

FOR LEGISLATIVE REVIEW

November 2014
DEVELOPMENTAL CENTERS
ESTIMATE
for
FISCAL YEAR
2015-16
Governor's Budget



STATE OF CALIFORNIA
DEPARTMENT OF DEVELOPMENTAL SERVICES
JANUARY 9, 2015

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Executive Highlights

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EXECUTIVE HIGHLIGHTS

OVERVIEW

The Department of Developmental Services (DDS) provides 24/7 residential services to its residents at four Developmental Centers (DC) and one State-operated Community Facility. Passage of Assembly Bill (AB) 1472 (Chapter 25, Statutes of 2012) placed a moratorium on admissions to the State-operated facilities, with limited exceptions, and mandated the closure of Lanterman DC by December 31, 2014. The proposed budget for 2015-16 reflects the closing of the facility on December 31, 2014, and the transfer of the property to California State University System on July 1, 2015. Therefore, there is no funding for costs associated with warm shutdown of the physical plant and facility structures, or the operation of the Primary Care Clinic after July 1, 2015.

The average-in-center population for 2014-15 is 1,116 residents, which reflects an increase of four residents from the enacted budget. For 2015-16, DDS estimates an average in-center population of 1,010, or a net decline in the number of DC residents by 102; remaining consistent with the ongoing transition of individuals residing in a DC into community living arrangements.

The DC budget is adjusted in both 2014-15 and 2015-16 for various employee compensation items, changes in staffing, New Major Assumptions (NMA) and Revised Major Assumptions (RMA) covering the costs of two Program Improvement Plans (PIPs) for the Fairview and Porterville DCs the expansion of the Secure Treatment Program (STP) at Porterville DC, and Lanterman DC closure and post-closure activities continuing after June 30, 2015.

FISCAL YEAR 2014-15

DDS proposes a net increase of \$34.7 Million (\$33.6 Million General Fund (GF)) for 2014-15. Significant changes are composed of the following:

Employee Compensation Adjustments:

- \$6.8 Million (\$4.1 Million GF) increase consistent with Control Section (CS) 3.60 for employer retirement contribution rates.
- \$6.5 Million (\$3.9 Million GF) increase due to 2014-15 employee compensation augmentations approved through the collective bargaining process, as detailed in Budget Letter 14-26, Employee Compensation Adjustments – Item 9800.

Staffing Adjustments for Current Year Including Acute Crisis Units:

- \$0.2 Million (\$0.1 Million GF) and 3.5 positions (net increases) associated with Level of Care (LOC) staffing adjustments.
- \$0.3 Million (\$0.2 Million GF) and 4.5 positions (net increases) associated with Non-Level of Care (NLOC) staffing adjustments.

Expansion of Secure Treatment Program (STP) at Porterville DC:

- \$9.0 Million GF and 92.3 FTE (43 LOC and 49.3 NLOC staff) positions increases for six months of costs, in order to expand the STP capacity at Porterville DC by 32 beds, so that DDS may accommodate the increasing number of individuals deemed incompetent to stand trial and awaiting treatment. (See pages D-4.1 through D-4.4.)

Sonoma DC (Four Intermediate Care Facility (ICF) Units) Backfill:

- -\$8.8 Million decrease in Reimbursement authority, offset by an increase of \$8.8 Million GF, to backfill the loss of Medi-Cal Reimbursement for eight months covering the four Sonoma ICF units withdrawn January 2013 from the Medicaid Provider Agreement to ensure continued federal funding for the remaining seven ICF units. The remaining seven units were found to still have conditions out of compliance when the facility was re-surveyed. Therefore, the 2014 Budget Act assumption of the four units receiving re-certification at the start of FY 2014-15 will not be realized until the end of February 2015 for all eleven units. (See pages D-5.1 and D-5.2.)

Program Improvement Plans:

- \$11.9 Million (\$7.5 Million GF) and 119.7 Full Time Equivalent (FTE) positions increase covering eight months of costs to implement two PIPs at the Fairview and Porterville DCs that were entered into with the California Department of Public Health (CDPH) on January 15, 2014. (See pages D-6.1 through D-6.3 for details of PIPs.)

FISCAL YEAR 2015-16

DDS proposes an overall net decrease of -\$13.0 Million total funds, with a net increase of \$3.8 Million GF for the following:

Employee Compensation and Other Baseline Adjustments:

- \$6.8 Million (\$4.1 Million GF) increase consistent with CS 3.60 for employer retirement contribution rates.
- \$6.4 Million (\$3.8 Million GF) increase due to 2014-15 employee compensation augmentations approved through the collective bargaining process, as detailed in Budget Letter 14-26, Employee Compensation Adjustments – Item 9800.
- -\$0.04 Million decrease in Lottery Education Funds
- \$0.3 Million GF increase for rental payments on lease-revenue bonds

Staffing Adjustments:

- -\$12.0 Million (-\$6.6 Million GF) decrease and -149.4 position reduction due to the anticipated population decline of -134 residents from the continuing transition of DC residents into the community.
 - This overall reduction, is comprised of -\$10.9 Million (-\$6.0 Million GF) and -138.5 positions in LOC and -\$1.1 Million (-\$0.6 Million GF) and -10.9 positions in NLOC.

Expansion of Secure Treatment Program at Porterville DC:

- \$18.0 Million GF and 184.5 position increases to support the expansion of the STP capacity at Porterville DC by 32 beds, so that DDS may accommodate the increasing number of individuals deemed incompetent to stand trial and awaiting treatment. (See pages D-4.1 through D-4.4.)

Sonoma Creek Pump Station:

- \$1.6 Million GF increase for the replacement of the Sonoma Creek Pump Station Intake System located at the Sonoma DC, for Phase I funding to prepare Preliminary Plans and Working Drawings. (See pages D-3.1 through D-3.4.)

Program Improvement Plan:

- \$12.2 Million (\$6.5 Million GF) and 179.5 position increases for full year costs to implement two PIPs at the Fairview and Porterville DCs that were entered into with CDPH on January 15, 2014. (See pages D-6.1 through D-6.3.)

Lanterman Closure/Post-Closure Activities:

- -\$64.8 Million (-\$33.9 Million GF) decrease and -418.5 position reduction associated with the closure of Lanterman DC.
- -\$0.3 Million (-\$0.2 GF) decrease to reflect the transition of the Foster Grandparent/Senior Companion program from Lanterman DC to Community Services Program.
- \$17.3 Million (\$9.1 Million GF) increase to pursue settlement of open Workers' Compensation claims assigned to the Lanterman DC. For one year after closure of the facility, the State may claim matching federal funds for these expenditures.
- \$0.6 Million (\$0.4 Million GF) and 6.0 position increases for related Regional Resource Development Projects to ensure a successful transition to community living, as statutorily required for up to one year after placement.
- \$0.3 Million (\$0.2 Million GF) and 2.0 position increases for Community State Staff program administration.
- \$0.6 Million (\$0.5 Million GF) and 5.0 position increases for post-closure impacts on oversight of Senate Bill 853, Chapter 717, Statutes of 2010 homes in the community, project management of the closure, continuity of Human Resources oversight of lay-off plan and Workers' Compensation cases, and infrastructure support of the information technology program. These positions are also needed for workload related to statewide downsizing in the overall DC system.

