)	29,974	15,793	14,940	18,302	15,056
Number of admissions (Outpatient Compulsive Gambling) (LAPAS CODE - 15691)	45	49	62	30	26
Number of services provided (Outpatient Compulsive Gambling) (LAPAS CODE - 15694)	1,654	2,069	1,766	1,003	917

**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 Indicators

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Percentage of new adult admissions in the three largest behavioral health clinics receiving a physical health screen (LAPAS CODE - 24012)	95%	84%	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%	17%	25%	25%	25%	25%
K	Percentage of clients who keep their first primary care appointment (LAPAS CODE - 24014)	72%	44%	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%	94%	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.

**Performance Indicators**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Percentage of Medical Special Needs Shelter-assigned staff who are trained in required NIMS courses (LAPAS CODE - 24017)	100%	100%	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%	99%	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 Indicators**

Level	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
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%	90%	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 meetings held in FY 2015-2016.							



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

GENERAL PERFORMANCE INFORMATION: SOUTHERN STATE COMPARISON				
STATE	Percentage of Adults Reporting Poor Mental Health, 2013	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
<b>Louisiana</b>	34.7% <sup>1</sup>	22 <sup>2</sup>	\$55.50 <sup>3</sup>	8 <sup>4</sup>
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	

<sup>1</sup> In Louisiana, 34.7% of all residents are reporting Poor Mental Health; Statehealthfacts.org 2013  
<sup>2</sup> 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  
<sup>3</sup> Louisiana spends \$55.50 per resident per capita for treatment of mental illness, the national average is \$119.62; Statehealthfacts.org 2013  
<sup>4</sup> 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

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)



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

GENERAL PERFORMANCE INFORMATION: SOUTHERN STATE COMPARISON						
	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 at least 1 day in the last 30 days) 2013	Rank (1 is the High Rank % 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
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%
<b>Louisiana</b>	19.8% <sup>1</sup>	16 <sup>2</sup>	16.5% <sup>3</sup>	25 <sup>4</sup>	703/234 <sup>5</sup>	33% <sup>6</sup>
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%

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

<sup>2</sup> 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) 2013

<sup>3</sup> In Louisiana, 16.5% of the adult population is considered binge drinkers; Centers for Disease Control (CDC) 2012

<sup>4</sup> Louisiana ranked 25th in the nation for largest population of adult binge drinkers. We are .4% below the national average for binge drinkers; Centers for Disease Control (CDC) 2012

<sup>5</sup> 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

<sup>6</sup> 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)

Source:

1 & 2: [http://apps.nccd.cdc.gov/brfss/list\\_PF.asp](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](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](http://www.nrd.nhtsa.dot.gov/cats/listpublication.aspx) (National Center for Statistics and Analysis, Traffic Safety Facts 2013 Data)



## 09-303 — Developmental Disabilities Council



### Agency Description

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

The goal of the Developmental Disabilities Council Program is to:

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

	Prior Year Actuals FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Means of Financing:</b>						
State General Fund (Direct)	\$ 495,439	\$ 507,076	\$ 507,076	\$ 337,067	\$ 507,067	\$ (9)
<b>State General Fund by:</b>						
Total Interagency Transfers	0	0	0	2,678	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	1,170,756	1,480,442	1,480,442	1,555,272	1,555,358	74,916
<b>Total Means of Financing</b>	<b>\$ 1,666,195</b>	<b>\$ 1,987,518</b>	<b>\$ 1,987,518</b>	<b>\$ 1,895,017</b>	<b>\$ 2,062,425</b>	<b>\$ 74,907</b>
<b>Expenditures &amp; Request:</b>						
Developmental Disabilities Council	\$ 1,666,195	\$ 1,987,518	\$ 1,987,518	\$ 1,895,017	\$ 2,062,425	\$ 74,907
<b>Total Expenditures &amp; Request</b>	<b>\$ 1,666,195</b>	<b>\$ 1,987,518</b>	<b>\$ 1,987,518</b>	<b>\$ 1,895,017</b>	<b>\$ 2,062,425</b>	<b>\$ 74,907</b>



## Developmental Disabilities Council Budget Summary

	Prior Year Actuals FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Authorized Full-Time Equivalents:</b>						
Classified	6	6	6	6	6	0
Unclassified	2	2	2	2	2	0
<b>Total FTEs</b>	<b>8</b>	<b>8</b>	<b>8</b>	<b>8</b>	<b>8</b>	<b>0</b>



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

The program goals of the Developmental Disabilities Council are to:

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

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

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

### Developmental Disabilities Council Budget Summary

	Prior Year Actuals FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Means of Financing:</b>						
State General Fund (Direct)	\$ 495,439	\$ 507,076	\$ 507,076	\$ 337,067	\$ 507,067	(9)



## Developmental Disabilities Council Budget Summary

	Prior Year Actuals FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>State General Fund by:</b>						
Total Interagency Transfers	0	0	0	2,678	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	1,170,756	1,480,442	1,480,442	1,555,272	1,555,358	74,916
<b>Total Means of Financing</b>	<b>\$ 1,666,195</b>	<b>\$ 1,987,518</b>	<b>\$ 1,987,518</b>	<b>\$ 1,895,017</b>	<b>\$ 2,062,425</b>	<b>\$ 74,907</b>
<b>Expenditures &amp; Request:</b>						
Personal Services	\$ 714,401	\$ 777,846	\$ 777,846	\$ 783,578	\$ 785,508	\$ 7,662
Total Operating Expenses	106,399	131,463	131,463	133,280	131,463	0
Total Professional Services	0	0	0	0	0	0
Total Other Charges	842,817	1,075,209	1,075,209	975,159	1,142,454	67,245
Total Acq & Major Repairs	2,578	3,000	3,000	3,000	3,000	0
Total Unallotted	0	0	0	0	0	0
<b>Total Expenditures &amp; Request</b>	<b>\$ 1,666,195</b>	<b>\$ 1,987,518</b>	<b>\$ 1,987,518</b>	<b>\$ 1,895,017</b>	<b>\$ 2,062,425</b>	<b>\$ 74,907</b>
<b>Authorized Full-Time Equivalents:</b>						
Classified	6	6	6	6	6	0
Unclassified	2	2	2	2	2	0
<b>Total FTEs</b>	<b>8</b>	<b>8</b>	<b>8</b>	<b>8</b>	<b>8</b>	<b>0</b>

## 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

General Fund	Total Amount	Table of Organization	Description
\$ 0	\$ 0	0	Mid-Year Adjustments (BA-7s):
\$ 507,076	\$ 1,987,518	8	Existing Oper Budget as of 12/01/16
<b>Statewide Major Financial Changes:</b>			
0	(12,742)	0	Related Benefits Base Adjustment
0	10,525	0	Retirement Rate Adjustment
0	2,173	0	Salary Base Adjustment



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

General Fund	Total Amount	Table of Organization	Description
0	(3,000)	0	Non-Recurring Acquisitions & Major Repairs
0	(55)	0	Risk Management
(9)	(9)	0	UPS Fees
0	(679)	0	Civil Service Fees
0	283	0	Office of Technology Services (OTS)
0	(1,448)	0	Office of State Procurement
<b>Non-Statewide Major Financial Changes:</b>			
0	76,859	0	Increase in Federal Developmental Disabilities Grant to fund contracts and Council administrative expenditures for the disability initiatives around the state.
0	3,000	0	Replacing computers and laptops to continue to assist with patient care and staff productivity.
\$ 507,067	\$ 2,062,425	8	<b>Recommended FY 2017-2018</b>
\$ 0	\$ 0	0	<b>Less Supplementary Recommendation</b>
\$ 507,067	\$ 2,062,425	8	<b>Base Executive Budget FY 2017-2018</b>
\$ 507,067	\$ 2,062,425	8	<b>Grand Total Recommended</b>

### Professional Services

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

### Other Charges

Amount	Description
<b>Other Charges:</b>	
\$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.
\$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.
<b>\$1,092,205</b>	<b>SUB-TOTAL OTHER CHARGES</b>
	<b>Interagency Transfers:</b>
\$4,502	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
\$7,136	Office of State Procurement
\$8,141	Office of Technology Services
\$459	Uniform Payroll Services
\$1,432	Civil Service Fees
<b>\$50,249</b>	<b>SUB-TOTAL INTERAGENCY TRANSFERS</b>
<b>\$1,142,454</b>	<b>TOTAL OTHER CHARGES</b>

## Acquisitions and Major Repairs

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

## Performance Information

- (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 Indicators**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Percentage of Council plan objectives on target (LAPAS CODE - 24027)	95%	96%	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**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Percentage of decisions regarding policy and program practices influenced through Council involvement (LAPAS CODE - 24026)	75%	100%	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

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Number of information and referral services provided (LAPAS CODE - 10697)	35,000	37,675	40,000	40,000	40,000	40,000
K	Number of training sessions provided statewide (LAPAS CODE - 21284)	230	227	240	240	240	240
K	Number of individuals provided training statewide (LAPAS CODE - 21285)	5,000	4,889	5,200	5,200	5,200	5,200
K	Number of individuals provided peer to peer support opportunities statewide (LAPAS CODE - 21286)	22,000	22,040	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 Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Percent of funds spent on community living (LAPAS CODE - 14074)	30%	41%	45%	49%	54%
Percent of funds spent on employment activities (LAPAS CODE - 14075)	24%	17%	20%	22%	22%
Percent of funds spent on system coordination (LAPAS CODE - 14076)	46%	36%	31%	24%	24%



### Developmental Disabilities Council General Performance Information (Continued)

Performance Indicator Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Percent of individuals with disabilities assisted (LAPAS CODE - 14077)	6%	5%	8%	8%	8%
Percent of parents/family members of individuals with disabilities assisted (LAPAS CODE - 14078)	69%	68%	65%	63%	61%
Percent of professionals assisted (LAPAS CODE - 14079)	25%	17%	27%	29%	31%
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 FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Means of Financing:</b>						
State General Fund (Direct)	\$ 18,945,538	\$ 18,659,909	\$ 18,543,431	\$ 18,876,184	\$ 17,554,030	\$ (989,401)
<b>State General Fund by:</b>						
Total Interagency Transfers	4,993,771	5,087,713	5,735,582	5,755,582	5,755,582	20,000
Fees and Self-generated Revenues	1,074,243	1,249,243	1,249,243	1,229,243	1,229,243	(20,000)
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
<b>Total Means of Financing</b>	<b>\$ 26,368,604</b>	<b>\$ 26,351,917</b>	<b>\$ 26,883,308</b>	<b>\$ 27,216,061</b>	<b>\$ 25,893,907</b>	<b>\$ (989,401)</b>
<b>Expenditures &amp; Request:</b>						
Metropolitan Human Services District	\$ 26,368,604	\$ 26,351,917	\$ 26,883,308	\$ 27,216,061	\$ 25,893,907	\$ (989,401)
<b>Total Expenditures &amp; Request</b>	<b>\$ 26,368,604</b>	<b>\$ 26,351,917</b>	<b>\$ 26,883,308</b>	<b>\$ 27,216,061</b>	<b>\$ 25,893,907</b>	<b>\$ (989,401)</b>
<b>Authorized Full-Time Equivalents:</b>						
Classified	0	0	0	0	0	0
Unclassified	0	0	0	0	0	0
<b>Total FTEs</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>



## 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-of-entry 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 be 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

	Prior Year Actuals FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Means of Financing:</b>						
State General Fund (Direct)	\$ 18,945,538	\$ 18,659,909	\$ 18,543,431	\$ 18,876,184	\$ 17,554,030	\$ (989,401)
<b>State General Fund by:</b>						
Total Interagency Transfers	4,993,771	5,087,713	5,735,582	5,755,582	5,755,582	20,000
Fees and Self-generated Revenues	1,074,243	1,249,243	1,249,243	1,229,243	1,229,243	(20,000)
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
<b>Total Means of Financing</b>	<b>\$ 26,368,604</b>	<b>\$ 26,351,917</b>	<b>\$ 26,883,308</b>	<b>\$ 27,216,061</b>	<b>\$ 25,893,907</b>	<b>\$ (989,401)</b>
<b>Expenditures &amp; Request:</b>						
Personal Services	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
Total Operating Expenses	0	0	0	42,790	0	0
Total Professional Services	0	0	0	30,510	0	0
Total Other Charges	26,368,604	26,351,917	26,883,308	27,142,761	25,893,907	(989,401)
Total Acq & Major Repairs	0	0	0	0	0	0
Total Unallotted	0	0	0	0	0	0
<b>Total Expenditures &amp; Request</b>	<b>\$ 26,368,604</b>	<b>\$ 26,351,917</b>	<b>\$ 26,883,308</b>	<b>\$ 27,216,061</b>	<b>\$ 25,893,907</b>	<b>\$ (989,401)</b>
<b>Authorized Full-Time Equivalents:</b>						
Classified	0	0	0	0	0	0
Unclassified	0	0	0	0	0	0
<b>Total FTEs</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

## 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

General Fund	Total Amount	Table of Organization	Description
\$ (116,478)	\$ 531,391	0	<b>Mid-Year Adjustments (BA-7s):</b>
\$ 18,543,431	\$ 26,883,308	0	<b>Existing Oper Budget as of 12/01/16</b>
<b>Statewide Major Financial Changes:</b>			
854,544	854,544	0	Related Benefits Base Adjustment
154,754	154,754	0	Retirement Rate Adjustment
116,428	116,428	0	Salary Base Adjustment
(960,866)	(960,866)	0	Attrition Adjustment
22,699	22,699	0	Risk Management
(79,382)	(79,382)	0	Office of Technology Services (OTS)
(7,157)	(7,157)	0	Office of State Procurement
<b>Non-Statewide Major Financial Changes:</b>			
(404,199)	(404,199)	0	Annualization of the FY 17 Mid-year Reduction to reduce Community Based Psychiatric Supports and Treatment (CPST) slots, eliminate one vacant position, and reductions to contracts.
(686,222)	(686,222)	0	Reduction to contracts, New Hope beds, and Assertive Community Treatment Teams (ACT) and Forensic Assertive Community Treatment Teams (FACT) funding.
\$ 17,554,030	\$ 25,893,907	0	<b>Recommended FY 2017-2018</b>
\$ 0	\$ 0	0	<b>Less Supplementary Recommendation</b>
\$ 17,554,030	\$ 25,893,907	0	<b>Base Executive Budget FY 2017-2018</b>
\$ 17,554,030	\$ 25,893,907	0	<b>Grand Total Recommended</b>

## Professional Services

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

## Other Charges

Amount	Description
<b>Other Charges:</b>	
\$11,381,988	Salaries and related benefits for Other Charges positions.
\$14,450,512	Contractual and operating costs of mental health, addictive disorders and developmental disability services
<b>\$25,832,500</b>	<b>SUB-TOTAL OTHER CHARGES</b>



### Other Charges (Continued)

Amount	Description
<b>Interagency Transfers:</b>	
\$22,933	Payments to the Legislative Auditor
\$38,474	Payments to the Department of Civil Service
<b>\$61,407</b>	<b>SUB-TOTAL INTERAGENCY TRANSFERS</b>
<b>\$25,893,907</b>	<b>TOTAL OTHER CHARGES</b>

### Acquisitions and Major Repairs

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

### Performance Information

- (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 Indicators

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Average number of days until the third next available appointment for psychiatric evaluation (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	45	30	30
This is a new performance indicator for FY 17-18. There is no prior year information available. The existing performance standard is an estimate.							
K	Average number of days until the third next available appointment for new medication management (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	45	30	30
This is a new performance indicator for FY 17-18. There is no prior year information available. The existing performance standard is an estimate.							
S	Percentage of MHSD clinics implementing modified scheduling (i.e., walk-ins, early morning, weekend, and evening hours). (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	60%	80%	80%
This is a new performance indicator for FY 17-18. There is no prior year information available. The existing performance standard is an estimate.							

## 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 Indicators**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Percentage of MHSD staff who have participated in training opportunities regarding co-occurring disorders (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	60%	70%	70%
This is a new performance indicator for FY 17-18. There is no prior year information available. The existing performance standard is an estimate.							
S	Percentage of clinic service contracts monitored (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	95%	95%	95%
This is a new performance indicator for FY 17-18. There is no prior year information available. The existing performance standard is an estimate.							
S	The number of documented electronic health record/ data systems audits (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	3.00	4.00	4.00
This is a new performance indicator for FY 17-18. There is no prior year information available. The existing performance standard is an estimate.							

**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 Indicators

Level	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Total unduplicated count of people receiving state - funded developmental disabilities community - based services (LAPAS CODE - 21002)	500	545	525	525	425	425
K	Total number of individuals applying for Developmental Disabilities Services (LAPAS CODE - 22194)	200	223	220	220	200	200
K	Number of consumers receiving Flexible Family Funds (LAPAS CODE - 22317)	128	138	140	140	143	143
K	Number of individual agreements with consumers (LAPAS CODE - 22319)	250	297	300	300	200	200
K	Percentage of consumers who indicate satisfaction with services received from MHSD staff, as reflected in consumer evaluations (LAPAS CODE - 22320)	95%	95%	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 Indicators**

L e v e l	Performance Indicator Name	Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Indicator Values			
				Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
S	Total adults served in Community Mental Health Centers (i.e., via MHSD clinics) (LAPAS CODE - 21007)	Not Applicable	6,487	7,000	7,000	7,000	7,000
This was a new performance indicator for FY 2015-2016.							
K	Number of adults receiving Addiction treatment via MHSD clinics (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	50	75	75
This is a new performance indicator for FY 17-18. There is no prior year information available. The existing performance standard is an estimate.							

**Metropolitan Human Services District General Performance Information**

Performance Indicator Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Total number of adults admitted into an addiction program reporting receiving prior mental health services (LAPAS CODE - 21013)	1,483	1,267	1,283	1,469	7,037
Total number of participants admitted into an addiction program who report community - based employment (LAPAS CODE - 21016)	542	323	283	139	18
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	Not Available	5.50

**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

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Number of children receiving behavioral health services within the community (via MHSD contractors) (LAPAS CODE - 22323)	1,300	1,922	2,000	2,000	2,000	2,000
K	Number of adolescents receiving Addiction treatment via MHSD clinics (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	16	20	20
This is a new performance indicator for FY 17-18. There is no prior year information available. The existing performance standard 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 women and children: the Family Medical Leave Policy (8108-93), the Sexual Harassment Policy (8143-02), and the Equal Employment Opportunity Policy (8116-77). In addition, flexibility in work schedules, telework opportunities, and the availability of Dependent Day Care Spending Accounts assist both women and their families.

Medical Vendor Administration has one program: Medical Vendor Administration.

For additional information, see:

[Medical Vendor Administration](#)

## Medical Vendor Administration Budget Summary

	Prior Year Actuals FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Means of Financing:</b>						
State General Fund (Direct)	\$ 78,093,014	\$ 101,854,324	\$ 101,829,357	\$ 117,651,042	\$ 118,413,627	\$ 16,584,270
<b>State General Fund by:</b>						
Total Interagency Transfers	286,000	473,672	473,672	473,672	473,672	0
Fees and Self-generated Revenues	2,256,965	4,200,000	4,200,000	4,200,000	4,200,000	0
Statutory Dedications	0	2,261,387	2,261,387	1,051,683	1,051,683	(1,209,704)
Interim Emergency Board	0	0	0	0	0	0
Federal Funds	167,106,588	301,346,795	301,552,351	339,031,558	399,396,879	97,844,528
<b>Total Means of Financing</b>	<b>\$ 247,742,567</b>	<b>\$ 410,136,178</b>	<b>\$ 410,316,767</b>	<b>\$ 462,407,955</b>	<b>\$ 523,535,861</b>	<b>\$ 113,219,094</b>
<b>Expenditures &amp; Request:</b>						
Medical Vendor Administration	\$ 247,742,567	\$ 410,136,178	\$ 410,316,767	\$ 462,407,955	\$ 523,535,861	\$ 113,219,094
<b>Total Expenditures &amp; Request</b>	<b>\$ 247,742,567</b>	<b>\$ 410,136,178</b>	<b>\$ 410,316,767</b>	<b>\$ 462,407,955</b>	<b>\$ 523,535,861</b>	<b>\$ 113,219,094</b>
<b>Authorized Full-Time Equivalents:</b>						
Classified	872	886	886	971	890	4
Unclassified	2	2	2	2	1	(1)
<b>Total FTEs</b>	<b>874</b>	<b>888</b>	<b>888</b>	<b>973</b>	<b>891</b>	<b>3</b>



## 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.
- 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 through 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.

- 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), for processing provider exclusions and terminations and for data analytics.

For additional information, see:

[Medical Vendor Administration](#)

**Medical Vendor Administration Budget Summary**

	Prior Year Actuals FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Means of Financing:</b>						
State General Fund (Direct)	\$ 78,093,014	\$ 101,854,324	\$ 101,829,357	\$ 117,651,042	\$ 118,413,627	\$ 16,584,270
<b>State General Fund by:</b>						
Total Interagency Transfers	286,000	473,672	473,672	473,672	473,672	0
Fees and Self-generated Revenues	2,256,965	4,200,000	4,200,000	4,200,000	4,200,000	0
Statutory Dedications	0	2,261,387	2,261,387	1,051,683	1,051,683	(1,209,704)
Interim Emergency Board	0	0	0	0	0	0
Federal Funds	167,106,588	301,346,795	301,552,351	339,031,558	399,396,879	97,844,528
<b>Total Means of Financing</b>	<b>\$ 247,742,567</b>	<b>\$ 410,136,178</b>	<b>\$ 410,316,767</b>	<b>\$ 462,407,955</b>	<b>\$ 523,535,861</b>	<b>\$ 113,219,094</b>
<b>Expenditures &amp; Request:</b>						
Personal Services	\$ 70,639,815	\$ 72,286,300	\$ 72,286,300	\$ 73,798,513	\$ 72,411,072	\$ 124,772
Total Operating Expenses	3,277,971	7,368,659	7,368,659	7,611,768	7,378,369	9,710
Total Professional Services	84,379,114	154,775,534	155,787,253	164,838,560	150,531,164	(5,256,089)
Total Other Charges	89,445,667	175,705,685	174,874,555	215,924,502	293,215,256	118,340,701
Total Acq& Major Repairs	0	0	0	234,612	0	0
Total Unallotted	0	0	0	0	0	0



## Medical Vendor Administration Budget Summary

	Prior Year Actuals FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Total Expenditures &amp; Request</b>	\$ 247,742,567	\$ 410,136,178	\$ 410,316,767	\$ 462,407,955	\$ 523,535,861	\$ 113,219,094
<b>Authorized Full-Time Equivalents:</b>						
Classified	872	886	886	971	890	4
Unclassified	2	2	2	2	1	(1)
<b>Total FTEs</b>	<b>874</b>	<b>888</b>	<b>888</b>	<b>973</b>	<b>891</b>	<b>3</b>

## 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 FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
Medical Assistance Programs Fraud Detection Fund	\$ 0	\$ 2,250,000	\$ 2,250,000	\$ 1,050,000	\$ 1,050,000	\$ (1,200,000)
Health Care Redesign Fund	0	2,827	2,827	658	658	(2,169)
New Opportunities Waiver (NOW) Fund	0	8,560	8,560	1,025	1,025	(7,535)



### Major Changes from Existing Operating Budget

General Fund	Total Amount	Table of Organization	Description
\$ (24,967)	\$ 180,589	0	<b>Mid-Year Adjustments (BA-7s):</b>
\$ 101,829,357	\$ 410,316,767	888	<b>Existing Oper Budget as of 12/01/16</b>
<b>Statewide Major Financial Changes:</b>			
260,656	521,312	0	Related Benefits Base Adjustment
441,220	882,440	0	Retirement Rate Adjustment
553,713	1,107,426	0	Salary Base Adjustment
(640,745)	(1,281,492)	0	Attrition Adjustment
(390,598)	(1,011,719)	0	Non-recurring Carryforwards
(484)	(969)	0	Risk Management
26,102	52,203	0	Rent in State-Owned Buildings
62,084	124,169	0	Maintenance in State-Owned Buildings
755	1,510	0	UPS Fees
3,524	7,048	0	Civil Service Fees
(28,475)	(56,951)	0	State Treasury Fees
20,991	357,779	0	Office of Technology Services (OTS)
(78,774)	(157,547)	0	Office of State Procurement
<b>Non-Statewide Major Financial Changes:</b>			
19,825	198,250	0	Increase in Professional Services funding as a result of a Centers for Medicare & Medicaid Services (CMS) mandate to augment the Electronic Health Record (EHR) program audit schedule timeline. This augmentation will ensure financial oversight and compliance monitoring of expenditures with CMS guidelines.
3,000,000	6,000,000	0	Funding to cover the costs associated with the Cooperative Endeavor agreement between Louisiana Department of Health and Louisiana State University, Health Sciences Center (LSUHSC).
0	492,884	0	Funds administrative costs associated with providing services and performing administrative activities to assist and support Child Welfare Programs within the Department of Children and Family Services (DCFS). Supported activities include Medicaid eligibility determination, case management and supervision, referral of medical and behavioral health related services, and Medicaid outreach.
9,900	99,000	0	This increase is in conjunction with the American Recovery and Reinvestment Act (ARRA) to provide additional staff support for promoting the adoption and meaningful use of electronic health record technology to reduce health care costs, improve coordination of care, and improve health outcomes, specifically one FTE to serve as the federally required HIT Coordinator.
3,432,521	34,325,210	0	Funding for the federally mandated Eligibility and Enrollment (E&E) Modernization Project. This adjustment funds the E&E Modernization Project through its initial implementation schedule. It also adds additional funding to integrate Temporary Assistance for Needy Families (TANF) and Supplemental Nutrition Assistance Program (SNAP), which will allow the Louisiana Department of Health to leverage additional federal funds.
69,232	138,464	0	Increases the Local Education Agency (LEA) auditing contract with Postlethwaite & Netterville to comply with Centers for Medicare & Medicaid Services (CMS) mandates per State Plan Amendment (SPA). The monitoring of the transportation cost reports is not currently included in this contract.† The additional funding is required to ensure that all claims are reviewed prior to payment and to ensure that claims are properly paid.



## Major Changes from Existing Operating Budget (Continued)

General Fund	Total Amount	Table of Organization	Description
49,769	99,538	0	Increases the nursing home case mix rate setting contract with Myers and Stauffer. Nursing Facilities (NF), Adult Day Health Care (ADHC) facilities, Intermediate Care Facilities for the Developmentally Disabled (ICF/DD) and Psychiatric Residential Treatment Facilities (PRTF) are all having more demands for rate setting from cost reports. This additional work could be done within the scope of the contract. This is a Centers for Medicare & Medicaid Services (CMS) mandate per the State Plan Amendment (SPA).
80,131	160,262	0	Increases the Long Term Care (LTC)† audit contract with Postlethwaite & Netterville. The increase is required to cover 5 additional facilities and to add complex care facilities to the audit list. The Medicaid Program is required by the federal Department of Health and Human Services to provide for the audit of providers enrolled in the Program. This contract provides for the audit of long term care providers.
75,140	150,280	0	Additional audit and accounting services to collect utilization data from Public Private Partnership hospitals. This data collection is the result of reporting requirements recently added to the State's Cooperative Endeavor Agreements (CEAs) in FY17 for purposes of establishing a new culture of transparency and accountability and preparing for a more substantial renegotiation of the CEAs for FY18.
9,084,071	18,168,142	0	Transfer of the Coordinated System of Care (CSoc) program from Medical Vendor Payments (MVP) to Medical Vendor Administration (MVA). See companion request in MVP.
0	652,500	0	To revise and implement new functionality in the OAAS Participant Tracking System (OPTS), which is used to track applicants for nursing facilities (NF), Community Choices (CCW) and Adult Day Health Care (ADHC) waiver programs, and Long Term - Personal Care Services (LT-PCS) state plan services. This is a companion request with the Office of Aging and Adult Services (OAAS).
342,471	684,941	0	Transfers funding from Medical Vendor Payments (MVP) to Medical Vendor Administration (MVA) for the administrative costs associated with restoring the Louisiana Health Insurance Premium Payment (LaHIPP) program. The program reimburses Medicaid members for the employee share of employer-sponsored insurance costs, including premiums, deductibles and copays, effectively providing no cost private insurance coverage and so discouraging "crowd out" among Medicaid eligibles dropping private insurance coverage. HIPP even pays for coverage of an employee's dependents when cost-effective for the state. The funding comes from savings generated in MVP from private insurance being primary payer for participating Medicaid enrollees' medical service costs.
2,169	0	0	Means of financing substitution replacing Health Care Redesign Fund with State General Fund (Direct), based on the projected fund balance at the end of FY 18.
7,535	0	0	Means of financing substitution replacing New Opportunities Waiver (NOW) Fund with State General Fund (Direct), based on the projected fund balance at the end of FY 18.
1,200,000	0	0	Means of financing substitution replacing Medical Assistance Programs Fraud Detection Fund with State General Fund (Direct), based on the projected fund balance at the end of FY 18.
3,084,284	64,517,563	0	Integrated Eligibility Solution - Integration of two sub-systems and the Louisiana Health Insurance Premium Payment (LAHIPP) program in the Louisiana Department of Health (LDH), and the old mainframe system in the Department of Children and Family Services (DCFS) with the state's Enterprise Architecture (EA) and Eligibility and Enrollment (E&E) platform. This will integrate the programs onto the latest technology; lowering maintenance costs, improving system reliability, improving constituent care and service due to the overlap in applications between the two departments, and improve worker efficiency and accuracy.
0	0	4	Conversion of Job Appointments to Authorized T.O. (4 T.O.) - A request for funding is not needed as Medical Vendor Administration has funding in the base budget to support the positions. The job appointments have been used to maintain mission critical agency functions as the agency experienced a 25% reduction in work force since 2008.
(3,360,344)	(11,484,684)	0	Annualization of the FY 17 Mid-year Reduction to various contracts within Medical Vendor Administration and reduction of CSOC daily rate by 5%.



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

General Fund	Total Amount	Table of Organization	Description
(277,258)	(1,174,176)	(1)	Elimination of 16 job appointments and 1 Unclassified T.O. position.
(37,145)	(74,289)	0	Reduction to the Travel and Supplies categories by 10%, as well as the elimination of Other Charges acquisitions.
(500,000)	(1,000,000)	0	Reduction to the Molina contract resulting from the settlement of a lawsuit.
72,000	720,000	0	Staff augmentation through a Cooperative Endeavor Agreement (CEA) with University of New Orleans (UNO) to assist with Medicaid Management Information Systems (MMIS) modernization until Medicaid has phased out the current monolithic MMIS system in 2020. CFR Subpart C subsection 433.117 requires that, the initial approval of replacement MMIS must have a plan for orderly transition from the system being replaced to the replacement system.
\$ 118,413,627	\$ 523,535,861	891	<b>Recommended FY 2017-2018</b>
\$ 0	\$ 0	0	<b>Less Supplementary Recommendation</b>
\$ 118,413,627	\$ 523,535,861	891	<b>Base Executive Budget FY 2017-2018</b>
\$ 118,413,627	\$ 523,535,861	891	<b>Grand Total Recommended</b>

### Professional Services

Amount	Description
<b>Professional Services:</b>	
\$45,776,800	Fiscal intermediary and Applied Behavioral Analysis
\$34,643,388	Enrollment Broker and Eligibility Call Center Functions
\$11,893,042	Assessment and long-term care services
\$10,659,275	Policy research, development and data analytic support for health care delivery system transformation and payment reform efforts
\$9,135,457	Medicaid Systems Modernization
\$6,816,468	Actuarial services
\$6,558,160	Provider Management
\$5,958,296	Independent Verification and Validation (IV&V)
\$2,949,424	Maintenance and support for MEDS and functionality with ACA
\$2,663,196	Information Systems development and implementation
\$2,550,000	Third Party Liability (TPL) collections
\$2,516,307	Long-term care audits
\$2,228,030	Audit services for hospitals, nursing facilities, clinics, etc.
\$1,996,795	External Quality Review Organization (EQRO) for LBHP, Bayou Health, and Managed Care Organizations
\$957,743	Incident Management System
\$756,944	Audit for functions associated with LEA
\$548,500	Medical review for disability
\$271,961	PASRR (Preadmission Screening and Resident Review)
\$268,557	Program Integrity initiatives



## Professional Services (Continued)

Amount	Description
\$262,833	Fiscal Management for Self-Direction Participants
\$212,944	HIFA Waiver and various (appeals of disallowances)
\$198,250	Maintain Home Case Mix reimbursement system and accounting services to audit the Electronic Health Records (EHR) incentive program
\$121,705	Conduct surveys to determine the number of uninsured persons in Louisiana
\$99,538	Nursing Home Case Mix/Rate Setting
\$75,000	Establish rates for the State Maximum Allowable Costs (SMAC) program
\$60,000	Actuarial services - GNOCHC
\$50,000	Pharmacy Cost Containment and Preferred Drug List (PDL)
\$50,000	Managed care organization (MCO) contractor
\$49,000	Health Information Exchange (HIE) consultant
\$42,261	Cooperative Endeavor Agreement (CEA) - provides assistance for a broad range of public health activities
\$57,393	Medicaid literature development and branded assets
\$33,333	Regional bus tickets for Medicaid patients
\$25,000	Home and Community-based services (HCBS) transition plan development
\$21,674	Provide services related to the administration of Applied Behavior Analysis
\$10,000	Phone and document language interpretation
\$8,557	Background checking service
\$5,333	Legal consultation regarding immigration issues
<b>\$150,531,164</b>	<b>TOTAL PROFESSIONAL SERVICES</b>

## Other Charges

Amount	Description
	<b>Other Charges:</b>
\$47,850,500	Health Information Technology (HIT) / EHR Incentive Payments to providers
\$38,728,880	Coordinated System of Care (CSOC) and waiver costs
\$15,015,701	University of New Orleans (Professional services)
\$13,500,000	Medicaid Eligibility Capacity (Outstationing)
\$3,700,000	Health Information Technology (HIT) / Health Information Exchange (HIE)
\$4,181,949	University of Louisiana at Monroe/GEO, Quality Informatics
\$1,882,574	Program Integrity initiatives; including accounting and auditing
\$990,574	Predictive analytics and data management
\$966,366	Children's Hospital Ventilator Assistance services
\$889,226	Reimbursement to Application Centers
\$812,388	Other Charges - Acquisitions including those necessary for Medicaid Expansion
\$684,941	Administrative costs associated with reinstatement of the LA Health Insurance Premium Payment Program (LaHIPP)
\$500,000	Local Education Agencies (LEA) - Medicaid match for administrative functions related to School Based Administrative Claiming Services
\$410,684	Various services, including workforce management, shredding, drug screens
\$330,185	Quality Management, statistics and reporting
\$300,000	Social Security Administration (SSA) and/or Parish Clerk of Court Offices
\$150,000	Nursing homes are reimbursed for allowable costs incurred to train their nurse aides to become state certified; mandated by OBRA '87



## Other Charges (Continued)

Amount	Description
\$60,000	Various operating costs including postal box rentals and copier/printer rental and maintenance
\$34,953	Transportation expenses for Medicaid recipients who must travel a significant distance for medical treatment
\$24,000	On-line provider training for private providers of waiver services
\$23,673	Survey services, including a survey on the effectiveness of LaCHIP on the uninsured
\$11,432	Travel for Medicaid Pharmaceutical & Therapeutics Committee Members/Federal Express and professional shorthand reports
<b>\$131,048,026</b>	<b>SUB-TOTAL OTHER CHARGES</b>
	<b>Interagency Transfers:</b>
\$64,517,563	DCFS/OTS - Integrated Eligibility Solutions
\$34,325,210	DOA - OTS - E & E FY18 increase
\$28,106,127	DOA - OTS - Information technology data processing and support services including maintenance and support for MEDS, Expansion, Modernization, CAFÉ and other support services
\$7,413,009	DOA - OTS - Information technology services
\$6,000,000	DCFS - Child Welfare Administrative Claiming
\$4,000,000	DCFS - Administrative activities related to eligibility determination, case management and supervision, referral of medical and behavioral health related services and Medicaid outreach
\$3,841,843	University of New Orleans (UNO)
\$3,189,930	LDH - Office of the Secretary - Transfer of Title 18 Federal Funds to for Health Standards
\$1,642,665	LDH - Office of Aging and Adult Services (OAAS) - Money Follows the Person
\$1,167,103	DOA - Office of State Buildings (OSB) Rent
\$775,681	LDH - OAAS - Program Integrity's reimbursement to OAAS for provider monitoring
\$771,332	LDH - Office of Behavioral Health (OBH) for salaries related to specialized behavioral health services
\$652,500	LDH - OAAS - Participant Tracking System Enhancements
\$615,655	DOA - Office of State Printing (OSP)
\$591,522	Department of Justice (DOJ) - Attorney General Advocacy Center, Community Living Ombudsman Program (CLOP)
\$570,818	DOA - Office of Risk Management (ORM)
\$480,000	LDH - OAAS - LTPCS Compliance and Audit Team Staff (CATS)
\$400,000	LDH - OAAS - Adult Protective Services (APS)
\$400,000	LDH - OAAS - Nursing Home Project
\$380,870	LDH - Office for Citizens with Developmental Disabilities (OCDD) - Home and Community Based Services (HCBS) Access Contract
\$297,820	Department of State Civil Service (DSCS) - Civil Service Fees; Division of Administration Comprehensive Public Training Program (CPTP) Fees
\$270,797	DCFS - Coordinated System of Care (CSOC)
\$268,770	DOA - Office of Group Benefits (OGB) - Separate SCHIP TPA and premium pay
\$202,875	Department of Corrections (DOC) - Disability Medicaid Program
\$200,000	LDH - Office of the Secretary - Governor's Program on Physical Fitness
\$185,383	DOA - Office of State Procurement Consolidation
\$150,000	Board of Regents - Medical and Allied Health Professional Education Scholarships & Loan Program
\$125,000	LDH - OAAS - Reimbursement of salaries and related expenses for appeals staff
\$124,169	DOA - Maintenance for State Agencies
\$99,000	University of Louisiana, Lafayette (ULL) for technical assistance
\$89,338	LDH - OPH - HIT Coordinator
\$84,644	LDH - Office of Public Health (OPH) Tobacco Quit Line
\$75,000	DOJ - Attorney General Advocacy Center, Supported Independent Living Advocacy Program (SILAP)
\$65,376	DOA - State Uniform Payroll System (UPS)