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EXECUTIVE SUMMARY
CURRENT YEAR 2014-15 and BUDGET YEAR 2015-16

	CURRENT YEAR 2014-15			BUDGET YEAR 2015-16		
	Enacted Budget CY 14-15	2015 Proposed Governor's Budget Authority for CY	2015 Proposed Governor's Budget Request for CY 2014-15	Enacted Budget CY 2014-15	2015 Proposed Governor's Budget Authority for BY	2015 Proposed Governor's Budget Request for BY 2015-16
TOTAL FUNDING	\$528,168,000	\$562,893,855	\$34,725,855	\$528,168,000	\$515,213,000	-\$12,955,000
Positions	4,461.1	4,681.1	220.0	4,461.1	4,270.2	-190.9
Average In-Center Population (Lanterman Excluded)	1,112	1,116	4	1,112	1,010	-102
General Fund (0001)	\$276,008,000	\$309,647,947	\$33,639,947	\$276,008,000	\$279,839,000	\$3,831,000
Item 002	9,903,000	9,888,000	-15,000	9,903,000	10,191,000	288,000
Item 003	260,659,000	294,148,373	33,489,373	260,659,000	264,341,000	3,682,000
Item 004	5,195,000	5,360,574	165,574	5,195,000	5,056,000	-139,000
Item 017	251,000	251,000	0	251,000	251,000	0
Reimbursements (0995)	\$251,373,000	\$252,494,908	\$1,121,908	\$251,373,000	\$234,722,000	-\$16,651,000
Item 002	1,000	1,000	0	1,000	1,000	0
Item 003	250,116,000	251,125,171	1,009,171	250,116,000	233,592,000	-16,524,000
Item 004	1,093,000	1,205,737	112,737	1,093,000	966,000	-127,000
Item 017	163,000	163,000	0	163,000	163,000	0
Federal Funds (0890)	\$384,000	\$384,000	\$0	\$384,000	\$285,000	-\$99,000
Item 003	384,000	384,000	0	384,000	285,000	-99,000
Lottery Education Fund (0817)	\$403,000	\$367,000	-\$36,000	\$403,000	\$367,000	-\$36,000
Item 503	403,000	367,000	-36,000	403,000	367,000	-36,000
Total DC Program Budget	\$528,168,000	\$562,893,855	\$34,725,855	\$528,168,000	\$515,213,000	-\$12,955,000
002	9,904,000	9,889,000	-15,000	9,904,000	10,192,000	288,000
003	511,159,000	545,657,544	34,498,544	511,159,000	498,218,000	-12,941,000
004	6,288,000	6,566,311	278,311	6,288,000	6,022,000	-266,000
017	414,000	414,000	0	414,000	414,000	0
503	403,000	367,000	-36,000	403,000	367,000	-36,000

**DEVELOPMENTAL CENTERS DETAILED FUNDING SUMMARY
CURRENT YEAR 2014-15**

	Enacted Budget CY 2014-15	Employee Compensation		Lottery Adjustment	CS 4.30	CY Budget Adjustments
		CS 3.60 Retirement	Item 9800			
Program 20 Total	\$528,168,000	\$6,838,260	\$6,497,939	-\$36,000	-\$15,000	\$13,285,199
Positions	4,461.1	0.0	0.0	0.0	0.0	0.0
Average In-Center Population	1,112	0	0	0	0	0
Funding Sources						
General Fund Total	\$276,008,000	\$4,079,705	\$3,876,672	\$0	-\$15,000	\$7,941,377
General Fund Match	264,678,000	2,758,555	2,621,267	0	0	5,379,822
General Fund Other	11,330,000	1,321,150	1,255,405	0	-15,000	2,561,555
Reimbursement Total	\$251,373,000	\$2,758,555	\$2,621,267	\$0	\$0	\$5,379,822
Medi-Cal Reimbursements	236,053,000	2,758,555	2,621,267	0	0	5,379,822
Other Reimbursements	15,320,000	0	0	0	0	0
Federal Funds	\$384,000	\$0	\$0	\$0	\$0	\$0
Lottery Education Fund	\$403,000	\$0	\$0	-\$36,000	\$0	-\$36,000
Total Funding	\$528,168,000	\$6,838,260	\$6,497,939	-\$36,000	-\$15,000	\$13,285,199

**DEVELOPMENTAL CENTERS DETAILED FUNDING SUMMARY
CURRENT YEAR 2014-15**

Staffing Adjustments for CY Including Acute Crisis Units			
	Level of Care	Non-Level of Care	Population Staffing Adjustments TOTAL
Program 20 Total	\$216,000	\$310,000	\$526,000
Positions	3.5	4.5	8.0
Average In-Center Population	0	0	0
Funding Sources			
General Fund Total	\$135,000	\$192,000	\$327,000
General Fund Match	81,000	118,000	199,000
General Fund Other	54,000	74,000	128,000
Reimbursement Total	\$81,000	\$118,000	\$199,000
Medi-Cal Reimbursements	81,000	118,000	199,000
Other Reimbursements	0	0	0
Federal Funds	\$0	\$0	0
Lottery Education Fund	\$0	\$0	0
Total Funding	\$216,000	\$310,000	\$526,000

**DEVELOPMENTAL CENTERS DETAILED FUNDING SUMMARY
CURRENT YEAR 2014-15**

	Major Assumptions			2015 Proposed Governor's Budget Request for CY 2014-15	Proposed Authority CY 2014-15
	PDC 32 Bed Expansion	SDC 4 Unit Backfill	FDC/PDC Program Improvement Plan		
Program 20 Total	\$9,039,000	\$0	\$11,875,656	\$34,725,855	\$562,893,855
Positions	92.3	0.0	119.7	220.0	4,681.1
Average In-Center Population	4	0	0	4	1,116
Funding Sources					
General Fund Total	\$9,039,000	\$8,800,000	\$7,532,570	\$33,639,947	\$309,647,947
General Fund Match	0	-8,800,000	4,343,086	1,121,908	265,799,908
General Fund Other	9,039,000	17,600,000	3,189,484	32,518,039	43,848,039
Reimbursement Total	\$0	-\$8,800,000	\$4,343,086	\$1,121,908	\$252,494,908
Medi-Cal Reimbursements	0	-8,800,000	4,343,086	1,121,908	237,174,908
Other Reimbursements	0	0	0	0	15,320,000
Federal Funds	\$0	\$0	\$0	\$0	\$384,000
Lottery Education Fund	\$0	\$0	\$0	-\$36,000	\$367,000
Total Funding	\$9,039,000	\$0	\$11,875,656	\$34,725,855	\$562,893,855

**DEVELOPMENTAL CENTERS DETAILED FUNDING SUMMARY
BUDGET YEAR 2015-16**

	Enacted Budget CY 2014-15	Employee Compensation		Lottery Adjustment	CS 4.30	Adjusted BY Budget
		CS 3.60 Retirement	Item 9800			
Program 20 Total	\$528,168,000	\$6,839,000	\$6,385,000	-\$36,000	\$288,000	\$541,644,000
Positions	4,461.1	0.0	0.0	0.0	0.0	4,461.1
Average In-Center Population	1,112	0	0	0	0	1,112
Funding Sources						
General Fund Total	\$276,008,000	\$4,080,000	\$3,810,000	\$0	\$288,000	\$284,186,000
General Fund Match	264,678,000	2,759,000	2,575,000	0	0	270,012,000
General Fund Other	11,330,000	1,321,000	1,235,000	0	288,000	14,174,000
Reimbursement Total	\$251,373,000	\$2,759,000	\$2,575,000	\$0	\$0	\$256,707,000
Medi-Cal Reimbursements	236,053,000	2,759,000	2,575,000	0	0	241,387,000
Other Reimbursements	15,320,000	0	0	0	0	15,320,000
Federal Funds	\$384,000	\$0	\$0	\$0	\$0	\$384,000
Lottery Education Fund	\$403,000	\$0	\$0	-\$36,000	\$0	\$367,000
Total Funding	\$528,168,000	\$6,839,000	\$6,385,000	-\$36,000	\$288,000	\$541,644,000

**DEVELOPMENTAL CENTERS DETAILED FUNDING SUMMARY
BUDGET YEAR 2015-16**

Staffing Adjustments			
	Level of Care	Non-Level of Care	Population Staffing Adjustments TOTAL
Program 20 Total	-\$10,860,000	-\$1,135,000	-\$11,995,000
Positions	-138.5	-10.9	-149.4
Average In-Center Population	-134	0	-134
Funding Sources			
General Fund Total	-\$5,928,000	-\$629,000	-\$6,557,000
General Fund Match	-4,932,000	-506,000	-5,438,000
General Fund Other	-996,000	-123,000	-1,119,000
Reimbursement Total	-\$4,932,000	-\$506,000	-\$5,438,000
Medi-Cal Reimbursements	-4,932,000	-506,000	-5,438,000
Other Reimbursements	0	0	0
Federal Funds	\$0	\$0	\$0
Lottery Education Fund	\$0	\$0	\$0
Total Funding	-\$10,860,000	-\$1,135,000	-\$11,995,000

**DEVELOPMENTAL CENTERS DETAILED FUNDING SUMMARY
BUDGET YEAR 2015-16**

	Major Assumptions			Subtotal, BY Major Assumptions
	PDC 32 Bed Expansion	SDC Replace/Repair of Sonoma Creek Pump Station Intake System	FDC/PDC Program Improvement Plan	
Program 20 Total	\$18,061,000	\$1,596,000	\$12,167,000	\$31,824,000
Positions	184.5	0.0	179.5	364.0
Average In-Center Population	32	0	0	32
Funding Sources				
General Fund Total	\$18,061,000	\$1,596,000	\$6,486,000	\$26,143,000
General Fund Match	0	0	5,681,000	5,681,000
General Fund Other	18,061,000	1,596,000	805,000	20,462,000
Reimbursement Total	\$0	\$0	\$5,681,000	\$5,681,000
Medi-Cal Reimbursements	0	0	5,681,000	5,681,000
Other Reimbursements	0	0	0	0
Federal Funds	\$0	\$0	\$0	\$0
Lottery Education Fund	\$0	\$0	\$0	\$0
Total Funding	\$18,061,000	\$1,596,000	\$12,167,000	\$31,824,000

**DEVELOPMENTAL CENTERS DETAILED FUNDING SUMMARY
BUDGET YEAR 2015-16**

	Lanterman Developmental Center Adjustments			Subtotal, LDC Adjustments (Section I)
	LDC Closure	FGP Transfer to Community Services	LDC Post Closure: Workman's Comp	
Program 20 Total	-\$64,762,000	-\$293,000	\$17,344,000	-\$47,711,000
Positions	-418.5	0.0	0.0	-418.5
Average In-Center Population	0	0	0	0
Funding Sources				
General Fund Total	-\$33,969,000	-\$194,000	\$9,106,000	-\$25,057,000
General Fund Match	-26,864,000	0	8,238,000	-18,626,000
General Fund Other	-7,105,000	-194,000	868,000	-6,431,000
Reimbursement Total	-\$30,793,000	\$0	\$8,238,000	-\$22,555,000
Medi-Cal Reimbursements	-26,864,000	0	8,238,000	-18,626,000
Other Reimbursements	-3,929,000	0	0	-3,929,000
Federal Funds	\$0	-\$99,000	\$0	-\$99,000
Lottery Education Fund	\$0	\$0	\$0	\$0
Total Funding	-\$64,762,000	-\$293,000	\$17,344,000	-\$47,711,000

DEVELOPMENTAL CENTERS DETAILED FUNDING SUMMARY BUDGET YEAR 2015-16

	Lanterman Developmental Center Adjustments			Subtotal, LDC Adjustments (Section II)	2015 Proposed Governor's Budget Request for BY 2015-16	Proposed Authority BY 2015-16
	LDC Post Closure: Regional Resource Development Projects	LDC Post Closure Implementation: Community State Staff	LDC Post Closure: Headquarters Positions			
Program 20 Total	\$577,000	\$283,000	\$591,000	\$1,451,000	-\$12,955,000	\$515,213,000
Positions	6.0	2.0	5.0	13.0	-190.9	4,270.2
Average In-Center Population	0	0	0	0	-102	1,010
Funding Sources						
General Fund Total	\$446,000	\$219,000	\$459,000	\$1,124,000	\$3,831,000	\$279,839,000
General Fund Match	131,000	64,000	132,000	327,000	-12,722,000	251,956,000
General Fund Other	315,000	155,000	327,000	797,000	16,553,000	27,883,000
Reimbursement Total	\$131,000	\$64,000	\$132,000	\$327,000	-\$16,651,000	\$234,722,000
Medi-Cal Reimbursements	131,000	64,000	132,000	327,000	-12,722,000	223,331,000
Other Reimbursements	0	0	0	0	-3,929,000	11,391,000
Federal Funds	\$0	\$0	\$0	\$0	-\$99,000	\$285,000
Lottery Education Fund	\$0	\$0	\$0	\$0	-\$36,000	\$367,000
Total Funding	\$577,000	\$283,000	\$591,000	\$1,451,000	-\$12,955,000	\$515,213,000

EXECUTIVE SUMMARY

CURRENT YEAR 2014-15 TO BUDGET YEAR 2015-16 COMPARISON

	Enacted Budget CY 2014-15	2015 Proposed Governor's Budget CY 2014-15	2014-15 Request	2015 Proposed Governor's Budget BY 2015-16	Incremental Change from CY to BY in the 2015 Governor's Budget
Program 20 Total	\$528,168,000	\$562,893,855	\$34,725,855	\$515,213,000	-\$47,680,855
Positions	4,461.1	4,681.1	220.0	4,270.2	-410.9
Average In-Center Population (Lanterman Excluded)	1,112	1,116	4	1,010	-106
Funding Sources					
General Fund Total	\$276,008,000	\$309,647,947	\$33,639,947	\$279,839,000	-\$29,808,947
General Fund Match	264,678,000	265,799,908	1,121,908	251,956,000	-13,843,908
General Fund Other	11,330,000	43,848,039	32,518,039	27,883,000	-15,965,039
Reimbursement Total	\$251,373,000	\$252,494,908	\$1,121,908	\$234,722,000	-\$17,772,908
Medi-Cal Reimbursements	236,053,000	237,174,908	1,121,908	223,331,000	-13,843,908
Other Reimbursements	15,320,000	15,320,000	0	11,391,000	-3,929,000
Federal Funds	\$384,000	\$384,000	\$0	\$285,000	-\$99,000
Lottery Education Fund	\$403,000	\$367,000	-\$36,000	\$367,000	\$0
Total Funding	\$528,168,000	\$562,893,855	\$34,725,855	\$515,213,000	-\$47,680,855