## Other Charges (Continued)

Amount	Description
\$32,948	DOA - State Treasurer's Office (STO)
\$29,282	Louisiana Workforce Commission (LWC)
\$25,000	LDH - Office of the Secretary - Record and report financial/fiscal information
<b>\$162,167,230</b>	<b>SUB-TOTAL INTERAGENCY TRANSFERS</b>
<b>\$293,215,256</b>	<b>TOTAL OTHER CHARGES</b>

## Acquisitions and Major Repairs

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

## Performance Information

- (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**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Percentage of Medicaid applications received online (LAPAS CODE - 25540)	28%	40%	40%	40%	40%	40%
K	Number of children enrolled through Express Lane Eligibility (ELE) (LAPAS CODE - 25539)	8,316	5,853	5,500	5,500	6,300	6,300
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.							
K	Percentage of applications for Pregnant Women approved within 5 calendar days (LAPAS CODE - 24036)	75%	34%	50%	50%	50%	50%
K	Percentage of applications for LaCHIP and Medicaid programs for children approved within 15 calendar days (LAPAS CODE - 25541)	70%	52%	60%	60%	60%	60%
K	Total number of children enrolled (LAPAS CODE - 10013)	768,444	757,621	773,335	773,335	803,760	803,760
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.							
K	Percentage of renewals processed and not closed for procedural reasons (LAPAS CODE - 17038)	94.0%	95.9%	95.0%	95.0%	95.0%	95.0%
K	Percentage of calls received through the Medicaid & LaCHIP hotlines who hold for a representative less than 5 minutes (LAPAS CODE - 24041)	60%	45%	48%	48%	60%	60%
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.							
K	Number of children renewed through Express Lane Eligibility (ELE) (LAPAS CODE - 25542)	187,068	179,325	187,068	187,068	185,000	185,000



## Performance Indicators (Continued)

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Number of adults enrolled through SNAP Assisted Enrollment (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	50,000	50,000
This is a new performance indicator for FY 2017-2018 and there is no prior year information available.							
S	Number of children enrolled as Title XXI Eligibles (LaCHIP) (LAPAS CODE - 2241)	128,444	125,350	128,444	128,444	132,984	132,984
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)	640,000	632,271	648,098	648,098	670,776	670,776
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	Percentage of applications for New Adult program approved within 15 calendar days (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	70%	70%
This is a new performance indicator for FY 2017-2018 and there is no prior year information available.							
K	Number of justice involved adults enrolled pre-release from incarceration (LAPAS CODE - NEW)	Not Applicable	Not Applicable	3,500	3,500	12,000	12,000
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 Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Number of Certified Medicaid Application Centers (LAPAS CODE - 12027)	533	516	583	562	566
Number of individuals enrolled in all Medicaid and LaCHIP programs (LAPAS CODE - 25543)	Not Applicable	1,263,442	1,269,019	1,391,896	1,413,395
Number of applications processed annually (LAPAS CODE - 25545)	Not Applicable	412,840	319,426	389,043	403,321



**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**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	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 Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Percentage of State Plan amendments approved. (LAPAS CODE - 24046)	88%	29%	88%	96%	74%
Number of State Plan amendments submitted. (LAPAS CODE - 24047)	58	69	49	28	35

**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

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
S	Number of Local Education Agencies targeted for monitoring (LAPAS CODE - 13375)	32	33	32	32	32	32
K	Percent of targeted Local Education Agencies monitored (LAPAS CODE - 13376)	95.0%	103.0%	95.0%	95.0%	95.0%	95.0%
S	Number of Nursing Home cost reports targeted for monitoring (LAPAS CODE - 25549)	120	103	100	100	120	120
K	Percent of Nursing Home cost reports monitored (LAPAS CODE - 25550)	33%	40%	39%	39%	33%	33%
S	Number of Intermediate Care Facilities (ICF) cost reports targeted for monitoring (LAPAS CODE - 25551)	180	87	91	91	180	180
S	Percent of Intermediate Care Facilities (ICF) cost reports monitored (LAPAS CODE - 25552)	33%	16%	17%	17%	33%	33%
S	Number of hospital cost reports reviewed and audited (LAPAS CODE - 25553)	360	331	400	400	400	400



**Medical Vendor Administration General Performance Information**

Performance Indicator Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Number of Local Education Agency claims adjusted as a result of monitoring activities (LAPAS CODE - 16539)	59	37	82	59	61
Amount identified as over claimed as a result of monitoring (LAPAS CODE - 13540)	\$ -3,914	\$ -22,441	\$ 378,351	\$ 544,435	\$ 750,574
Number of Nursing Homes cost reports adjusted as a result of monitoring activities (LAPAS CODE - 25554)	Not Applicable	107	104	86	101
Number of Intermediate Care Facilities (ICF) cost reports adjusted as a result of monitoring activities (LAPAS CODE - 25555)	Not Applicable	129	95	92	79

**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**

Level	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Percentage of total claims processed within 30 days of receipt (LAPAS CODE - 2219)	98.0%	99.7%	98.0%	98.0%	98.0%	98.0%
S	Average claim processing time in days (LAPAS CODE - 2217)	9.0	11.9	9.0	9.0	9.0	9.0
K	Total number of managed care encounters processed (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	18,000,000.0	18,000,000.0
This is a new performance indicator for FY 2017-2018 and there is no prior year information available.							
K	Total number of managed capitation payments processed (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	9,000,000	9,000,000
This is a new performance indicator for FY 2017-2018 and there is no prior year information 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**

L e v e l	Performance Indicator Name	Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Indicator Values			
				Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Dollar value of MMIS contract expenditures (LAPAS CODE - 25556)	\$ 47,000,000	\$ 44,248,899	\$ 58,315,591	\$ 58,315,591	\$ 46,261,965	\$ 46,261,965
The updated projection is due to the new Molina contract that will begin Jan 1, 2017. The Molina contract was renegotiated at better terms. The only unknown is the postage costs, which are minimal.							
S	Percent of MMIS contract expenditures that are federally funded (LAPAS CODE - 25557)	95%	73%	70%	70%	70%	70%

**Medical Vendor Administration General Performance Information**

Performance Indicator Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Monthly Louisiana Information Form Tracking (Lift) System change request (LAPAS CODE - NEW)	Not Available	Not Available	Not Available	Not Available	61.2
Average age of system change request (Lifts) (Line Graph by Month) (LAPAS CODE - NEW)	Not Available	Not Available	Not Available	Not Available	117.6
Percentage of applications processed timely (LAPAS CODE - NEW)	Not Available	Not Available	Not Available	Not Available	64.9%
Number of Medicaid Information Technology Architecture (MITA) business process advancements in maturity (LAPAS CODE - NEW)	Not Available	Not Available	Not Available	Not Available	0



**Medical Vendor Administration General Performance Information (Continued)**

Performance Indicator Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Number of months in the Design, Development and Implementation (DDI) phase for revisions and upgrades to systems (LAPAS CODE - NEW)	1,002,949	Not Available	Not Available	Not Available	0
Dollar value of penalties assessed on contractors (LAPAS CODE - NEW)	\$ 420,736	\$ Not Available	\$ Not Available	\$ Not Available	\$ 0
Total number of claims processed (LAPAS CODE - 12020)	97,238,093	113,942,597	79,245,729	28,545,865	143,608,428

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**

L e v e l Performance Indicator Name	Performance Indicator Values					
	Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K Percentage (%) of Total Scripts PDL Compliance (LAPAS CODE - 24061)	90%	94%	90%	90%	90%	90%

The percentage of total scripts Preferred Drug List (PDL) compliance reports prescriber's adherence to the PDL for Legacy Medicaid 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 v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Percent of reports per calendar year that indicate plan compliance with all Chisholm Prior Authorization Liaison (PAL) requirements. (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	80.0%	80.0%
This is a new performance indicator for FY 2017-18 and there is no prior year data available.							

**Medical Vendor Administration General Performance Information**

Performance Indicator Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Percent of reports per calendar year that resulted in remediation or corrective action plan due to failure to follow Chisholm PAL requirements. (LAPAS CODE - NEW)	Not Available	Not Available	Not Available	Not Available	0
This is a new performance indicator and there is no data currently available.					
Percent of Chisholm class members who are denied services due to lack of sufficient documentation after all PAL procedures were correctly followed. (LAPAS CODE - NEW)	Not Available	Not Available	Not Available	Not Available	10%
This is a new performance indicator and there is no data currently available.					
Percent of Chisholm class members who are denied services due to lack of medical necessity after all PAL procedures were correctly followed. (LAPAS CODE - NEW)	Not Available	Not Available	Not Available	Not Available	0
This is a new performance indicator and there is no data currently available.					

**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**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard	Actual Yearend Performance	Performance Standard as Initially Appropriated	Existing Performance Standard	Performance At Continuation Budget Level	Performance At Executive Budget Level
		FY 2015-2016	FY 2015-2016	FY 2016-2017	FY 2016-2017	FY 2017-2018	FY 2017-2018
K	Number of TPL claims processed (LAPAS CODE - 2215)	1,500,000	6,185,852	1,500,000	1,500,000	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%	97.83%	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**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard	Actual Yearend Performance	Performance Standard as Initially Appropriated	Existing Performance Standard	Performance At Continuation Budget Level	Performance At Executive Budget Level
		FY 2015-2016	FY 2015-2016	FY 2016-2017	FY 2016-2017	FY 2017-2018	FY 2017-2018
S	TPL trauma recovery amount (LAPAS CODE - 7958)	\$ 3,025,000	\$ 6,674,563	\$ 8,000,000	\$ 8,000,000	\$ 3,500,000	\$ 3,500,000
Recoveries have been negatively affected by staffing limitations as well as increased population of enrollees in managed care.							



**Medical Vendor Administration General Performance Information**

Performance Indicator Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Number of claims available for TPL processing (LAPAS CODE - 12021)	86,875,426	92,124,018	79,317,167	83,680,515	62,770,350
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)	7.8%	7.3%	8.0%	7.5%	9.8%
The "Percentage of TPL claims processed and cost avoided" is the number of TPL claims processed divided by the total number of claims.					
Funds recovered from third parties with a liability for services provided by Medicaid (LAPAS CODE - 24044)	\$ 59,812,329	\$ 39,816,699	\$ 29,058,565	\$ 22,094,024	\$ 31,520,876
Estate recovery amount (LAPAS CODE - 25567)	\$ Not Available	\$ 738,159	\$ 502,985	\$ 683,814	\$ 287,927
Recoveries have been negatively affected by staffing limitations.					
Recipient recovery amount (LAPAS CODE - 25568)	\$ Not Available	\$ 487,589	\$ 1,110,559	\$ 1,028,060	\$ 1,003,227
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**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Number of closed cases (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	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**

Performance Indicator Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Number of Provider Exclusions (LAPAS CODE - NEW)	Not Available	Not Available	Not Available	Not Available	177
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)
- Bayou Health Program
- Child Health and Maternity Program (CHAMP)

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

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

For additional information, see:

[Medical Vendor Payments](#)

**Medical Vendor Payments Budget Summary**

	Prior Year Actuals FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Means of Financing:</b>						
State General Fund (Direct)	\$ 2,053,493,691	\$ 2,347,201,044	\$ 2,347,201,044	\$ 2,363,089,222	\$ 2,101,425,001	\$ (245,776,043)
<b>State General Fund by:</b>						
Total Interagency Transfers	78,354,141	35,573,960	35,573,960	24,603,787	24,603,787	(10,970,173)
Fees and Self-generated Revenues	188,248,068	225,840,025	332,224,531	306,401,031	320,195,434	(12,029,097)
Statutory Dedications	526,164,369	690,684,380	690,684,380	821,369,902	842,358,353	151,673,973
Interim Emergency Board	0	0	0	0	0	0
Federal Funds	5,471,133,787	7,404,282,437	7,601,175,451	9,192,529,437	9,319,393,042	1,718,217,591
<b>Total Means of Financing</b>	<b>\$ 8,317,394,056</b>	<b>\$ 10,703,581,846</b>	<b>\$ 11,006,859,366</b>	<b>\$ 12,707,993,379</b>	<b>\$ 12,607,975,617</b>	<b>\$ 1,601,116,251</b>
<b>Expenditures &amp; Request:</b>						
Payments to Private Providers	\$ 6,560,351,212	\$ 9,383,295,859	\$ 9,361,744,027	\$ 11,028,521,955	\$ 11,159,141,201	\$ 1,797,397,174
Payments to Public Providers	196,233,426	215,495,865	215,495,865	211,777,753	220,763,218	5,267,353
Medicare Buy-Ins & Supplements	454,301,806	471,154,777	471,154,777	528,565,285	528,565,285	57,410,508
Uncompensated Care Costs	1,106,507,612	633,635,345	958,464,697	939,128,386	699,505,913	(258,958,784)
<b>Total Expenditures &amp; Request</b>	<b>\$ 8,317,394,056</b>	<b>\$ 10,703,581,846</b>	<b>\$ 11,006,859,366</b>	<b>\$ 12,707,993,379</b>	<b>\$ 12,607,975,617</b>	<b>\$ 1,601,116,251</b>
<b>Authorized Full-Time Equivalents:</b>						
Classified	0	0	0	0	0	0
Unclassified	0	0	0	0	0	0
<b>Total FTEs</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>



## 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.
- Behavioral Health Services Reform - In 2012, LDH began sweeping reforms to ensure access to medical, preventive and rehabilitative behavioral health services for all citizens of the State of Louisiana through the Louisiana Behavioral Health Partnership which was a carved out managed care approach managed by a Prepaid Inpatient Health Plan. Effective December 1, 2015, the Department transitioned specialized behavioral health services from the Louisiana Behavioral Health Partnership into an integrated care model under Medicaid managed care for physical and acute care. All Medicaid MCOs, or health plans, provide the full array of Medicaid allowable physical and specialized behavioral health services with the exception of services for at-risk children and youth who are in need and qualify for the Coordinated System of Care (CSoC). CSoC is a waiver program offering services for children and youth that have significant behavioral health challenges or co-occurring disorders that are in, or at imminent risk of, out of home placement.
- 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

	Prior Year Actuals FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Means of Financing:</b>						
State General Fund (Direct)	\$ 1,406,938,577	\$ 1,911,978,892	\$ 1,775,482,346	\$ 1,814,888,139	\$ 1,624,273,165	\$ (151,209,181)
<b>State General Fund by:</b>						
Total Interagency Transfers	70,354,141	8,054,095	8,054,095	8,054,095	8,054,095	0
Fees and Self-generated Revenues	153,390,690	159,085,108	277,295,252	212,507,767	261,178,517	(16,116,735)
Statutory Dedications	490,274,833	669,381,306	669,381,306	800,066,828	821,055,279	151,673,973
Interim Emergency Board	0	0	0	0	0	0
Federal Funds	4,439,392,971	6,634,796,458	6,631,531,028	8,193,005,126	8,444,580,145	1,813,049,117
<b>Total Means of Financing</b>	<b>\$ 6,560,351,212</b>	<b>\$ 9,383,295,859</b>	<b>\$ 9,361,744,027</b>	<b>\$ 11,028,521,955</b>	<b>\$ 11,159,141,201</b>	<b>\$ 1,797,397,174</b>
<b>Expenditures &amp; Request:</b>						
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	6,560,351,212	9,383,295,859	9,361,744,027	11,028,521,955	11,159,141,201	1,797,397,174
Total Acq & Major Repairs	0	0	0	0	0	0
Total Unallotted	0	0	0	0	0	0
<b>Total Expenditures &amp; Request</b>	<b>\$ 6,560,351,212</b>	<b>\$ 9,383,295,859</b>	<b>\$ 9,361,744,027</b>	<b>\$ 11,028,521,955</b>	<b>\$ 11,159,141,201</b>	<b>\$ 1,797,397,174</b>



### Payments to Private Providers Budget Summary

	Prior Year Actuals FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Authorized Full-Time Equivalents:</b>						
Classified	0	0	0	0	0	0
Unclassified	0	0	0	0	0	0
<b>Total FTEs</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

### 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 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
Louisiana Medical Assistance Trust Fund	\$ 234,217,297	\$ 469,676,565	\$ 469,676,565	\$ 599,712,019	\$ 593,412,019	\$ 123,735,454
Medicaid Trust Fund for the Elderly	1,133,333	24,909,431	24,909,431	1,733,908	1,733,908	(23,175,523)
Health Trust Fund	566,667	11,118,476	11,118,476	590,522	590,522	(10,527,954)
Community and Family Support System Fund	182	63	63	0	0	(63)
Community Hospital Stabilization Fund	12,724,067	0	0	0	0	0
Hospital Stabilization Fund	0	22,003,442	22,003,442	56,357,050	56,357,050	34,353,608
Tobacco Tax Medicaid Match Fund	102,986,669	107,400,000	107,400,000	107,400,000	131,900,000	24,500,000



### Payments to Private Providers Statutory Dedications

Fund	Prior Year Actuals FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
2013 Amnesty Collections Fund	75,000,000	0	0	0	0	0
Overcollections Fund	28,557,088	0	0	0	0	0
Louisiana Fund	4,604,606	4,804,902	4,804,902	4,804,902	7,787,687	2,982,785
Health Excellence Fund	30,484,924	29,468,427	29,468,427	29,468,427	29,274,093	(194,334)

### Major Changes from Existing Operating Budget

General Fund	Total Amount	Table of Organization	Description
\$ (136,496,546)	\$ (21,551,832)	0	<b>Mid-Year Adjustments (BA-7s):</b>
\$ 1,775,482,346	\$ 9,361,744,027	0	<b>Existing Oper Budget as of 12/01/16</b>
<b>Statewide Major Financial Changes:</b>			
<b>Non-Statewide Major Financial Changes:</b>			
1,211,882	3,305,733	0	Annualization for payments to five Rural Health Clinics (RHCs) and 19 Federally Qualified Health Clinics (FQHCs) that are projected to enroll in FY 17.
1,738,119	4,741,186	0	Funding for 13 new Federally Qualified health Clinics (FQHCs) and six new Rural Health Clinics (RHCs) projected to enroll in FY 18. 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.
488,366	1,332,150	0	Annualization of the increase in Medical Economic Index (MEI) costs for Federally Qualified Health Clinics (FQHCs) and Rural Health Centers.
214,999	586,468	0	Funds the annual increase to hospice rates federally mandated by Section 1814(i)(1)(C)(ii) of the Social Security Act. The 1.6% increase takes effect October 1.
94,020	3,339,527	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.
1,404,555	3,831,300	0	This adjustment is for a projected increase in utilization of Long Term Personal Care Services (LT-PCS) of 50 recipients per month in FY18.
3,587,887	9,786,926	0	Utilization adjustment for fee-for-service budgeted categories of service.
(119,090,440)	(343,600,000)	0	Non-recurs funding provided for the 13th MCO payment in FY17.
0	(32,250,877)	0	Non-recurs funding from BA-7 105 which increased Per Member Per Month (PMPM) payments for the five Managed Care Organizations (MCOs) that provide physical and specialized behavioral health services from the 25th percentile to the 50th percentile of the actuarially sound rate range.
(687,500)	(27,500,000)	0	Non-recurs one-time payments to Bogalusa and Children's Hospital.
(6,830,940)	(18,100,000)	0	Reverses the financing of 2017 expenditures, which paid cost report cost settlements to Our Lady of the Lake (LOL) for FY 13, FY 14 and FY 15.
9,178,425	25,036,621	0	Increased funding for Applied Behavior Analysis (ABA). Chisolm v. Gee mandated ABA services in Medicaid starting in FY 14. Since then, the program has grown from an initial cost of \$136K to an estimated \$49.5 million in FY 18.



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

General Fund	Total Amount	Table of Organization	Description
0	2,538,496	0	Act 305 from the 2016 Regular Legislative Session implemented an Emergency Ambulance Provider fee. The fee is used to fund increased upper payment limit (UPL) supplemental payments to certain private ambulance companies. This adjustment brings FY 17 budget in line with FY 18 projections. Statutory Dedication is Medical Assistance Trust Fund (MATF).
227,367	620,204	0	Annualization of 50 Community Choices Waiver (CCW) slots certified during FY 2016-2017.
368,478	1,005,123	0	Annualization of 43 New Opportunity Waiver (NOW) slots certified during FY 2016-2017.
0	3,658,877	0	Annualization of the nursing home provider fee established under Act 675 of the 2016 Regular Session. This increase was effective on 9/1/16 and there is a one month claim lag, so there are only 9 months of funding in the FY 17 budget. This adjustment adds the remaining three months to completely fund the nursing home provider fee in FY 18. Statutory Dedication is Medical Assistance Trust Fund (MATF).
1,027,911	2,803,904	0	Program of All Inclusive Care for the Elderly (PACE) - annualization of 91 new enrollees that were phased in during FY17 and the phase-in of 55 new enrollees in FY18 in the New Orleans and Lafayette PACE sites.
68,625	187,193	0	Additional funding to increase per diem rates for small rural hospitals effective on 7/1/17. The Department is mandated by ACT 327 of the 2007 Louisiana Legislative Session to increase per diems for the small rural hospitals by an inflation factor every other year. The inflation factor is 2.5%.
77,643	3,850,386	0	Annualization of the FY 17 Nursing Home Rebase (including Hospice Room and Board). The FY 17 rebase only included 11 months of funding due to a one month claim lag. This adjustment adds one month of funding to address the claim lag. Statutory Dedication is Medicaid Trust Fund for the Elderly (MTFE).
(195,408,172)	1,369,577,569	0	This adjustment accounts for increases in the total per member per month (PMPM) payments for the population covered under the Healthy Louisiana Managed Care Organizations (MCO) for physical, specialized behavioral health, and Non-Emergency Medical Transportation services. It reflects PMPMs paid at the 25th percentile in the actuarially sound rate range and the increase is primarily a result of 1) utilization/trend adjustment, 2) enrollment increases, and 3) 12 months for new adult group. These increases are offset by general fund savings primarily resulting from 1) reduction in one-time retro payments for premium tax increase, 2) one-time moratorium on the Health Insurance Provider Fee (HIPF), 3) reduction in PMPMs and maternity kick payments made to members who have moved out of base population and into the new adult group.
3,666,000	10,000,000	0	Provides funding for Our Lady of the Lake and Our Lady of the Lake - DPP (Distinct Part Psychiatric) partial cost report cost settlement payment projected for Fiscal Year End 6/30/16. This cost report will be submitted to LDH contracts by end of November 2016 and partial settlement should be completed in February 2017.
(9,084,071)	(24,779,244)	0	Transfer of the Coordinated System of Care (CSoc) program from Medical Vendor Payments (MVP) to Medical Vendor Administration (MVA). See companion request in MVA.
(83,421,160)	0	0	Means of financing substitution replacing State General Fund (Direct) and Fees and Self-generated Revenues with Federal Funds due to a FMAP rate change in the Private Providers, Public Providers, Medicare Buy-ins and Supplements, and Uncompensated Care Costs Programs. The FY 17 Title XIX blended rate is 62.26% federal and the FY 18 blended rate is 63.34% federal. For UCC, the FY 17 FMAP rate is 62.28% federal and the FY 18 rate is 63.69% federal.
51,103,094	376,322,339	0	Hospital Services - reinvests the amount of the reduction to supplemental payments to hospitals, including Disproportionate Share Hospital (DSH) payments, Full Medicaid Payment (FMP), and Upper Payment Limit (UPL) payments in hospital base rate. This change is part of a larger Medicaid payment reform and health care systems transformation effort to reduce the State's reliance on supplemental payments and advance the use of value-based payments for hospital services provided to Louisiana's indigent population.



## Major Changes from Existing Operating Budget (Continued)

General Fund	Total Amount	Table of Organization	Description
(8,214,414)	(97,286,867)	0	Hospital Services - reduces hospital supplemental payments to Public Private Partner hospitals, including Disproportionate Share Hospital (DSH) payments, Full Medicaid Payments (FMP), and Upper Payment Limit (UPL) payments. The amount reduced from supplemental payments will be reinvested in inbase rate increases for hospitals.
12,913,372	0	0	Means of financing substitution replacing Federal Funds with State General Fund (Direct) to adjust the Large Public Hospitals Certified Public Expenditures (CPEs) from the FY 17 level of \$62,376,506 to the FY18 anticipated level of \$49,463,134.
5,567,702	0	0	Means of financing substitution replacing Louisiana Medical Assistance Trust Fund (MATF) with State General Fund (Direct) to match the LDH's FY 18 Provider Fee projection.
24,509,431	0	0	Means of financing substitution replacing Medicaid Trust Fund for the Elderly (MTFE) with State General Fund (Direct), since nursing homes were rebased in FY 17.
10,527,954	0	0	Means of financing substitution replacing Health Trust Fund with State General Fund (Direct), due to less Medicaid Trust Fund for the Elderly (MTFE) interest appropriated based on approved REC and projected fund balance at the end of FY 18.
63	0	0	Means of financing substitution replacing Community and Family Support System Fund with State General Fund (Direct).
1,742,172	4,639,606	0	Provides funding for Woman's Hospital for prior year payments due to Public/Private Partnership reconciliation. This reconciliation would be for the amount owed for SFY 2015 and SFY 2016.
1,369,250	3,734,997	0	Transfers 244 recipients to the Residential Options Waiver (ROW) from the Office of Aging and Adult Services (OAAS) Community Choices Waiver and Adult Day Healthcare (ADHC) Waiver over a total of two state fiscal years, FY 2016-2017 and FY 2017-2018. This amount requested includes the annualization of the estimated 117 slots to be phased in during FY 2016-2017 and 127 slots to be phased-in during 2017-2018.
119,722,345	(87,140,875)	0	Adjusts the Supplemental Payments portion of the budget based on the projected payments that will be made in FY18. The Public Private Partnership hospitals will not receive supplemental Upper Payment Limit (UPL) payments in FY18. They will receive Full Medicaid Pricing (FMP) payments, which are included in the Managed Care request.
(342,471)	(934,182)	0	Transfers funding from Medical Vendor Payments (MVP) to Medical Vendor Administration (MVA) for the administrative costs associated with restoring the Louisiana Health Insurance Premium Payment (LaHIPP) program. The program reimburses Medicaid members for the employee share of employer-sponsored insurance costs, including premiums, deductibles and copays, effectively providing no cost private insurance coverage and so discouraging "crowd out" among Medicaid eligibles dropping private insurance coverage. HIPP even pays for coverage of an employee's dependents when cost-effective for the state. The funding comes from savings generated in MVP from private insurance being primary payer for participating Medicaid enrollees' medical service costs.
152,053,363	612,515,201	0	Delay of the June (FY 17) Healthy Louisiana Checkwrite to July (FY 18).
(24,500,000)	0	0	Means of financing substitution replacing State General Fund (Direct) with Tobacco Tax Medicaid Match Fund based on the official forecast adopted by REC on 1/13/17.
(1,882,785)	0	0	Means of financing substitution replacing State General Fund (Direct) with Louisiana Fund based on the official forecast adopted by REC on 1/13/17.
194,334	0	0	Means of financing substitution replacing Health Excellence Fund with State General Fund (Direct) based on the official forecast adopted by REC on 1/13/17.
(25,000,000)	0	0	To increase the contributions of locals to the Medicaid program.
(15,382,396)	24,706,708	0	Annualization of the FY 17 Mid-year Reduction to increase New Orleans Medical School contracts to maximum Fair Market Value (FMV).
4,888,484	13,957,047	0	Delay of the June (FY 17) Managed Care Organization (MCO) Dental Checkwrite to July (FY 18).



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

General Fund	Total Amount	Table of Organization	Description
(30,849,896)	146,361,296	0	Annualization of the FY 17 Mid-year Reduction for Managed Care Organization (MCO) rate reduction for the Expansion Program. Rates effective February 1, 2017.
(366,233)	(999,000)	0	Annualization of the FY 17 Mid-year Reduction to reduce the High Medicaid Upper Payment Limit (UPL) Pool from \$1 million to \$1 thousand.
(1,833,000)	(5,000,000)	0	Annualization of the FY 17 Mid-year Reduction to eliminate Graduate Medical Education (GME) payments.
(1,100,000)	0	0	Annualization of the FY 17 transfer of Louisiana Fund from the Attorney General's office to the Louisiana Department of Health.
(27,200,000)	(171,700,000)	0	Reduce MCO PMPMs to the rate floor.
(6,000,000)	(16,400,000)	0	Reduce 50% of State General Fund (Direct) supporting Rural Hospital Supplemental Payments.
(1,961,544)	(5,350,638)	0	6.2% reduction to the Public Private Partnerships.
<b>\$ 1,624,273,165</b>	<b>\$ 11,159,141,201</b>	<b>0</b>	<b>Recommended FY 2017-2018</b>
<b>\$ 0</b>	<b>\$ 0</b>	<b>0</b>	<b>Less Supplementary Recommendation</b>
<b>\$ 1,624,273,165</b>	<b>\$ 11,159,141,201</b>	<b>0</b>	<b>Base Executive Budget FY 2017-2018</b>
<b>\$ 1,624,273,165</b>	<b>\$ 11,159,141,201</b>	<b>0</b>	<b>Grand Total Recommended</b>

### Professional Services

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

### Other Charges

Amount	Description
	<b>Other Charges:</b>
\$11,159,141,201	Payments to Private Providers
<b>\$11,159,141,201</b>	<b>SUB-TOTAL OTHER CHARGES</b>
	<b>Interagency Transfers:</b>
\$0	This program does not have funding for Interagency Transfers.
<b>\$0</b>	<b>SUB-TOTAL INTERAGENCY TRANSFERS</b>
<b>\$11,159,141,201</b>	<b>TOTAL OTHER CHARGES</b>



## 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 applicable

## Performance Indicators

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Number of new adults enrolled in Medicaid Managed Care (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	452,951	452,951
	These are new performance indicators for FY17-18 and there is no data available.						
K	Number of Primary care visits (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	100,000	100,000
	These are new performance indicators for FY17-18 and there is no data available.						
K	Number of mammograms (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	250,000	250,000
	These are new performance indicators for FY17-18 and there is no data available.						
K	Number of immunizations (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	45,000	45,000
	These are new performance indicators for FY17-18 and there is no data available.						
K	Number of colonoscopies (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	20,000	20,000
	These are new performance indicators for FY17-18 and there is no data available.						
K	Number of Emergency Department visits per 1000 (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	62	62
	These are new performance indicators for FY17-18 and there is no data available.						



**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**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Total Medicaid expenditures for newly eligible adults (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	\$ 3,101,850,530	\$ 3,101,850,530
These are new performance indicators for FY17-18 and there is no data available.							
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 - NEW)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	\$ -98,280,867	\$ -98,280,867
These are new performance indicators for FY17-18 and there is no data available.							
K	Inpatient hospital expenditures for incarcerated offenders eligible under Medicaid expansion (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	\$ 5,922,900	\$ 5,922,900
These are new performance indicators for FY17-18 and there is no data available.							

**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**

L e v e l	Performance Indicator Name	Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Indicator Values			
				Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
S	Number of high-need DOC offenders enrolled in case management (LAPAS CODE - NEW)	Not Applicable	Not Applicable	1,000	1,000	1,000	1,000
This is a new performance indicator for FY17-18 and there is no data available.							

**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**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
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 l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Percentage of Medicaid enrollees enrolled in a managed care model (LAPAS CODE - 25602)	82%	76%	86%	86%	86%	86%
Measure is for Healthy Louisiana members enrolled for both physical health and specialized behavioral health; includes new adult group.							
K	Percentage of Medicaid enrollee expenditures under a managed care model (LAPAS CODE - 25603)	88%	61%	68%	68%	73%	73%
Increase due to updated new adult group expenditure projection; actual enrollment to date and PMPM rates are higher than originally projected.							
S	Annual amount of premium taxes paid by Medicaid managed care plans (LAPAS CODE - 25604)	\$ 64,196,791	\$ 79,900,780	\$ 335,407,653	\$ 335,407,653	\$ 399,129,765	\$ 399,129,765
This performance indicator Measures premium tax collections, including quarterly pre-payments. Updated to include the new adult group and reflect increased premium tax amount to 5.5%.							

**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**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Percentage increase in adults' access to preventive/ ambulatory health services for Medicaid Managed Care members (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	31%	31%
These are new performance indicators and there is no prior year data available.							
K	Percentage of Medicaid Managed Care members in case management (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	35%	35%
These are new performance indicators and there is no prior year data available.							

**Payments to Private Providers General Performance Information**

Performance Indicator Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Percentage increase of well-child visits in third, fourth, fifth, and sixth years of life for Medicaid Managed Care members (LAPAS CODE - NEW)	Not Available	Not Available	Not Available	Not Available	63.59%
These are new performance indicators for FY17-18 and there is no prior data available. These numbers were provided by University of Louisiana Monroe-ULM and are on based on calendar year 2015.					
Percentage increase of adolescent well-care visits for Medicaid Managed Care members (LAPAS CODE - NEW)	Not Available	Not Available	Not Available	Not Available	51.51%
These are new performance indicators for FY17-18 and there is no prior data available. These numbers were provided by University of Louisiana Monroe-ULM and are on based on calendar year 2015.					
Follow-up care visits for children enrolled in a managed care plan who are prescribed Attention Deficit Hyperactivity Disorder (ADHD) Medication (LAPAS CODE - NEW)	Not Available	Not Available	Not Available	Not Available	55.69%
These are new performance indicators for FY17-18 and there is no prior data available. These numbers were provided by University of Louisiana Monroe-ULM and are on based on calendar year 2015.					

**7. (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

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Number of recipients with a primary mental health diagnosis receiving community-based services (LAPAS CODE - 25561)	118,000	158,226	135,700	143,842	135,700	135,700
K	Percentage change in the number of recipients with a primary mental health diagnosis receiving community-based services (LAPAS CODE - 25562)	3%	17%	6%	6%	6%	6%

### 8. (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**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
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)	\$ 8.2	\$ 1.6	\$ 2.2	\$ 2.2	\$ 2.2	\$ 2.2
<p>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. The amount of cost avoidance through the Pharmacy program declined due to the movement of Medicaid Fee-For-Service recipients to Managed Care which resulted in the loss of supplemental rebates, which cannot be collected on managed care Medicaid recipients.</p>							
K	Percentage of Total Drug Rebates Collected (LAPAS CODE - 22942)	90%	67%	90%	90%	90%	90%
<p>Percentage of Total Drug Rebates Collected is the percentage of rebates actually collected based on invoices/billing.</p>							

**9. (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

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Average (mean) length of stay in days (non-psych.) for Title XIX Medicaid recipients (LAPAS CODE - 24083)	4.8	4.7	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
These privately run hospitals average length of stay was lower than expected.							

### 10. (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

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Number of Room and Board Services for Hospice Patients (LAPAS CODE - 24090)	491,678	424,275	491,678	491,678	491,478	491,478
K	Number of Hospice Services (LAPAS CODE - 24091)	71,473	42,954	71,473	71,473	71,473	71,473



**11. (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**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard	Actual Yearend Performance	Performance Standard as Initially Appropriated	Existing Performance Standard	Performance At Continuation Budget Level	Performance At Executive Budget Level
		FY 2015-2016	FY 2015-2016	FY 2016-2017	FY 2016-2017	FY 2017-2018	FY 2017-2018
K	Percentage of Medicaid enrollees aged 2-21 years of age who had at least one dental visit in a year (LAPAS CODE - 22947)	60%	52%	55%	55%	55%	55%

**12. (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 l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Percentage of Medicaid enrollees, enrolled for at least 90 consecutive days aged 6-9, who receive a dental sealant on a permanent molar tooth (LAPAS CODE - 25576)	18%	12%	16%	16%	15%	15%
Standards were adjusted to reflect revised goals of the dental program.							
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	22,266	24,757	24,757	23,500	23,500
Standards were adjusted to reflect revised goals of the dental program.							