Position Summary

CURRENT YEAR 2014-15					
	TOTALS	LEVEL-OF-CARE			NON LOC
		PROF	NURSING	TOTAL	
2014-15 Authorized Positions	4,461.1	212.4	1,463.8	1,676.2	2,784.9
November Estimate					
Staffing Adjustment	8.0	1.0	2.5	3.5	4.5
PDC 32 Bed DDX Expansion	92.3	8.5	34.5	43.0	49.3
FDC/PDC Program Improvement Plan	119.7	0.0	69.1	69.1	50.6
November Estimate Totals	220.0	9.5	106.1	115.6	104.3
Total Positions	4,681.0	221.9	1,569.9	1,791.8	2,889.2
Total Adjustments	220.0	9.5	106.1	115.6	104.3

BUDGET YEAR 2015-16					
	TOTALS	LEVEL-OF-CARE			NON LOC
		PROF	NURSING	TOTAL	
2015-16 Authorized Positions	4,461.1	212.4	1,463.8	1,676.2	2,784.9
November Estimate					
Staffing Adjustment (Excluding LDC)	-149.4	-14.0	-124.5	-138.5	-10.9
PDC 32 Bed DDX Expansion	184.5	17.0	69.0	86.0	98.5
FDC/PDC Program Improvement Plan	179.5	0.0	103.7	103.7	75.8
LDC Staffing Adjustment	-418.5	-9.5	-75.0	-84.5	-334.0
Lanterman Closure	13.0	0.0	0.0	0.0	13.0
November Estimate Totals	-190.9	-6.5	-26.8	-33.3	-157.6
Total Positions	4,270.2	205.9	1,437.0	1,642.9	2,627.3
Total Adjustments	-190.9	-6.5	-26.8	-33.3	-157.6

Population

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SYSTEMWIDE POPULATION (Excludes Lanterman)

Current Year 2014-15					
	November Estimate			Population Change	
	2014-15 Enacted Budget	2015 Proposed Governor's Budget for CY	Change from Enacted to November Estimate	Population Change CY 2014-15	Percentage Annual Change
Beginning Population, July 1, 2014	1,165	1,187	22	22	2%
Admissions*	52	88	36	36	69%
Placements	-124	-150	-26	-26	21%
Deaths	-41	-41	0	0	0%
Ending Population, June 30, 2015	1,052	1,084	32	32	3%
<i>DC Average Population Detail:</i>					
Canyon Springs	58	58	0	0	0%
Fairview	283	282	-1	-1	0%
Porterville	381	385	4	4	1%
Sonoma	405	406	1	1	0%
Total Average Population	1,127	1,131	4	4	0%
Average Population					
On Leave	-15	-15	0	0	0%
Total Average In-Center Population	1,112	1,116	4	4	0%
<i>DC Average In-Center Population Detail:</i>					
Canyon Springs	58	58	0	0	0%
Fairview	278	277	-1	-1	0%
Porterville	376	380	4	4	1%
Sonoma	400	401	1	1	0%
Total Average In-Center Population	1,112	1,116	4	4	0%

*Admissions include transfers to Canyon Springs, and the 32 Bed DDX Expansion at Porterville DC

Assumptions/Methodology:

Historical data indicates that more placements occur in the second half of the fiscal year due to resource development (new providers/beds) in the community. The average in-center population estimate is weighted to account for this factor.

SYSTEMWIDE POPULATION

Budget Year 2015-16					
	November Estimate			Population Change	
	2014-15 Enacted Budget	2015 Proposed Governor's Budget for BY	Change from Enacted to November Estimate	Population Change BY 2015-16	Percentage Annual Change
Beginning Population, July 1, 2015	1,165	1,084	-81	-81	-7%
Admissions**	52	49	-3	-3	-6%
Placements	-124	-144	-20	-20	16%
Deaths	-41	-38	3	3	-7%
Ending Population, June 30, 2016	1,052	951	-101	-101	-10%
<i>DC Average Population Detail:</i>					
Canyon Springs	58	58	0	0	0%
Fairview	283	238	-45	-45	-16%
Porterville	381	372	-9	-9	-2%
Sonoma	405	357	-48	-48	-12%
Total Average Population	1,127	1,025	-102	-102	-9%
Average Population	1,127	1,025	-102	-102	-9%
On Leave	-15	-15	0	0	0%
Total Average In-Center Population	1,112	1,010	-102	-102	-9%
<i>DC Average In-Center Population Detail:</i>					
Canyon Springs	58	58	0	0	0%
Fairview	278	233	-45	-45	-16%
Porterville	376	367	-9	-9	-2%
Sonoma	400	352	-48	-48	-12%
Total Average In-Center Population	1,112	1,010	-102	-102	-9%

**Admissions include transfers to Canyon Springs

Assumptions/Methodology:

Historical data indicates that more placements occur in the second half of the fiscal year due to resource development (new providers/beds) in the community. The average in-center population estimate is weighted to account for this factor.

SYSTEMWIDE POPULATION

Current Year 2014-15 to Budget Year 2015-16				
	2015 Proposed Governor's Budget for CY	2015 Proposed Governor's Budget for BY	Change from CY to BY	Percentage Change
Beginning Population, July 1	1,187	1,084	-103	-9%
Admissions	88	49	-39	-44%
Placements	-150	-144	6	-4%
Deaths	-41	-38	3	-7%
Ending Population, June 30th	1,084	951	-133	-12%
Average Population	1,131	1,025	-106	-9%
On Leave	-15	-15	0	0%
Total Average In-Center Population	1,116	1,010	-106	-10%
<i>DC Average In-Center Population Detail:</i>				
Canyon Springs	58	58	0	0%
Fairview	277	233	-44	-16%
Porterville	380	367	-13	-3%
Sonoma	401	352	-49	-12%
Total Average In-Center Population	1,116	1,010	-106	-10%

Lanterman Population

	Beginning Population	Placements	Deaths	Ending Population*
2014-15 Enacted Budget	22	-22	0	0
2015-16 BY Proposed	0	0	0	0

*Population in Lanterman is zero as of December 23, 2014. Lanterman is closed as of December 31, 2014.

**CLIENT DEVELOPMENT EVALUATION REPORT (CDER) MIX PERCENTAGE
(SYSTEMWIDE)**

Preferred Programs:	CMC 1	PD 2	AUT 3	SENS 4	DDX 5	BEH 6	HAB 7	SOC 8	P&S 9
2014 November Estimate (CY 2014-15)	45.9%	8.8%	10.5%	2.6%	7.4%	21.2%	2.2%	0.4%	1.0%
2014 November Estimate (BY 2015-16)	45.0%	7.3%	10.7%	2.1%	9.8%	23.1%	1.0%	0.2%	0.9%

Program Type:

CMC: Continuing Medical Care
 PD: Physical Development
 AUT: Autism
 SENS: Sensory Development
 DDX: Dual Diagnosed

BEH: Behavior Development
 HAB: Habilitation
 SOC: Social Development
 P&S: Physical and Social Development

Statements of Change

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Program Update
Staffing Population Adjustments
Level-of-Care Staffing
CURRENT YEAR 2014-15

	Enacted Budget 1,116	Governor's Budget 1,116	Net Change 0	Fiscal Impact		
					003	004
PROFESSIONAL:						
Medical	22.0	22.0	0.0	\$0	\$0	\$0
Psychology	45.0	45.0	0.0	0	0	0
Social Work	38.0	38.0	0.0	0	0	0
Rehab Therapy	41.0	41.0	0.0	0	0	0
Phys./Occ. Therapy	0.0	0.0	0.0	0	0	0
Education	55.0	56.0	1.0	37,006	0	37,006
Speech	0.0	0.0	0.0	0	0	0
Subtotal, Professional	201.0	202.0	1.0	\$37,006	\$0	\$37,006
NURSING:						
	1,287.5	1,290.0	2.5	116,796	116,796	0
Subtotal : LOC Permanent	1,488.5	1,492.0	3.5	\$153,802	\$116,796	\$37,006
TEMPORARY HELP						
Physical Therapy (PT)/Occupational Therapy (OT)				\$0	\$0	\$0
Speech Therapy (ST)				0	0	0
Subtotal, Temporary Help				\$0	\$0	\$0
Subtotal, Salaries and Wages				\$153,802	\$116,796	\$37,006
STAFF BENEFITS						
OASDI/Medicare				\$11,972	\$9,141	\$2,831
Health				26,142	20,070	6,072
Retirement				29,877	22,653	7,224
Subtotal, Staff Benefits				\$67,991	\$51,864	\$16,127
TOTAL, PERSONAL SERVICES				\$221,793	\$168,660	\$53,133
OPERATING EXPENSE & EQUIPMENT						
OT/PT Contract Services				-\$3,907	-\$3,907	\$0
ST Contract Services				-1,595	0	-1,595
Foodstuffs	\$1,829			0	0	0
Drugs, Lab & Supply	\$1,371			0	0	0
Clothing	\$586			0	0	0
TOTAL, OPERATING EXPENSE & EQUIPMENT				-\$5,502	-\$3,907	-\$1,595
Subtotal Request				\$216,291	\$164,753	\$51,538
*LDC costed separately due to closure process						
TOTAL REQUEST			3.5	\$216,291	\$164,753	\$51,538
ROUNDING				\$217,000	\$165,000	\$52,000
TOTAL FUNDING				\$216,000	\$165,000	\$51,000
General Fund				\$135,000	\$107,000	\$28,000
General Fund Match				81,000	58,000	23,000
General Fund Other				54,000	49,000	5,000
Reimbursements				\$81,000	\$58,000	\$23,000
Medi-Cal Reimbursements				81,000	58,000	23,000

Program Update
Staffing Population Adjustments
Non-Level of Care Staffing (Excludes Lanterman)

CURRENT YEAR 2014-15

	Net Position Change from Enacted Budget	Net Change in Costs from Enacted Budget
ADMINISTRATION		
<i>TOTAL ADMINISTRATION</i>	0.0	\$0
CLINICAL SERVICES		
SHIFT SUP (RNII/SPT)	1.0	55,077
SPT SERV ASST-INTRPRET/HOSPITAL WORKER	3.5	172,746
PSYCH. TECH. (Active Treatment)	1.0	40,127
IPC	-1.0	-48,408
<i>TOTAL CLINICAL SERVICES</i>	4.5	\$219,542
SUPPORT SERVICES		
FSW I/II-PRESENTATION	-1.0	-28,312
SUPERVISING HOUSEKEEPER I	1.0	29,820
<i>TOTAL SUPPORT SERVICES</i>	0.0	\$1,508
PLANT OPERATIONS		
<i>TOTAL PLANT OPERATIONS</i>	0.0	\$0
		\$221,050
STAFF BENEFITS		
OASDI/Medicare		\$16,910
Health		29,225
Retirement		43,266
Sub-Total, Staff Benefits		\$89,401
TOTAL, PERSONAL SERVICES	4.5	\$310,451
ROUNDED		\$310,000
General Fund		\$192,000
General Fund Match		118,000
General Fund Other		74,000
Medi-Cal Reimbursements		\$118,000
*LDC costed seperately due to closure process		
CHANGES IN STAFFING		
ENACTED BUDGET STAFFING		2,407.0
GOVERNOR'S BUDGET STAFFING		2,411.5
CHANGE		4.5

Program Update
Staffing Population Adjustments
Level-of-Care Staffing
BUDGET YEAR 2015-16

	Enacted Budget	Governor's Budget	Net Change	Fiscal Impact		
					003	004
PROFESSIONAL:						
Medical	22.0	22.0	0.0	\$0	\$0	\$0
Psychology	45.0	41.0	-4.0	-363,011	-363,011	0
Social Work	38.0	36.0	-2.0	-102,039	-102,039	0
Rehab Therapy	41.0	37.0	-4.0	-239,939	-239,939	0
Phys./Occ. Therapy	0.0	0.0	0.0	0	0	0
Education	55.0	51.0	-4.0	-148,024	0	-148,024
Speech	0.0	0.0	0.0	0	0	0
Subtotal, Professional	201.0	187.0	-14.0	-\$853,013	-\$704,989	-\$148,024
NURSING:	1,287.5	1,163.0	-124.5	-5,815,995	-5,815,995	0
Subtotal : LOC Permanent	1,488.5	1,350.0	-138.5	-\$6,669,008	-\$6,520,984	-\$148,024
TEMPORARY HELP						
Physical Therapy (PT)/Occupational Therapy (OT)				\$0	\$0	\$0
Speech Therapy (ST)				0	0	0
Subtotal, Temporary Help				\$0	\$0	\$0
Subtotal, Salaries and Wages				-\$6,669,007	-\$6,520,984	-\$148,024
STAFF BENEFITS						
OASDI/Medicare				-\$474,817	-\$464,197	-\$10,620
Health				-1,134,023	-1,107,812	-26,211
Retirement				-1,329,116	-1,298,290	-30,826
Subtotal, Staff Benefits				-\$2,937,956	-\$2,870,299	-\$67,657
TOTAL, PERSONAL SERVICES				-\$9,606,963	-\$9,391,283	-\$215,681
OPERATING EXPENSE & EQUIPMENT						
OT/PT Contract Services				-\$522,672	-\$522,672	\$0
ST Contract Services				-223,686	0	-223,686
Foodstuffs	\$1,829			-245,086	-245,086	0
Drugs, Lab & Supply	\$1,371			-183,714	-183,714	0
Clothing	\$586			-78,524	-78,524	0
TOTAL, OPERATING EXPENSE & EQUIPMENT				-\$1,253,682	-\$1,029,996	-\$223,686
Subtotal Request				-\$10,860,645	-\$10,421,279	-\$439,367
TOTAL REQUEST				-138.5	-\$10,860,645	-\$10,421,279
ROUNDING				-\$10,860,000	-\$10,421,000	-\$439,000
TOTAL FUNDING				-\$10,860,000	-\$10,420,000	-\$440,000
General Fund				-\$5,928,000	-\$5,683,000	-\$245,000
General Fund Match				-4,932,000	-4,737,000	-195,000
General Fund Other				-996,000	-946,000	-50,000
Reimbursements				-\$4,932,000	-\$4,737,000	-\$195,000
Medi-Cal Reimbursements				-4,932,000	-4,737,000	-195,000