**13. (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**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Number of unduplicated recipients receiving community-based services (LAPAS CODE - 25571)	37,000	38,514	38,000	38,000	39,037	39,037
S	Percentage change in the unduplicated number of recipients receiving community-based services (LAPAS CODE - 25572)	2%	-4%	1%	1%	1%	1%
The number of unduplicated recipients receiving community based services from FY15 to FY16 decreased by 4%.							
S	Percentage of Medicaid spending that goes toward home and community-based services rather than institutional services (LAPAS CODE - 25573)	45%	36%	44%	44%	40%	40%
S	Percentage of recipients reporting satisfaction with self-directed services (LAPAS CODE - 25574)	90%	93%	90%	90%	90%	90%
S	Percentage change in the unduplicated number of recipients self-directing services (LAPAS CODE - 25575)	25%	43%	24%	24%	25%	25%



## 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 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Means of Financing:</b>						
State General Fund (Direct)	\$ 54,653,445	\$ 56,045,383	\$ 56,045,383	\$ 52,816,697	\$ 56,110,768	\$ 65,385
<b>State General Fund by:</b>						
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	132,432,115	150,302,616	150,302,616	149,813,190	155,504,584	5,201,968
<b>Total Means of Financing</b>	<b>\$ 196,233,426</b>	<b>\$ 215,495,865</b>	<b>\$ 215,495,865</b>	<b>\$ 211,777,753</b>	<b>\$ 220,763,218</b>	<b>\$ 5,267,353</b>
<b>Expenditures &amp; Request:</b>						
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	196,233,426	215,495,865	215,495,865	211,777,753	220,763,218	5,267,353
Total Acq & Major Repairs	0	0	0	0	0	0
Total Unallotted	0	0	0	0	0	0
<b>Total Expenditures &amp; Request</b>	<b>\$ 196,233,426</b>	<b>\$ 215,495,865</b>	<b>\$ 215,495,865</b>	<b>\$ 211,777,753</b>	<b>\$ 220,763,218</b>	<b>\$ 5,267,353</b>
<b>Authorized Full-Time Equivalents:</b>						
Classified	0	0	0	0	0	0
Unclassified	0	0	0	0	0	0
<b>Total FTEs</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

### 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	Prior Year Actuals FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended 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

General Fund	Total Amount	Table of Organization	Description
\$ 0	\$ 0	0	Mid-Year Adjustments (BA-7s):
\$ 56,045,383	\$ 215,495,865	0	Existing Oper Budget as of 12/01/16
<b>Statewide Major Financial Changes:</b>			
<b>Non-Statewide Major Financial Changes:</b>			
\$ 1,931,011	\$ 5,267,353	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.
\$ (1,865,626)	\$ 0	0	Means of financing substitution replacing State General Fund (Direct) and Fees and Self-generated Revenues with Federal Funds due to a FMAP rate change in the Private Providers, Public Providers, Medicare Buy-ins and Supplements, and Uncompensated Care Costs Programs. The FY 17 Title XIX blended rate is 62.26% federal and the FY 18 blended rate is 63.34% federal. For UCC, the FY 17 FMAP rate is 62.28% federal and the FY 18 rate is 63.69% federal.
\$ 56,110,768	\$ 220,763,218	0	Recommended FY 2017-2018
\$ 0	\$ 0	0	Less Supplementary Recommendation
\$ 56,110,768	\$ 220,763,218	0	Base Executive Budget FY 2017-2018
\$ 56,110,768	\$ 220,763,218	0	Grand Total Recommended

## Professional Services

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



### Other Charges

Amount	Description
	<b>Other Charges:</b>
\$4,934,246	Funds for Local Education Agencies for Certified Public Expenditures due to Coordinated System of Care agreements
\$37,818,513	Local Education for School Based Health
<b>\$42,752,759</b>	<b>SUB-TOTAL OTHER CHARGES</b>
	<b>Interagency Transfers:</b>
\$3,294,291	LSU HCSD
\$14,889,037	LSU Physicians
\$556,968	Jefferson Parish Human Services Authority
\$667,869	Metropolitan Human Services District
\$95,925	South Central LA Human Services Authority
\$24,000	Northeast Delta Human Services Authority
\$18,751,841	Villa Feliciana Medical Complex
\$85,000	Acadiana Area Human Services District
\$4,646,577	Office of Public Health
\$3,419,479	Office of Mental Health for public free standing psych units
\$114,728,008	Office for Citizens with Developmental Disabilities
\$36,898	Imperial Calcasieu Human Services Authority
\$15,744,201	Louisiana Special Education Center
\$717,321	Special School District #1
\$353,044	Louisiana School for the Deaf
<b>\$178,010,459</b>	<b>SUB-TOTAL INTERAGENCY TRANSFERS</b>
<b>\$220,763,218</b>	<b>TOTAL OTHER CHARGES</b>

### 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 Indicators**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Number of Local Education Agencies participating in School Nursing Services (LAPAS CODE - 24092)	72	103	101	101	103	103
K	Number of unduplicated recipients Receiving School Nursing Services from Local Education Agencies (LAPAS CODE - 25580)	160,000	0	160,000	160,000	160,000	160,000
The system is not in place yet to gather this data. LDH is working with our fiscal intermediary to implement this system.							

**Payments to Public Providers General Performance Information**

Performance Indicator Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Number of school nurses in participating Local Education Agencies (LAPAS CODE - 25582)	Not Available	Not Available	Not Available	529	571
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 Indicators**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Number of Medicaid eligibles receiving family planning services (LAPAS CODE - 25583)	1,755	6,734	2,500	2,500	7,070	7,070
Continuation budget level based on an increase of 5% from FY 2016.							
K	Percentage change in the number of Medicaid eligibles accessing family planning services. (LAPAS CODE - 25585)	20%	35%	22%	22%	25%	25%
The actual yearend performance was reported incorrectly. The number of eligibles (6734) was entered instead of the percentage change. The correct value should be 35%. An increase will occur in the number of those with Medicaid who receive services from Family Planning providers. The expanded Medicaid recipients will continue to seek services offered by Family Planning. The actual increase was more than expected from the previous fiscal year, the trend will continue.							

**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**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Number of Medicaid eligibles screened for syphilis (LAPAS CODE - 25590)	30,944	63,562	34,726	34,726	66,740	66,740
An estimated 5% increase will be expected from the actual data of FY16 to FY18 for number screened for syphilis.							
K	Number of Medicaid eligibles screened for HIV (LAPAS CODE - 25591)	52,392	109,011	58,795	58,795	114,461	114,461
An estimated 5% increase will be expected from the actual data of FY16 to FY18 for number screened for HIV.							



**Performance Indicators (Continued)**

L e v e l	Performance Indicator Name	Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Indicator Values			
				Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Number of Medicaid eligibles screened for chlamydia (LAPAS CODE - 25592)	6,849	19,546	10,000	10,000	20,523	20,523
An estimated 5% increase will be expected from the actual data of FY16 to FY18 as the number screened for chlamydia.							
K	Number of Medicaid eligibles screened for gonorrhea (LAPAS CODE - 25593)	6,872	19,542	10,000	10,000	20,519	20,519
An estimated 5% increase will be expected from the actual data of FY16 to FY18 as the number screened for gonorrhea.							



## 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 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Means of Financing:</b>						
State General Fund (Direct)	\$ 239,103,588	\$ 255,313,743	\$ 255,313,743	\$ 283,310,520	\$ 283,310,520	\$ 27,996,777
<b>State General Fund by:</b>						
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	215,198,218	215,841,034	215,841,034	245,254,765	245,254,765	29,413,731
<b>Total Means of Financing</b>	<b>\$ 454,301,806</b>	<b>\$ 471,154,777</b>	<b>\$ 471,154,777</b>	<b>\$ 528,565,285</b>	<b>\$ 528,565,285</b>	<b>\$ 57,410,508</b>
<b>Expenditures &amp; Request:</b>						
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	454,301,806	471,154,777	471,154,777	528,565,285	528,565,285	57,410,508
Total Acq & Major Repairs	0	0	0	0	0	0
Total Unallotted	0	0	0	0	0	0
<b>Total Expenditures &amp; Request</b>	<b>\$ 454,301,806</b>	<b>\$ 471,154,777</b>	<b>\$ 471,154,777</b>	<b>\$ 528,565,285</b>	<b>\$ 528,565,285</b>	<b>\$ 57,410,508</b>
<b>Authorized Full-Time Equivalents:</b>						
Classified	0	0	0	0	0	0
Unclassified	0	0	0	0	0	0
<b>Total FTEs</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

## 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

General Fund	Total Amount	Table of Organization	Description
\$ 0	\$ 0	0	<b>Mid-Year Adjustments (BA-7s):</b>
\$ 255,313,743	\$ 471,154,777	0	<b>Existing Oper Budget as of 12/01/16</b>
<b>Statewide Major Financial Changes:</b>			
<b>Non-Statewide Major Financial Changes:</b>			
18,389,710	18,389,710	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.
12,858,352	39,020,798	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 \$3,946,187 of 100% federal funds for Qualified Individuals (QI).
(3,251,285)	0	0	Means of financing substitution replacing State General Fund (Direct) and Fees and Self-generated Revenues with Federal Funds due to a FMAP rate change in the Private Providers, Public Providers, Medicare Buy-ins and Supplements, and Uncompensated Care Costs Programs. The FY 17 Title XIX blended rate is 62.26% federal and the FY 18 blended rate is 63.34% federal. For UCC, the FY 17 FMAP rate is 62.28% federal and the FY 18 rate is 63.69% federal.
\$ 283,310,520	\$ 528,565,285	0	<b>Recommended FY 2017-2018</b>
\$ 0	\$ 0	0	<b>Less Supplementary Recommendation</b>
\$ 283,310,520	\$ 528,565,285	0	<b>Base Executive Budget FY 2017-2018</b>
\$ 283,310,520	\$ 528,565,285	0	<b>Grand Total Recommended</b>

### Professional Services

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

### Other Charges

Amount	Description
<b>Other Charges:</b>	
\$368,887,737	Medicare Savings Plans
\$159,677,548	Clawback Payments



## Other Charges (Continued)

Amount	Description
\$528,565,285	SUB-TOTAL OTHER CHARGES
<b>Interagency Transfers:</b>	
\$0	This program does not have funding for Interagency Transfers.
\$0	SUB-TOTAL INTERAGENCY TRANSFERS
\$528,565,285	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

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Total savings (cost of care less premium cost) for Medicare benefits (LAPAS CODE - 2266)	\$ 1,253,500,500	\$ 1,171,016,329	\$ 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 (LaHIPP) 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**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Number of cases added in LaHIPP (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	2,000	2,000
These are new performance indicators and there is no prior year data available.							
K	LaHIPP Total Savings in Millions (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	\$ 2,000,000	\$ 2,000,000
These are new performance indicators and there is no prior year data available.							



## 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 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

	Prior Year Actuals FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Means of Financing:</b>						
State General Fund (Direct)	\$ 352,798,081	\$ 123,863,026	\$ 260,359,572	\$ 212,073,866	\$ 137,730,548	\$ (122,629,024)
<b>State General Fund by:</b>						
Total Interagency Transfers	8,000,000	27,519,865	27,519,865	16,549,692	16,549,692	(10,970,173)
Fees and Self-generated Revenues	34,857,378	66,754,917	54,929,279	93,893,264	59,016,917	4,087,638
Statutory Dedications	26,741,670	12,155,208	12,155,208	12,155,208	12,155,208	0
Interim Emergency Board	0	0	0	0	0	0
Federal Funds	684,110,483	403,342,329	603,500,773	604,456,356	474,053,548	(129,447,225)



### Uncompensated Care Costs Budget Summary

	Prior Year Actuals FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Total Means of Financing</b>	\$ 1,106,507,612	\$ 633,635,345	\$ 958,464,697	\$ 939,128,386	\$ 699,505,913	\$ (258,958,784)
<b>Expenditures &amp; Request:</b>						
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	1,106,507,612	633,635,345	958,464,697	939,128,386	699,505,913	(258,958,784)
Total Acq & Major Repairs	0	0	0	0	0	0
Total Unallotted	0	0	0	0	0	0
<b>Total Expenditures &amp; Request</b>	\$ 1,106,507,612	\$ 633,635,345	\$ 958,464,697	\$ 939,128,386	\$ 699,505,913	\$ (258,958,784)
<b>Authorized Full-Time Equivalents:</b>						
Classified	0	0	0	0	0	0
Unclassified	0	0	0	0	0	0
<b>Total FTEs</b>	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 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
Louisiana Medical Assistance Trust Fund	\$ 0	\$ 12,155,208	\$ 12,155,208	\$ 12,155,208	\$ 12,155,208	\$ 0
Overcollections Fund	26,741,670	0	0	0	0	0



### Major Changes from Existing Operating Budget

General Fund	Total Amount	Table of Organization	Description
\$ 136,496,546	\$ 324,829,352	0	<b>Mid-Year Adjustments (BA-7s):</b>
\$ 260,359,572	\$ 958,464,697	0	<b>Existing Oper Budget as of 12/01/16</b>
<b>Statewide Major Financial Changes:</b>			
<b>Non-Statewide Major Financial Changes:</b>			
19,991	55,057	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.
(1,167,375)	(3,089,112)	0	Non-recurs expenditures associated with the Greater New Orleans Community Health Center's (GNOCHC) claim lag. GNOCHC ended June 30, 2016.
(2,043,783)	0	0	Means of financing substitution replacing State General Fund (Direct) and Fees and Self-generated Revenues with Federal Funds due to a FMAP rate change in the Private Providers, Public Providers, Medicare Buy-ins and Supplements, and Uncompensated Care Costs Programs. The FY 17 Title XIX blended rate is 62.26% federal and the FY 18 blended rate is 63.34% federal. For UCC, the FY 17 FMAP rate is 62.28% federal and the FY 18 rate is 63.69% federal.
(42,888,680)	(118,118,095)	0	Hospital Services - reduces hospital supplemental payments to Public Private Partner hospitals, including Disproportionate Share Hospital (DSH) payments, Full Medicaid Payments (FMP), and Upper Payment Limit (UPL) payments. The amount reduced from supplemental payments will be reinvested in inbase rate increases for hospitals.
(47,619,286)	(44,876,347)	0	Adequately funds the DSH (Disproportionate Share Hospital) portion of the public private partnerships. Includes annualization of the PPPs & Hospitals BA-7 approved by the Joint Legislative Committee on the Budget on October 28, 2016. It also includes an adjustment for BRF. The State General Fund (Direct) increase is offset by the State General Fund (Direct) reductions in the Payments to Private Providers program related to the Supplemental Payments budget and the Managed Care adjustment (which is a \$195M General Fund reduction) due to changes which maximized Full Medicaid Pricing.
0	(13,255,567)	0	Non-recurs Uncompensated Care Costs (UCC) for major medical centers located in central and northern Louisiana providing health care services to the medically indigent and advancing medical education learning environment at the medical schools in New Orleans and Shreveport.
(362,737)	(999,000)	0	Annualization of the FY 17 Mid-year Reduction to reduce the High Medicaid Uncompensated Care Costs (UCC) Disproportionate Share Hospital (DSH) Pool from \$1 million to \$1 thousand.
(28,567,154)	(78,675,720)	0	6.2% reduction to the Public Private Partnerships.
\$ 137,730,548	\$ 699,505,913	0	<b>Recommended FY 2017-2018</b>
\$ 0	\$ 0	0	<b>Less Supplementary Recommendation</b>
\$ 137,730,548	\$ 699,505,913	0	<b>Base Executive Budget FY 2017-2018</b>
\$ 137,730,548	\$ 699,505,913	0	<b>Grand Total Recommended</b>



### Professional Services

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

### Other Charges

Amount	Description
	<b>Other Charges:</b>
\$442,811,629	LSU Privatization Partners
\$153,876,055	Low Income & Needy Care Collaboration
\$10,848,028	Non-state Public CPEs
\$14,690,831	OBH Public/Private CEA Agreements
\$1,000	Nonrural Hospitals - High Medicaid DSH Pool
<b>\$622,227,543</b>	<b>SUB-TOTAL OTHER CHARGES</b>
	<b>Interagency Transfers:</b>
\$13,572,737	Louisiana State University Health Care Services Division
\$63,705,633	Office of Mental Health Psyc Free Standing Units
<b>\$77,278,370</b>	<b>SUB-TOTAL INTERAGENCY TRANSFERS</b>
<b>\$699,505,913</b>	<b>TOTAL OTHER CHARGES</b>

### 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.



## Performance Indicators

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
S	Total DSH funds collected in millions (LAPAS CODE - 17040)	\$ 976.5	\$ 1,087.7	\$ 630.5	\$ 630.5	\$ 750.0	\$ 699.5
K	Total federal funds collected in millions (LAPAS CODE - 17041)	\$ 607.6	\$ 679.4	\$ 401.4	\$ 401.4	\$ 484.0	\$ 474.0
S	Total State Match in millions (LAPAS CODE - 17042)	\$ 369.0	\$ 408.3	\$ 229.1	\$ 229.1	\$ 266.0	\$ 225.5

## Uncompensated Care Costs General Performance Information

Performance Indicator Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Percent change in annual DSH associated with uninsured costs for the recently completed fiscal year compared to the prior fiscal year (LAPAS CODE - NEW)	Not Available	Not Available	Not Available	Not Available	-1.31%
These are new performance indicators for FY17-18 and there is no data available.					
Dollar reduction in total Disproportionate Share Hospital (DSH) program expenditures (LAPAS CODE - NEW)	\$ Not Available	\$ Not Available	\$ Not Available	\$ Not Available	\$ 81.2
These are new performance indicators for FY17-18 and there is no data available.					
Percent reduction in total DSH program expenditures (LAPAS CODE - NEW)	Not Available	Not Available	Not Available	Not Available	3.84%
These are new performance indicators for FY17-18 and there is no data available.					



## 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 practices.
- 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 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 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 FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Means of Financing:</b>						
State General Fund (Direct)	\$ 40,937,435	\$ 41,207,584	\$ 43,786,505	\$ 47,572,788	\$ 44,562,307	\$ 775,802
<b>State General Fund by:</b>						
Total Interagency Transfers	11,494,322	14,539,668	14,539,668	12,389,668	12,339,668	(2,200,000)



## Office of the Secretary Budget Summary

	Prior Year Actuals FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
Fees and Self-generated Revenues	2,404,298	2,878,495	2,463,565	2,419,521	2,650,601	187,036
Statutory Dedications	3,890,782	5,095,793	5,095,793	3,376,429	1,373,390	(3,722,403)
Interim Emergency Board	0	0	0	0	0	0
Federal Funds	15,776,813	17,703,098	17,703,098	17,881,598	17,881,598	178,500
<b>Total Means of Financing</b>	<b>\$ 74,503,650</b>	<b>\$ 81,424,638</b>	<b>\$ 83,588,629</b>	<b>\$ 83,640,004</b>	<b>\$ 78,807,564</b>	<b>\$ (4,781,065)</b>
<b>Expenditures &amp; Request:</b>						
Management and Finance	\$ 74,172,976	\$ 80,965,664	\$ 83,544,585	\$ 83,640,004	\$ 78,807,564	\$ (4,737,021)
Auxiliary Account	330,674	458,974	44,044	0	0	(44,044)
<b>Total Expenditures &amp; Request</b>	<b>\$ 74,503,650</b>	<b>\$ 81,424,638</b>	<b>\$ 83,588,629</b>	<b>\$ 83,640,004</b>	<b>\$ 78,807,564</b>	<b>\$ (4,781,065)</b>
<b>Authorized Full-Time Equivalents:</b>						
Classified	372	358	399	401	395	(4)
Unclassified	12	13	11	11	11	0
<b>Total FTEs</b>	<b>384</b>	<b>371</b>	<b>410</b>	<b>412</b>	<b>406</b>	<b>(4)</b>



## 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 Planning & Review, Drug Testing, Employee Administration, and Staff Development.
- **The Governor's Council on Physical Fitness and Sports** (Governor's Games) promotes physical fitness and health through participating in competitive sports, workshops and conferences. Its main purpose is to motivate all Louisianans to become and stay physically active by promoting the benefits of physical activity through sports and fitness programs. The Governor's Games offers 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 2-10 people for adults and 10-30 for youth. These programs foster and encourage ways for Louisiana residents to become physically fit by getting them involved in competitive activities that require physical fitness.



## 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 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Means of Financing:</b>						
State General Fund (Direct)	\$ 40,937,435	\$ 41,207,584	\$ 43,786,505	\$ 47,572,788	\$ 44,562,307	\$ 775,802
<b>State General Fund by:</b>						
Total Interagency Transfers	11,494,322	14,539,668	14,539,668	12,389,668	12,339,668	(2,200,000)
Fees and Self-generated Revenues	2,073,624	2,419,521	2,419,521	2,419,521	2,650,601	231,080



## Management and Finance Budget Summary

	Prior Year Actuals FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
Statutory Dedications	3,890,782	5,095,793	5,095,793	3,376,429	1,373,390	(3,722,403)
Interim Emergency Board	0	0	0	0	0	0
Federal Funds	15,776,813	17,703,098	17,703,098	17,881,598	17,881,598	178,500
<b>Total Means of Financing</b>	<b>\$ 74,172,976</b>	<b>\$ 80,965,664</b>	<b>\$ 83,544,585</b>	<b>\$ 83,640,004</b>	<b>\$ 78,807,564</b>	<b>\$ (4,737,021)</b>
<b>Expenditures &amp; Request:</b>						
Personal Services	\$ 39,558,867	\$ 39,151,127	\$ 41,747,891	\$ 42,935,471	\$ 42,194,956	\$ 447,065
Total Operating Expenses	1,394,727	1,487,495	1,487,495	1,519,670	1,413,339	(74,156)
Total Professional Services	3,263,959	4,848,911	4,832,455	4,832,455	2,170,804	(2,661,651)
Total Other Charges	29,955,423	35,478,131	35,476,744	34,352,408	33,028,465	(2,448,279)
Total Acq & Major Repairs	0	0	0	0	0	0
Total Unallotted	0	0	0	0	0	0
<b>Total Expenditures &amp; Request</b>	<b>\$ 74,172,976</b>	<b>\$ 80,965,664</b>	<b>\$ 83,544,585</b>	<b>\$ 83,640,004</b>	<b>\$ 78,807,564</b>	<b>\$ (4,737,021)</b>
<b>Authorized Full-Time Equivalents:</b>						
Classified	371	357	399	401	395	(4)
Unclassified	11	12	11	11	11	0
<b>Total FTEs</b>	<b>382</b>	<b>369</b>	<b>410</b>	<b>412</b>	<b>406</b>	<b>(4)</b>

## 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 FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
Telecommunications for the Deaf Fund	\$ 1,897,768	\$ 2,386,793	\$ 2,386,793	\$ 2,003,039	\$ 0	\$ (2,386,793)
Nursing Home Residents' Trust Fund	0	150,000	150,000	150,000	150,000	0
Medical Assistance Programs Fraud Detection Fund	1,993,014	2,559,000	2,559,000	1,223,390	1,223,390	(1,335,610)

## Major Changes from Existing Operating Budget

General Fund	Total Amount	Table of Organization	Description
\$ 2,578,921	\$ 2,578,921	41	<b>Mid-Year Adjustments (BA-7s):</b>
\$ 43,786,505	\$ 83,544,585	410	<b>Existing Oper Budget as of 12/01/16</b>

### Statewide Major Financial Changes:

234,760	308,706	0	Related Benefits Base Adjustment
508,942	508,942	0	Retirement Rate Adjustment
965,847	1,122,981	0	Salary Base Adjustment
(1,179,194)	(1,179,194)	0	Attrition Adjustment
(39,941)	(39,941)	0	Risk Management
362,571	362,571	0	Legislative Auditor Fees
(72,890)	(72,890)	0	Rent in State-Owned Buildings
4,332	4,332	0	Maintenance in State-Owned Buildings
4,626	4,626	0	Capitol Park Security
15,577	15,577	0	Capitol Police
(3,496)	(3,496)	0	UPS Fees
9,805	9,805	0	Civil Service Fees
1,563	1,563	0	Office of Technology Services (OTS)
(581,837)	(581,837)	0	Administrative Law Judges
(2,055)	(2,055)	0	Office of State Procurement

### Non-Statewide Major Financial Changes:

0	(2,000,000)	0	Non-recr funding for the HVAC Generator Program for Hazard Mitigation. This program ended in the Prior Fiscal Year. The funding source was IAT from GOHSEP.
200,000	0	0	Means of financing substitution replacing Interagency Transfers (IAT) with State General Fund (Direct) due to the Emergency Preparedness Grant within the Office of Public Health being significantly reduced in FY 18. This adjustment is necessary to continue operations required in the grant at the current level.
59,500	238,000	2	Two new T.O. in the Health Standards Section (HSS) to ensure compliance with a new set of emergency preparedness requirements from the Centers for Medicare and Medicaid Services (CMS) for healthcare providers participating in Medicare and Medicaid.



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

General Fund	Total Amount	Table of Organization	Description
1,335,610	0	0	Means of financing substitution replacing Medical Assistance Programs Fraud Detection Fund with State General Fund (Direct), based on the projected fund balance at the end of FY 18.
0	(2,386,793)	(4)	Transfer the Louisiana Commission for the Deaf and all of its functions and positions from the Office of the Secretary to the Office of Public Health.
(393,871)	(393,871)	(2)	Annualization of the FY 17 Mid-year Reduction to eliminate two administrative positions, reduce overtime budget, and Executive Order JBE 16-03 savings.
(654,047)	(654,047)	0	Reduction to Operating Services, Other Charges, and Professional Services.
<b>\$ 44,562,307</b>	<b>\$ 78,807,564</b>	<b>406</b>	<b>Recommended FY 2017-2018</b>
<b>\$ 0</b>	<b>\$ 0</b>	<b>0</b>	<b>Less Supplementary Recommendation</b>
<b>\$ 44,562,307</b>	<b>\$ 78,807,564</b>	<b>406</b>	<b>Base Executive Budget FY 2017-2018</b>
<b>\$ 44,562,307</b>	<b>\$ 78,807,564</b>	<b>406</b>	<b>Grand Total Recommended</b>

### Professional Services

Amount	Description
<b>Professional Services</b>	
	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.
\$1,320,875	
\$165,000	Audit Contracts
\$55,500	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.
\$91,500	Governor's Office on Physical Fitness venues
<b>\$2,170,804</b>	<b>TOTAL PROFESSIONAL SERVICES</b>

### Other Charges

Amount	Description
<b>Other Charges:</b>	
\$4,160,536	Disaster preparation from the HHS Hospital Preparedness Grant



## Other Charges (Continued)

Amount	Description
\$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 Augmentation
\$739,828	LATAN
\$55,425	Fiscal managed contracts and Internal Audit contracts
\$2,051,631	For fraud initiatives in Legal and Audit
\$201,190	Other Charge Acquisitions
\$169,000	Minority Health Initiatives
\$827,500	Other Charges travel for licensing, certification and surveys of facilities
<b>\$13,405,020</b>	<b>SUB-TOTAL OTHER CHARGES</b>
	<b>Interagency Transfers:</b>
\$25,476	Division of Administration for Uniform Payroll Services
\$359,983	Department of Public Safety for Capitol Park Security
\$15,577	Capitol Police
\$18,524	Division of Administration for Comprehensive Public Employees' Training Program (CPTP)
\$180,485	Department of Civil Service Fees
\$614,398	Office of Risk Management for insurance costs
\$1,770,906	Legislative Auditor's Office for the performance of financial and program compliance audits
\$8,562,319	Office of Technology Services for data processing and support services
\$2,197,965	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
\$4,332	Maintenance to State owned buildings
\$93,254	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
\$3,570,038	Division of Administrative Law
\$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
<b>\$19,623,445</b>	<b>SUB-TOTAL INTERAGENCY TRANSFERS</b>
<b>\$33,028,465</b>	<b>TOTAL OTHER CHARGES</b>

## 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

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Percentage of Office of the Secretary indicators meeting or exceeding established targets (LAPAS CODE - 10029)	75%	91%	85%	85%	90%	90%
S	Percentage of the department's employees receiving Performance Evaluations System (PES) evaluations by the due date (LAPAS CODE - 24100)	98%	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 Indicators

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
S	Number of participants in the Governor's Games (LAPAS CODE - 24106)	230,000	314,000	240,000	240,000	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

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Percentage of invoices paid within 90 days of receipt (LAPAS CODE - 24107)	99%	100%	95%	95%	95%	95%
K	Percentage of budget related documents submitted in accordance with DOA and Legislative timelines (LAPAS CODE - 24108)	99%	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 Indicators**

L e v e l	Performance Indicator Name	Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Indicator Values			
				Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Percentage of cases litigated successfully (LAPAS CODE - 10033)	85%	98%	85%	85%	85%	85%

**Management and Finance General Performance Information**

Performance Indicator Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Number of cases litigated (LAPAS CODE - 12050)	1,131	1,009	957	1,200	866
Amount recovered (LAPAS CODE - 12051)	\$ 12,102,052	\$ 12,650,903	\$ 9,307,552	\$ 6,121,053	\$ 5,169,337

**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 Indicators

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
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%	97%	97%	97%	97%
K	Percentage of licensing surveys conducted (LAPAS CODE - 16535)	80.0%	93.0%	80.0%	80.0%	80.0%	80.0%

## Management and Finance General Performance Information

Performance Indicator Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Number of facilities (unduplicated) (LAPAS CODE - 12031)	8,045	7,952	7,828	7,881	7,812
Number of licensing surveys conducted (LAPAS CODE - 16563)	1,411	1,265	1,465	1,461	1,508
Number of certified facilities (LAPAS CODE - 12032)	6,024	6,106	6,230	6,252	6,426
Number of licensed facilities (LAPAS CODE - 12033)	3,729	3,519	3,319	3,348	3,116
Number of Provider Exclusions (LAPAS CODE - 10009)	707	649	611	676	720
This is a new performance indicator for FY17-18 and there is no data currently available.					
Number of facilities terminated (LAPAS CODE - 10011)	135	82	133	83	223
Percentage of facilities out of compliance (LAPAS CODE - 10012)	8.8%	8.2%	7.8%	8.6%	9.2%
Number of facilities sanctioned (LAPAS CODE - 10010)	395	296	243	188	547



**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**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard	Actual Yearend Performance	Performance Standard as Initially Appropriated	Existing Performance Standard	Performance At Continuation Budget Level	Performance At Executive Budget Level
		FY 2015-2016	FY 2015-2016	FY 2016-2017	FY 2016-2017	FY 2017-2018	FY 2017-2018
S	Number of audit assessments (LAPAS CODE - 25605)	6	8	6	6	8	8
S	Number of audit reviews (LAPAS CODE - 25606)	6	25	12	12	16	16



## 307\_A000 — Auxiliary Account

Program Authorization: R.S. 17:3051- 3056

### Program Description

The mission of the Health Education Authority of Louisiana (HEAL) Auxiliary Account is to promote the medical and/or health education activities of various public and private organizations in Louisiana. HEAL aims to promote the health and welfare of Louisiana residents by encouraging and assisting in medical care access, enabling prompt and efficient health and related services being offered at a reasonable cost by both public and private institutions and organizations in modern, well-equipped facilities, and by working with partner organizations to meet excellent standards for health care and health education that will place Louisiana in the position of regional, national and international leadership.

Health Education Authority of Louisiana (HEAL) Auxiliary Account is authorized under R.S. 17:30501 – 3056.

The goals of the HEAL Auxiliary Account are:

- I. To assist the primary institutions named in the creating legislation -- LSU Health Sciences Center in New Orleans and Tulane University Health Sciences Center -- and participating institutions, which could be state and local government agencies, nonprofit/501C3 organizations or other groups working in health care, health education or the biological sciences in obtaining tax-free bonds to construct, renovate or enhance facilities within a 10-mile radius of the Medical Complex area in New Orleans and LSU Health Sciences Center in Shreveport.

The Health Education Authority of Louisiana (HEAL) Auxiliary Account has one activity:

- HEAL activity plans, acquires and/or constructs facilities within a ten-mile radius of the Medical Center of Louisiana - New Orleans (formerly Charity Hospital) and provides for the financing, usually through revenue bonds, of such projects. HEAL is also responsible for the operations of a parking garage in the New Orleans medical complex. Through an exchange of information and data the institutions can plan their growth and future expansion. The master plan issued by HEAL has served as a blueprint for this development. At the request of a primary or participating institution, HEAL through tax exempt revenue bonds may finance the needs of these institutions.
- HEAL has encouraged and looks for activities that will result in shared facilities such as a day care center, parking, centralized chilled water, steam and electricity plants. Other areas considered include laundry facilities, centralized warehouses, a student center, cafeteria, bookstores, and office buildings. Other non-revenue producing projects considered are medical libraries, a centralized computer center, maintenance depots and elevated walkways. HEAL currently operates a parking garage at the Charity Hospital and Medical Center of Louisiana at New Orleans.