Program Update
Staffing Population Adjustments
Non-Level of Care Staffing

BUDGET YEAR 2015-16

	Net Position Change from Enacted Budget	Net Change in Costs from Enacted Budget
ADMINISTRATION		
HEALTH RECD TECH III/I-OT	-5.0	-184,855
<i>TOTAL ADMINISTRATION</i>	-5.0	-\$184,855
CLINICAL SERVICES		
PROGRAM/RESIDENCE ADMINISTRATION		
PROGRAM DIRECTOR DS	-1.0	-80,478
PROG ASST DS	-1.0	-66,520
NURSING COORDINATOR	-1.0	-70,159
RESIDENCE MANAGERS (RNIII/Unit Sup)	1.0	62,506
SHIFT SUP (RNII/SPT)	4.4	242,339
HEALTH SERVICES SPECIALIST	-4.0	-260,156
OT/OA	-2.0	-62,974
SPT SERV ASST-INTRPRET/HOSPITAL WORKER	3.5	172,746
PSYCHIATRIC TECH (Escorts)	-3.0	-120,381
PSYCH. TECH. (Active Treatment)	6.0	240,762
PHARMACIST I/PHARM ASST	-3.0	-214,881
IPC	-4.0	-176,612
MIN DATA SET COORD. (RN)	-3.0	-184,716
NURSE PRACTITIONER	-1.0	-82,767
<i>TOTAL CLINICAL SERVICES</i>	-8.1	-\$601,291
SUPPORT SERVICES		
FAC ENV AUDIT TECH	-1.0	-33,128
CLINICAL DIETITIAN	-2.0	-87,848
FSW I/II-PRODUCTION	-2.0	-56,624
FSW I/II-PRESENTATION	4.8	135,898
SEAMER/ASST SEAMER	0.0	0
SUPERVISING HOUSEKEEPER I	2.0	59,640
CUSTODIAN	2.4	66,617
LAUNDRY WORKER/LABORER	-1.0	-32,969
AUTOMOTIVE EQUIPMENT OPERATOR I	-1.0	-40,365
<i>TOTAL SUPPORT SERVICES</i>	2.2	\$11,220
PLANT OPERATIONS		
<i>TOTAL PLANT OPERATIONS</i>	0.0	\$0
		-\$774,926

Program Update
Staffing Population Adjustments
Non-Level of Care Staffing

BUDGET YEAR 2015-16

Net Position Change from Enacted Budget	Net Change in Costs from Enacted Budget
--	--

STAFF BENEFITS

OASDI/Medicare		-\$56,841
Health		-143,572
Retirement		-159,634
Sub-Total, Staff Benefits		-360,047
TOTAL, PERSONAL SERVICES	-10.9	-\$1,134,973
ROUNDED		-\$1,135,000
General Fund		-\$629,000
General Fund Match		-506,000
General Fund Other		-123,000
Medi-Cal Reimbursements		-\$506,000

*LDC costed seperately due to closure process

CHANGES IN STAFFING

ENACTED BUDGET STAFFING		2,419.4
GOVERNOR'S BUDGET STAFFING		2,408.5
CHANGE		-10.9

NEW MAJOR ASSUMPTION

Funding to Close Lanterman Developmental Center's Workers' Compensation Claims

DESCRIPTION:

The Department requests \$17.3 Million TF (\$9.1 Million GF) to pursue settlement of open Workers' Compensation claims for Lanterman Developmental Center (DC). For one year after closure of the facility, the State has the possibility of claiming matching federal funds for these expenditures.

In prior closures, the Department has moved the administration of open Workers' Compensation claims to another DC. Without a settlement, the Department could pay Workers' Compensation costs indefinitely. For example, Stockton and Camarillo closed in 1995 and 1996, respectively, and the Department is still paying on a few remaining open claims today. The Department of Healthcare Services (DHCS) in recent audits of DC cost reporting has disallowed claiming matching federal funds for Workers' Compensation claims from closed DCs.

Lanterman DC has approximately 217 individuals with open Workers' Compensation claims. Of these, 177 individuals have been rated as "permanent and stationary," with dates of injury going back as far as 1975. The Department has received a preliminary valuation from PricewaterhouseCoopers LLP of \$32 Million for the unpaid claim liability for all cases open at Lanterman DC as of May 2014. The State Compensation Insurance Fund estimates \$17.3 Million as the future paid cost for the cases rated "permanent and stationary" that can be considered for settlement.

In recent years, Lanterman DC has expended between \$4 Million and \$6 Million annually in Workers' Compensation costs. This minimum level of cost must be considered in the 2015-16 budget as the costs to operate Lanterman DC were removed in the 2014-15 budget.

This estimate assumes 95% of costs at Lanterman DC are typically eligible for Medi-Cal reimbursement at 50% Federal Medical Assistance Percentage resulting in an overall total Medi-Cal reimbursement rate of 47.5%. Because the funds would be spent prior to December 2015 and would be considered in the final cost report for Lanterman DC, this estimate assumes federal funds are available for these costs.

NEW MAJOR ASSUMPTION

Funding to Close Lanterman Developmental Center's Worker's Compensation Claims

The Department requests \$17,344,000 (\$9,106,000 GF) to pursue settlement of open workers' compensation claims for Lanterman DC.

Budget Year 2015-16 Total	\$17,344,000
General Fund	\$9,106,000
Reimbursements	\$8,238,000

REVISED MAJOR ASSUMPTION

Lanterman Developmental Center (DC) Post Closure

DESCRIPTION:

The Department of Developmental Services (DDS) will be in possession of the Lanterman DC property until June 30, 2015. The property is expected to transfer to the California State University System on July 1, 2015. As a result, DDS will no longer be statutorily required to operate the Outpatient Clinic at Lanterman DC.

DDS requests 13.0 positions for the post closure period in BY 2015-16, and beyond, for transitioning of consumers into the community as detailed below:

DDS is requesting to extend the Regional Resource Development Projects (RRDP) to ensure consumers moving from Lanterman DC have a successful transition to community living arrangements, and assist consumers already residing in the community maintain their living arrangements should difficulties arise. DDS requests 6.0 positions for the post closure period in BY 2015-16.