### Auxiliary Account Budget Summary

	Prior Year Actuals FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Means of Financing:</b>						
State General Fund (Direct)	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
<b>State General Fund by:</b>						
Total Interagency Transfers	0	0	0	0	0	0
Fees and Self-generated Revenues	330,674	458,974	44,044	0	0	(44,044)
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
<b>Total Means of Financing</b>	<b>\$ 330,674</b>	<b>\$ 458,974</b>	<b>\$ 44,044</b>	<b>\$ 0</b>	<b>\$ 0</b>	<b>\$ (44,044)</b>
<b>Expenditures &amp; Request:</b>						
Personal Services	\$ 225,554	\$ 278,842	\$ 28,487	\$ 0	\$ 0	\$ (28,487)
Total Operating Expenses	27,592	52,045	4,149	0	0	(4,149)
Total Professional Services	72,974	125,916	11,408	0	0	(11,408)
Total Other Charges	1,058	2,171	0	0	0	0
Total Acq & Major Repairs	3,496	0	0	0	0	0
Total Unallotted	0	0	0	0	0	0
<b>Total Expenditures &amp; Request</b>	<b>\$ 330,674</b>	<b>\$ 458,974</b>	<b>\$ 44,044</b>	<b>\$ 0</b>	<b>\$ 0</b>	<b>\$ (44,044)</b>
<b>Authorized Full-Time Equivalents:</b>						
Classified	1	1	0	0	0	0
Unclassified	1	1	0	0	0	0
<b>Total FTEs</b>	<b>2</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

### Source of Funding

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



## Major Changes from Existing Operating Budget

General Fund	Total Amount	Table of Organization	Description
\$ 0	\$ (414,930)	(2)	<b>Mid-Year Adjustments (BA-7s):</b>
\$ 0	\$ 44,044	0	<b>Existing Oper Budget as of 12/01/16</b>
			<b>Statewide Major Financial Changes:</b>
			<b>Non-Statewide Major Financial Changes:</b>
0	(44,044)	0	Non-recur the remaining one month of funding for the Health Education Authority of Louisiana (HEAL) from Office of the Secretary.
\$ 0	\$ 0	0	<b>Recommended FY 2017-2018</b>
\$ 0	\$ 0	0	<b>Less Supplementary Recommendation</b>
\$ 0	\$ 0	0	<b>Base Executive Budget FY 2017-2018</b>
\$ 0	\$ 0	0	<b>Grand Total Recommended</b>

## Professional Services

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

## Other Charges

Amount	Description
	This program does not have funding for 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 Auxiliary Account - The Health Education Authority of Louisiana (HEAL) activity, to operate a parking garage at the Medical Center of Louisiana at New Orleans and promote medical education, research and health care.**

Children's Cabinet Link: Not applicable

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

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

### Performance Indicators

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
S	Amount of fees and revenue collected (LAPAS CODE - 24114)	\$ 372,327	Not Applicable	\$ 452,629	\$ 452,629	0	0



## 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 FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Means of Financing:</b>						
State General Fund (Direct)	\$ 14,070,456	\$ 14,750,241	\$ 14,623,626	\$ 15,248,414	\$ 14,644,995	\$ 21,369
<b>State General Fund by:</b>						
Total Interagency Transfers	3,716,234	4,221,781	4,221,781	4,497,870	4,497,870	276,089
Fees and Self-generated Revenues	2,587,277	2,921,180	2,921,180	2,841,180	2,841,180	(80,000)
Statutory Dedications	0	0	0	0	0	0
Interim Emergency Board	0	0	0	0	0	0
Federal Funds	0	186,292	186,292	0	0	(186,292)



## South Central Louisiana Human Services Authority Budget Summary

	Prior Year Actuals FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Total Means of Financing</b>	\$ 20,373,967	\$ 22,079,494	\$ 21,952,879	\$ 22,587,464	\$ 21,984,045	\$ 31,166
<b>Expenditures &amp; Request:</b>						
South Central Louisiana Human Services Authority	\$ 20,373,967	\$ 22,079,494	\$ 21,952,879	\$ 22,587,464	\$ 21,984,045	\$ 31,166
<b>Total Expenditures &amp; Request</b>	\$ 20,373,967	\$ 22,079,494	\$ 21,952,879	\$ 22,587,464	\$ 21,984,045	\$ 31,166
<b>Authorized Full-Time Equivalents:</b>						
Classified	0	0	0	0	0	0
Unclassified	0	0	0	0	0	0
<b>Total FTEs</b>	0	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 FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Means of Financing:</b>						
State General Fund (Direct)	\$ 14,070,456	\$ 14,750,241	\$ 14,623,626	\$ 15,248,414	\$ 14,644,995	\$ 21,369
<b>State General Fund by:</b>						
Total Interagency Transfers	3,716,234	4,221,781	4,221,781	4,497,870	4,497,870	276,089
Fees and Self-generated Revenues	2,587,277	2,921,180	2,921,180	2,841,180	2,841,180	(80,000)
Statutory Dedications	0	0	0	0	0	0
Interim Emergency Board	0	0	0	0	0	0
Federal Funds	0	186,292	186,292	0	0	(186,292)
<b>Total Means of Financing</b>	<b>\$ 20,373,967</b>	<b>\$ 22,079,494</b>	<b>\$ 21,952,879</b>	<b>\$ 22,587,464</b>	<b>\$ 21,984,045</b>	<b>\$ 31,166</b>
<b>Expenditures &amp; Request:</b>						
Personal Services	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
Total Operating Expenses	1,841,114	2,378,065	2,378,065	2,431,829	2,343,065	(35,000)
Total Professional Services	300	0	0	0	0	0
Total Other Charges	18,532,553	19,701,429	19,574,814	20,155,635	19,601,097	26,283
Total Acq & Major Repairs	0	0	0	0	39,883	39,883



## South Central Louisiana Human Services Authority Budget Summary

	Prior Year Actuals FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
Total Unallotted	0	0	0	0	0	0
<b>Total Expenditures &amp; Request</b>	<b>\$ 20,373,967</b>	<b>\$ 22,079,494</b>	<b>\$ 21,952,879</b>	<b>\$ 22,587,464</b>	<b>\$ 21,984,045</b>	<b>\$ 31,166</b>
<b>Authorized Full-Time Equivalents:</b>						
Classified	0	0	0	0	0	0
Unclassified	0	0	0	0	0	0
<b>Total FTEs</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

### 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

General Fund	Total Amount	Table of Organization	Description
\$ (126,615)	\$ (126,615)	0	<b>Mid-Year Adjustments (BA-7s):</b>
\$ 14,623,626	\$ 21,952,879	0	<b>Existing Oper Budget as of 12/01/16</b>
<b>Statewide Major Financial Changes:</b>			
132,993	132,993	0	Related Benefits Base Adjustment
158,618	158,618	0	Retirement Rate Adjustment
369,876	369,876	0	Salary Base Adjustment
(235,772)	(235,772)	0	Attrition Adjustment
(11,271)	(11,271)	0	Risk Management
6,528	6,528	0	Legislative Auditor Fees
(12)	(12)	0	UPS Fees
487	487	0	Civil Service Fees
17,819	17,819	0	Office of Technology Services (OTS)
(12,311)	(12,311)	0	Office of State Procurement
<b>Non-Statewide Major Financial Changes:</b>			
0	196,089	0	This increase in Interagency Transfers is due to an increase of grant funds from the Office of Behavioral Health.
0	(186,292)	0	This adjustment reduces Federal Funds budget authority for Medicare revenue because this revenue source is collected as Fees and Self-generated Revenue.
(66,670)	(66,670)	0	Annualization of FY 17 mid-year cuts including expenditure reduction for supplies and elimination of student workers



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

General Fund	Total Amount	Table of Organization	Description
(353,799)	(353,799)	0	Reduction to contracts for addiction services, staffing contracts, and advocacy services for Developmental Disabilities.
(25,000)	(25,000)	0	Reduction of pharmacy services for Behavioral Health and Primary Care services.
39,883	39,883	0	Replacement of two high mileage vehicles
<b>\$ 14,644,995</b>	<b>\$ 21,984,045</b>	<b>0</b>	<b>Recommended FY 2017-2018</b>
<b>\$ 0</b>	<b>\$ 0</b>	<b>0</b>	<b>Less Supplementary Recommendation</b>
<b>\$ 14,644,995</b>	<b>\$ 21,984,045</b>	<b>0</b>	<b>Base Executive Budget FY 2017-2018</b>
<b>\$ 14,644,995</b>	<b>\$ 21,984,045</b>	<b>0</b>	<b>Grand Total Recommended</b>

### Professional Services

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

### Other Charges

Amount	Description
	<b>Other Charges:</b>
\$12,973,913	Salaries and related benefits for Other Charges positions.
\$6,104,278	Contractual and operating costs of mental health, addictive disorders and developmental disability services
<b>\$19,078,191</b>	<b>SUB-TOTAL OTHER CHARGES</b>
	<b>Interagency Transfers:</b>
\$48,683	Payments to the Department of Civil Service - Civil Service Fees
\$172,848	Payments to the Division of Administration - Risk Management
\$138,651	Payments to the Division of Administration - Telecommunications Management
\$8,179	Payments to the Division of Administration - Uniform Payroll Services
\$106,891	Payments to the Division of Administration - Technology Services
\$2,768	Payments to the Division of Administration - Office of State Procurement
\$34,725	Payments to the Legislative Auditor
\$10,161	Miscellaneous commodities and services
<b>\$522,906</b>	<b>SUB-TOTAL INTERAGENCY TRANSFERS</b>
<b>\$19,601,097</b>	<b>TOTAL OTHER CHARGES</b>



## Acquisitions and Major Repairs

Amount	Description
\$39,883	Replacement vehicles
\$39,883	TOTAL 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 and 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 Indicators**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Percentage of adults and adolescents with an addictive disorder who successfully complete treatment (LAPAS CODE - 24510)	80%	95%	80%	80%	80%	80%
K	Percentage of adults and adolescents with an addictive disorder who report improvement at discharge (LAPAS CODE - 24511)	85%	95%	80%	80%	80%	80%
K	Number of crisis visits in all SCLHSA Behavioral Health Clinics (LAPAS CODE - 24123)	500	396	350	350	400	400
K	Percentage of adults with depression who report improvement in disposition during and/or after treatment. (LAPAS CODE - 24513)	60%	85%	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	2,188	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

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Percentage of home- and community-based waiver assessments completed timely. (LAPAS CODE - 24118)	80%	86%	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 Indicators**

Level	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Percentage of appointments kept for assessments and ongoing client appointments (LAPAS CODE - 25060)	75%	70%	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%	95%	90%	90%	90%	90%
K	Percentage of clients who indicate they would recommend SCLHSA services to family and friends (LAPAS CODE - 25062)	90%	96%	90%	90%	90%	90%

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

Performance Indicator Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Number of people receiving flexible family funds. (LAPAS CODE - 24120)	128	108	130	126	123
Total number of individuals served in the SCLHSA (Region 3) (LAPAS CODE - 24128)	20,121	26,221	24,766	30,208	24,997
Total number of individuals served by outpatient mental health in SCLHSA (LAPAS CODE - 24129)	7,815	8,983	8,466	9,914	9,704
Total number of individuals served by inpatient Addictive Disorders in SCLHSA (Region 3) (LAPAS CODE - 24130)	1,209	1,051	1,140	1,631	1,050
Total numbers of individuals served outpatient by Addictive Disorders in SCLHSA (Region 3) (LAPAS CODE - 24131)	2,857	2,671	1,789	1,566	1,134
Total number of individuals receiving individual and family support services in SCLHSA (Region 3) (LAPAS CODE - 24119)	179	208	239	233	228
The number of enrollees in prevention programs. (LAPAS CODE - 24115)	5,408	5,326	5,351	6,043	6,402



**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**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Number of patients seen per day by the Primary Care Team (LAPAS CODE - NEW)	Not Applicable	19	Not Applicable	32	32	32
K	Average wait- time from check-in to provider start time (in minutes) (LAPAS CODE - NEW)	Not Applicable	21	Not Applicable	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, including Early Childhood Supports and Services, and the Regional Transition Program for the parishes of Caldwell, East Carroll, Franklin, Jackson, Lincoln, Madison, Morehouse, Ouachita, Richland, Tensas, Union, and West Carroll. 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 Year Actuals FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Means of Financing:</b>						
State General Fund (Direct)	\$ 9,192,844	\$ 9,151,140	\$ 9,066,671	\$ 9,493,057	\$ 9,578,625	\$ 511,954
<b>State General Fund by:</b>						
Total Interagency Transfers	3,047,971	3,285,507	3,285,507	3,345,536	3,345,536	60,029



## Northeast Delta Human Services Authority Budget Summary

	Prior Year Actuals FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
Fees and Self-generated Revenues	590,810	2,664,300	2,666,456	773,844	773,844	(1,892,612)
Statutory Dedications	0	0	0	0	0	0
Interim Emergency Board	0	0	0	0	0	0
Federal Funds	0	48,289	48,289	0	0	(48,289)
<b>Total Means of Financing</b>	<b>\$ 12,831,625</b>	<b>\$ 15,149,236</b>	<b>\$ 15,066,923</b>	<b>\$ 13,612,437</b>	<b>\$ 13,698,005</b>	<b>\$ (1,368,918)</b>
<b>Expenditures &amp; Request:</b>						
Northeast Delta Human Services Authority	\$ 12,831,625	\$ 15,149,236	\$ 15,066,923	\$ 13,612,437	\$ 13,698,005	\$ (1,368,918)
<b>Total Expenditures &amp; Request</b>	<b>\$ 12,831,625</b>	<b>\$ 15,149,236</b>	<b>\$ 15,066,923</b>	<b>\$ 13,612,437</b>	<b>\$ 13,698,005</b>	<b>\$ (1,368,918)</b>
<b>Authorized Full-Time Equivalents:</b>						
Classified	0	0	0	0	0	0
Unclassified	0	0	0	0	0	0
<b>Total FTEs</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>



## 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 our state as well as in the Northeast Delta Human Services Authority catchment area. The resources available are not sufficient to meet the growing need for treatment and prevention services. Northeast Delta Human Services Authority falls into this category when considering the vast geography covered in the service area which limits inpatient service options. The same is true for outpatient services. The program has made significant strides to prioritize services to meet these crucial needs by encouraging and supporting the awareness and understanding of alcoholism and drug addiction amongst the citizens of our state. The basic premise of addictive disorder services is to develop ideas and programs that can help increase public awareness, treat adults and youth who need addictive disorder (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 substances 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, and communities requiring substance abuse intervention.
- **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 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.

- **Mental Health Services** – The current budget for mental health services in the Northeast Delta Human Services Authority catchment area provides for outpatient clinic services for children over the age of six, adolescents, and adults. Core services include screening, assessment, crisis evaluation, individual, group and family counseling, and medication management which includes administration, education, and screening for people with co-occurring disorders. Contracted services include, but are not limited to, Psychosocial Rehabilitation and Community Psychiatric Support Treatment, housing and employment assistance, and assistance in application for Supplemental Security Income (SSI). Service delivery includes full participation in the Louisiana Behavioral Health Partnership and the Coordinated system of Care and works as a participant in the Coordinated Care Network. All Behavioral Health clinics in the Northeast Delta Human Services Authority will participate as Medicaid Application Centers for persons requesting services.
- **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 is at the heart of our targeted goals in the 12 parish area of Region VIII. 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. Actively working to collaborate through coalitions, and other community driven partnerships, we strive to create a web of interwoven services through contractors, school systems, policy makers, educators, and law enforcement to not only reduce the use of Alcohol, Tobacco, and other drugs but to reduce brain diseases through programs that begin before conception and continually provide guidance throughout the life cycle to maintain 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 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 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. The Northeast Delta Human Services Authority will participate in the statewide initiative to implement an electronic health record to assist with continuous documentation efforts, scheduling of clients to maximize provider time, invoicing and billing procedures to improve collection efforts, and standardization of forms/procedures.



## Northeast Delta Human Services Authority Budget Summary

	Prior Year Actuals FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Means of Financing:</b>						
State General Fund (Direct)	\$ 9,192,844	\$ 9,151,140	\$ 9,066,671	\$ 9,493,057	\$ 9,578,625	\$ 511,954
<b>State General Fund by:</b>						
Total Interagency Transfers	3,047,971	3,285,507	3,285,507	3,345,536	3,345,536	60,029
Fees and Self-generated Revenues	590,810	2,664,300	2,666,456	773,844	773,844	(1,892,612)
Statutory Dedications	0	0	0	0	0	0
Interim Emergency Board	0	0	0	0	0	0
Federal Funds	0	48,289	48,289	0	0	(48,289)
<b>Total Means of Financing</b>	<b>\$ 12,831,625</b>	<b>\$ 15,149,236</b>	<b>\$ 15,066,923</b>	<b>\$ 13,612,437</b>	<b>\$ 13,698,005</b>	<b>\$ (1,368,918)</b>
<b>Expenditures &amp; Request:</b>						
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	12,831,625	15,149,236	15,066,923	13,512,437	13,698,005	(1,368,918)
Total Acq & Major Repairs	0	0	0	100,000	0	0
Total Unallotted	0	0	0	0	0	0
<b>Total Expenditures &amp; Request</b>	<b>\$ 12,831,625</b>	<b>\$ 15,149,236</b>	<b>\$ 15,066,923</b>	<b>\$ 13,612,437</b>	<b>\$ 13,698,005</b>	<b>\$ (1,368,918)</b>
<b>Authorized Full-Time Equivalents:</b>						
Classified	0	0	0	0	0	0
Unclassified	0	0	0	0	0	0
<b>Total FTEs</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

## 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

General Fund	Total Amount	Table of Organization	Description
\$ (84,469)	\$ (82,313)	0	<b>Mid-Year Adjustments (BA-7s):</b>
\$ 9,066,671	\$ 15,066,923	0	<b>Existing Oper Budget as of 12/01/16</b>
<b>Statewide Major Financial Changes:</b>			
309,013	309,013	0	Related Benefits Base Adjustment
116,852	116,852	0	Retirement Rate Adjustment
198,559	198,559	0	Salary Base Adjustment
(163,570)	(163,570)	0	Attrition Adjustment
0	(2,156)	0	Non-recurring Carryforwards
(21,316)	(21,316)	0	Risk Management
15,114	15,114	0	Legislative Auditor Fees
99	99	0	UPS Fees
(1,132)	(1,132)	0	Civil Service Fees
944	944	0	Office of Technology Services (OTS)
7,582	7,582	0	Office of State Procurement
<b>Non-Statewide Major Financial Changes:</b>			
0	36,029	0	This increase in Interagency Transfers is due to an increase of grant funds from the Office of Behavioral Health.
0	(1,866,456)	0	Reduction of Fees and Self-Generated revenue to reflect realistic anticipated collections based on prior year revenues.
0	(48,289)	0	This adjustment reduces Federal Funds budget authority for Medicare revenue because this revenue source is collected as Fees and Self-generated Revenue.
49,000	49,000	0	This adjustment transfers \$49,000 SGF to NEDHSA for the Extra Mile R8 contract. This contract provides financial support for the administration of The Extra Mile R8, Inc., volunteer services. This contract was not transferred to NEDHSA when the region became an LDH agency independent of the OBH.
(45,961)	(45,961)	0	Reduction of funding for Wrap-around services.
46,770	46,770	0	Replacement of two high mileage vehicles
\$ 9,578,625	\$ 13,698,005	0	<b>Recommended FY 2017-2018</b>
\$ 0	\$ 0	0	<b>Less Supplementary Recommendation</b>
\$ 9,578,625	\$ 13,698,005	0	<b>Base Executive Budget FY 2017-2018</b>
\$ 9,578,625	\$ 13,698,005	0	<b>Grand Total Recommended</b>

## Professional Services

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

## Other Charges

Amount	Description
	<b>Other Charges:</b>
\$8,705,017	Salaries and related benefits for Other Charges positions
\$4,740,863	Contractual and operating costs of mental health, addictive disorders and developmental disability services
<b>\$13,445,880</b>	<b>SUB-TOTAL OTHER CHARGES</b>
	<b>Interagency Transfers:</b>
\$33,801	Payments to the Department of Civil Service - Civil Service Fees
\$130,589	Payments to the Division of Administration - Risk Management
\$34,840	Payments to the Division of Administration- Technology Services
\$25,353	Payments to the Legislative Auditor
\$5,986	Payments to the Division of Administration - Uniform Payroll Services
\$14,517	Payments to the Division of Administration - Office of State Procurement
\$7,039	Miscellaneous commodities and services
<b>\$252,125</b>	<b>SUB-TOTAL INTERAGENCY TRANSFERS</b>
<b>\$13,698,005</b>	<b>TOTAL OTHER CHARGES</b>

## Acquisitions and Major Repairs

Amount	Description
--------	-------------

## Performance Information

- (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 Indicators

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Number of referrals to NEDHSA partner agencies (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	150	150
S	Number of NEDHSA partner agencies (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	15	15
S	Number of Behavioral Health services provided (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	17,000	17,000

### 2. (KEY) NEDHSA will provide a continuum of quality, competent and clinical behavioral health services that meet the needs of our customers

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**

Level	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
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%	88%	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%	87%	87%	87%	87%	87%
K	Percentage of clients who indicate they would recommend NEDHSA services to family and friends (LAPAS CODE - 25212)	87%	90%	87%	87%	87%	87%
K	Percentage of mental health clients who would recommend NEDHSA services to others (LAPAS CODE - 25216)	87%	89%	87%	87%	87%	87%
K	Percentage of individuals successfully completing the 24-hour residential addictive disorders treatment program (LAPAS CODE - 25218)	70%	100%	65%	65%	65%	65%
K	Percentage of individuals successfully completing the Primary Inpatient Adult addictive disorders treatment program (LAPAS CODE - 25219)	68%	75%	65%	65%	65%	65%
K	Number of adults receiving mental health services in all NEDHSA behavioral health clinics (LAPAS CODE - 25213)	2,600	9,737	4,500	4,500	4,500	4,500
K	Number of children/adolescents receiving mental health services in all NEDHSA behavioral health clinics (LAPAS CODE - 25214)	105	1,278	250	250	250	250



### Northeast Delta Human Services Authority General Performance Information

Performance Indicator Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Total number of individuals served in the Northeast Delta Human Services Authority (LAPAS CODE - 25225)	Not Applicable	5,099	6,227	9,230	16,382
Agency did not exist prior to 2013, therefore, no prior year information is available.					
Total number of individuals served by inpatient Addictive Disorders in Northeast Delta Human Services Authority (LAPAS CODE - 25227)	Not Applicable	1,534	1,754	1,822	3,290
Agency did not exist prior to 2013, therefore, no prior year information is available.					
Total numbers of individuals served by outpatient Addictive Disorders in Northeast Delta Human Services Authority (LAPAS CODE - 25228)	Not Applicable	813	1,132	789	3,290
Agency did not exist prior to 2013, therefore, no prior year information is available.					
Total number of individuals served by outpatient mental health in Northeast Delta Human Services Authority (LAPAS CODE - 25226)	Not Applicable	1,286	3,163	8,441	11,352
Agency did not exist prior to 2013, therefore, no prior year information is available.					
Total number of enrollees in prevention programs (LAPAS CODE - 25229)	Not Applicable	7,477	12,534	10,249	7,191
Agency did not exist prior to 2013, therefore, no prior year information is available.					

### 3. (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**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Percentage of mental health Flexible Family Fund slots utilized (LAPAS CODE - 25217)	95%	100%	95%	95%	95%	95%

**4. (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 Indicators

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
S	Percentage of compliant Performance Evaluation System (PES) evaluations completed within required timeframe (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	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 treatmenti (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	85%	85%
S	Number of annual trainings offered (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	10	10

### 5. (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**

Level	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Percentage of eligibility determinations determined to be valid according to Flexible Family Fund provisions (LAPAS CODE - 25223)	95%	93%	95%	95%	95%	90%
K	Percentage of completed monitoring of Individual and Family Support fund usage (in accordance with OCDD policy) (LAPAS CODE - 25965)	Not Applicable	Not Applicable	60%	60%	60%	60%
K	Number of persons receiving individual and family support services (LAPAS CODE - 25221)	385	350	390	390	390	390
K	Number of persons receiving Flexible Family Fund services (LAPAS CODE - 25222)	150	141	150	150	150	150
K	Number of persons receiving developmental disabilities services (LAPAS CODE - 25224)	1,600	1,740	1,625	1,625	1,625	1,625

**6. (KEY) NEDHSA will promote the delivery of quality supports and support consumerís right to live a community setting of their choice.**

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

Human Resource Policies Beneficial to Women and Families Link: The Northeast Delta Human Services Authority abides by all state Civil 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 Indicators

L e v e l	Performance Indicator Name	Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Indicator Values			
				Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Percentage of plans of care that address waiver participants' personal goals (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	90%	90%



## 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 FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Means of Financing:</b>						
State General Fund (Direct)	\$ 14,158,082	\$ 16,583,162	\$ 16,583,162	\$ 18,102,674	\$ 16,294,897	\$ (288,265)
<b>State General Fund by:</b>						
Total Interagency Transfers	22,225,194	25,838,767	26,929,588	28,800,163	29,437,397	2,507,809
Fees and Self-generated Revenues	1,171,252	1,197,437	1,197,437	1,197,437	1,197,437	0
Statutory Dedications	2,030,524	2,445,812	2,445,812	3,045,812	3,045,812	600,000
Interim Emergency Board	0	0	0	0	0	0
Federal Funds	0	452,991	452,991	452,991	868,196	415,205
<b>Total Means of Financing</b>	<b>\$ 39,585,052</b>	<b>\$ 46,518,169</b>	<b>\$ 47,608,990</b>	<b>\$ 51,599,077</b>	<b>\$ 50,843,739</b>	<b>\$ 3,234,749</b>
<b>Expenditures &amp; Request:</b>						
Administration Protection and Support	\$ 21,184,124	\$ 26,092,589	\$ 27,183,410	\$ 29,834,351	\$ 28,670,403	\$ 1,486,993
Villa Feliciana Medical Complex	18,362,436	20,365,580	20,365,580	21,704,726	22,113,336	1,747,756
Auxiliary Account	38,492	60,000	60,000	60,000	60,000	0
<b>Total Expenditures &amp; Request</b>	<b>\$ 39,585,052</b>	<b>\$ 46,518,169</b>	<b>\$ 47,608,990</b>	<b>\$ 51,599,077</b>	<b>\$ 50,843,739</b>	<b>\$ 3,234,749</b>
<b>Authorized Full-Time Equivalents:</b>						
Classified	379	379	384	384	380	(4)
Unclassified	3	3	3	3	3	0
<b>Total FTEs</b>	<b>382</b>	<b>382</b>	<b>387</b>	<b>387</b>	<b>383</b>	<b>(4)</b>



## 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 community-based 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 and over, 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 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Means of Financing:</b>						
State General Fund (Direct)	\$ 14,158,082	\$ 16,583,162	\$ 16,583,162	\$ 18,102,674	\$ 16,294,897	\$ (288,265)
<b>State General Fund by:</b>						
Total Interagency Transfers	4,995,518	7,063,615	8,154,436	8,685,865	8,914,489	760,053
Fees and Self-generated Revenues	0	0	0	0	0	0
Statutory Dedications	2,030,524	2,445,812	2,445,812	3,045,812	3,045,812	600,000
Interim Emergency Board	0	0	0	0	0	0
Federal Funds	0	0	0	0	415,205	415,205
<b>Total Means of Financing</b>	<b>\$ 21,184,124</b>	<b>\$ 26,092,589</b>	<b>\$ 27,183,410</b>	<b>\$ 29,834,351</b>	<b>\$ 28,670,403</b>	<b>\$ 1,486,993</b>
<b>Expenditures &amp; Request:</b>						
Personal Services	\$ 13,617,718	\$ 14,791,389	\$ 14,791,389	\$ 15,965,477	\$ 14,240,519	\$ (550,870)
Total Operating Expenses	640,269	776,564	776,564	878,700	1,221,222	444,658
Total Professional Services	7,283	118,142	118,142	115,448	714,958	596,816
Total Other Charges	6,918,854	10,406,494	11,497,315	12,856,026	12,493,704	996,389
Total Acq & Major Repairs	0	0	0	18,700	0	0
Total Unallotted	0	0	0	0	0	0
<b>Total Expenditures &amp; Request</b>	<b>\$ 21,184,124</b>	<b>\$ 26,092,589</b>	<b>\$ 27,183,410</b>	<b>\$ 29,834,351</b>	<b>\$ 28,670,403</b>	<b>\$ 1,486,993</b>
<b>Authorized Full-Time Equivalents:</b>						
Classified	165	165	165	165	161	(4)
Unclassified	1	1	1	1	1	0
<b>Total FTEs</b>	<b>166</b>	<b>166</b>	<b>166</b>	<b>166</b>	<b>162</b>	<b>(4)</b>



## 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	Prior Year Actuals FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
Nursing Home Residents' Trust Fund	\$ 437,001	\$ 800,000	\$ 800,000	\$ 1,400,000	\$ 1,400,000	\$ 600,000
Traumatic Head & Spinal Cord Injury Trust Fund	1,593,523	1,645,812	1,645,812	1,645,812	1,645,812	0

## Major Changes from Existing Operating Budget

General Fund	Total Amount	Table of Organization	Description
\$ 0	\$ 1,090,821	0	<b>Mid-Year Adjustments (BA-7s):</b>
\$ 16,583,162	\$ 27,183,410	166	<b>Existing Oper Budget as of 12/01/16</b>
<b>Statewide Major Financial Changes:</b>			
2,470	2,470	0	Civil Service Training Series
107,906	107,906	0	Related Benefits Base Adjustment
209,932	209,932	0	Retirement Rate Adjustment
524,348	524,348	0	Salary Base Adjustment
(390,959)	(390,959)	0	Attrition Adjustment
(115,875)	(115,875)	0	Rent in State-Owned Buildings
39,497	39,497	0	Maintenance in State-Owned Buildings
877	877	0	Capitol Police
700	700	0	UPS Fees
8,039	8,039	0	Civil Service Fees
31,420	314,196	0	Office of Technology Services (OTS)
13,341	13,341	0	Office of State Procurement
<b>Non-Statewide Major Financial Changes:</b>			
0	(394,158)	0	Non-recurs Villa pool funding from the Office of Aging and Adult Services, Administration, Protection and Support Program in order to align revenue with actual expenditures.
0	0	3	Transferring 3 NON T.O. FTE positions to 3 T.O. FTE permanent positions in the Compliance and Audit Team (CATS) to assess cases to ensure participants meet program eligibility requirements and to detect any potential fraud.



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

General Fund	Total Amount	Table of Organization	Description
0	218,935	0	Increase funding to continue the Disaster Case Management grant funded through the Louisiana Office of Community Development-Disaster Recovery Unit for the Spring and Summer floods in SFY17. The Louisiana Department of Health, OAAS is the sub-grantee responsible for program oversight. OAAS will be reporting to FEMA and providing support to community non-profits that are providing disaster case management to affected households and individuals.
0	600,000	0	Increases Nursing Home Residents Trust Fund which provides demonstration projects to improve the quality of care of Louisiana's nursing home facilities.
72,500	725,000	0	OAAS Participant Tracking System (OPTS), Medicaid eligibility screening to determine the level of care required per applicant, used to track Pre-admission Screening and Resident Review (PASRR) information for nursing facilities applicants. OPTS is used to track applicants for nursing facilities (NF), Community Choices (CCW) and Adult Day Health Care (ADHC) waiver programs, and Long Term - Personal Care Services (LT-PCS) state plan services.
3,401,320	3,816,525	32	Year 1 costs for creating system of care changes in responsive to Department of Justice findings.
(63,174)	(63,174)	0	Annualization of the FY17 Mid-Year Reduction in contracts and expenditures.
(421,311)	(421,311)	0	Annualization of FY17 Mid-Year reduction in the Traumatic Head and Spinal Cord Injury program.
(736,267)	(736,267)	0	Reducing Traumatic Head and Spinal Cord Injury program by eliminating contracts and reducing expenditures.
(2,973,029)	(2,973,029)	(39)	Transferring State General Fund (Direct) and 39 T.O. FTE positions to the Governor's Office of Elderly Affairs for the Elderly Protective Services activity.
\$ 16,294,897	\$ 28,670,403	162	<b>Recommended FY 2017-2018</b>
\$ 0	\$ 0	0	<b>Less Supplementary Recommendation</b>
\$ 16,294,897	\$ 28,670,403	162	<b>Base Executive Budget FY 2017-2018</b>
\$ 16,294,897	\$ 28,670,403	162	<b>Grand Total Recommended</b>

### Professional Services

Amount	Description
<b>Professional Services</b>	
\$75,448	Professional contracts needed to provide clinical monitoring and oversight for managed long term supports and services.
\$631,750	Department of Justice - funds will be used to respond to findings around nursing home placement.
\$7,760	Professional contracts needed to provide legal and interpreting services for protective services cases.
<b>\$714,958</b>	<b>TOTAL PROFESSIONAL SERVICES</b>



## Other Charges

Amount	Description
	<b>Other Charges:</b>
\$3,621,548	'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.
\$1,425,499	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.
\$476,111	Independent Living Program- Manages services for the state personal assistance program.
\$1,280,665	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.
\$310,180	Department of Justice - funds will be used to respond to findings around nursing home placement.
\$79,956	Louisiana Guardianship Services- provides money management and guardianship services to certain Protective Services clients that are in need of this service.
\$1,362,878	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.
<b>\$10,356,837</b>	<b>SUB-TOTAL OTHER CHARGES</b>
	<b>Interagency Transfers:</b>
\$419,242	Rent in State-Owned Buildings
\$38,530	Rent in the Northeast Louisiana State Office Building
\$57,355	Civil Service and CPTP Fees
\$54,116	LEAF
\$1,837	Capitol Police
\$1,867	DOA - Office of Computing Services
\$103,086	DOA- Office of State Procurement
\$102,203	Office of Telecommunications Management (OTM)
\$725,000	Office of Technology Services - Participant Tracking System
\$431,622	Office of Technology Services
\$133,040	Office of Risk Management Premiums
\$56,345	Maintenance State-Owned Buildings
\$12,624	Office of State Uniform Payroll
<b>\$2,136,867</b>	<b>SUB-TOTAL INTERAGENCY TRANSFERS</b>
<b>\$12,493,704</b>	<b>TOTAL OTHER CHARGES</b>

## 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

Level	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Percentage of OAAS performance indicators that meet or exceed performance standards (LAPAS CODE - 24134)	85%	74%	80%	80%	80%	80%
K	Administrative cost as percentage of service cost (LAPAS CODE - 24135)	1.00%	0.16%	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 Indicators

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Percentage of Medicaid spending for elderly and disabled adult long-term care that goes towards community-based services rather than nursing homes (LAPAS CODE - 24137)	29%	24%	25%	25%	25%	25%
K	Percentage of participants receiving Medicaid long term care in the community rather than nursing homes (LAPAS CODE - 25059)	47%	45%	44%	44%	44%	44%
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)	48%	39%	46%	46%	46%	46%
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 Indicators**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Number on registries for OAAS HCBS waivers (LAPAS CODE - 24144)	35,100	28,741	37,000	37,000	37,000	37,000
K	Percentage on registry for OAAS HCBS waivers who are receiving other Medicaid LTC (LAPAS CODE - 24145)	30%	24%	30%	30%	30%	30%
S	Percentage of available Healthcare Effectiveness Data Information Set (HEDIS) and Agency for Research and Healthcare Quality (ARHQ) Prevention measures on which Medicaid community-based programs perform as well or better than the Medicaid nursing home program (LAPAS CODE - 24142)	50%	50%	50%	50%	50%	50%
S	Number served in all OAAS HCBS programs (LAPAS CODE - 24146)	30,000	21,107	30,000	30,000	30,000	30,000

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

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	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

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Percentage of participants who remain stabilized in the community (LAPAS CODE - 24148)	90%	94%	90%	90%	90%	90%
K	Percentage of participants who obtain a source of or increase in income (LAPAS CODE - 24149)	50%	55%	50%	50%	50%	50%



**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 and the opportunity to coordinate and/or leverage funds.**

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**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Percentage of THSCI Trust Fund expenditures going to direct services (LAPAS CODE - 25158)	85%	85%	85%	85%	85%	85%
S	Number of people served by THSCI Trust Fund (LAPAS CODE - 3367)	750	650	720	720	720	720

**Administration Protection and Support General Performance Information**

Performance Indicator Name	Performance Indicator Values					
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016	
Number of people on waiting list for THSCI Trust Fund assistance (LAPAS CODE - 8294)	262	196	324	306	294	

**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 Indicators

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Percentage of investigations completed within established timeframes (LAPAS CODE - 7995)	75%	79%	75%	75%	75%	75%
K	Number of clients served (LAPAS CODE - 7994)	6,690	6,314	6,690	6,690	6,890	2,308
K	Percentage of cases requiring service plans that were closed (LAPAS CODE - 25607)	80%	82%	80%	80%	80%	80%

## Administration Protection and Support General Performance Information

Performance Indicator Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Number of cases assigned to investigators (statewide) (LAPAS CODE - 12052)	3,195	3,529	6,926	6,642	4,506
Number of reports received (LAPAS CODE - 350)	4,136	4,172	4,843	5,364	5,262
Number of reports investigated (LAPAS CODE - 351)	4,136	3,670	4,308	4,540	4,324
Number of cases closed (LAPAS CODE - 353)	4,167	3,592	4,989	4,574	4,262



## 320\_3000 — Villa Feliciano 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 Feliciano 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 Feliciano Medical Complex to the Office of Aging and Adult Services.

### Program Description

The Villa Feliciano 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 Feliciano 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 Feliciano Medical Complex Budget Summary

	Prior Year Actuals FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Means of Financing:</b>						
State General Fund (Direct)	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
<b>State General Fund by:</b>						
Total Interagency Transfers	17,229,676	18,775,152	18,775,152	20,114,298	20,522,908	1,747,756
Fees and Self-generated Revenues	1,132,760	1,137,437	1,137,437	1,137,437	1,137,437	0
Statutory Dedications	0	0	0	0	0	0
Interim Emergency Board	0	0	0	0	0	0
Federal Funds	0	452,991	452,991	452,991	452,991	0
<b>Total Means of Financing</b>	<b>\$ 18,362,436</b>	<b>\$ 20,365,580</b>	<b>\$ 20,365,580</b>	<b>\$ 21,704,726</b>	<b>\$ 22,113,336</b>	<b>\$ 1,747,756</b>
<b>Expenditures &amp; Request:</b>						
Personal Services	\$ 13,929,478	\$ 14,904,086	\$ 15,210,283	\$ 15,867,124	\$ 16,325,027	\$ 1,114,744
Total Operating Expenses	2,357,158	2,942,550	2,942,550	3,691,047	3,704,691	762,141
Total Professional Services	157,173	290,000	290,000	290,000	290,000	0
Total Other Charges	1,918,627	2,023,493	1,717,296	1,651,104	1,588,167	(129,129)
Total Acq & Major Repairs	0	205,451	205,451	205,451	205,451	0
Total Unallotted	0	0	0	0	0	0
<b>Total Expenditures &amp; Request</b>	<b>\$ 18,362,436</b>	<b>\$ 20,365,580</b>	<b>\$ 20,365,580</b>	<b>\$ 21,704,726</b>	<b>\$ 22,113,336</b>	<b>\$ 1,747,756</b>
<b>Authorized Full-Time Equivalents:</b>						
Classified	214	214	219	219	219	0
Unclassified	2	2	2	2	2	0
<b>Total FTEs</b>	<b>216</b>	<b>216</b>	<b>221</b>	<b>221</b>	<b>221</b>	<b>0</b>



## Source of Funding

The Villa Feliciano Medical 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	Total Amount	Table of Organization	Description
\$ 0	\$ 0	5	<b>Mid-Year Adjustments (BA-7s):</b>
\$ 0	\$ 20,365,580	221	<b>Existing Oper Budget as of 12/01/16</b>
<b>Statewide Major Financial Changes:</b>			
0	12,222	0	Civil Service Training Series
0	192,174	0	Related Benefits Base Adjustment
0	188,164	0	Retirement Rate Adjustment
0	527,109	0	Salary Base Adjustment
0	(228,942)	0	Attrition Adjustment
0	205,451	0	Acquisitions & Major Repairs
0	(205,451)	0	Non-Recurring Acquisitions & Major Repairs
0	(101,232)	0	Risk Management
<b>Non-Statewide Major Financial Changes:</b>			
0	100,257	0	Increase food service contract by 11% in FY18 to accommodate normal inflation, equipment needs and increased expectations of the contractor to assure quality and accountability.
0	1,058,004	0	Provides funding for eight beds at the Office of Aging and Adult Services, Villa Feliciano Medical Complex (OAAS-Villa) for hospital-based physical care service beds for Eastern Louisiana Mental Health System (ELMHS) clients.
\$ 0	\$ 22,113,336	221	<b>Recommended FY 2017-2018</b>
\$ 0	\$ 0	0	<b>Less Supplementary Recommendation</b>
\$ 0	\$ 22,113,336	221	<b>Base Executive Budget FY 2017-2018</b>
\$ 0	\$ 22,113,336	221	<b>Grand Total Recommended</b>



## Professional Services

Amount	Description
	<b>Professional Services</b>
\$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.
<b>\$290,000</b>	<b>TOTAL PROFESSIONAL SERVICES</b>

## Other Charges

Amount	Description
	<b>Other Charges:</b>
	This program does not have funding for Other Charges.
	<b>Interagency Transfers:</b>
\$716,012	Office of Risk Management (ORM)
\$12,126	IAT Data Processing - Fees for Internet Service
\$64,797	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
\$47,662	Office of Technology Services
<b>\$1,588,167</b>	<b>SUB-TOTAL INTERAGENCY TRANSFERS</b>
<b>\$1,588,167</b>	<b>TOTAL OTHER CHARGES</b>

## Acquisitions and Major Repairs

Amount	Description
	<b>Acquisitions and Major Repairs</b>
\$205,451	Provides funding for replacement equipment and major repairs for this 24-hour healthcare facility's standard of care.
<b>\$205,451</b>	<b>TOTAL ACQUISITIONS AND MAJOR REPAIRS</b>

## 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**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
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	1.31	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 Indicators**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
S	Cost per client day (LAPAS CODE - 2289)	\$ 357	\$ 330	\$ 361	\$ 361	\$ 345	\$ 345
K	Average daily census (LAPAS CODE - 2292)	150	150	150	150	150	150
K	Total clients served (LAPAS CODE - 10052)	200	225	200	200	200	200
K	Occupancy rate (LAPAS CODE - 2288)	93%	95%	93%	93%	93%	93%



### Villa Feliciana Medical Complex General Performance Information

Performance Indicator Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
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

	Prior Year Actuals FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Means of Financing:</b>						
State General Fund (Direct)	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
<b>State General Fund by:</b>						
Total Interagency Transfers	0	0	0	0	0	0
Fees and Self-generated Revenues	38,492	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
<b>Total Means of Financing</b>	<b>\$ 38,492</b>	<b>\$ 60,000</b>	<b>\$ 60,000</b>	<b>\$ 60,000</b>	<b>\$ 60,000</b>	<b>\$ 0</b>
<b>Expenditures &amp; Request:</b>						
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	38,492	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
<b>Total Expenditures &amp; Request</b>	<b>\$ 38,492</b>	<b>\$ 60,000</b>	<b>\$ 60,000</b>	<b>\$ 60,000</b>	<b>\$ 60,000</b>	<b>\$ 0</b>



## Auxiliary Account Budget Summary

	Prior Year Actuals FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Authorized Full-Time Equivalents:</b>						
Classified	0	0	0	0	0	0
Unclassified	0	0	0	0	0	0
<b>Total FTEs</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

## 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

General Fund	Total Amount	Table of Organization	Description
\$ 0	\$ 0	0	Mid-Year Adjustments (BA-7s):
\$ 0	\$ 60,000	0	Existing Oper Budget as of 12/01/16
<b>Statewide Major Financial Changes:</b>			
<b>Non-Statewide Major Financial Changes:</b>			
\$ 0	\$ 60,000	0	Recommended FY 2017-2018
\$ 0	\$ 0	0	Less Supplementary Recommendation
\$ 0	\$ 60,000	0	Base Executive Budget FY 2017-2018
\$ 0	\$ 60,000	0	Grand Total Recommended

## Professional Services

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

## Other Charges

Amount	Description
	<b>Other Charges:</b>



### Other Charges (Continued)

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

### 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 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.

### **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

	Prior Year Actuals FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Means of Financing:</b>						
State General Fund (Direct)	\$ 1,611,349	\$ 1,585,839	\$ 1,579,615	\$ 1,617,082	\$ 1,576,253	\$ (3,362)
<b>State General Fund by:</b>						
Total Interagency Transfers	32,853	69,900	69,900	49,900	49,900	(20,000)
Fees and Self-generated Revenues	0	0	0	0	0	0
Statutory Dedications	188,718	0	0	0	0	0
Interim Emergency Board	0	0	0	0	0	0
Federal Funds	0	0	0	0	0	0
<b>Total Means of Financing</b>	<b>\$ 1,832,920</b>	<b>\$ 1,655,739</b>	<b>\$ 1,649,515</b>	<b>\$ 1,666,982</b>	<b>\$ 1,626,153</b>	<b>\$ (23,362)</b>
<b>Expenditures &amp; Request:</b>						
Louisiana Emergency Response Network Board	\$ 1,832,920	\$ 1,655,739	\$ 1,649,515	\$ 1,666,982	\$ 1,626,153	\$ (23,362)
<b>Total Expenditures &amp; Request</b>	<b>\$ 1,832,920</b>	<b>\$ 1,655,739</b>	<b>\$ 1,649,515</b>	<b>\$ 1,666,982</b>	<b>\$ 1,626,153</b>	<b>\$ (23,362)</b>
<b>Authorized Full-Time Equivalents:</b>						
Classified	5	5	5	5	5	0
Unclassified	2	2	2	2	2	0
<b>Total FTEs</b>	<b>7</b>	<b>7</b>	<b>7</b>	<b>7</b>	<b>7</b>	<b>0</b>



## 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 state-wide 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](http://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 FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Means of Financing:</b>						
State General Fund (Direct)	\$ 1,611,349	\$ 1,585,839	\$ 1,579,615	\$ 1,617,082	\$ 1,576,253	\$ (3,362)
<b>State General Fund by:</b>						
Total Interagency Transfers	32,853	69,900	69,900	49,900	49,900	(20,000)



## Louisiana Emergency Response Network Board Budget Summary

	Prior Year Actuals FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
Fees and Self-generated Revenues	0	0	0	0	0	0
Statutory Dedications	188,718	0	0	0	0	0
Interim Emergency Board	0	0	0	0	0	0
Federal Funds	0	0	0	0	0	0
<b>Total Means of Financing</b>	<b>\$ 1,832,920</b>	<b>\$ 1,655,739</b>	<b>\$ 1,649,515</b>	<b>\$ 1,666,982</b>	<b>\$ 1,626,153</b>	<b>\$ (23,362)</b>
<b>Expenditures &amp; Request:</b>						
Personal Services	\$ 859,198	\$ 860,296	\$ 860,296	\$ 878,966	\$ 866,986	\$ 6,690
Total Operating Expenses	235,235	241,761	241,761	245,679	239,261	(2,500)
Total Professional Services	374,758	359,800	359,800	370,143	337,531	(22,269)
Total Other Charges	362,594	193,882	187,658	172,194	179,467	(8,191)
Total Acq & Major Repairs	1,135	0	0	0	2,908	2,908
Total Unallotted	0	0	0	0	0	0
<b>Total Expenditures &amp; Request</b>	<b>\$ 1,832,920</b>	<b>\$ 1,655,739</b>	<b>\$ 1,649,515</b>	<b>\$ 1,666,982</b>	<b>\$ 1,626,153</b>	<b>\$ (23,362)</b>
<b>Authorized Full-Time Equivalents:</b>						
Classified	5	5	5	5	5	0
Unclassified	2	2	2	2	2	0
<b>Total FTEs</b>	<b>7</b>	<b>7</b>	<b>7</b>	<b>7</b>	<b>7</b>	<b>0</b>

## 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.

## Louisiana Emergency Response Network Board Statutory Dedications

Fund	Prior Year Actuals FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
LA Emergency Response Network Fund	\$ 188,718	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0



### Major Changes from Existing Operating Budget

General Fund	Total Amount	Table of Organization	Description
\$ (6,224)	\$ (6,224)	0	<b>Mid-Year Adjustments (BA-7s):</b>
\$ 1,579,615	\$ 1,649,515	7	<b>Existing Oper Budget as of 12/01/16</b>
<b>Statewide Major Financial Changes:</b>			
\$ (9,800)	\$ (9,800)	0	Related Benefits Base Adjustment
\$ 12,118	\$ 12,118	0	Retirement Rate Adjustment
\$ 3,853	\$ 3,853	0	Salary Base Adjustment
\$ 5,084	\$ 5,084	0	Risk Management
\$ (29)	\$ (29)	0	UPS Fees
\$ 74	\$ 74	0	Civil Service Fees
\$ 657	\$ 657	0	Office of Technology Services (OTS)
\$ 6,542	\$ 6,542	0	Office of State Procurement
<b>Non-Statewide Major Financial Changes:</b>			
\$ 0	\$ (20,000)	0	Non-recur Louisiana Highway Safety Commission grant which was used for a two-day National Highway Traffic Safety Administration recommended trauma course.
\$ (6,000)	\$ (6,000)	0	Annualization of the mid-year reduction in contracts and expenditures.
\$ (18,769)	\$ (18,769)	0	Strategic reduction in contracts and expenditures.
\$ 2,908	\$ 2,908	0	Replacing computers and laptops to access proper information to route patients to the proper facilities.
\$ 1,576,253	\$ 1,626,153	7	<b>Recommended FY 2017-2018</b>
\$ 0	\$ 0	0	<b>Less Supplementary Recommendation</b>
\$ 1,576,253	\$ 1,626,153	7	<b>Base Executive Budget FY 2017-2018</b>
\$ 1,576,253	\$ 1,626,153	7	<b>Grand Total Recommended</b>

### Professional Services

Amount	Description
<b>Professional Services:</b>	
\$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
<b>\$337,531</b>	<b>Total Professional Services</b>



## Other Charges

Amount	Description
<b>Other Charges:</b>	
\$49,900	Grant provided by the Louisiana Highway Safety Commission (LHSC)
<b>\$49,900</b>	<b>SUB-TOTAL OTHER CHARGES</b>
<b>Interagency Transfers:</b>	
\$23,827	Office of Risk Management
\$51,644	Office of Technology Services (OTS)
\$2,570	Civil Service Fees
\$12,391	Office of State Procurement
\$345	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)
<b>\$129,567</b>	<b>SUB-TOTAL INTERAGENCY TRANSFERS</b>
<b>\$179,467</b>	<b>TOTAL OTHER CHARGES</b>

## Acquisitions and Major Repairs

Amount	Description
\$2,908	Purchase of computers and laptop for Communication Center
<b>\$2,908</b>	<b>TOTAL ACQUISITIONS AND MAJOR REPAIRS</b>

## Performance Information

- (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**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Percentage of hospitals having emergency room services that participate in the LERN Network (LAPAS CODE - 22965)	89%	98%	95%	95%	95%	95%
K	Percentage of EMS Agencies that participate in LERN (LAPAS CODE - 22328)	85%	56%	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%	90%	90%
K	Percentage of EMS agencies that submit data to the State EMS Registry (LAPAS CODE - 25347)	25%	50%	55%	55%	55%	55%

**Louisiana Emergency Response Network Board General Performance Information**

Performance Indicator Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Percentage of Louisiana citizens with access to a Level I, II, or III trauma center within a 60 minute drive time. (LAPAS CODE - New)	Not Available	Not Available	Not Available	Not Available	53%
This is a new performance indicator for FY2017-18 and there is no prior year information available.					
Number of state designated trauma center (LAPAS CODE - New)	Not Available	Not Available	Not Available	Not Available	5%
This is a new performance indicator for FY2017-18 and there is no prior year information available.					
Number of hospitals participating in the STEMI regional report (LAPAS CODE - NEW)	Not Available	Not Available	Not Available	Not Available	11
This is a new performance indicator for FY2017-18 and there is no prior year information available.					



### Louisiana Emergency Response Network Board General Performance Information (Continued)

Performance Indicator Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Number of Primary Stroke Centers in the state (LAPAS CODE - NEW)	Not Available	Not Available	Not Available	Not Available	12
This is a new performance indicator for FY2017-18 and there is no prior year information available.					
Percentage of LDH regions participating with LERN in regional MCI drills. (LAPAS CODE - NEW)	Not Available	Not Available	Not Available	Not Available	4%
This is a new performance indicator for FY2017-18 and there is no prior year information available.					



## 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

	Prior Year Actuals FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Means of Financing:</b>						
State General Fund (Direct)	\$ 12,740,561	\$ 14,504,784	\$ 14,402,977	\$ 14,058,882	\$ 13,667,559	\$ (735,418)
<b>State General Fund by:</b>						
Total Interagency Transfers	2,266,154	2,623,873	2,623,873	2,708,873	2,708,873	85,000
Fees and Self-generated Revenues	763,773	1,621,196	1,621,196	1,536,196	1,536,196	(85,000)
Statutory Dedications	0	0	0	0	0	0
Interim Emergency Board	0	0	0	0	0	0
Federal Funds	0	23,601	23,601	0	0	(23,601)
<b>Total Means of Financing</b>	<b>\$ 15,770,488</b>	<b>\$ 18,773,454</b>	<b>\$ 18,671,647</b>	<b>\$ 18,303,951</b>	<b>\$ 17,912,628</b>	<b>\$ (759,019)</b>
<b>Expenditures &amp; Request:</b>						
Acadiana Area Human Services District	\$ 15,770,488	\$ 18,773,454	\$ 18,671,647	\$ 18,303,951	\$ 17,912,628	\$ (759,019)
<b>Total Expenditures &amp; Request</b>	<b>\$ 15,770,488</b>	<b>\$ 18,773,454</b>	<b>\$ 18,671,647</b>	<b>\$ 18,303,951</b>	<b>\$ 17,912,628</b>	<b>\$ (759,019)</b>
<b>Authorized Full-Time Equivalents:</b>						
Classified	0	0	0	0	0	0
Unclassified	0	0	0	0	0	0
<b>Total FTEs</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>



## 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 FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Means of Financing:</b>						
State General Fund (Direct)	\$ 12,740,561	\$ 14,504,784	\$ 14,402,977	\$ 14,058,882	\$ 13,667,559	\$ (735,418)
<b>State General Fund by:</b>						
Total Interagency Transfers	2,266,154	2,623,873	2,623,873	2,708,873	2,708,873	85,000
Fees and Self-generated Revenues	763,773	1,621,196	1,621,196	1,536,196	1,536,196	(85,000)
Statutory Dedications	0	0	0	0	0	0
Interim Emergency Board	0	0	0	0	0	0
Federal Funds	0	23,601	23,601	0	0	(23,601)
<b>Total Means of Financing</b>	<b>\$ 15,770,488</b>	<b>\$ 18,773,454</b>	<b>\$ 18,671,647</b>	<b>\$ 18,303,951</b>	<b>\$ 17,912,628</b>	<b>\$ (759,019)</b>
<b>Expenditures &amp; Request:</b>						
Personal Services	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
Total Operating Expenses	74,565	176,100	176,100	180,417	176,100	0
Total Professional Services	0	0	0	0	0	0
Total Other Charges	15,695,923	18,597,354	18,495,547	18,123,534	17,714,528	(781,019)
Total Acq & Major Repairs	0	0	0	0	22,000	22,000
Total Unallotted	0	0	0	0	0	0
<b>Total Expenditures &amp; Request</b>	<b>\$ 15,770,488</b>	<b>\$ 18,773,454</b>	<b>\$ 18,671,647</b>	<b>\$ 18,303,951</b>	<b>\$ 17,912,628</b>	<b>\$ (759,019)</b>



## Acadiana Area Human Services District Budget Summary

	Prior Year Actuals FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Authorized Full-Time Equivalents:</b>						
Classified	0	0	0	0	0	0
Unclassified	0	0	0	0	0	0
<b>Total FTEs</b>	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

General Fund	Total Amount	Table of Organization	Description
\$ (101,807)	\$ (101,807)	0	<b>Mid-Year Adjustments (BA-7s):</b>
\$ 14,402,977	\$ 18,671,647	0	<b>Existing Oper Budget as of 12/01/16</b>
<b>Statewide Major Financial Changes:</b>			
(138,877)	(138,877)	0	Related Benefits Base Adjustment
142,682	142,682	0	Retirement Rate Adjustment
117,476	117,476	0	Salary Base Adjustment
(189,630)	(189,630)	0	Attrition Adjustment
(537,112)	(537,112)	0	Non-Recurring Acquisitions & Major Repairs
16,914	16,914	0	Risk Management
(11,090)	(11,090)	0	Legislative Auditor Fees
315	315	0	UPS Fees
(1,461)	(1,461)	0	Civil Service Fees
14,608	14,608	0	Office of Technology Services (OTS)
(5,627)	(5,627)	0	Office of State Procurement
<b>Non-Statewide Major Financial Changes:</b>			
0	(23,601)	0	This adjustment reduces Federal Funds budget authority for Medicare revenue because this revenue source is collected as Fees and Self-generated Revenue.
(165,616)	(165,616)	0	Attrition reduction



## Major Changes from Existing Operating Budget (Continued)

General Fund	Total Amount	Table of Organization	Description
22,000	22,000	0	Replace a high mileage vehicle
\$ 13,667,559	\$ 17,912,628	0	<b>Recommended FY 2017-2018</b>
\$ 0	\$ 0	0	<b>Less Supplementary Recommendation</b>
\$ 13,667,559	\$ 17,912,628	0	<b>Base Executive Budget FY 2017-2018</b>
\$ 13,667,559	\$ 17,912,628	0	<b>Grand Total Recommended</b>

## Professional Services

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

## Other Charges

Amount	Description
	<b>Other Charges:</b>
\$10,650,064	Salaries and related benefits for Other Charges positions.
\$6,571,401	Contractual and operating costs of mental health, addictive disorders and developmental disability services
<b>\$17,221,465</b>	<b>SUB-TOTAL OTHER CHARGES</b>
	<b>Interagency Transfers:</b>
\$37,394	Payments to the Department of Civil Service - Civil Service Fees
\$194,115	Payments to the Division of Administration - Risk Management
\$7,922	Payments to the Division of Administration - Uniform Payroll Services
\$100,088	Payments to the Division of Administration- Technology Services
\$6,728	Payments to the Division of Administration - Office of State Procurement
\$27,876	Payments to the Legislative Auditor
\$118,940	Miscellaneous Commodities and Services
<b>\$493,063</b>	<b>SUB-TOTAL INTERAGENCY TRANSFERS</b>
<b>\$17,714,528</b>	<b>TOTAL OTHER CHARGES</b>

## Acquisitions and Major Repairs

Amount	Description
\$22,000	Replacement vehicle
<b>\$22,000</b>	<b>TOTAL ACQUISITIONS AND MAJOR REPAIRS</b>



## 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

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
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%	96%	90%	90%	90%	90%
K	Percentage of clients who indicate they would recommend AAHSD services to family and friends (LAPAS CODE - 25058)	90%	98%	90%	90%	90%	90%



## Acadiana Area Human Services District General Performance Information

Performance Indicator Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Total number of individuals served in the Acadiana Area Human Services District (LAPAS CODE - 25043)	11,133	81,549	3,583	15,841	14,891
Total number of individuals served by outpatient mental health in Acadiana Area Human Services District (LAPAS CODE - 25044)	6,513	5,043	1,276	4,938	5,772
Total numbers of individuals served by outpatient Addictive Disorders in Acadiana Area Human Services District (LAPAS CODE - 25046)	1,515	1,101	283	1,222	675
Total number of enrollees in prevention programs (LAPAS CODE - 25047)	6,840	75,122	1,531	9,681	8,444

**2. (KEY) Each year through June 30, 2022, AAHSD will work as part of the State's 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**

Level	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Number of adults receiving mental health services in all AAHSD behavioral health clinics (LAPAS CODE - 25052)	5,000	5,954	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	818	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%	96%	90%	90%	90%	90%
K	Percentage of mental health clients who would recommend AAHSD services to others (LAPAS CODE - 25055)	90%	98%	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%	36%	60%	60%	60%	60%
K	Percentage of individuals successfully completing the Primary Inpatient Adult addictive disorders treatment program (LAPAS CODE - 25041)	85%	68%	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

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Number of persons receiving individual and family support services (LAPAS CODE - 25048)	220	230	250	250	240	240
K	Number of persons receiving Flexible Family Funds (LAPAS CODE - 25049)	207	153	207	207	202	202
K	Percentage of eligibility determinations determined to be valid according to Flexible Family Fund provisions (LAPAS CODE - 25050)	95%	100%	95%	95%	95%	95%
K	Number of persons receiving developmental disabilities services (LAPAS CODE - 25051)	2,300	2,286	2,400	2,400	2,350	2,350



## 09-326 — Office of Public Health



### Agency Description

#### **Mission Statement:**

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.

OPH does this through health education: promotion of healthy lifestyles, disease and injury prevention and surveillance, enforcement of regulations that protect the environment, sharing vital information, analysis of health effects on the population, and assurance that essential preventive services are available to uninsured and underserved individuals and families.

#### **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.
- 5) 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 public 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 FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Means of Financing:</b>						
State General Fund (Direct)	\$ 42,546,640	\$ 44,656,251	\$ 43,647,958	\$ 52,540,641	\$ 47,196,802	\$ 3,548,844
<b>State General Fund by:</b>						
Total Interagency Transfers	6,637,216	10,323,249	10,323,249	7,955,554	7,955,554	(2,367,695)
Fees and Self-generated Revenues	27,604,612	38,271,850	38,271,850	41,309,589	47,923,983	9,652,133
Statutory Dedications	6,140,334	7,040,956	7,040,956	7,040,956	8,040,956	1,000,000
Interim Emergency Board	0	0	0	0	0	0
Federal Funds	243,903,377	274,951,846	278,337,191	276,755,895	276,843,795	(1,493,396)
<b>Total Means of Financing</b>	<b>\$ 326,832,179</b>	<b>\$ 375,244,152</b>	<b>\$ 377,621,204</b>	<b>\$ 385,602,635</b>	<b>\$ 387,961,090</b>	<b>\$ 10,339,886</b>
<b>Expenditures &amp; Request:</b>						
Public Health Services	\$ 326,832,179	\$ 375,244,152	\$ 377,621,204	\$ 385,602,635	\$ 387,961,090	\$ 10,339,886
<b>Total Expenditures &amp; Request</b>	<b>\$ 326,832,179</b>	<b>\$ 375,244,152</b>	<b>\$ 377,621,204</b>	<b>\$ 385,602,635</b>	<b>\$ 387,961,090</b>	<b>\$ 10,339,886</b>
<b>Authorized Full-Time Equivalents:</b>						
Classified	1,151	1,190	1,190	1,190	1,182	(8)
Unclassified	14	14	14	14	14	0
<b>Total FTEs</b>	<b>1,165</b>	<b>1,204</b>	<b>1,204</b>	<b>1,204</b>	<b>1,196</b>	<b>(8)</b>



## 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. 701ß501, 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 ß Section 511(b), Medicaid Targeted Case Management 42 U.S.C. 701 ß 1905(a)(19), ß 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 ß 219; Louisiana Children Code Art. 609A; Abortion Alternatives R.S.40.1299.35í 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; ß 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. ß300aa-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; ßß4901-5903 /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 FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Means of Financing:</b>						
State General Fund (Direct)	\$ 42,546,640	\$ 44,656,251	\$ 43,647,958	\$ 52,540,641	\$ 47,196,802	\$ 3,548,844
<b>State General Fund by:</b>						
Total Interagency Transfers	6,637,216	10,323,249	10,323,249	7,955,554	7,955,554	(2,367,695)
Fees and Self-generated Revenues	27,604,612	38,271,850	38,271,850	41,309,589	47,923,983	9,652,133
Statutory Dedications	6,140,334	7,040,956	7,040,956	7,040,956	8,040,956	1,000,000
Interim Emergency Board	0	0	0	0	0	0
Federal Funds	243,903,377	274,951,846	278,337,191	276,755,895	276,843,795	(1,493,396)
<b>Total Means of Financing</b>	<b>\$ 326,832,179</b>	<b>\$ 375,244,152</b>	<b>\$ 377,621,204</b>	<b>\$ 385,602,635</b>	<b>\$ 387,961,090</b>	<b>\$ 10,339,886</b>
<b>Expenditures &amp; Request:</b>						
Personal Services	\$ 103,180,505	\$ 108,269,218	\$ 108,473,420	\$ 111,815,057	\$ 112,404,437	\$ 3,931,017
Total Operating Expenses	24,992,751	27,014,608	27,647,265	29,340,488	28,984,355	1,337,090
Total Professional Services	23,593,369	33,773,702	34,003,085	34,965,801	36,338,923	2,335,838
Total Other Charges	173,541,495	204,339,721	205,020,651	209,426,989	209,457,187	4,436,536
Total Acq & Major Repairs	1,524,059	1,846,903	2,476,783	54,300	776,188	(1,700,595)
Total Unallotted	0	0	0	0	0	0
<b>Total Expenditures &amp; Request</b>	<b>\$ 326,832,179</b>	<b>\$ 375,244,152</b>	<b>\$ 377,621,204</b>	<b>\$ 385,602,635</b>	<b>\$ 387,961,090</b>	<b>\$ 10,339,886</b>
<b>Authorized Full-Time Equivalents:</b>						
Classified	1,151	1,190	1,190	1,190	1,182	(8)
Unclassified	14	14	14	14	14	0
<b>Total FTEs</b>	<b>1,165</b>	<b>1,204</b>	<b>1,204</b>	<b>1,204</b>	<b>1,196</b>	<b>(8)</b>

## 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	Prior Year Actuals FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
Telecommunications for the Deaf Fund	\$ 0	\$ 0	\$ 0	\$ 0	\$ 1,000,000	\$ 1,000,000
Vital Records Conversion Fund	39,403	155,404	155,404	155,404	155,404	0
Emergency Medical Technician Fund	9,001	9,000	9,000	9,000	9,000	0
Oyster Sanitation Fund	55,292	55,292	55,292	55,292	55,292	0
Louisiana Fund	6,036,638	6,821,260	6,821,260	6,821,260	6,821,260	0

### Major Changes from Existing Operating Budget

General Fund	Total Amount	Table of Organization	Description
\$ (1,008,293)	\$ 2,377,052	0	<b>Mid-Year Adjustments (BA-7s):</b>
\$ 43,647,958	\$ 377,621,204	1,204	<b>Existing Oper Budget as of 12/01/16</b>
<b>Statewide Major Financial Changes:</b>			
1,502,010	2,309,702	0	Related Benefits Base Adjustment
1,014,356	1,352,475	0	Retirement Rate Adjustment
203,644	1,621,673	0	Salary Base Adjustment
(1,680,329)	(2,250,105)	0	Attrition Adjustment
0	570,994	0	Acquisitions & Major Repairs
(9,868)	(1,846,903)	0	Non-Recurring Acquisitions & Major Repairs
44,550	44,550	0	Risk Management
(673,316)	(673,316)	0	Rent in State-Owned Buildings
(6,685)	(6,685)	0	Maintenance in State-Owned Buildings
3,595	3,595	0	Capitol Park Security
28,197	28,197	0	Capitol Police
2,536	2,536	0	UPS Fees
3,695	3,695	0	Civil Service Fees
185	185	0	State Treasury Fees
37,272	37,272	0	Office of Technology Services (OTS)



## Major Changes from Existing Operating Budget (Continued)

General Fund	Total Amount	Table of Organization	Description
(4,426)	(4,426)	0	Administrative Law Judges
57,750	57,750	0	Office of State Procurement
<b>Non-Statewide Major Financial Changes:</b>			
0	4,736,735	0	Annualization of Act 605 of the 2016 Regular Legislative Session that increases Fees and Self-generated Revenues for the Safe Drinking Water program. Funding for FY17 was only allocated for half a year, because Act 605 is not implemented until January 1, 2017. This adjustment will provide for a full year of funding for the 40 sanitarian positions approved by Act 605.
0	2,899,154	0	Increase Federal budget authority for the Bioterrorism grant which provides funding for disaster related preparedness activities.
611,502	611,502	0	This adjustment provides funding for the increased cost of a drug called Factor, used to treat Hemophilia, which OPH is mandated to provide to Department of Corrections inmates. In 2014 the OPH's costs for the drug was \$432,307, compared to \$1,111,502 in 2016. OPH currently has \$500,000 budgeted to this program, but due to the continued increased costs, the agency exceeded this budget by \$611,502 in 2016. This drug is not Medicaid reimbursable so it is funded with 100% State General Fund.
227,500	0	0	This means of finance swap replaces Federal Funds with State General Fund for the Emergency Medical Staff contract with Response Systems Inc., which provides necessary staffing during emergency response events. This grant has been reduced and is no longer available to the Office of Public Health.
1,951,631	(1,033,714)	0	The Office of Public Health received a Federal Grant in FY17 for Zika related mitigation and prevention activities. Most of this grant is not anticipated to be available in FY18. The Office of Public Health is requesting State General Fund to backfill a portion of these Federal Funds to continue essential activities to help mitigate the spread of Zika. Louisiana has been listed as high risk for the spread of Zika, especially since the types of mosquitos known for carrying Zika have a presence in Louisiana.
0	639,975	0	Increase of Interagency Transfers budget authority for anticipated costs associated with Severe Combined Immunodeficiency (SCID) screening, which is a Medicaid reimbursable test to be added to the Newborn Screening panel.
0	2,386,793	4	Transfer the Louisiana Commission for the Deaf and all of its functions and positions from the Office of the Secretary to the Office of Public Health.
1,386,793	0	0	Means of financing substitution replacing Telecommunications for the Deaf Fund with State General Fund (Direct)
(82,827)	(82,827)	0	Annualization of Mid-year cuts which include contract eliminations and expenditure reductions
(367,034)	(367,034)	(12)	Closure of East Baton Rouge Parish Health Unit
(734,066)	(734,066)	0	Elimination of technology enhancement to improve customer service in the processing of building permits.
32,179	32,179	0	Replacement of a high mileage vehicle
\$ 47,196,802	\$ 387,961,090	1,196	<b>Recommended FY 2017-2018</b>
\$ 0	\$ 0	0	<b>Less Supplementary Recommendation</b>
\$ 47,196,802	\$ 387,961,090	1,196	<b>Base Executive Budget FY 2017-2018</b>
\$ 47,196,802	\$ 387,961,090	1,196	<b>Grand Total Recommended</b>



## Professional Services

Amount	Description
<b>Professional Services:</b>	
\$126,250	Dental Director services for the Oral Health Program to assess the oral health status of third grade children in Louisiana; provide guidance for the school based health dental sealant program.
\$81,920	Engineering & Architectural services for Operations and Support Services and Engineering Services.
\$3,123,400	Medical & Dental Services for (but not limited to): Family Planning, TB, Maternity/STD, Preventive, WIC, Ophthalmology, Urology, Pediatrics etc. with private and institutional contractors.
\$31,186,324	Other professional services for (but not limited to): Hospital Coordinator, Interpreters, Immunization, Injury Prevention Coordinators, Infant Monitoring Reduction Initiative Program, Nurse Family Partnership program, Student Loan Repayment Program, Commercial Body Art and Tanning Facility Inspections, Statewide Breastfeeding Promotion, Special Agents for Burial Transit Permits, Plumbing variance and appeals, Training, Facility Inspections, Coordination of pesticide-related health complaint Investigation Services, Infant Coordinated Care and Follow-up services.
\$1,632,563	Teen Outreach Program to prevent Teen Pregnancy.
\$40,000	Legal services for public water system loans.
\$148,466	Toxic Disease Investigation, GIS development, adult blood lead, and general Environmental Epi Services for the Environmental Epidemiology and Toxicology Section.
<b>\$36,338,923</b>	<b>TOTAL PROFESSIONAL SERVICES</b>

## Other Charges

Amount	Description
<b>Other Charges:</b>	
\$22,192,652	Flow through contracts for AIDS Drug Assistance Program (ADAP).
\$198,212	Contracts to provide services to the Office of Public Health to strengthen current infrastructure.
\$47,000	Provision of foreign language interpretation through language line services.
\$533,444	EMS Examination and Oversight Services.
\$9,946,769	Maternal & Child Health services for primary care, counseling, referral and social services for pregnant adolescents and adults; contracts for Nurse Family Partnership Nurse statewide to serve at risk populations.
\$82,600,000	WIC services for issuance of WIC food vouchers statewide.
\$9,677,400	Contracts with various providers statewide to provide WIC services to eligible clients, nutrition education, contracts for WIC financial assistance services and WIC outreach services; provide WIC PEER counselors and transportation services to eligible WIC participants.
\$717,535	Contracts for ongoing enhancements to the WIC PHAME system; contract for feasibility study for Electronic Benefits Transfers (EBT).
\$1,627,991	Contracts to monitor a 24-hr, 7 days a week helpline; WIC breastfeeding Project.
\$4,788,495	Contract to distribute statewide Food for Families, Food for Seniors and the Commodity Supplemental Food Program.
\$1,535,311	Children's Special Health Services statewide for provision of hearing, vision, dental and orthodontist services; Physician Services for high risk pediatric patients statewide.
\$316,354	Family Planning Clinical Services; Sterilization Vouchers; Medicaid collections for Family Planning services; Family Planning Medical Director .
\$54,479	Tuberculosis Medical Services.
\$185,177	Provide outreach and screening services for Syphilis Elimination efforts.
\$30,000	Medicaid Billing for Immunization services statewide.
\$183,796	Medicaid Billing for Genetic Disease services statewide.
\$800,000	Moving costs associated with the relocation of the OPH Laboratory from Metairie to Baton Rouge.



## Other Charges (Continued)

Amount	Description
\$472,961	Contract services for the upgrading of the Infectious Disease Reporting System (IDRS); lab data reporting of infectious diseases for the Infectious Disease Epidemiology Program.
\$18,937,195	HIV/AIDS education, outreach, and prevention services.
\$20,000	Contract to provide pathology consultations to the Office of Public Health Laboratory as required by federal laboratory regulations.
\$907,430	Contract to sustain and build capacity for volunteer recruitment in advance of and during emergencies and disasters both natural and man-made disasters.
\$533,346	Contracts to assist rural hospitals throughout the state.
\$2,776,882	Support initiatives for tobacco cessation, treatment of chronic diseases, support for rural community hospitals and health centers statewide.
\$743,909	Contracts to be determined by the OPH Assistant Secretary through the Preventive Health Block Grant.
\$1,080,000	Contract to provide emergency response for controlling the presence of Naegleria Fowler (Amoeba) in Louisiana public water systems.
\$20,000	Contracts for onsite technical assistance and training to public water systems under violation and/or administrative order.
\$412,912	Contracts with the LSU Health Sciences Centers to provide specialized Sickle Cell patient care.
\$30,000	Moving costs associated with the relocation of medical records and equipment for Delgado Clinic.
\$7,000	Moving costs associated with moving to new health units across OPH.
\$130,977	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 for The Beach Monitoring Program.
\$190,000	Contracts to provide consulting services to help make decisions to better leverage the Drinking Water Revolving Loan Fund Program; develop marketing materials for the Drinking Water Revolving Loan Program.
\$20,828	University of Louisiana at Monroe
\$277,000	ULL Lafayette for IT services for the Env Epi Public Health Tracking System
\$35,000	University of New Orleans to hire student labor to assist the WIC Program
\$68,670	LSU Coastal Studies Institute to prepare updated digital imagery for Louisiana Coastal Area
\$22,619,173	Contracts with various providers to support program services and grant deliverable to all programs statewide within the Office of Public Health.
<b>\$184,717,898</b>	<b>SUB-TOTAL OTHER CHARGES</b>
	<b>Interagency Transfers:</b>
\$439,168	Civil Service Fees
\$6,435	Treasurer's Office
\$41,961	Comprehensive Public Training Program (DOA)
\$68,939	Uniform Payroll System (UPS)
\$639,632	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.
\$114,994	Dept. of Public Safety - Capitol Area Police
\$153,052	Capitol Park Security
\$1,234,244	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)
\$3,825,720	Office of Technology Services (OTS)
\$1,288,756	Capital Area Human Services Authority for Nurse Family Partnership Services



### Other Charges (Continued)

Amount	Description
\$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
\$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
\$18,081	Telecommunication for the Deaf
\$3,959,059	Services to be provided for OPH programs
<b>\$24,739,289</b>	<b>SUB-TOTAL INTERAGENCY TRANSFERS</b>
<b>\$209,457,187</b>	<b>TOTAL OTHER CHARGES</b>

### Acquisitions and Major Repairs

Amount	Description
\$38,000	Acquisitions associated with Zika mitigation and prevention.
\$135,015	Acquisitions associated with annualization of Act 605- Safe Drinking Water program.
\$16,300	Replacement of obsolete and outdated office equipment for the OPH lab and parish health units.
\$554,694	Replacement and purchase of new electronic equipment used in supporting WIC, Engineering, and HIV/STD activities.
\$32,179	Replacement Vehicle
<b>\$776,188</b>	<b>TOTAL ACQUISITIONS AND MAJOR REPAIRS</b>

### 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, 2019.**

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

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
S	Percentage of walk-in customers served within 30 minutes (LAPAS CODE - 2547)	90%	93%	85%	85%	88%	88%
S	Percentage of emergency document service requests filled within 24 hours (LAPAS CODE - 2549)	98%	99%	98%	98%	98%	98%
S	Percent of mail requests filled within two weeks (LAPAS CODE - 2548)	90%	90%	90%	90%	90%	90%

### Public Health Services General Performance Information

Performance Indicator Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Birth record intake (LAPAS CODE - 11227)	63,506	62,630	65,499	65,287	66,713
Death record intake (LAPAS CODE - 11229)	43,745	48,374	44,043	44,159	42,008
Marriage record intake (LAPAS CODE - 11231)	32,723	29,039	33,163	32,387	35,302
Divorce record intake (LAPAS CODE - 11232)	15,723	15,825	15,332	16,088	13,921
Abortion record intake (LAPAS CODE - 11234)	8,583	9,710	11,450	9,364	10,733
Fetal death record intake (LAPAS CODE - 11235)	414	405	498	435	359
Total number of birth, death, fetal death, marriage, divorce, abortion and still birth certificates accepted (LAPAS CODE - 11236)	164,694	165,578	169,487	167,720	169,036
Total number of birth, death, fetal death, marriage, divorce, abortion and still birth certificates sold (LAPAS CODE - 20430)	511,395	532,981	495,879	527,190	525,392



**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, 2019.**

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**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
S	Percent increase of EMS workforce in Louisiana (LAPAS CODE - 24154)	1.0%	12.0%	0.5%	0.5%	1.0%	1.0%
S	Number of EMS personnel newly certified (LAPAS CODE - 24155)	3,500	3,577	3,500	3,500	3,500	3,500
The number of EMS personnel newly certified demonstrates the actual number of licenses issued.							
S	Number of EMS personnel re-certified (LAPAS CODE - 24156)	5,500	8,932	5,500	5,500	5,500	5,500
S	Total number of EMS Workforce (LAPAS CODE - 24157)	20,000	21,252	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 Louisiana's 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, 2019.**

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

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
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, 2019.