The trailer bill to the Budget Act of 2010 (SB 853, Chapter 717, Statutes of 2010, Committee on Budget), enacted October 19, 2010, authorized DDS employees working at Lanterman DC to work in the community with former residents while remaining as state employees. This program is referred to as the Community State Staff (CSS) Program. DDS is requesting to extend the CSS Program so that Lanterman DC employees, through contract with a community provider or a RC, are able to directly support former residents of Lanterman DC in their new homes; and thereby, enhance the quality and promote continuity of services in the community. DDS is requesting 2.0 positions for the administration of the CSS program for the post closure period in BY 2015-16.

DDS requests 5.0 positions to be stationed in headquarters for the post closure period as detailed at D-2.7 through D-2.8.

**Department of Developmental Services
Developmental Centers Programs**

Program Update

**Lanterman Post Closure: Regional Resource Development Projects (RRDP)
Budget Year 2015-16**

Through planning and monitoring activities, the Regional Resource Development Projects (RRDP) help ensure consumers within developmental centers experience a successful transition to community living arrangements and help consumers already residing in the community maintain their living arrangements should difficulties arise. DDS requests the authority to retain the positions listed below for the post closure period in BY 2015-16

	ANNUAL SALARY	POS.	BY COST	
RRDP				
PERSONAL SERVICES				
8351	COMMUNITY PROGRAM SPECIALIST IV	83,148	1.0	83,148
8352	COMMUNITY PROGRAM SPECIALIST II	66,096	2.0	132,192
8353	COMMUNITY PROGRAM SPECIALIST I	54,948	2.0	109,896
1139	OFFICE TECHNICIAN (TYPING)	40,344	1.0	40,344
	SUBTOTAL		6.0	365,580
	PERSONAL SERVICES SUBTOTAL		6.0	365,580
	STAFF BENEFITS			
	OASDI/MEDICARE	7.65%		27,967
	HEALTH	19.07%		69,716
	RETIREMENT	24.28%		88,763
	STAFF BENEFITS SUBTOTAL			186,446
	TOTAL PERSONAL SERVICES		6.0	\$552,026
OE&E				
	GENERAL EXPENSE			\$10,000
	VEHICLE OPERATIONS			\$15,000
	TOTAL OE&E			\$25,000
	TOTAL		6.0	\$577,026
	Rounding:			577,000
	Funding:			
	General Fund 003:			446,000
	Medi-Cal Reimbursements 003:			131,000

**Program Update
Lanterman Developmental Center
Post Closure: Community State Staff
Budget Year 2015-16**

STATE STAFF IN THE COMMUNITY

The trailer bill to the Budget Act of 2010 (SB 853, Chapter 717, Statutes of 2010, Committee on Budget), enacted October 19, 2010, authorized DDS employees working at Lanterman to work in the community with former residents while remaining state employees. This program is referred to as the Community State Staff (CSS) Program. Lanterman employees, through contract, are able to directly support former residents of Lanterman in their new homes, and thereby enhance the quality and promote continuity of services in the community. In addition to previously approved CSS positions the DDS is requesting authority for the following positions for the administration of the CSS program for the post closure period in BY 2015-16.

CSS ADMINISTRATION	ANNUAL SALARY		BY 2014-15 COST
8268 PROGRAM DIRECTOR	93,780	1.0	93,780
1303 PERSONNEL SPECIALIST I	66,096	1.0	93,780
		2.0	\$ 187,560
Staff Benefits			
OASDI/Medicare	7.65%		\$14,348
Health	19.07%		35,768
Retirement	24.28%		45,540
	Total Benefits		\$95,656
TOTAL, ADMINISTRATION FOR STATE STAFF		2.0	\$283,216
TOTAL , STATE STAFF IN THE COMMUNITY		2.0	\$283,216
		Rounding:	\$283,000
		General Fund 003:	\$219,000
		Medi-Cal Reimbursements 003:	\$64,000

REVISED MAJOR ASSUMPTION

Lanterman Developmental Center (DC) Post Closure – Headquarters Positions

DESCRIPTION:

DDS has identified an ongoing need for key positions that are stationed at Headquarters (HQ), but tied directly to the closure of Lanterman DC, and an expansion of the position roles with the future of the Developmental Center system is proposed. DDS is requesting reauthorization of 5.0 HQ positions originally provided for oversight of the closure and post closure activities at Lanterman DC during FY 2014-15. These positions include a CEA, a Research Program Specialist, a Research Program Analyst II, an Associate Information Systems Analyst, and an Associate Personnel Analyst.

The CEA (Level A) position was responsible for the project management of the closure, and will transition to a DC system wide role of primary liaison between DDS and families of remaining residents at the various DCs. As the future role of the DCs change, and an acceleration of placements occur, there will be a greater and ongoing need for the unique skillset developed during the Lanterman DC shutdown process. The overall welfare of the residents is of primary concern, and having a primary point of contact outside of a specific DC for the family members or advocates is crucial to a successful transition out of the DC system and into the community.

The Research Program Specialist and Research Analyst II positions are responsible for the oversight/certification of the Senate Bill 853 homes in the community, on-going monitoring requirements, and management of the continuation phase within the Community Placement Plan for the Lanterman DC consumers that were placed during FYs 2013-14 and 2014-15. This request is for the post closure period in 2015-16.

The HQ Associate Information Systems Analyst (AISA) was initially identified as a mission-critical position in FY 2012-13 as the primary back-up to the Lanterman DC AISA established under the Lanterman DC warm shutdown workload. This position continues to be mission-critical because of the necessary IT functions that must be performed during the warm shutdown. Consequently, this position must be retained. The HQ AISA is still required to secure, monitor access rights to applications, make revisions regarding access rights as appropriate, and archive all data and equipment which includes the final closing down of all IT systems at Lanterman DC, and the final disposition of all computer equipment. Disposition includes securing the data, transferring the data to HQ, wiping all hard drives, preparing equipment, and arranging for surplus and e-waste. Also, as the future

role of the DCs changes and an acceleration of placements occur, there will be a greater need for HQ IT support for downsizing of the DC IT systems. This position provides on-site and remote support as plans are developed to move or retrieve equipment as offices are consolidated. With the downsizing of IT staff locally to one position, this AISA position is mandatory from a disaster security perspective. It is not possible to provide the essential day-to-day customer support required, as well as ongoing network and security functions necessary for adequate protection. This position provides the experience, skills and knowledge gained from previous closures and is vital to maintaining IT operations for direct care and administrative staff until final closure.