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**

Level	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Number of Maternal, Infant & Early Childhood home visits, including Nurse-Family Partnership (NFP) and Parents as Teachers (PAT) (LAPAS CODE - 20139)	38,000	42,445	38,000	38,000	38,000	38,000

K	Number of students with access to School Based Health Center services (LAPAS CODE - 24162)	62,000	71,635	62,500	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 discrepancy 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.

S	Percentage of patients receiving a preventive health visit at least once in the last measurement year. (LAPAS CODE - NEW)	10%	17%	10%	10%	10%	10%
---	---------------------------------------------------------------------------------------------------------------------------	-----	-----	-----	-----	-----	-----

Last measurement year is defined as August to June.

**Public Health Services General Performance Information**

Performance Indicator Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Percent of infants born to mothers beginning prenatal care in the first trimester (LAPAS CODE - 13749)	88.00%	74.00%	71.00%	69.00%	70.00%
Percentage of children with special health care needs receiving care in a Medical Home (LAPAS CODE - 24164)	40%	40%	40%	42%	42%
Number of Adolescent School-Based Health Centers (LAPAS CODE - 2368)	65	64	62	62	63



**Public Health Services General Performance Information (Continued)**

Performance Indicator Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Average cost per visit to Adolescent School-Based Health Centers (LAPAS CODE - 10053)	\$ 61.00	\$ 58.00	\$ 59.00	\$ 67.00	\$ 67.00
Number of continuous quality improvement visits to school-based health centers (LAPAS CODE - 25628)	Not Applicable	Not Applicable	0	9	11
Number of students who received a comprehensive well visit at the SBHC (LAPAS CODE - NEW)	Not Available	Not Available	Not Available	9,321	8,176
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.					

**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, 2019.**

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

Explanatory Note: Not Applicable



**Performance Indicators**

Level	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
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%	73%	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.
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).

**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, 2019.**

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.



## Performance Indicators

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Number of monthly WIC participants (LAPAS CODE - 2384)	130,000	125,539	134,000	134,000	128,000	128,000
S	Number of monthly Commodity Supplemental Food Program participants (LAPAS CODE - 24168)	65,015	57,723	63,165	63,165	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.						
S	Percentage of postpartum women enrolled in WIC who breastfeed (LAPAS CODE - 25608)	20%	21%	23%	23%	25%	25%

## Public Health Services General Performance Information

Performance Indicator Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Percentage of WIC eligible clients served (LAPAS CODE - 10857)	63.90%	53.00%	54.00%	63.00%	61.00%
Number of WIC vendor fraud investigations (LAPAS CODE - 10858)	204.00	34.00	45.00	21.00	

**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, 2019.**

Children's Budget Link: Maternal and Child Health activities are linked via the Childrens Cabinet and funded under the Childrenís 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**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Percentage of TB infected contacts who complete treatment (LAPAS CODE - 24170)	72%	86%	72%	72%	72%	72%
S	Percentage of culture confirmed cases completing treatment within 12 months (LAPAS CODE - 25609)	90%	79%	90%	90%	90%	90%
S	Percentage of pulmonary culture confirmed cases converting sputum culture within two months (LAPAS CODE - 25610)	60%	53%	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)	86%	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%	58%	56%	56%	60%	60%
S	Percentage of primary and secondary syphilis cases treated within 14 days of specimen collection (LAPAS CODE - 25612)	77%	82%	80%	80%	83%	83%



## Public Health Services General Performance Information

Performance Indicator Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Number of HIV tests conducted at publicly-funded sites  (LAPAS CODE - 2325)	97,760	94,860	87,141	101,542	104,336
Number of primary and secondary syphilis cases (LAPAS CODE - 25613)	391	360	492	548	729
Number of people living with HIV in Louisiana (LAPAS CODE - 25614)	17,601	18,710	19,640	20,274	19,365
Number of new HIV diagnoses in Louisiana (LAPAS CODE - 25615)	1,146	1,200	1,469	1,312	1,195

**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, 2019.**

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

Explanatory Note: Not Applicable

**Performance Indicators**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
S	Completed case classifications within 10 working days of date of report (LAPAS CODE - 25616)	85%	97%	85%	85%	96%	96%
S	Issue recommendations within five working days on selected conditions. (LAPAS CODE - 25617)	80%	99%	80%	80%	96%	96%
S	Conduct follow up on recommendations on all outbreak investigations within 15 working days (LAPAS CODE - 25618)	90%	100%	85%	85%	97%	97%

**9. (KEY) Personal Health Services, through its Laboratory Services 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, 2019.**

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)

Explanatory Note: Not Applicable



## Performance Indicators

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Number of lab tests/ specimens tested (LAPAS CODE - 17387)	200,000	234,715	200,000	200,000	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%	95%	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, 2019.**

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**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
S	Number of health consults and technical assists (LAPAS CODE - 24198)	1,000	529	1,000	1,000	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	8,645	9,000	9,000	9,000	9,000

**Public Health Services General Performance Information**

Performance Indicator Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Number of Indoor Air Quality phone consults (LAPAS CODE - 24196)	653	722	554	706	686

**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, 2019.**

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 Indicators

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
S	Number of providers that have received education through conferences or BPCRH trainings (LAPAS CODE - 25619)	375	616	500	500	500	500
	<p>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.</p>						
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	114	114	110	110
K	Number of healthcare providers receiving practice management technical assistance regarding revenue sustainability. (LAPAS CODE - 24271)	375	282	120	120	120	120



**Public Health Services General Performance Information**

Performance Indicator Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Number of critical access hospitals (CAHs) reporting HCAHPS data (LAPAS CODE - 25860)	Not Applicable	9	9	27	13
Number of parishes and/ or areas designated as Health Professional Shortage Areas by the Federal government (LAPAS CODE - 12218)	464	444	446	342	63
Number of patient visits to Adolescent School-Based Health Centers (LAPAS CODE - 13744)	127,703	130,327	114,359	105,014	114,184
Percentage of underserved communities receiving technical assistance in developing rural health clinics (LAPAS CODE - NEW)	Not Available	Not Available	Not Available	Not Available	20%
Percentage of underserved communities receiving technical assistance in developing federally qualified health centers (LAPAS CODE - NEW)	Not Available	Not Available	Not Available	Not Available	20%

**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, 2019.**

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 Indicators**

L e v e l	Performance Indicator Name	Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Indicator Values			
				Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
S	Number of registered callers to the Louisiana Tobacco Quitline (LAPAS CODE - 25624)	2,500	2,547	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.
- 2) The program does not directly impact the percentage of school districts reporting implementation of comprehensive school wellness policies (physical activity, nutrition, tobacco-free campus)

**Public Health Services General Performance Information**

Performance Indicator Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Percentage of school districts reporting implementation of 100% tobacco-free school policies (LAPAS CODE - 24272)	69%	75%	86%	0	12%
Percentage of worksites implementing worksite wellness programs (LAPAS CODE - 25626)	Not Available	Not Available	29%	29%	35%
1. This was a new performance indicator in FY 2014-15 and no prior year data is available.					
Percentage of school districts reporting implementation of comprehensive school wellness policies (physical activity, nutrition, tobacco-free campus) (LAPAS CODE - 25625)	69%	75%	86%	0	5%
2. 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, 2019.**

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**

Level	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
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%	95%	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**

Performance Indicator Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Number of existing sewage systems inspections (LAPAS CODE - 24209)	11,930	15,947	11,285	12,062	10,421
Number of food, water, sewage-borne illnesses reported (LAPAS CODE - 24211)	Not Applicable	2	12	11	7
Percentage of establishments/facilities in compliance (LAPAS CODE - 11886)	90%	90%	94%	94%	95%
Number of inspections of permitted establishments/facilities (LAPAS CODE - 2485)	109,212	100,726	113,556	111,860	115,292



**Public Health Services General Performance Information (Continued)**

Performance Indicator Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Food related complaints received from the public (LAPAS CODE - 11215)	1,568	1,527	620	620	253
Number of sewage system applications taken (LAPAS CODE - 24210)	11,314	10,887	10,173	9,973	8,965
Number of plans reviewed (LAPAS CODE - 24205)	13,033	12,725	12,408	12,826	11,689
Number of samples taken (LAPAS CODE - 24206)	20,720	19,093	15,006	8,754	8,505
In FY's 2012, 2013 and 2014, samples taken included British Petroleum (BP) samples. FY15 are normal sample activity data.					
Number of new sewage systems installed (LAPAS CODE - 24208)	9,889	8,673	8,441	12,976	12,392
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, 2019.**

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

Explanatory Note: Not Applicable

**Performance Indicators**

Level	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
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)	87%	84%	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%	91%	98%	98%	98%	98%
S	Percentage of water and sewer plans reviewed within 60 days of receipt of submittal (LAPAS CODE - 25629)	95%	97%	95%	95%	95%	95%
S	Number of Louisiana public water systems provided financial and technical assistance (LAPAS CODE - 24523)	300	810	300	300	300	300

**Public Health Services General Performance Information**

Performance Indicator Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Total number of CEU hours received by certified public water and community sewage operators from LDH approved training courses (LAPAS CODE - 24522)	94,509	85,774	104,806	95,669	106,274
Percentage of Surface Water Public Water Systems monitored annually for chemical compliance (LAPAS CODE - 24520)	99%	100%	100%	95%	100%



**Public Health Services General Performance Information (Continued)**

Performance Indicator Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Number of low-interest loans made (LAPAS CODE - 24524)	7	4	10	13	4
Number of public water systems provided technical assistance (LAPAS CODE - 24525)	341	583	449	274	430
Number of water systems provided capacity development technical assistance (LAPAS CODE - 24526)	173	164	209	274	380
Number of public water systems in Louisiana (LAPAS CODE - 11225)	1,382	1,377	1,354	1,354	1,346



## 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 378 civil (258 ELMHS and 120 CLSH), and 367 forensic (ELMHS) hospital beds. 173 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 Policy (8108-93), the Sexual Harassment Policy (8143-02) and the Equal Employment Opportunity Policy (8116-77). In addition, flexibility in work schedules assists both women and their families.

LDH Policy 8116-77 EEO/EEO Complaints Policy provides for equal opportunities for the recruitment, employment, training and promotion of all employees based solely on merit factors and prohibits the use of gender and other on-merit factors. OBH follows the LDH Family and Medical Leave Policy (#8108-93) to provide up to 12 workweeks of "job-protected" paid or unpaid leave during any 12-month period to eligible employees (regardless of gender and other non-merit factors) for certain specified family and medical reasons.

OBH follows the LDH Leave for Classified Employees Policy (#8107-76) 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

	Prior Year Actuals FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Means of Financing:</b>						
State General Fund (Direct)	\$ 105,032,482	\$ 109,162,408	\$ 109,207,641	\$ 110,629,412	\$ 104,047,126	\$ (5,160,515)
<b>State General Fund by:</b>						
Total Interagency Transfers	62,338,577	60,708,763	67,281,523	74,610,341	70,698,565	3,417,042
Fees and Self-generated Revenues	1,268,648	758,434	758,434	505,709	505,309	(253,125)
Statutory Dedications	4,696,749	6,090,298	6,090,298	6,090,298	5,190,487	(899,811)
Interim Emergency Board	0	0	0	0	0	0



## Office of Behavioral Health Budget Summary

	Prior Year Actuals FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
Federal Funds	27,760,017	45,806,159	46,819,388	45,714,563	45,714,563	(1,104,825)
<b>Total Means of Financing</b>	<b>\$ 201,096,473</b>	<b>\$ 222,526,062</b>	<b>\$ 230,157,284</b>	<b>\$ 237,550,323</b>	<b>\$ 226,156,050</b>	<b>\$ (4,001,234)</b>
<b>Expenditures &amp; Request:</b>						
Administration and Support	\$ 5,597,806	\$ 7,431,230	\$ 7,431,230	\$ 7,190,115	\$ 6,909,512	\$ (521,718)
Behavioral Health Community	53,021,242	67,906,067	68,919,296	68,283,949	62,249,089	(6,670,207)
Hospital Based Treatment	142,475,205	147,168,765	153,786,758	162,055,859	156,977,449	3,190,691
Auxiliary Account	2,220	20,000	20,000	20,400	20,000	0
<b>Total Expenditures &amp; Request</b>	<b>\$ 201,096,473</b>	<b>\$ 222,526,062</b>	<b>\$ 230,157,284</b>	<b>\$ 237,550,323</b>	<b>\$ 226,156,050</b>	<b>\$ (4,001,234)</b>
<b>Authorized Full-Time Equivalents:</b>						
Classified	1,318	1,318	1,407	1,408	1,395	(12)
Unclassified	12	12	15	15	15	0
<b>Total FTEs</b>	<b>1,330</b>	<b>1,330</b>	<b>1,422</b>	<b>1,423</b>	<b>1,410</b>	<b>(12)</b>



## 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, two 24/7 psychiatric hospitals, and business plan development, as well as 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, 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 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 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 CSoC; and auditing and reviewing for accuracy of encounter data submission.

- Medical Oversight** - The Medical Director serves as the lead on critical incidents and contributes to the prevention of such incidents, providing professional expertise, credibility, and authority to unfortunate and very public situations that can be difficult to manage from a public relations and political point of view. The Medical Director provides clinical credibility for OBH to a wide range of internal and external audiences, constituencies, customers, regulatory bodies, and other state agencies, and is also one of the essential troubleshooters, being available to be dispatched to manage difficult and complex situations which arise in the course of administering OBH. The Medical Director is often called upon to testify at court and legislative hearings.
- 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. The BI-A Section strives to transform data into actionable information for purposes of behavioral health service planning, quality improvement, and performance accountability. The OBH BI-A 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 FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Means of Financing:</b>						
State General Fund (Direct)	\$ 5,302,627	\$ 5,659,449	\$ 5,659,449	\$ 5,418,334	\$ 5,155,727	\$ (503,722)
<b>State General Fund by:</b>						
Total Interagency Transfers	0	0	0	0	0	0
Fees and Self-generated Revenues	0	0	0	0	0	0
Statutory Dedications	72,286	72,285	72,285	72,285	54,289	(17,996)
Interim Emergency Board	0	0	0	0	0	0
Federal Funds	222,893	1,699,496	1,699,496	1,699,496	1,699,496	0
<b>Total Means of Financing</b>	<b>\$ 5,597,806</b>	<b>\$ 7,431,230</b>	<b>\$ 7,431,230</b>	<b>\$ 7,190,115</b>	<b>\$ 6,909,512</b>	<b>\$ (521,718)</b>
<b>Expenditures &amp; Request:</b>						
Personal Services	\$ 4,649,542	\$ 5,894,954	\$ 5,894,954	\$ 5,656,463	\$ 5,446,965	\$ (447,989)
Total Operating Expenses	66,424	119,271	119,271	121,895	94,271	(25,000)
Total Professional Services	25,939	147,918	147,918	151,173	147,918	0
Total Other Charges	855,901	1,269,087	1,269,087	1,260,584	1,220,358	(48,729)
Total Acq & Major Repairs	0	0	0	0	0	0
Total Unallotted	0	0	0	0	0	0
<b>Total Expenditures &amp; Request</b>	<b>\$ 5,597,806</b>	<b>\$ 7,431,230</b>	<b>\$ 7,431,230</b>	<b>\$ 7,190,115</b>	<b>\$ 6,909,512</b>	<b>\$ (521,718)</b>



## Administration and Support Budget Summary

	Prior Year Actuals FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Authorized Full-Time Equivalents:</b>						
Classified	39	39	39	40	40	1
Unclassified	2	2	2	2	2	0
<b>Total FTEs</b>	<b>41</b>	<b>41</b>	<b>41</b>	<b>42</b>	<b>42</b>	<b>1</b>

## 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 FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
Tobacco Tax Health Care Fund	\$ 72,286	\$ 72,285	\$ 72,285	\$ 72,285	\$ 54,289	\$ (17,996)

## Major Changes from Existing Operating Budget

General Fund	Total Amount	Table of Organization	Description
\$ 0	\$ 0	0	<b>Mid-Year Adjustments (BA-7s):</b>
\$ 5,659,449	\$ 7,431,230	41	<b>Existing Oper Budget as of 12/01/16</b>
<b>Statewide Major Financial Changes:</b>			
\$ (154,935)	\$ (154,935)	0	Related Benefits Base Adjustment
\$ 62,209	\$ 62,209	0	Retirement Rate Adjustment
\$ (189,448)	\$ (189,448)	0	Salary Base Adjustment
\$ (165,815)	\$ (165,815)	0	Attrition Adjustment
\$ (10,635)	\$ (10,635)	0	Rent in State-Owned Buildings
\$ 1,698	\$ 1,698	0	UPS Fees
\$ (1,428)	\$ (1,428)	0	Civil Service Fees
\$ (20,368)	\$ (20,368)	0	Office of State Procurement
<b>Non-Statewide Major Financial Changes:</b>			
\$ 0	\$ 0	1	Transferring 1 NON T.O. FTE position to 1 T.O. FTE permanent position to perform administrative functions and duties in support of management and staff within the OBH Emergency Preparedness section.
\$ 0	\$ (17,996)	0	Reduce funds to match projected available Statutory Dedication for the Tobacco Tax Health fund.



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

General Fund	Total Amount	Table of Organization	Description
\$ (25,000)	\$ (25,000)	0	Annualization of the FY17 Mid-Year Reduction to eliminate contracts, reduce expenditures, and Executive Order JBE 16-03 savings.
\$ 5,155,727	\$ 6,909,512	42	<b>Recommended FY 2017-2018</b>
\$ 0	\$ 0	0	<b>Less Supplementary Recommendation</b>
\$ 5,155,727	\$ 6,909,512	42	<b>Base Executive Budget FY 2017-2018</b>
\$ 5,155,727	\$ 6,909,512	42	<b>Grand Total Recommended</b>

### Professional Services

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

### Other Charges

Amount	Description
	<b>Other Charges:</b>
\$19,746	Other operating services, supplies and in-state travel
<b>\$19,746</b>	<b>SUB-TOTAL OTHER CHARGES</b>
	<b>Interagency Transfers:</b>
\$255,208	Payments to the Division of Administration - Office of Risk Management
\$139,236	Payments to the Department of Civil Service - Civil Service Fees
\$9,269	Payments to the Division of Administration - Uniform Payroll Services
\$244,338	Payments to the Division of Administration - Office of State Procurement
\$385,882	Rental of Bienville Building
\$166,679	Transfers to other State Agencies
<b>\$1,200,612</b>	<b>SUB-TOTAL INTERAGENCY TRANSFERS</b>
<b>\$1,220,358</b>	<b>TOTAL OTHER CHARGES</b>

### 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

L e v e l	Performance Indicator Name	Performance Indicator Values					Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018		
K	Percentage of clean claims processed within 15 days of receipt (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	Not Applicable		90%	90%
	This is a new performance indicator for FY 2017-2018. It did not appear under Act 10 of 2015 or Act 11 of 2016 and has no performance standards for FY 2015-2016 or FY 2016-2017. No data were collected or reported for this indicator in FY 2015-2016. The agency did not provide an estimate of the year end FY 2016-2017 performance level for this indicator.							
K	Percentage of clean claims processed within 30 days of receipt (LAPAS CODE - 25230)	95%	95%	95%	95%		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 Indicators**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Percentage of providers who meet urban/rural access standards for specialized behavioral health services (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	90%	90%
<p>This is a new performance indicator for FY 2017-2018. It did not appear under Act 10 of 2015 or Act 11 of 2016 and has no performance standards for FY 2015-2016 or FY 2016-2017. No data were collected or reported for this indicator in FY 2015-2016. The agency did not provide an estimate of the year end FY 2016-2017 performance level for this indicator.</p>							
S	Percentage of providers who meet overall emergent appointment availability standards (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	90%	90%
<p>This is a new performance indicator for FY 2017-2018. It did not appear under Act 10 of 2015 or Act 11 of 2016 and has no performance standards for FY 2015-2016 or FY 2016-2017. No data were collected or reported for this indicator in FY 2015-2016. The agency did not provide an estimate of the year end FY 2016-2017 performance level for this indicator.</p>							
K	Percentage of providers who meet overall urgent appointment availability standards (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	90.00%	90.00%
<p>This is a new performance indicator for FY 2017-2018. It did not appear under Act 10 of 2015 or Act 11 of 2016 and has no performance standards for FY 2015-2016 or FY 2016-2017. No data were collected or reported for this indicator in FY 2015-2016. The agency did not provide an estimate of the year end FY 2016-2017 performance level for this indicator.</p>							
K	Percentage of providers who meet overall routine appointment availability standards (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	70%	70%
<p>This is a new performance indicator for FY 2017-2018. It did not appear under Act 10 of 2015 or Act 11 of 2016 and has no performance standards for FY 2015-2016 or FY 2016-2017. No data were collected or reported for this indicator in FY 2015-2016. The agency did not provide an estimate of the year end FY 2016-2017 performance level for this indicator.</p>							
K	Percentage of overall member satisfaction (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	83%	83%
<p>This is a new performance indicator for FY 2017-2018. It did not appear under Act 10 of 2015 or Act 11 of 2016 and has no performance standards for FY 2015-2016 or FY 2016-2017. No data were collected or reported for this indicator in FY 2015-2016. The agency did not provide an estimate of the year end FY 2016-2017 performance level for this indicator.</p>							
K	Percentage of overall provider satisfaction (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	80%	80%
<p>This is a new performance indicator for FY 2017-2018. It did not appear under Act 10 of 2015 or Act 11 of 2016 and has no performance standards for FY 2015-2016 or FY 2016-2017. No data were collected or reported for this indicator in FY 2015-2016. The agency did not provide an estimate of the year end FY 2016-2017 performance level for this indicator.</p>							



**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 Indicators**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Percent of initial quality reports accepted (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	90.0%	90.0%
This is a new performance indicator for FY 2017-2018. It did not appear under Act 10 of 2015 or Act 11 of 2016 and has no performance standards for FY 2015-2016 or FY 2016-2017. No data were collected or reported for this indicator in FY 2015-2016. The agency did not provide an estimate of the year end FY 2016-2017 performance level for this indicator.							
S	Percent of CMS waiver assurances satisfactorily met (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	90%	90%
This is a new performance indicator for FY 2017-2018. It did not appear under Act 10 of 2015 or Act 11 of 2016 and has no performance standards for FY 2015-2016 or FY 2016-2017. No data were collected or reported for this indicator in FY 2015-2016. The agency did not provide an estimate of the year end FY 2016-2017 performance level for this indicator.							



## 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 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, as well as East Louisiana Mental Health System (ELMHS) Acute Unit.
- **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, most recently the flooding in March and August 2016 that impacted 52 parishes.

- **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.
- **Pharmaceutical Patient Assistance Program (PAP) and Behavioral Health Pharmaceutical Policy** - Shamrock Pharmacy, located on the grounds of Central Louisiana State Hospital, administers the pharmaceutical Patient Assistance Program (PAP). In addition to day-to-day hospital activities, the Shamrock Pharmacy currently dispenses medications to four out of ten LGEs including: AAHSD, CLSHD, NLHSD, and NEDHSA, although it has a statewide service area.
- **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 CSoC waiver 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 of OBH stated goals and objectives, policies and procedures, in addition to OBH Mental Health and Addiction Block Grants, strategic and operational plans. These monitoring processes are required efforts and utilized to ensure compliance with Federal Substance Abuse Prevention and Treatment Block Grant 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 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 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Means of Financing:</b>						
State General Fund (Direct)	\$ 19,118,892	\$ 15,850,030	\$ 15,850,030	\$ 16,126,140	\$ 10,973,095	\$ (4,876,935)
<b>State General Fund by:</b>						
Total Interagency Transfers	2,982,979	3,212,235	3,212,235	3,109,903	3,109,903	(102,332)
Fees and Self-generated Revenues	0	0	0	0	0	0
Statutory Dedications	4,624,463	6,018,013	6,018,013	6,018,013	5,136,198	(881,815)
Interim Emergency Board	0	0	0	0	0	0
Federal Funds	26,294,908	42,825,789	43,839,018	43,029,893	43,029,893	(809,125)
<b>Total Means of Financing</b>	<b>\$ 53,021,242</b>	<b>\$ 67,906,067</b>	<b>\$ 68,919,296</b>	<b>\$ 68,283,949</b>	<b>\$ 62,249,089</b>	<b>\$ (6,670,207)</b>
<b>Expenditures &amp; Request:</b>						
Personal Services	\$ 7,265,825	\$ 8,943,822	\$ 8,943,822	\$ 8,802,782	\$ 7,450,151	\$ (1,493,671)
Total Operating Expenses	576,463	987,787	987,787	1,017,719	775,747	(212,040)
Total Professional Services	219	97,076	97,076	99,212	57,276	(39,800)
Total Other Charges	45,178,735	57,877,382	58,890,611	58,364,236	53,965,915	(4,924,696)
Total Acq & Major Repairs	0	0	0	0	0	0
Total Unallotted	0	0	0	0	0	0
<b>Total Expenditures &amp; Request</b>	<b>\$ 53,021,242</b>	<b>\$ 67,906,067</b>	<b>\$ 68,919,296</b>	<b>\$ 68,283,949</b>	<b>\$ 62,249,089</b>	<b>\$ (6,670,207)</b>
<b>Authorized Full-Time Equivalents:</b>						
Classified	41	41	41	41	28	(13)
Unclassified	0	0	0	0	0	0
<b>Total FTEs</b>	<b>41</b>	<b>41</b>	<b>41</b>	<b>41</b>	<b>28</b>	<b>(13)</b>



## 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 FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
Tobacco Tax Health Care Fund	\$ 2,477,561	\$ 3,434,140	\$ 3,434,140	\$ 3,434,140	\$ 2,552,325	\$ (881,815)
Compulsive and Problem Gaming Fund	2,146,902	2,583,873	2,583,873	2,583,873	2,583,873	0

## Major Changes from Existing Operating Budget

General Fund	Total Amount	Table of Organization	Description
\$ 0	\$ 1,013,229	0	Mid-Year Adjustments (BA-7s):
\$ 15,850,030	\$ 68,919,296	41	Existing Oper Budget as of 12/01/16
<b>Statewide Major Financial Changes:</b>			
(1,009)	(1,009)	0	Related Benefits Base Adjustment
81,714	81,714	0	Retirement Rate Adjustment
88,283	88,283	0	Salary Base Adjustment
(146,353)	(146,353)	0	Attrition Adjustment
(1,168)	(1,168)	0	Civil Service Fees
18,286	18,286	0	Office of Technology Services (OTS)
<b>Non-Statewide Major Financial Changes:</b>			
0	(102,332)	0	Non-recurs funds appropriated in the Department of Education and transferred to the Office of Behavioral Health for Coordinated System of Care staffing in order to align revenue with actual expenditures.



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

General Fund	Total Amount	Table of Organization	Description
0	(809,125)	0	Non-recurs Federal budget authority for the Louisiana State Adolescent Treatment Enhancement and Dissemination Program (SAT-ED) grant that expires during FY 2017.
(49,000)	(49,000)	0	Transfer \$49,000 to Northeast Delta Human Services Authority (NDHSA) for the Extra Mile Region VIII contract, which offers opportunities for volunteers to work in community-based settings that provide support services to individuals with behavioral health needs.
0	(881,815)	0	Reduce funds to match projected available Statutory Dedication for the Tobacco Tax Health fund.
(239,800)	(239,800)	0	Annualization of the FY17 Mid-Year Reduction to eliminate contracts, reduce expenditures, and Executive Order JBE 16-03 savings.
(2,199,616)	(2,199,616)	0	Annualization of the FY17 Mid-Year Reduction to eliminate Care Authorization Management Activity.
(2,227,084)	(2,227,084)	(4)	Annualization of the FY17 Mid-Year Reduction to eliminate Access to Recovery Activity.
(224,486)	(224,486)	(9)	Eliminating Shamrock Pharmacy and 9 T.O. in the Behavioral Health Community program.
23,298	23,298	0	Replacing computers and laptops to continue to assist with patient care and staff productivity.
\$ 10,973,095	\$ 62,249,089	28	<b>Recommended FY 2017-2018</b>
\$ 0	\$ 0	0	<b>Less Supplementary Recommendation</b>
\$ 10,973,095	\$ 62,249,089	28	<b>Base Executive Budget FY 2017-2018</b>
\$ 10,973,095	\$ 62,249,089	28	<b>Grand Total Recommended</b>

### Professional Services

Amount	Description
\$57,276	Legal, accounting and other professional services
<b>\$57,276</b>	<b>TOTAL PROFESSIONAL SERVICES</b>

### Other Charges

Amount	Description
<b>Other Charges:</b>	
\$307,500	Salaries and related benefits for Other Charges positions
\$12,355,441	Specialized community, family, educational, residential, crisis, respite and other contracted services
\$167,600	Preadmission Screening and Resident Review(PASRR)
\$1,109,842	Outpatient children's psychiatry and psychology services in Midtown New Orleans
\$1,146,225	Prevention Services



## Other Charges (Continued)

Amount	Description
<b>\$15,086,608</b>	<b>SUB-TOTAL OTHER CHARGES</b>
<b>Interagency Transfers:</b>	
\$112,403	Payments to the Department of Civil Service - Civil Service Fees
\$1,810,568	Payments to the Division of Administration - Technology Services
\$290,109	Payments to the Division of Administration - Risk Management
\$4,924	Payments to the Division of Administration - Uniform Payroll Services
\$1,948,358	Jefferson Parish Human Services Authority
\$4,662,639	Florida Parishes Human Services Authority
\$5,139,821	Capital Area Human Services District
\$5,044,007	Metropolitan Human Services District
\$4,162,200	South Central Louisiana Human Services Authority
\$3,178,865	Northeast Delta Human Services Authority
\$2,580,217	Acadiana Area Human Services District
\$1,882,210	Imperial Calcasieu Human Services Authority
\$3,802,322	Central Louisiana Human Services District
\$4,260,664	Northwest Louisiana Human Services District
<b>\$38,879,307</b>	<b>SUB-TOTAL INTERAGENCY TRANSFERS</b>
<b>\$53,965,915</b>	<b>TOTAL OTHER CHARGES</b>

## Acquisitions and Major Repairs

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

## Performance Information

- (SUPPORTING) Through FY 2022, care authorizations will be provided for uninsured individuals through the Louisiana Care Authorization Management System (LaCAMS) for all LGEs, and will result in at least a 90% provider satisfaction response for quality and outcomes.**

Children's Budget Link: Child/adolescent services are linked to the goals of the Children's Cabinet.

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

**Performance Indicators**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
S	Percentage of LGEs that participate in LaCAMS (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	90%	90%	90%
This is a new performance indicator for FY 2017-2018. It did not appear under Act 10 of 2015 or Act 11 of 2016 and has no performance standards for FY 2015-2016 or FY 2016-2017. The FY 2016-2017 Existing Performance Standard is what the agency expects to achieve in this fiscal year.							
K	Provider satisfaction rating (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	90%	90%	90%
This is a new performance indicator for FY 2017-2018. It did not appear under Act 10 of 2015 or Act 11 of 2016 and has no performance standards for FY 2015-2016 or FY 2016-2017. The FY 2016-2017 Existing Performance Standard is what the agency expects to achieve in this fiscal year.							
S	Incoming call wait time (in minutes) (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	3	3	3
This is a new performance indicator for FY 2017-2018. It did not appear under Act 10 of 2015 or Act 11 of 2016 and has no performance standards for FY 2015-2016 or FY 2016-2017. The FY 2016-2017 Existing Performance Standard is what the agency expects to achieve in this fiscal year.							

**Behavioral Health Community General Performance Information**

Performance Indicator Name	Performance Indicator Values					
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016	
Number of initial care authorizations (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	3,770	
This is a new performance indicator for FY 2017-2018; data was only collected for FY 2015-2016.						

**2. (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 Indicators

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
S	Number of individuals with positive tobacco screenings (LAPAS CODE - NEW)	Not Applicable	6,266	Not Applicable	9,400	9,494	9,494
This is a new performance indicator for FY 2017-2018. It did not appear under Act 10 of 2015 or Act 11 of 2016. The FY 2016-2017 Existing Performance Standard is what the agency expects to achieve in this fiscal year.							
S	Number of individuals screened for tobacco use (LAPAS CODE - NEW)	Not Applicable	26,317	Not Applicable	39,476	39,871	39,871
This is a new performance indicator for FY 2017-2018. It did not appear under Act 10 of 2015 or Act 11 of 2016. The FY 2016-2017 Existing Performance Standard is what the agency expects to achieve in this fiscal year.							
K	Number of individuals with positive tobacco screenings referred to tobacco cessation services (LAPAS CODE - NEW)	Not Applicable	1,772	Not Applicable	2,658	2,685	2,685
This is a new performance indicator for FY 2017-2018. It did not appear under Act 10 of 2015 or Act 11 of 2016. The FY 2016-2017 Existing Performance Standard is what the agency expects to achieve in this fiscal year.							

### 3. (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 l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
S	Number of individuals enrolled in MAT, including those with Substance Use Disorders (LAPAS CODE - NEW)	Not Applicable	3,998	Not Applicable	Not Applicable	4,055	4,055
<p>This is a new performance indicator for FY 2017-2018. It did not appear under Act 10 of 2015 or Act 11 of 2016. The agency did not provide an estimate of the year end FY 2016-2017 performance level for this indicator.</p>							
K	Percent increase in number of individuals enrolled in MAT, including those with Substance Use Disorders (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	1.43%	1.43%
<p>This is a new performance indicator for FY 2017-2018. It did not appear under Act 10 of 2015 or Act 11 of 2016 and has no performance standards for FY 2015-2016 or FY 2016-2017. No data were collected or reported for this indicator in FY 2015-2016. The agency did not provide an estimate of the year end FY 2016-2017 performance level for this indicator.</p>							

**4. (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

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Percent increase in the number of individuals served for problem gambling. (LAPAS CODE - NEW)	Not Applicable	-10%	Not Applicable	1%	1%	1%
This is a new performance indicator for FY 2017-2018. It did not appear under Act 10 of 2015 or Act 11 of 2016 and has no performance standards for FY 2015-2016 or FY 2016-2017. The FY 2016-2017 Existing Performance Standard is what the agency expects to achieve in this fiscal year.							
K	Percent of individuals discharged from gambling treatment reporting a decrease in the frequency of gambling activities (LAPAS CODE - NEW)	Not Applicable	89%	Not Applicable	89%	89%	89%
This is a new performance indicator for FY 2017-2018. It did not appear under Act 10 of 2015 or Act 11 of 2016 and has no performance standards for FY 2015-2016 or FY 2016-2017. The FY 2016-2017 Existing Performance Standard is what the agency expects to achieve in this fiscal year.							
K	Percent of individuals discharged from gambling treatment that completed treatment. (LAPAS CODE - NEW)	Not Applicable	49%	Not Applicable	65%	65%	65%
This is a new performance indicator for FY 2017-2018. It did not appear under Act 10 of 2015 or Act 11 of 2016 and has no performance standards for FY 2015-2016 or FY 2016-2017. The FY 2016-2017 Existing Performance Standard is what the agency expects to achieve in this fiscal year.							

## Behavioral Health Community General Performance Information

Performance Indicator Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Number of individuals screened for gambling within LGEs and Healthy Louisiana plans (LAPAS CODE - NEW)	23,421	12,550	10,606	10,038	31,917
LGE data does not include JPHSA. Data from the Healthy Louisiana plan is from December 1, 2015 to June 30, 2016 only.					
Number of individuals with positive problem gambling screenings within LGEs and Healthy Louisiana plans (LAPAS CODE - NEW)	1,147	756	538	610	1,284
LGE data does not include JPHSA. Data from the Healthy Louisiana plan is from December 1, 2015 to June 30, 2016 only.					
Number of individuals admitted for gambling treatment (inpatient and outpatient) (LAPAS CODE - NEW)	394	357	358	392	342
Total number of intake calls to the Gamblers Helpline (LAPAS CODE - NEW)	1,485	1,132	1,206	1,107	1,086



**5. (KEY) By FY 2022, 90% of individuals who receive Access to Recovery (ATR) services will report positive satisfaction regarding access, quality, and overall program services**

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 l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Percentage of members reporting positive satisfaction with access to ATR services (LAPAS CODE - 25239)	90%	90%	90%	90%	90%	90%
K	Percentage of members reporting positive satisfaction with quality of ATR services (LAPAS CODE - 25240)	90%	90%	90%	90%	90%	90%
K	Percentage of clients reporting positive satisfaction with ATR services (LAPAS CODE - 25242)	90%	90%	90%	90%	90%	90%

**Behavioral Health Community General Performance Information**

Performance Indicator Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Number of individuals served through ATR (LAPAS CODE - NEW)	2,031	2,158	2,061	1,872	2,270

**6. (KEY) By FY 2022, the statewide average compliance of Access to Recovery (ATR) providers will be 80%.**

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 l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Annual statewide average of composite provider ratings of ATR providers (LAPAS CODE - NEW)	Not Applicable	84%	Not Applicable	80%	84%	84%
This is a new performance indicator for FY 2017-2018. It did not appear under Act 10 of 2015 or Act 11 of 2016 and has no performance standards for FY 2015-2016 or FY 2016-2017. The FY 2016-2017 Existing Performance Standard is what the agency expects to achieve in this fiscal year.							

### 7. (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

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
S	Number of individuals served by evidence-based prevention programs (LAPAS CODE - 25245)	44,900	44,900	44,900	44,900	44,900	44,900
K	Percentage of individuals served, ages 12-17, who reported that they used alcohol, tobacco and marijuana during the last 30 days (LAPAS CODE - 25246)	20%	20%	20%	20%	20%	20%

### 8. (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**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Annual tobacco non-compliance rate (LAPAS CODE - 25247)	10%	18%	10%	10%	10%	10%

**9. (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**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
S	Number of suicide prevention trainings (LAPAS CODE - NEW)	Not Applicable	21	Not Applicable	20	20	20
This is a new performance indicator for FY 2017-2018. It did not appear under Act 10 of 2015 or Act 11 of 2016 and has no performance standards for FY 2015-2016 or FY 2016-2017. The FY 2016-2017 Existing Performance Standard is what the agency expects to achieve in this fiscal year.							
S	Number of individuals who participated in suicide prevention trainings (LAPAS CODE - NEW)	Not Applicable	528	Not Applicable	500	500	500
This is a new performance indicator for FY 2017-2018. It did not appear under Act 10 of 2015 or Act 11 of 2016 and has no performance standards for FY 2015-2016 or FY 2016-2017. The FY 2016-2017 Existing Performance Standard is what the agency expects to achieve in this fiscal year.							



## 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:

The Hospital-Based Treatment Program will promote recovery through the efficient use of evidence-informed care and successful transition to community-based services.

- 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 FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Means of Financing:</b>						
State General Fund (Direct)	\$ 80,610,963	\$ 87,652,929	\$ 87,698,162	\$ 89,084,938	\$ 87,918,304	\$ 220,142
<b>State General Fund by:</b>						
Total Interagency Transfers	59,355,598	57,496,528	64,069,288	71,500,438	67,588,662	3,519,374
Fees and Self-generated Revenues	1,266,428	738,434	738,434	485,309	485,309	(253,125)
Statutory Dedications	0	0	0	0	0	0
Interim Emergency Board	0	0	0	0	0	0
Federal Funds	1,242,216	1,280,874	1,280,874	985,174	985,174	(295,700)
<b>Total Means of Financing</b>	<b>\$ 142,475,205</b>	<b>\$ 147,168,765</b>	<b>\$ 153,786,758</b>	<b>\$ 162,055,859</b>	<b>\$ 156,977,449</b>	<b>\$ 3,190,691</b>
<b>Expenditures &amp; Request:</b>						
Personal Services	\$ 99,165,908	\$ 100,278,171	\$ 105,661,668	\$ 108,115,289	\$ 109,173,356	\$ 3,511,688
Total Operating Expenses	16,638,821	18,317,207	18,864,532	22,663,254	21,021,783	2,157,251
Total Professional Services	5,669,032	5,993,432	6,740,082	8,002,694	7,321,999	581,917
Total Other Charges	20,627,768	21,799,627	21,315,148	21,694,518	19,172,012	(2,143,136)
Total Acq & Major Repairs	373,676	780,328	1,205,328	1,580,104	288,299	(917,029)
Total Unallotted	0	0	0	0	0	0
<b>Total Expenditures &amp; Request</b>	<b>\$ 142,475,205</b>	<b>\$ 147,168,765</b>	<b>\$ 153,786,758</b>	<b>\$ 162,055,859</b>	<b>\$ 156,977,449</b>	<b>\$ 3,190,691</b>
<b>Authorized Full-Time Equivalents:</b>						
Classified	1,238	1,238	1,327	1,327	1,327	0
Unclassified	10	10	13	13	13	0
<b>Total FTEs</b>	<b>1,248</b>	<b>1,248</b>	<b>1,340</b>	<b>1,340</b>	<b>1,340</b>	<b>0</b>



## 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.

## Major Changes from Existing Operating Budget

General Fund	Total Amount	Table of Organization	Description
\$ 45,233	\$ 6,617,993	76	<b>Mid-Year Adjustments (BA-7s):</b>
\$ 87,698,162	\$ 153,786,758	1,340	<b>Existing Oper Budget as of 12/01/16</b>
<b>Statewide Major Financial Changes:</b>			
62,879	87,623	0	Civil Service Training Series
2,075,686	2,075,686	0	Related Benefits Base Adjustment
702,625	1,097,851	0	Retirement Rate Adjustment
2,266,449	3,597,520	0	Salary Base Adjustment
(2,953,048)	(4,614,137)	0	Attrition Adjustment
0	171,333	0	Acquisitions & Major Repairs
(484,861)	(1,205,328)	0	Non-Recurring Acquisitions & Major Repairs
(19,596)	(19,596)	0	Non-recurring Carryforwards
(1,730,438)	(1,730,438)	0	Risk Management
(1,731)	(1,731)	0	Civil Service Fees
<b>Non-Statewide Major Financial Changes:</b>			
0	2,975,426	0	Annualize FY17 ELMHS system redesign and expansion that was approved by JLCB in August, 2016 to phase in beds beginning in November and throughout FY17.
158,764	387,657	0	Increase food service contract by 11% in FY18 to accommodate normal inflation, equipment needs and increased expectations of the contractor to assure quality and accountability.
(191,733)	(191,733)	0	Reducing medical supplies and other expenditures in OBH Hospital Based Treatment program for the Central Louisiana State Hospital (CLSH).
279,702	443,592	0	Replacing computers and laptops to continue to assist with patient care and staff productivity.

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

General Fund	Total Amount	Table of Organization	Description
55,444	116,966	0	Provides funding for vehicles to assist with patient care and staff productivity.
\$ 87,918,304	\$ 156,977,449	1,340	<b>Recommended FY 2017-2018</b>
\$ 0	\$ 0	0	<b>Less Supplementary Recommendation</b>
\$ 87,918,304	\$ 156,977,449	1,340	<b>Base Executive Budget FY 2017-2018</b>
\$ 87,918,304	\$ 156,977,449	1,340	<b>Grand Total Recommended</b>

### Professional Services

Amount	Description
\$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)
\$1,208,066	Other Professional services /consultants
<b>\$7,321,999</b>	<b>TOTAL PROFESSIONAL SERVICES</b>

### Other Charges

Amount	Description
	<b>Other Charges:</b>
\$14,400	Provide vocational rehabilitation for Community Home Residents at ELMHS through job coaching
\$4,539,186	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
\$445,817	Patient Rehabilitation Labor Program
\$1,351,050	Other professional services
<b>\$6,388,472</b>	<b>SUB-TOTAL OTHER CHARGES</b>
	<b>Interagency Transfers:</b>
\$168,612	Department of Civil Service - Civil Service Fees
\$10,322,546	Division of Administration - Risk Management
\$74,675	Division of Administration - Uniform Payroll Services
\$41,800	Dixon Correctional Institute - Inmate Labor



## Other Charges (Continued)

Amount	Description
\$1,524,938	Villa Feliciana - Medical services
\$90,000	Villa Feliciana - Water
\$458,000	Telephone and Telegraph
\$102,969	Payments to other State Agencies
<b>\$12,783,540</b>	<b>SUB-TOTAL INTERAGENCY TRANSFERS</b>
<b>\$19,172,012</b>	<b>TOTAL OTHER CHARGES</b>

## Acquisitions and Major Repairs

Amount	Description
\$128,299	Purchase of new equipment at the inpatient hospitals
\$160,000	Repairs to existing equipment at the inpatient hospitals
<b>\$288,299</b>	<b>TOTAL ACQUISITIONS AND MAJOR REPAIRS</b>

## 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

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Percentage of adults discharged from a state hospital and readmitted within 30 days of discharge (Statewide) (LAPAS CODE - 24230)	1.5%	1.5%	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**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
S	Ratio of inpatient restraint hours to inpatient days (Statewide) (LAPAS CODE - 25249)	0.4	0.4	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 l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Percentage of compliance with Federal consent decree (LAPAS CODE - 25250)	90%	90%	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.

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

Performance Indicator Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Inpatient Care (Adults - East Louisiana Mental Health System-Civil, including Acute) - Total adults served (LAPAS CODE - 11761)	332	325	341	356	283
Inpatient Care (Adults - East Louisiana Mental Health System-Civil, including Acute) - Average daily census (LAPAS CODE - 11763)	134	169	215	217	217
Inpatient Care (Adults - East Louisiana Mental Health System-Civil, including Acute) - Average length of stay in days (LAPAS CODE - 11766)	104	251	73	78	92
Inpatient Care (Adults - East Louisiana Mental Health System-Civil, including Acute) - Average daily occupancy rate (LAPAS CODE - 11764)	99%	99%	99%	100%	100%
Inpatient Care (Adults - Feliciana Forensic Facility) - Total adults served (LAPAS CODE - NEW)	1,479	1,521	1,624	1,548	1,438
Inpatient Care (Adults - Feliciana Forensic Facility) - Average daily census (LAPAS CODE - 11769)	254	257	258	258	258
Inpatient Care (Adults - Feliciana Forensic Facility) - Average length of stay in days (LAPAS CODE - 11772)	767	263	675	675	598
Inpatient Care (Adults - Feliciana Forensic Facility) - Average daily occupancy rate (LAPAS CODE - 11770)	100%	100%	101%	100%	100%
Inpatient Care (East Louisiana Mental Health System-Civil, including Acute and Feliciana Forensic Facility) - Total adults served (LAPAS CODE - NEW)	179	126	156	144	176
Inpatient Care (East Louisiana Mental Health System-Civil, including Acute and Feliciana Forensic Facility) - Average daily census (LAPAS CODE - 17030)	194	139	473	475	475
Inpatient Care (East Louisiana Mental Health System-Civil, including Acute and Feliciana Forensic Facility) - Average length of stay in days (LAPAS CODE - NEW)	372	401	417	399	424
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%	100%
Inpatient Care (Adults-Central Louisiana State Hospital) - Total adults served (LAPAS CODE - 11467)	101	162	175	174	178

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.



**Hospital Based Treatment General Performance Information (Continued)**

Performance Indicator Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Inpatient Care (Adults-Central Louisiana State Hospital) - Average daily census (LAPAS CODE - 10124)	61.36	89.90	112.51	118.24	119.11
<p>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.</p>					
Inpatient Care (Adults-Central Louisiana State Hospital) - Average length of stay in days (LAPAS CODE - 10123)	223.36	202.50	234.70	248.00	245.00
Inpatient Care (Adults-Central Louisiana State Hospital) - Average daily occupancy rate (LAPAS CODE - 10125)	102.27%	87.20%	93.80%	98.50%	99.30%
<p>The average daily occupancy rate for Adult inpatient care at Central LA State Hospital is 87.20 for fiscal year 2013. When compared to the prior year's average daily occupancy rate of 102.27, the result is a negative (14.74%) variance. The average daily occupancy rate decreased due to immediately adding 60 beds in October, 2013 at Central LA State Hospital. The average daily census gradually increased from 59 in September, 2012 to 108 at June 30, 2013.</p>					



## 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 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Means of Financing:</b>						
State General Fund (Direct)	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
<b>State General Fund by:</b>						
Total Interagency Transfers	0	0	0	0	0	0
Fees and Self-generated Revenues	2,220	20,000	20,000	20,400	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
<b>Total Means of Financing</b>	<b>\$ 2,220</b>	<b>\$ 20,000</b>	<b>\$ 20,000</b>	<b>\$ 20,400</b>	<b>\$ 20,000</b>	<b>\$ 0</b>
<b>Expenditures &amp; Request:</b>						
Personal Services	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
Total Operating Expenses	0	0	0	0	0	0
Total Professional Services	0	0	0	400	0	0
Total Other Charges	2,220	20,000	20,000	20,000	20,000	0
Total Acq & Major Repairs	0	0	0	0	0	0
Total Unallotted	0	0	0	0	0	0
<b>Total Expenditures &amp; Request</b>	<b>\$ 2,220</b>	<b>\$ 20,000</b>	<b>\$ 20,000</b>	<b>\$ 20,400</b>	<b>\$ 20,000</b>	<b>\$ 0</b>
<b>Authorized Full-Time Equivalents:</b>						
Classified	0	0	0	0	0	0
Unclassified	0	0	0	0	0	0
<b>Total FTEs</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>



## 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

General Fund	Total Amount	Table of Organization	Description
\$ 0	\$ 0	16	Mid-Year Adjustments (BA-7s):
\$ 0	\$ 20,000	0	Existing Oper Budget as of 12/01/16
<b>Statewide Major Financial Changes:</b>			
<b>Non-Statewide Major Financial Changes:</b>			
\$ 0	\$ 20,000	0	Recommended FY 2017-2018
\$ 0	\$ 0	0	Less Supplementary Recommendation
\$ 0	\$ 20,000	0	Base Executive Budget FY 2017-2018
\$ 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 with information and access to the appropriate services and supports.
- II. To provide a person-centered planning process consistent with a needs-based assessment that both 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:

- Administration Program- This program includes the administration and management, education and training, policy and procedures, accounting and budget control, quality and emergency preparedness functions.
- Community-Based Program- This program includes Central Office Community Program Development and Management (waiver services, clinical services and regional level oversight), EarlySteps, and Money Follows the Person.
- Pinecrest Supports and Services Center- This program includes the Pinecrest Facility, the statewide Resource Centers activity, and the ongoing costs for closed facilities.
- Auxiliary Account

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 FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Means of Financing:</b>						
State General Fund (Direct)	\$ 23,735,077	\$ 25,623,579	\$ 25,623,579	\$ 23,726,262	\$ 22,811,888	\$ (2,811,691)
<b>State General Fund by:</b>						
Total Interagency Transfers	107,940,460	108,228,569	108,701,649	113,586,303	117,755,422	9,053,773
Fees and Self-generated Revenues	373,746	4,042,994	4,042,994	4,044,229	4,054,471	11,477
Statutory Dedications	0	0	0	0	0	0
Interim Emergency Board	0	0	0	0	0	0
Federal Funds	1,279,384	6,412,027	6,412,027	6,755,851	6,755,851	343,824
<b>Total Means of Financing</b>	<b>\$ 133,328,667</b>	<b>\$ 144,307,169</b>	<b>\$ 144,780,249</b>	<b>\$ 148,112,645</b>	<b>\$ 151,377,632</b>	<b>\$ 6,597,383</b>
<b>Expenditures &amp; Request:</b>						
Administration and General Support	\$ 2,467,927	\$ 2,919,754	\$ 2,919,754	\$ 2,872,908	\$ 3,064,920	\$ 145,166
Community-Based	22,955,376	28,112,984	28,112,984	25,423,685	24,623,026	(3,489,958)



## Office for Citizens w/Developmental Disabilities Budget Summary

	Prior Year Actuals FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
Pinecrest Supports and Services Center	107,531,618	112,708,316	113,181,396	119,248,702	123,112,094	9,930,698
Auxiliary Account	373,746	566,115	566,115	567,350	577,592	11,477
<b>Total Expenditures &amp; Request</b>	<b>\$ 133,328,667</b>	<b>\$ 144,307,169</b>	<b>\$ 144,780,249</b>	<b>\$ 148,112,645</b>	<b>\$ 151,377,632</b>	<b>\$ 6,597,383</b>
<b>Authorized Full-Time Equivalents:</b>						
Classified	1,317	1,347	1,371	1,452	1,452	81
Unclassified	35	35	35	35	35	0
<b>Total FTEs</b>	<b>1,352</b>	<b>1,382</b>	<b>1,406</b>	<b>1,487</b>	<b>1,487</b>	<b>81</b>



## 340\_1000 — Administration and General Support

Program Authorization: R.S. 28:451.1-455.2 and R.S. 28:821-824.

### Program Description

The mission of the Administration Program is to provide effective and responsive leadership in the administration and enhancement of the developmental disabilities services system in order for people with developmental disabilities to receive information, opportunities for choice, and quality services and supports.

The goal of the Administration Program is:

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

The Administration and General Support Program includes one activity:

- The Administrative Services activity provides the required system design, policy direction, and operational oversight to the developmental disabilities system in a manner that promotes person-centeredness approach, evidence-based practices, accountability, cost-effectiveness, and consumer/ responsiveness.
- The program 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 Administrative Services activity manages the administrative support functions including accounting and budget control, property, travel, communications, and information systems management.
- This activity also provides leadership to the state-operated Pinecrest Supports and Services Center and the statewide resource centers’ functions.

### Administration and General Support Budget Summary

	Prior Year Actuals FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Means of Financing:</b>						
State General Fund (Direct)	\$ 2,467,927	\$ 2,919,754	\$ 2,919,754	\$ 2,872,908	\$ 3,064,920	\$ 145,166
<b>State General Fund by:</b>						
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

	Prior Year Actuals FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Total Means of Financing</b>	\$ 2,467,927	\$ 2,919,754	\$ 2,919,754	\$ 2,872,908	\$ 3,064,920	\$ 145,166
<b>Expenditures &amp; Request:</b>						
Personal Services	\$ 2,022,624	\$ 2,318,150	\$ 2,318,150	\$ 2,274,985	\$ 2,447,746	\$ 129,596
Total Operating Expenses	12,748	64,965	64,965	66,395	54,901	(10,064)
Total Professional Services	432,555	0	0	0	0	0
Total Other Charges	0	536,639	536,639	531,528	562,273	25,634
Total Acq & Major Repairs	0	0	0	0	0	0
Total Unallotted	0	0	0	0	0	0
<b>Total Expenditures &amp; Request</b>	\$ 2,467,927	\$ 2,919,754	\$ 2,919,754	\$ 2,872,908	\$ 3,064,920	\$ 145,166
<b>Authorized Full-Time Equivalents:</b>						
Classified	12	12	12	12	12	0
Unclassified	1	1	1	1	1	0
<b>Total FTEs</b>	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

General Fund	Total Amount	Table of Organization	Description
\$ 0	\$ 0	0	<b>Mid-Year Adjustments (BA-7s):</b>
\$ 2,919,754	\$ 2,919,754	13	<b>Existing Oper Budget as of 12/01/16</b>
<b>Statewide Major Financial Changes:</b>			
183,129	183,129	0	Related Benefits Base Adjustment
28,259	28,259	0	Retirement Rate Adjustment
(81,792)	(81,792)	0	Salary Base Adjustment
(5,938)	(5,938)	0	Rent in State-Owned Buildings
827	827	0	UPS Fees
1,372	1,372	0	Civil Service Fees
29,373	29,373	0	Office of State Procurement
<b>Non-Statewide Major Financial Changes:</b>			



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

General Fund	Total Amount	Table of Organization	Description
(10,064)	(10,064)	0	Annualization of the FY17 Mid-Year Reduction to freeze vacancies, reduce expenditures, and Executive Order JBE 16-03 savings.
\$ 3,064,920	\$ 3,064,920	13	<b>Recommended FY 2017-2018</b>
\$ 0	\$ 0	0	<b>Less Supplementary Recommendation</b>
\$ 3,064,920	\$ 3,064,920	13	<b>Base Executive Budget FY 2017-2018</b>
\$ 3,064,920	\$ 3,064,920	13	<b>Grand Total Recommended</b>

### Professional Services

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

### Other Charges

Amount	Description
	<b>Other Charges</b>
	This program does not have funding for Other Charges.
	<b>Interagency Transfers:</b>
\$27,800	Office of Telecommunications Management (OTM) Fees
\$827	Uniform Payroll System (UPS) Fees
\$23,712	Civil Services (CTP)
\$202,419	Rent in State-Owned Buildings
\$14,600	Maintenance in State-Owned Buildings
\$152,223	Office of State Procurement
\$140,692	Office of Risk Management (ORM)
<b>\$562,273</b>	<b>SUB-TOTAL INTERAGENCY TRANSFERS</b>
<b>\$562,273</b>	<b>TOTAL OTHER CHARGES</b>

### 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

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
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%	90%	90%
K	Percentage of Support Coordinator Supervisors achieving and/or maintaining certification(s) as determined by OCDD (LAPAS CODE - 24644)	85%	85%	85%	85%	85%	85%
S	Percentage of individuals enrolled in EarlySteps Program who receive the scheduled autism screening (LAPAS CODE - 24645)	50%	78%	50%	50%	50%	50%
K	Percentage of budgeted community funding expended (LAPAS CODE - 24647)	98%	103%	98%	98%	98%	98%



**Performance Indicators (Continued)**

Level	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Total number of HCBS and ICF/DD recipients (LAPAS CODE - 25634)	17,060	16,936	17,060	17,060	17,060	17,060
K	Total HCBS and ICF/DD expenditures (LAPAS CODE - 25635)	\$ 896,287,769	\$ 853,290,917	\$ 896,287,769	\$ 896,287,769	\$ 896,287,769	\$ 896,287,769
K	Percentage of recipients of HCBS (LAPAS CODE - 25636)	71%	71%	71%	71%	75%	75%
K	Percentage of recipients of ICF/DD services (LAPAS CODE - 25637)	29%	29%	29%	29%	25%	25%
S	Percentage of expenditures for HCBS (LAPAS CODE - 25638)	54%	55%	54%	54%	60%	60%
S	Percentage of expenditures for ICF/DD services (LAPAS CODE - 25639)	46%	45%	46%	46%	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	0	4	4	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%	100%	85%	85%	85%	85%
S	Percentage of progress toward My Place Louisiana transitions annual benchmark of number of persons transitioned (LAPAS CODE - 25642)	85%	114%	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**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Percentage of months in the designated period that monthly expenditure reports were delivered accurately and timely (LAPAS CODE - 24653)	95%	100%	100%	100%	100%	100%



**Performance Indicators (Continued)**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
S	Percentage of people surveyed reporting an overall satisfaction with services received (LAPAS CODE - 22461)	90%	92%	90%	90%	90%	90%
S	Percentage of people surveyed reporting that they had choice in the services they received (LAPAS CODE - 22462)	90%	84%	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%	100%	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 Administrative Services

GENERAL PERFORMANCE INFORMATION: SOUTHERN STATE COMPARISON	
Percentage of Individuals served in Out-of-Home Residential Placements in 1-6 Bed Settings (June 30, 2013)	
STATE	
Alabama	80.0%
Arkansas	90.0%
Florida	74.0%
Georgia	94.0%
Kentucky	91.0%
<b>Louisiana</b>	<b>57.0%</b>
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.)



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 Administrative Services

GENERAL PERFORMANCE 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
<b>Louisiana</b>	\$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.)



## 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 Program is to both effectively and efficiently implement the 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 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.

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.

The Community-Based Program includes the following activities:

- The Central Office 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 oversight includes, but is 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).
- OCDD Community Program Oversight provides regional level oversight of the delivery of individualized community-based supports and services.
- Early Steps is 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 FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Means of Financing:</b>						
State General Fund (Direct)	\$ 21,175,600	\$ 18,347,088	\$ 18,347,088	\$ 16,496,617	\$ 15,695,958	\$ (2,651,130)
<b>State General Fund by:</b>						
Total Interagency Transfers	500,392	2,996,369	2,996,369	1,813,717	1,813,717	(1,182,652)
Fees and Self-generated Revenues	0	357,500	357,500	357,500	357,500	0
Statutory Dedications	0	0	0	0	0	0
Interim Emergency Board	0	0	0	0	0	0
Federal Funds	1,279,384	6,412,027	6,412,027	6,755,851	6,755,851	343,824
<b>Total Means of Financing</b>	<b>\$ 22,955,376</b>	<b>\$ 28,112,984</b>	<b>\$ 28,112,984</b>	<b>\$ 25,423,685</b>	<b>\$ 24,623,026</b>	<b>\$ (3,489,958)</b>
<b>Expenditures &amp; Request:</b>						
Personal Services	\$ 5,193,759	\$ 5,592,974	\$ 5,592,974	\$ 5,714,596	\$ 6,058,807	\$ 465,833
Total Operating Expenses	113,127	352,255	352,255	360,005	352,255	0
Total Professional Services	3,588,008	3,697,348	3,697,348	3,778,690	3,697,348	0
Total Other Charges	14,048,092	18,470,407	18,470,407	15,548,524	14,492,746	(3,977,661)
Total Acq & Major Repairs	12,390	0	0	21,870	21,870	21,870
Total Unallotted	0	0	0	0	0	0
<b>Total Expenditures &amp; Request</b>	<b>\$ 22,955,376</b>	<b>\$ 28,112,984</b>	<b>\$ 28,112,984</b>	<b>\$ 25,423,685</b>	<b>\$ 24,623,026</b>	<b>\$ (3,489,958)</b>
<b>Authorized Full-Time Equivalents:</b>						
Classified	47	47	47	47	47	0
Unclassified	1	1	1	1	1	0
<b>Total FTEs</b>	<b>48</b>	<b>48</b>	<b>48</b>	<b>48</b>	<b>48</b>	<b>0</b>

## 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

General Fund	Total Amount	Table of Organization	Description
\$ 0	\$ 0	0	<b>Mid-Year Adjustments (BA-7s):</b>
\$ 18,347,088	\$ 28,112,984	48	<b>Existing Oper Budget as of 12/01/16</b>
<b>Statewide Major Financial Changes:</b>			
392,649	392,649	0	Related Benefits Base Adjustment
71,243	71,243	0	Retirement Rate Adjustment
94,592	94,592	0	Salary Base Adjustment
(92,651)	(92,651)	0	Attrition Adjustment
4,118	4,118	0	Civil Service Fees
298	298	0	Office of Technology Services (OTS)
<b>Non-Statewide Major Financial Changes:</b>			
(343,824)	0	0	Means of financing substitution increases Federal Funds and decreases State General Fund (Direct) by the same amount to accommodate Early Steps current Federal Funds grant award for FY17 by the U.S. Department of Education (USDOE), Individuals with Disabilities Education Act, Part C. Both SGF and Federal Funds are based on the annual USDOE grant allocation to the states. This allocation typically fluctuates each year. This allows for the continued provision of services to children ages 0-3 years old.
(1,489,231)	(2,671,883)	0	This adjustment provides for the costs associated with assessments anticipated for those individuals currently on the Request for Services Registry. The costs represent projected assessments to be processed in FY17 for Medicaid-eligible assessments and non-Medicaid eligible assessments.
(250,000)	(250,000)	0	Non-recurs Louisiana Assistive Technology Access Network (LATAN) one-time funding that was added during the 2016 Regular Legislature Session by a Non-OPB amendment. LATAN is an Assistive Technology program that enables individuals with independence in employment, school, and community living.
(1,060,194)	(1,060,194)	0	Restrict enrollment in EarlySteps by eliminating certain established medical conditions from current eligibility criteria.
21,870	21,870	0	Provides funding for replacement desktops, laptops, printers, and IT equipment related to staff productivity.
\$ 15,695,958	\$ 24,623,026	48	<b>Recommended FY 2017-2018</b>
\$ 0	\$ 0	0	<b>Less Supplementary Recommendation</b>
\$ 15,695,958	\$ 24,623,026	48	<b>Base Executive Budget FY 2017-2018</b>
\$ 15,695,958	\$ 24,623,026	48	<b>Grand Total Recommended</b>

## Professional Services

Amount	Description
	<b>Professional Services</b>



## Professional Services (Continued)

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

## Other Charges

Amount	Description
	<b>Other Charges:</b>
\$11,621,368	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.
\$837,077	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.
\$184,215	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.
\$766,804	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.
\$299,513	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.
\$273,600	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.
<b>\$13,982,577</b>	<b>SUB-TOTAL OTHER CHARGES</b>
	<b>Interagency Transfers:</b>
\$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
\$32,746	Civil Services Fees
\$73,526	Office of State Buildings and Grounds
\$8,256	Unemployment Compensation
\$122,703	Office of Technology Services
<b>\$510,169</b>	<b>SUB-TOTAL INTERAGENCY TRANSFERS</b>
<b>\$14,492,746</b>	<b>TOTAL OTHER CHARGES</b>

## Acquisitions and Major Repairs

Amount	Description
	<b>Acquisitions and Major Repairs</b>
\$21,870	Provides funding for replacement desktops, laptops, printers, and IT equipment related to staff productivity.
<b>\$21,870</b>	<b>TOTAL ACQUISITIONS AND MAJOR REPAIRS</b>

## Performance Information

- 1. (KEY) To provide effective and efficient management, delivery, and expansion of waiver and state-funded 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**

Level	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Percentage of funded Residential Options Waiver (ROW) opportunities utilized (LAPAS CODE - 22479)	95%	11%	95%	95%	95%	95%
Filling of ROW slots is subject to development of an RFSR for ROW as well as availability of funding. Development of an RFSR has been delayed due to changing departmental procedures, and no funding was available for ROW slots because of a departmental freeze of waiver slots due to budget constraints in SFY 2014-15.							
K	Percentage of available Supports Waiver (SW) opportunities utilized (LAPAS CODE - 22478)	95%	90%	95%	95%	95%	95%
K	Percentage of available Children's Choice (CC) waiver opportunities utilized (LAPAS CODE - 22476)	95%	86%	95%	95%	95%	95%
K	Percentage of available New Opportunities Waiver (NOW) opportunities utilized (LAPAS CODE - 22477)	95%	96%	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)	5.0%	0.4%	97.0%	97.0%	97.0%	97.0%
S	Number of individuals participating in HCBS Waivers who utilize self-direction (LAPAS CODE - 25036)	330	681	330	330	700	700
S	Number of persons in individual integrated employment (LAPAS CODE - 25035)	Not Applicable	Not Applicable	225	225	225	225
This was a new performance indicator for FY 2015-16. There was no data reported in FY16 as an electronic Plan of Care (POC) system was not available. Currently, OCDD is working with the data contractor to capture accurate employment data.							



### Performance Indicators (Continued)

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Number of years on Request for Services Registry until offered a New Opportunities Waiver (NOW) opportunity (LAPAS CODE - 24648)	8.9	11.9	8.9	8.9	8.9	8.9
K	Number of years on Request for Services Registry until offered a Children's Choice (CC) opportunity (LAPAS CODE - 24649)	8.3	10.0	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	1.5	1.7	1.7	1.7	1.7
K	Number of individuals with developmental disabilities supported through HCBS Waivers (LAPAS CODE - 25034)	11,859	11,772	11,859	11,859	11,859	11,859

### Community-Based General Performance Information

Performance Indicator Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Number of allocated New Opportunities Waiver (NOW) slots (LAPAS CODE - 7964)	8,832	8,832	8,832	8,832	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	2,050	2,188	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**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
		S	Percentage of EarlySteps providers that meet all training requirements (LAPAS CODE - 24662)	90%	100%	100%	100%
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%



## Performance Indicators (Continued)

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
S	Percentage of Individual Family Services Plan implemented within 30 days of parental consent on the Individual Family Services Plan (LAPAS CODE - 24665)	94%	93%	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%	95%	95%
S	Percentage of families reporting that early intervention improved their ability to help their child develop and learn. (LAPAS CODE - NEW)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	95%	95%
New Performance Indicator for FY2017-2018.							



## 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 Program provides for three budget activities: (1) Residential Services, (2) the statewide Resource Centers, and (3) Closed Facilities Cost, to provide for the ongoing costs associated with closed or privatized facilities.

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 that is part of Louisiana's continuum of developmental disability services and implements the state's plans for serving citizens with ID/DD in the least restrictive setting capable of meeting their support needs by referring residents for transition to less restrictive settings when they are deemed by the Interdisciplinary Team to be able to handle and benefit from such transition. The remaining Pinecrest residents will continue to receive services at the Pinecrest center. Following Title XIX (Medicaid) regulations, the center's comprehensive services and supports are administered by direct support, professional, health care, support and administrative staff 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 Resource Centers 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 goals of the Resource Centers are:

- I. To provide a person-centered planning process consistent with a needs-based assessment that focuses on the person's goal and desires and addresses quality of life.
- II. To increase the capacity of the developmental disabilities services system to provide opportunities for people to live, work, and learn in integrated community settings.
- III. 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 Centers activity directs and provides an array of highly specialized, critical community-based services to individuals, families, and providers across the state including crisis triage and diversion, training, consultation, technical assistance to service and caregiver resources in the community (i.e., private support staff agencies, community homes, families, and schools), and direct clinical services for individuals at high risk to meet the behavior, psychiatric, and/or complex medical support needs of persons with disabilities in existing community settings and to avoid more restrictive and costly institutional placement. The activity intends to expand private service and professional capacity and to assist and support the private sector in meeting higher, needed standards of care for individuals with developmental disabilities and complex support needs.

The Closed Facilities Cost activity represents the legacy costs associated with public Intermediate Care Facilities/Developmental Disabilities that have been closed or whose operations have been privatized.

Like the Residential Services activity of the Pinecrest Supports and Services Center Program, these formerly state-operated facilities provided 24-hour personal care, habilitation, developmental, and supportive health services to individuals with developmental disabilities whose primary need is for active treatment services.

Historically, OCDD operated nine such ICF/DD facilities. Three of the original state-operated facilities were privatized through a Cooperative Endeavor Agreement. These three facilities remain open today with two of the operators actively engaging in a downsizing plan. Five of the original facilities have been closed. The closed facilities costs represent the ongoing costs associated with the facilities and mainly include Group Insurance for Retirees, Risk Management costs, personnel costs and costs associated with facility upkeep.

## Pinecrest Supports and Services Center Budget Summary

	Prior Year Actuals FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Means of Financing:</b>						
State General Fund (Direct)	\$ 91,550	\$ 4,356,737	\$ 4,356,737	\$ 4,356,737	\$ 4,051,010	\$ (305,727)
<b>State General Fund by:</b>						
Total Interagency Transfers	107,440,068	105,232,200	105,705,280	111,772,586	115,941,705	10,236,425
Fees and Self-generated Revenues	0	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
<b>Total Means of Financing</b>	<b>\$ 107,531,618</b>	<b>\$ 112,708,316</b>	<b>\$ 113,181,396</b>	<b>\$ 119,248,702</b>	<b>\$ 123,112,094</b>	<b>\$ 9,930,698</b>
<b>Expenditures &amp; Request:</b>						
Personal Services	\$ 83,117,976	\$ 83,685,330	\$ 85,095,739	\$ 91,980,962	\$ 96,302,189	\$ 11,206,450
Total Operating Expenses	8,691,357	9,387,351	9,415,675	9,839,725	9,721,901	306,226



### Pinecrest Supports and Services Center Budget Summary

	Prior Year Actuals FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
Total Professional Services	1,178,208	2,640,443	2,640,443	2,726,398	2,640,443	0
Total Other Charges	13,703,087	15,636,292	14,626,439	13,350,791	13,181,035	(1,445,404)
Total Acq & Major Repairs	840,990	1,358,900	1,403,100	1,350,826	1,266,526	(136,574)
Total Unallotted	0	0	0	0	0	0
<b>Total Expenditures &amp; Request</b>	<b>\$ 107,531,618</b>	<b>\$ 112,708,316</b>	<b>\$ 113,181,396</b>	<b>\$ 119,248,702</b>	<b>\$ 123,112,094</b>	<b>\$ 9,930,698</b>
<b>Authorized Full-Time Equivalents:</b>						
Classified	1,254	1,284	1,308	1,389	1,389	81
Unclassified	33	33	33	33	33	0
<b>Total FTEs</b>	<b>1,287</b>	<b>1,317</b>	<b>1,341</b>	<b>1,422</b>	<b>1,422</b>	<b>81</b>

### Source of Funding

The Pinecrest Supports and Services Center Program is funded from the State General Fund (Direct), Inter-agency 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

General Fund	Total Amount	Table of Organization	Description
\$ 0	\$ 473,080	24	<b>Mid-Year Adjustments (BA-7s):</b>
\$ 4,356,737	\$ 113,181,396	1,341	<b>Existing Oper Budget as of 12/01/16</b>
<b>Statewide Major Financial Changes:</b>			
0	247,504	0	Civil Service Training Series
0	(76,323)	0	Related Benefits Base Adjustment
0	941,359	0	Retirement Rate Adjustment
0	5,725,895	0	Salary Base Adjustment
0	(422,051)	0	Attrition Adjustment
0	1,122,726	0	Acquisitions & Major Repairs
0	(1,358,900)	0	Non-Recurring Acquisitions & Major Repairs
0	(72,524)	0	Non-recurring Carryforwards
0	(1,275,648)	0	Risk Management
21,962	21,962	0	Civil Service Fees
0	14,609	0	Office of Technology Services (OTS)
<b>Non-Statewide Major Financial Changes:</b>			



## Major Changes from Existing Operating Budget (Continued)

General Fund	Total Amount	Table of Organization	Description
0	4,970,928	81	Increasing 81 T.O. FTE positions to meet required staffing ratio at Pinecrest Supports and Services Center. The additional T.O. is necessary to meet Title XIX regulations for the requested year based on a 450 census capacity which will be reached by FY17 year end.
0	240,423	0	Increase food service contract by 11% in FY18 to accommodate normal inflation, equipment needs and increased expectations of the contractor to assure quality and accountability.
(112,300)	(112,300)	0	Annualization of the FY17 Mid-year elimination of Greater New Orleans Resource Center Dental Services activity.
(274,889)	(274,889)	0	Annualization of the FY17 Mid-Year Reduction to freeze vacancies, reduce expenditures, and Executive Order JBE 16-03 savings.
0	94,127	0	Provides funding for Operating Services including supplies and hardware / software maintenance.
59,500	143,800	0	Provides funding for both replacement vehicles and for desktop, laptop, and printer replacement, related to patient care and staff productivity.
\$ 4,051,010	\$ 123,112,094	1,422	<b>Recommended FY 2017-2018</b>
\$ 0	\$ 0	0	<b>Less Supplementary Recommendation</b>
\$ 4,051,010	\$ 123,112,094	1,422	<b>Base Executive Budget FY 2017-2018</b>
\$ 4,051,010	\$ 123,112,094	1,422	<b>Grand Total Recommended</b>

## Professional Services

Amount	Description
	<b>Professional Services</b>
\$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.
<b>\$2,640,443</b>	<b>TOTAL PROFESSIONAL SERVICES</b>



## Other Charges

Amount	Description
	<b>Other Charges:</b>
\$2,600,496	Pinecrest Facility - long-term care provider fees paid to the Louisiana Department of Health based on the number of occupied beds.
\$741,285	Pinecrest Facility - other services, including medical and professional services and therapies, and expenditures associated with conditions of participation in the ICF/DD program.
\$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	Pinecrest Facility - court mandated costs associated with the medical expenses of an individual.
\$138,036	Resource Centers - Community Support Team (CST) activities.
<b>\$4,224,513</b>	<b>SUB-TOTAL OTHER CHARGES</b>
	<b>Interagency Transfers:</b>
\$129,610	Office of Telecommunications Management (OTM) Fees
\$79,239	Uniform Payroll System (UPS) Fees
\$10,595	Department of Corrections work crews
\$5,618,240	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
\$289,431	Department of Civil Service Fees
\$1,580,801	Office of Technology Services
<b>\$8,956,522</b>	<b>SUB-TOTAL INTERAGENCY TRANSFERS</b>
<b>\$13,181,035</b>	<b>TOTAL OTHER CHARGES</b>

## Acquisitions and Major Repairs

Amount	Description
	<b>Acquisitions and Major Repairs</b>
\$1,266,526	Provides funding to implement and enable the facility to have the equipment and resources necessary to meet required standards of care.
<b>\$1,266,526</b>	<b>TOTAL ACQUISITIONS AND MAJOR REPAIRS</b>

## 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

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Number of people transitioned to private provider community options according to assessment/support team recommendations (LAPAS CODE - 22522)	22	25	25	25	25	25
K	Number of re-admissions to center within one year of transition (LAPAS CODE - 24697)	4	5	1	1	1	1
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 Indicators**

Level	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Percentage of individuals discharged who do not return to therapeutic program within one year (LAPAS CODE - 24703)	65%	96%	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	4	4

**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 Indicators

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Percentage of individuals served by the resource centers' medical/nursing, allied health, and behavioral health professionals who remain in their most integrated setting (LAPAS CODE - 24259)	85%	96%	90%	90%	90%	90%
S	Percentage of individuals reporting satisfaction across the Partners in Quality (PIQ) assessed living situations (LAPAS CODE - 24699)	85%	93%	90%	90%	90%	90%
S	Percentage of individuals reporting satisfaction across the Partners in Quality (PIQ) assessed work/day areas (LAPAS CODE - 24700)	85%	100%	90%	90%	90%	90%
S	Number of providers receiving Resource Center services (LAPAS CODE - 25644)	150	601	490	490	490	490
S	Number of resource center training events (LAPAS CODE - 24692)	266	411	266	266	266	266
S	Number of resource center technical assistance sessions (LAPAS CODE - 24694)	61	385	120	120	120	120
S	Number of resource center consultations (LAPAS CODE - 24695)	236	803	760	760	760	760
S	Percentage of customers that report satisfaction with resource center services (LAPAS CODE - 24696)	85%	98%	90%	90%	90%	90%
This performance indicator previously included only "training offered." It now includes all resource center services.							



## 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 FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Means of Financing:</b>						
State General Fund (Direct)	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
<b>State General Fund by:</b>						
Total Interagency Transfers	0	0	0	0	0	0
Fees and Self-generated Revenues	373,746	566,115	566,115	567,350	577,592	11,477
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
<b>Total Means of Financing</b>	<b>\$ 373,746</b>	<b>\$ 566,115</b>	<b>\$ 566,115</b>	<b>\$ 567,350</b>	<b>\$ 577,592</b>	<b>\$ 11,477</b>
<b>Expenditures &amp; Request:</b>						
Personal Services	\$ 50,470	\$ 180,276	\$ 180,276	\$ 181,511	\$ 191,753	\$ 11,477
Total Operating Expenses	0	0	0	0	0	0



## Auxiliary Account Budget Summary

	Prior Year Actuals FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
Total Professional Services	0	0	0	0	0	0
Total Other Charges	323,276	385,839	385,839	385,839	385,839	0
Total Acq & Major Repairs	0	0	0	0	0	0
Total Unallotted	0	0	0	0	0	0
<b>Total Expenditures &amp; Request</b>	<b>\$ 373,746</b>	<b>\$ 566,115</b>	<b>\$ 566,115</b>	<b>\$ 567,350</b>	<b>\$ 577,592</b>	<b>\$ 11,477</b>
<b>Authorized Full-Time Equivalents:</b>						
Classified	4	4	4	4	4	0
Unclassified	0	0	0	0	0	0
<b>Total FTEs</b>	<b>4</b>	<b>4</b>	<b>4</b>	<b>4</b>	<b>4</b>	<b>0</b>

## 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

General Fund	Total Amount	Table of Organization	Description
\$ 0	\$ 0	0	Mid-Year Adjustments (BA-7s):
\$ 0	\$ 566,115	4	Existing Oper Budget as of 12/01/16
<b>Statewide Major Financial Changes:</b>			
0	8,775	0	Related Benefits Base Adjustment
0	2,702	0	Retirement Rate Adjustment
<b>Non-Statewide Major Financial Changes:</b>			
\$ 0	\$ 577,592	4	Recommended FY 2017-2018
\$ 0	\$ 0	0	Less Supplementary Recommendation
\$ 0	\$ 577,592	4	Base Executive Budget FY 2017-2018
\$ 0	\$ 577,592	4	Grand Total Recommended



### Professional Services

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

### Other Charges

Amount	Description
	<b>Other Charges:</b>
	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	
<b>\$385,839</b>	<b>SUB-TOTAL OTHER CHARGES</b>

### Acquisitions and Major Repairs

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

### Performance Information

- (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**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	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%	100%	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 FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Means of Financing:</b>						
State General Fund (Direct)	\$ 7,704,986	\$ 8,119,197	\$ 8,059,828	\$ 8,040,646	\$ 7,513,736	\$ (546,092)
<b>State General Fund by:</b>						
Total Interagency Transfers	653,088	2,004,741	2,004,741	2,004,741	2,004,741	0
Fees and Self-generated Revenues	1,227,442	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 FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
Federal Funds	0	419,075	419,075	399,949	399,949	(19,126)
<b>Total Means of Financing</b>	\$ 9,585,516	\$ 11,634,350	\$ 11,574,981	\$ 11,536,673	\$ 11,009,763	\$ (565,218)
<b>Expenditures &amp; Request:</b>						
Imperial Calcasieu Human Services Authority	\$ 9,585,516	\$ 11,634,350	\$ 11,574,981	\$ 11,536,673	\$ 11,009,763	\$ (565,218)
<b>Total Expenditures &amp; Request</b>	\$ 9,585,516	\$ 11,634,350	\$ 11,574,981	\$ 11,536,673	\$ 11,009,763	\$ (565,218)
<b>Authorized Full-Time Equivalents:</b>						
Classified	0	0	0	0	0	0
Unclassified	0	0	0	0	0	0
<b>Total FTEs</b>	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, medically supported detoxification, 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. 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

	Prior Year Actuals FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Means of Financing:</b>						
State General Fund (Direct)	\$ 7,704,986	\$ 8,119,197	\$ 8,059,828	\$ 8,040,646	\$ 7,513,736	\$ (546,092)
<b>State General Fund by:</b>						
Total Interagency Transfers	653,088	2,004,741	2,004,741	2,004,741	2,004,741	0
Fees and Self-generated Revenues	1,227,442	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	419,075	419,075	399,949	399,949	(19,126)
<b>Total Means of Financing</b>	<b>\$ 9,585,516</b>	<b>\$ 11,634,350</b>	<b>\$ 11,574,981</b>	<b>\$ 11,536,673</b>	<b>\$ 11,009,763</b>	<b>\$ (565,218)</b>
<b>Expenditures &amp; Request:</b>						
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	9,585,516	11,634,350	11,574,981	11,536,673	11,009,763	(565,218)
Total Acq & Major Repairs	0	0	0	0	0	0
Total Unallotted	0	0	0	0	0	0
<b>Total Expenditures &amp; Request</b>	<b>\$ 9,585,516</b>	<b>\$ 11,634,350</b>	<b>\$ 11,574,981</b>	<b>\$ 11,536,673</b>	<b>\$ 11,009,763</b>	<b>\$ (565,218)</b>
<b>Authorized Full-Time Equivalents:</b>						
Classified	0	0	0	0	0	0
Unclassified	0	0	0	0	0	0
<b>Total FTEs</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

## 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

General Fund	Total Amount	Table of Organization	Description
\$ (59,369)	\$ (59,369)	0	<b>Mid-Year Adjustments (BA-7s):</b>
\$ 8,059,828	\$ 11,574,981	0	<b>Existing Oper Budget as of 12/01/16</b>
<b>Statewide Major Financial Changes:</b>			
(30,803)	(30,803)	0	Related Benefits Base Adjustment
81,463	81,463	0	Retirement Rate Adjustment
(194,698)	(194,698)	0	Salary Base Adjustment
(104,843)	(104,843)	0	Attrition Adjustment
(40,711)	(40,711)	0	Risk Management
14,342	14,342	0	Legislative Auditor Fees
(3)	(3)	0	UPS Fees
(239)	(239)	0	Civil Service Fees
18,830	18,830	0	Office of Technology Services (OTS)
(3,270)	(3,270)	0	Office of State Procurement
<b>Non-Statewide Major Financial Changes:</b>			
0	(19,126)	0	This adjustment reduces Federal Funds budget authority for Medicare revenue because this revenue source is collected as Fees and Self-generated Revenue.
(166,160)	(166,160)	0	Annualization of FY 17 mid-year reductions due to elimination of vacant position funding.
(120,000)	(120,000)	0	Reduction in funding for Genoa Pharmacy which is located in the Lake Charles Behavioral Health Clinic. This reduction is offset in part by anticipated reduction in pharmaceutical costs due to Medicaid expansion.
\$ 7,513,736	\$ 11,009,763	0	<b>Recommended FY 2017-2018</b>
\$ 0	\$ 0	0	<b>Less Supplementary Recommendation</b>
\$ 7,513,736	\$ 11,009,763	0	<b>Base Executive Budget FY 2017-2018</b>
\$ 7,513,736	\$ 11,009,763	0	<b>Grand Total Recommended</b>

### Professional Services

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



## Other Charges

Amount	Description
	<b>Other Charges:</b>
\$5,818,820	Salaries and related benefits for Other Charges positions
\$4,962,313	Contractual and operating costs of mental health, addictive disorders and developmental disability services
<b>\$10,781,133</b>	<b>SUB-TOTAL OTHER CHARGES</b>
	<b>Interagency Transfers:</b>
\$22,770	Payments to the Department of Civil Service - Civil Service Fees
\$88,817	Payments to the Division of Administration - Risk Management
\$33,794	Payments to the Legislative Auditor
\$36,315	Payments to the Division of Administration - Technology Services
\$4,403	Payments to the Division of Administration - Uniform Payroll Services
\$42,531	Miscellaneous Commodities and Services
<b>\$228,630</b>	<b>SUB-TOTAL INTERAGENCY TRANSFERS</b>
<b>\$11,009,763</b>	<b>TOTAL OTHER CHARGES</b>

## 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).

**Performance Indicators**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
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)	80%	94%	90%	90%	90%	90%
K	Percentage of clients who indicate they would recommend ImCal HSA services to family and friends (LAPAS CODE - 25260)	80%	94%	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 Indicators

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Number of adults receiving mental health services in all ImCal HSA behavioral health clinics (LAPAS CODE - 25264)	2,100	3,433	2,100	2,100	3,000	3,000
K	Number of children/ adolescents receiving mental health services in all ImCal HSA behavioral health clinics (LAPAS CODE - 25265)	200	540	200	200	500	500
K	Percentage of adults receiving mental health services who report that they would choose to receive services from ImCal HSA if given a choice to receive services elsewhere (LAPAS CODE - 25266)	80%	94%	80%	80%	90%	90%
K	Percentage of mental health clients who would recommend ImCal HSA services to others (LAPAS CODE - 25267)	80%	94%	80%	80%	90%	90%
K	Percentage of mental health Flexible Family Fund 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%	62%	70%	70%	70%	70%
S	Number of clients enrolled in primary care services provided through the ImHealthy Program at LCBHC (LAPAS CODE - 25966)	Not Applicable	Not Applicable	160	160	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**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Number of persons receiving individual and family support services (LAPAS CODE - 25275)	230	151	230	230	300	200
K	Number of Flexible Family Fund slots utilized (LAPAS CODE - 25276)	100	160	100	100	100	100
K	Percentage of eligibility determinations determined to be valid according to Flexible Family Fund provisions (LAPAS CODE - 25277)	95%	100%	95%	95%	100%	100%
K	Number of persons receiving developmental disabilities services (LAPAS CODE - 25278)	1,908	1,731	1,908	1,908	1,700	1,700



### Imperial Calcasieu Human Services Authority General Performance Information

Performance Indicator Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Total number of individuals served in the Imperial Calcasieu Human Services Authority (LAPAS CODE - 25279)	Not Applicable	13,308	12,326	12,873	10,142
Total number of individuals served by outpatient mental health in Imperial Calcasieu Human Services Authority (LAPAS CODE - 25280)	Not Applicable	3,488	3,811	4,295	3,973
Total number of individuals served by inpatient Addictive Disorders in Imperial Calcasieu Human Services Authority (LAPAS CODE - 25281)	Not Applicable	1,198	1,029	1,109	1,210
Total numbers of individuals served by outpatient Addictive Disorders in Imperial Calcasieu Human Services Authority (LAPAS CODE - 25282)	Not Applicable	988	914	845	718
Total number of enrollees in prevention programs (LAPAS CODE - 25283)	Not Applicable	6,196	4,814	4,583	3,476



## 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

	Prior Year Actuals FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Means of Financing:</b>						
State General Fund (Direct)	\$ 9,975,284	\$ 9,759,732	\$ 9,685,933	\$ 9,956,628	\$ 9,371,414	\$ (314,519)
<b>State General Fund by:</b>						
Total Interagency Transfers	3,643,522	3,845,978	3,845,978	3,971,053	3,971,053	125,075
Fees and Self-generated Revenues	387,031	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	48,358	48,358	0	0	(48,358)



## Central Louisiana Human Services District Budget Summary

	Prior Year Actuals FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Total Means of Financing</b>	\$ 14,005,837	\$ 15,156,851	\$ 15,083,052	\$ 15,430,464	\$ 14,845,250	\$ (237,802)
<b>Expenditures &amp; Request:</b>						
Central Louisiana Human Services District	\$ 14,005,837	\$ 15,156,851	\$ 15,083,052	\$ 15,430,464	\$ 14,845,250	\$ (237,802)
<b>Total Expenditures &amp; Request</b>	\$ 14,005,837	\$ 15,156,851	\$ 15,083,052	\$ 15,430,464	\$ 14,845,250	\$ (237,802)
<b>Authorized Full-Time Equivalents:</b>						
Classified	0	0	0	0	0	0
Unclassified	0	0	0	0	0	0
<b>Total FTEs</b>	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. The Central Louisiana Human Services District will participate in the statewide initiative to implement an electronic health record to assist with continuous documentation efforts, scheduling of clients to maximize provider time, invoicing and billing procedures to improve collection efforts and standardization of forms/procedures. 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.

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 FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Means of Financing:</b>						
State General Fund (Direct)	\$ 9,975,284	\$ 9,759,732	\$ 9,685,933	\$ 9,956,628	\$ 9,371,414	\$ (314,519)
<b>State General Fund by:</b>						
Total Interagency Transfers	3,643,522	3,845,978	3,845,978	3,971,053	3,971,053	125,075
Fees and Self-generated Revenues	387,031	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	48,358	48,358	0	0	(48,358)
<b>Total Means of Financing</b>	<b>\$ 14,005,837</b>	<b>\$ 15,156,851</b>	<b>\$ 15,083,052</b>	<b>\$ 15,430,464</b>	<b>\$ 14,845,250</b>	<b>\$ (237,802)</b>
<b>Expenditures &amp; Request:</b>						
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	14,005,837	15,156,851	15,083,052	15,430,464	14,845,250	(237,802)
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

	Prior Year Actuals FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Total Expenditures &amp; Request</b>	\$ 14,005,837	\$ 15,156,851	\$ 15,083,052	\$ 15,430,464	\$ 14,845,250	\$ (237,802)
<b>Authorized Full-Time Equivalents:</b>						
Classified	0	0	0	0	0	0
Unclassified	0	0	0	0	0	0
<b>Total FTEs</b>	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

General Fund	Total Amount	Table of Organization	Description
\$ (73,799)	\$ (73,799)	0	<b>Mid-Year Adjustments (BA-7s):</b>
\$ 9,685,933	\$ 15,083,052	0	<b>Existing Oper Budget as of 12/01/16</b>
<b>Statewide Major Financial Changes:</b>			
(94,302)	(94,302)	0	Related Benefits Base Adjustment
87,215	87,215	0	Retirement Rate Adjustment
43,136	43,136	0	Salary Base Adjustment
(125,578)	(125,578)	0	Attrition Adjustment
(1,725)	(1,725)	0	Risk Management
267	267	0	Legislative Auditor Fees
25	25	0	UPS Fees
(1,351)	(1,351)	0	Civil Service Fees
15,236	15,236	0	Office of Technology Services (OTS)
(24,556)	(24,556)	0	Office of State Procurement
<b>Non-Statewide Major Financial Changes:</b>			
0	(48,358)	0	This adjustment reduces Federal Funds budget authority for Medicare revenue because this revenue source is collected as Fees and Self-generated Revenue.
0	125,075	0	This adjustment of Interagency Transfers is due to the reallocation of federal grants and Statutory Dedications overseen and distributed by the Office of Behavioral Health
(71,600)	(71,600)	0	Annualization of FY 17 mid-year cuts realized through efficiencies from implementing Signature Pads for Electronic Health Records, reduction of supplies expenditures and contract reduction.



## Major Changes from Existing Operating Budget (Continued)

General Fund	Total Amount	Table of Organization	Description
(141,286)	(141,286)	0	Reduction of a contract which provides community outreach services
\$ 9,371,414	\$ 14,845,250	0	<b>Recommended FY 2017-2018</b>
\$ 0	\$ 0	0	<b>Less Supplementary Recommendation</b>
\$ 9,371,414	\$ 14,845,250	0	<b>Base Executive Budget FY 2017-2018</b>
\$ 9,371,414	\$ 14,845,250	0	<b>Grand Total Recommended</b>

## Professional Services

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

## Other Charges

Amount	Description
	<b>Other Charges:</b>
\$7,000,885	Salaries and related benefits for Other Charges positions
\$7,645,739	Contractual and operating costs of mental health, addictive disorders and developmental disability services
<b>\$14,646,624</b>	<b>SUB-TOTAL OTHER CHARGES</b>
	<b>Interagency Transfers:</b>
\$28,688	Payments to the Department of Civil Service - Civil Service Fees
\$114,129	Payments to the Division of Administration - Risk Management
\$35,880	Payments to the Division of Administration - Technology Services
\$11,565	Payments to the Legislative Auditor
\$5,586	Payments to the Division of Administration - Uniform Payroll Services
\$2,778	Miscellaneous Commodities and Services
<b>\$198,626</b>	<b>SUB-TOTAL INTERAGENCY TRANSFERS</b>
<b>\$14,845,250</b>	<b>TOTAL OTHER CHARGES</b>

## 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 l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
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%	97%	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**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
S	Number of district clinics using the TOMS website to manage satisfaction surveys and programmatic outcomes. (LAPAS CODE - NEW)	Not Available	Not Available	Not Available	Not Available	4	4
S	Number of Tele-medicine sites Districtwide. (LAPAS CODE - NEW)	Not Available	Not Available	Not Available	Not Available	4	4



**Central Louisiana Human Services District General Performance Information**

Performance Indicator Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Total number of individuals served in the Central Louisiana Human Services District (LAPAS CODE - 25298)	Not Applicable	20,337	39,234	18,882	18,165
Percentage of Behavioral Health Clinics that are in compliance with state standards of care (LAPAS CODE - 25864)	Not Available	Not Available	100%	100%	8,395%
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	Not Applicable	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 Indicators

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Number of adults receiving Mental Health services in all CLHSD behavioral health programs (LAPAS CODE - 25286)	2,392	2,961	2,392	2,392	2,704	2,704
K	Number of children/ adolescents receiving Mental Health services in all CLHSD behavioral health program (LAPAS CODE - 25287)	306	266	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%	92%	90%	90%	90%	90%
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%	89%	96%	96%	96%	96%
K	Percentage of individuals successful completions (24-hour residential programs)- AD Program (LAPAS CODE - 25291)	75%	93%	75%	75%	83%	83%



**Performance Indicators (Continued)**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Percentage of individuals successfully completing the Primary Inpatient Adult addictive disorders treatment program (LAPAS CODE - 25292)	75%	94%	75%	75%	84%	84%
K	Primary Inpatient Adolescent: Percentage of individuals successfully completing the program-AD programs (LAPAS CODE - 25293)	85%	89%	70%	70%	75%	75%
K	Number of adults served in Outpatient Addictive Disorders programs in the CLHSD (LAPAS CODE - 25861)	1,000	1,430	1,000	1,000	1,000	1,000
K	Number of children/adolescent served in outpatient Addictive Disorders programs in CLHSD (LAPAS CODE - 25862)	71	131	71	71	71	71

**Central Louisiana Human Services District General Performance Information**

Performance Indicator Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Total number of individuals served by outpatient mental health in Central Louisiana Human Services District (LAPAS CODE - 25299)	Not Applicable	3,612	2,889	2,760	3,227
Total number of individuals served by inpatient Addictive Disorders in Central Louisiana Human Services District (LAPAS CODE - 25300)	Not Applicable	2,195	2,940	2,527	1,570
Total numbers of individuals served by outpatient Addictive Disorders in Central Louisiana Human Services District (LAPAS CODE - 25301)	Not Applicable	2,870	1,584	1,157	1,561
Figures reported during FY 2012-2013 appear to have been calculated using a duplicated count for outreach programs. The current numbers are unduplicated.					
Total number of enrollees in prevention programs (LAPAS CODE - 25302)	Not Applicable	10,210	9,967	9,932	



**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 Indicators

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Number of persons receiving individual and family support services (LAPAS CODE - 25294)	150	172	192	192	192	192
K	Number of persons receiving Flexible Family Fund services (LAPAS CODE - 25295)	102	113	102	102	102	102
K	Percentage of eligibility determinations determined valid according to Flexible Family Fund promulgation (LAPAS CODE - 25296)	90%	94%	90%	90%	90%	90%
K	Number of individuals certified for waiver services (LAPAS CODE - 25863)	799	824	799	799	799	799



**Central Louisiana Human Services District General Performance Information**

Performance Indicator Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Number of persons receiving DD services CLHSD (LAPAS CODE - 25297)	Not Applicable	Not Applicable	1,095	1,118	1,109



## 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 self-determination 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

	Prior Year Actuals FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Means of Financing:</b>						
State General Fund (Direct)	\$ 7,984,410	\$ 7,680,885	\$ 7,598,416	\$ 7,746,436	\$ 7,272,478	\$ (325,938)
<b>State General Fund by:</b>						
Total Interagency Transfers	4,072,705	4,367,437	4,367,437	4,356,357	4,356,357	(11,080)
Fees and Self-generated Revenues	2,071,486	2,700,000	2,700,000	1,500,000	1,500,000	(1,200,000)
Statutory Dedications	0	0	0	0	0	0
Interim Emergency Board	0	0	0	0	0	0
Federal Funds	0	48,289	48,289	0	0	(48,289)
<b>Total Means of Financing</b>	<b>\$ 14,128,601</b>	<b>\$ 14,796,611</b>	<b>\$ 14,714,142</b>	<b>\$ 13,602,793</b>	<b>\$ 13,128,835</b>	<b>\$ (1,585,307)</b>
<b>Expenditures &amp; Request:</b>						
Northwest Louisiana Human Services District	\$ 14,128,601	\$ 14,796,611	\$ 14,714,142	\$ 13,602,793	\$ 13,128,835	\$ (1,585,307)
<b>Total Expenditures &amp; Request</b>	<b>\$ 14,128,601</b>	<b>\$ 14,796,611</b>	<b>\$ 14,714,142</b>	<b>\$ 13,602,793</b>	<b>\$ 13,128,835</b>	<b>\$ (1,585,307)</b>
<b>Authorized Full-Time Equivalents:</b>						
Classified	0	0	0	0	0	0
Unclassified	0	0	0	0	0	0
<b>Total FTEs</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>



## 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 FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Means of Financing:</b>						
State General Fund (Direct)	\$ 7,984,410	\$ 7,680,885	\$ 7,598,416	\$ 7,746,436	\$ 7,272,478	\$ (325,938)
<b>State General Fund by:</b>						
Total Interagency Transfers	4,072,705	4,367,437	4,367,437	4,356,357	4,356,357	(11,080)
Fees and Self-generated Revenues	2,071,486	2,700,000	2,700,000	1,500,000	1,500,000	(1,200,000)
Statutory Dedications	0	0	0	0	0	0
Interim Emergency Board	0	0	0	0	0	0
Federal Funds	0	48,289	48,289	0	0	(48,289)



## Northwest Louisiana Human Services District Budget Summary

	Prior Year Actuals FY 2015-2016	Enacted FY 2016-2017	Existing Oper Budget as of 12/01/16	Continuation FY 2017-2018	Recommended FY 2017-2018	Total Recommended Over/(Under) EOB
<b>Total Means of Financing</b>	\$ 14,128,601	\$ 14,796,611	\$ 14,714,142	\$ 13,602,793	\$ 13,128,835	\$ (1,585,307)
<b>Expenditures &amp; Request:</b>						
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	14,128,601	14,796,611	14,714,142	13,602,793	13,128,835	(1,585,307)
Total Acq & Major Repairs	0	0	0	0	0	0
Total Unallotted	0	0	0	0	0	0
<b>Total Expenditures &amp; Request</b>	\$ 14,128,601	\$ 14,796,611	\$ 14,714,142	\$ 13,602,793	\$ 13,128,835	\$ (1,585,307)
<b>Authorized Full-Time Equivalents:</b>						
Classified	0	0	0	0	0	0
Unclassified	0	0	0	0	0	0
<b>Total FTEs</b>	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

General Fund	Total Amount	Table of Organization	Description
\$ (82,469)	\$ (82,469)	0	<b>Mid-Year Adjustments (BA-7s):</b>
\$ 7,598,416	\$ 14,714,142	0	<b>Existing Oper Budget as of 12/01/16</b>
<b>Statewide Major Financial Changes:</b>			
467,322	467,322	0	Related Benefits Base Adjustment
107,956	107,956	0	Retirement Rate Adjustment
(149,581)	(149,581)	0	Salary Base Adjustment
(149,506)	(149,506)	0	Attrition Adjustment
(27,367)	(27,367)	0	Risk Management
14,750	14,750	0	Legislative Auditor Fees



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

General Fund	Total Amount	Table of Organization	Description
(37)	(37)	0	UPS Fees
(2,547)	(2,547)	0	Civil Service Fees
15,092	15,092	0	Office of Technology Services (OTS)
(11,201)	(11,201)	0	Office of State Procurement
<b>Non-Statewide Major Financial Changes:</b>			
0	(48,289)	0	This adjustment reduces Federal Funds budget authority for Medicare revenue because this revenue source is collected as Fees and Self-generated Revenue.
0	(11,080)	0	This adjustment of Interagency Transfers is due to a reallocation of grant funds from the Office of Behavioral Health.
0	(1,200,000)	0	Reduces Fees and Self-generated Revenue to bring the District closer to an attainable collection goal based on collection averages from previous years.
(483,474)	(483,474)	0	Annualization of FY 17 mid-year reductions for travel, supplies and operating services expenditures.
(74,515)	(74,515)	0	Reductions resulting from elimination of escrow account and anticipated savings realized through Medicaid expansion
(32,830)	(32,830)	0	Elimination of unobligated Mental Health Cash Subsidy slots and a slot with a participant who will age out in FY 18.
\$ 7,272,478	\$ 13,128,835	0	<b>Recommended FY 2017-2018</b>
\$ 0	\$ 0	0	<b>Less Supplementary Recommendation</b>
\$ 7,272,478	\$ 13,128,835	0	<b>Base Executive Budget FY 2017-2018</b>
\$ 7,272,478	\$ 13,128,835	0	<b>Grand Total Recommended</b>

### Professional Services

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

### Other Charges

Amount	Description
<b>Other Charges:</b>	
\$7,895,828	Salaries and related benefits for Other Charges positions
\$5,007,083	Contractual and operating costs of mental health, addictive disorders and developmental disability services
<b>\$12,902,911</b>	<b>SUB-TOTAL OTHER CHARGES</b>
<b>Interagency Transfers:</b>	
\$28,557	Payments to the Department of Civil Service - Civil Service Fees
\$94,270	Payments to the Division of Administration - Risk Management



## Other Charges (Continued)

Amount	Description
\$52,565	Payments to the Division of Administration - Technology Services
\$31,121	Payments to the Legislative Auditor
\$1,343	Payments to the Division of Administration - Office of State Procurement
\$6,258	Payments to the Division of Administration - Uniform Payroll Services
\$11,810	Miscellaneous Commodities and Services
<b>\$225,924</b>	<b>SUB-TOTAL INTERAGENCY TRANSFERS</b>
<b>\$13,128,835</b>	<b>TOTAL OTHER CHARGES</b>

## Acquisitions and Major Repairs

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

## Performance Information

- (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 Indicators**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
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%	96%	90%	90%	90%	90%
K	Percentage of clients who indicate they would recommend NLHSD clinics to family and friends (LAPAS CODE - 25304)	90%	100%	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.**

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 Indicators

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Number of adults receiving mental health services in all NLHSD behavioral health clinics (LAPAS CODE - 25305)	2,875	1,680	2,300	2,300	2,300	2,300
	The actual number of adults served has dropped due to extended vacancies in clinical positions and the closure of three clinics in May 2016. While services and locations remain stable, the ability to serve individuals remains a challenge. With clinician staffing being challenged by private sector competition for the same workers, the number of adults served is expected to decline.						
K	Number of children/adolescents receiving mental health services in all NLHSD behavioral health clinics (LAPAS CODE - 25306)	705	355	600	600	600	600
	The actual number of adults served has dropped due to extended vacancies in clinical positions and the closure of three clinics in May 2016. While services and locations remain stable, the ability to serve additional individuals remains a challenge. With clinician staffing being challenged by private sector competition for the same workers, the number of children served is expected to decline from the previous year.						
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%	96%	90%	90%	90%	90%
K	Percentage of mental health clients who would recommend NLHSD services to others (LAPAS CODE - 25308)	90%	96%	90%	90%	90%	90%

**Performance Indicators (Continued)**

L e v e l	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
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%	60%	65%	65%	65%	65%
K	Percentage of individuals successfully completing the Primary Inpatient Adult addictive disorders treatment program (LAPAS CODE - 25311)	75%	82%	75%	75%	75%	75%
K	Percentage of individuals successfully completing the Primary Inpatient Adolescent addictive disorders treatment program (LAPAS CODE - 25312)	60%	73%	60%	60%	60%	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.**

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 Indicators

Level	Performance Indicator Name	Performance Indicator Values					
		Yearend Performance Standard FY 2015-2016	Actual Yearend Performance FY 2015-2016	Performance Standard as Initially Appropriated FY 2016-2017	Existing Performance Standard FY 2016-2017	Performance At Continuation Budget Level FY 2017-2018	Performance At Executive Budget Level FY 2017-2018
K	Number of persons receiving individual and family support services (LAPAS CODE - 25313)	350	350	350	350	350	350
K	Number of persons receiving Flexible Family Fund services (LAPAS CODE - 25314)	170	175	170	170	170	170
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	509	450	450	450	450

## Northwest Louisiana Human Services District General Performance Information

Performance Indicator Name	Performance Indicator Values				
	Prior Year Actual FY 2011-2012	Prior Year Actual FY 2012-2013	Prior Year Actual FY 2013-2014	Prior Year Actual FY 2014-2015	Prior Year Actual FY 2015-2016
Total number of individuals served in the Northwest Louisiana Human Services District (LAPAS CODE - 25317)	Not Applicable	Not Applicable	6,840	21,559	19,470
Total number of individuals served by outpatient mental health in Northwest Louisiana Human Services District (LAPAS CODE - 25318)	Not Applicable	Not Applicable	4,385	2,106	2,035
Total number of individuals served by inpatient Addictive Disorders in Northwest Louisiana Human Services District (LAPAS CODE - 25319)	Not Applicable	Not Applicable	424	1,100	1,447
Total numbers of individuals served by outpatient Addictive Disorders in Northwest Louisiana Human Services District (LAPAS CODE - 25320)	Not Applicable	Not Applicable	914	698	626
Total number of enrollees in prevention programs (LAPAS CODE - 25321)	Not Applicable	Not Applicable	12,214	16,038	14,344