The HQ Associate Personnel Analyst (APA) position, initially established in FY 2012-13 for the purposes of developing the Lanterman DC layoff plan and serving as the subject matter expert for the layoff, continues to be necessary for processing and guiding the DDS for the current and future layoffs at the DCs, and must be retained. The APA is needed to perform the final layoff activities for the Warm Shutdown and Clinic staff that were laid off on by June 30, 2015. After the closure of Lanterman DC, DDS believes the knowledge, skills, and abilities of the APA is a critical asset as future DCs will face a declining resident population and continuing staff reductions and layoffs. The functions and tasks of this position are sensitive, time intensive and directly involve discussions and actions with the DCs to ensure their concerns, input and issues are addressed. Even though each phase of layoff requires similar actions and documents, DDS must obtain CalHR approval for each action and document. Frequently, there are changes to the documents even after CalHR's approval was received for a previous layoff phase. It's apparent that the HQ APA position serves a critical role in the layoff process to ensure it is conducted fairly, and that all layoff requirements are complied with for the legal layoff of employees. In addition, it has been DDS' experience with the facility closures that as the DC's administrative and human resource staff leave the DC as a result of the staffing reductions, there is a need for HQ Personnel to assume a greater role in the overall personnel functions for the DCs, including processing payroll transactions, classification and pay activities, and drafting disciplinary actions.

**Department of Developmental Services
Developmental Centers Programs**

**Program Update
Lanterman Post Closure: Headquarters Positions
Budget Year 2015-16**

Headquarters positions necessary to provide oversight of the closure and post closure activities at Lanterman Developmental Center (DC). (See Revised Major Assumption for DC Post Closure: Headquarters Position 2015-16)

	ANNUAL SALARY	POS.	BY COST
CLOSURE TEAM			
PERSONAL SERVICES			
7500 CEA A	106,488	1.0	106,488
5742 RESEARCH PROGRAM SPECIALIST	74,052	1.0	74,052
1470 ASSOC. INFO. SYSTEMS ANALYST-SPEC.	74,340	1.0	74,340
5732 RESEARCH ANALYST II	69,408	1.0	69,408
5142 ASSOC. PERSONNEL ANALYST	67,416	1.0	67,416
SUBTOTAL		5.0	391,704
		5.0	391,704
PERSONAL SERVICES SUBTOTAL			
		5.0	391,704
STAFF BENEFITS			
OASDI/MEDICARE	7.65%		29,965
HEALTH	19.07%		74,698
RETIREMENT	24.28%		95,106
STAFF BENEFITS SUBTOTAL			199,769
TOTAL PERSONAL SERVICES			
		5.0	\$591,473
TOTAL			
		5.0	\$591,473
	Rounding:		591,000
	Funding:		
	General Fund 003:		459,000
	Medi-Cal Reimbursements 003:		132,000

NEW MAJOR ASSUMPTION

Sonoma Developmental Center Replacement of Sonoma Creek Pump Station Intake System (Phase I)

DESCRIPTION:

The Department of Developmental Services (DDS) is requesting \$1.6 Million (General Fund) in funding to prepare Preliminary Plans and Working Drawings for Phase I of the project to replace the water diversion intake structure at Sonoma Creek. The structure that was designed and built to divert water for use by the residents and staff at Sonoma Developmental Center (DC) was damaged, and the various components require either replacement or repair.

The purpose of this request is to secure funding for Phase I of the project; the preparation of Preliminary Plans and Working Drawings documents are anticipated to be completed by June 2016.

Sonoma DC is a state-owned and operated facility located in Eldridge, California. Its primary purpose is to provide care and treatment for individuals with developmental disabilities. Sonoma DC's only source of water for its own use comes from Fern Lake and Lake Suttonfield; and these lakes are dependent upon seasonal diversions from Mill Creek, Asbury Creek, and Sonoma Creek. Water is pumped from Sonoma Creek to fill Lake Suttonfield, and Fern Lake is in turn fed by gravity ditches from Mill and Asbury Creeks. Sonoma DC's on-site water treatment facility can be fed from either Lake Suttonfield or Fern Lake. The water is then treated prior to distribution and potable use for Sonoma DC's facilities and fire protection requirements. Water diversions from the creeks are monitored via water meters installed at their intake structures and reported annually to the State Water Resources Control Board (SWRCB). Water diversion from Sonoma Creek is limited by two existing water diversion licenses that were granted by SWRCB to Sonoma DC in the 1930s (License Numbers 2451 and 3082).

The existing Sonoma Creek Pump Station intake structure has been damaged by large storm floods over an extended period, and this damage combined with the recent chronic low flows associated with California's drought has not allowed the Sonoma DC to fully utilize the pump station equipment at maximum capacity. Existing law requires that water diverters make full and beneficial use of allocated water. Further, water volumes not utilized for a period of five years or more could be subject to forfeiture.

The project is geared to providing a consistent healthy water supply to our residents, and ensuring proper environmentally-safe usage of the creek waters.

During drought years, Sonoma DC has needed all of its water collection sites, including the Sonoma Creek Diversion structure, to capture enough water to fill the reservoirs to a level that would support the facility. Sufficient water impound is essential to the facility as water is used for heating, cooling, cooking, laundry, fire suppression, irrigation, and most importantly, the care and health of the residents who live at the facility. Sonoma DC has more than 900 acres of property, much of it hillside and mountainous grass, brush, forest, and natural habitat that is highly vulnerable to wild fires, especially in drought years. As the facility relies on its water supply for critical fire protection to safeguard the fragile resident population from the encroachment of fires onto the inhabited parts of the campus, it is imperative that critical water levels be maintained in the reservoirs.

The inability to divert water during a drought due to the disrepair of the existing diversion facility not only has left water storage levels precariously low, jeopardizing facility operations and residents health and safety, but it jeopardizes continuation of the facility's water rights that have been in existence since the 1930s. If the water supply cannot sustain the facility, Sonoma DC will be required to purchase water to cover the shortfall at significant cost to the State. The estimated costs for Preliminary Plans and Working Drawings are based on standards used by Department of General Services, Real Estate Services Division, Project Management and Development Branch.

Preliminary Plans will commence upon the signing of the Budget Act, and will immediately be followed by Working Drawings. Both will be completed by June 2017 and are dependent on significant interdepartmental coordination.

The funding request is \$900,600 GF for Preliminary Plans, another \$695,500 GF for Working Drawings, for a total of \$1,596,100 GF for Phase I of the project.

New Major Assumption

Sonoma Developmental Center Replacement of Sonoma Creek Pump Station Intake System (Phase I)

The Department of Developmental Services (DDS) is requesting \$1.6 million (General Fund) in funding to prepare Preliminary Plans and Working Drawings for Phase I of the project to replace the water diversion intake structure at Sonoma Creek.

	TOTAL COST
Budget Year 2015-16	
Preliminary Plans	900,600
Working Drawings	695,500
Total Request, Phase I	<u>\$1,596,100</u>
TOTAL FUNDING	\$1,596,000
General Fund	\$1,596,000
Reimbursements	\$0

NEW MAJOR ASSUMPTION

Porterville Incompetent to Stand Trial Expansion

DESCRIPTION:

The Department is requesting \$9 Million GF and 92.3 positions in Current Year 2014-15, and \$18.1 Million GF and 184.5 positions in BY 2015-16, to increase the capacity of Porterville Developmental Center's (DC) Secure Treatment Program (STP) by 32 beds. This expansion is needed to accommodate the increasing number of Developmentally Disabled individuals found Incompetent to Stand Trial (IST) and will require trailer bill language to permit increased admissions.

Porterville DC's STP currently serves 170 residents who have been judicially committed because of their behavior in the community and involvement with the criminal justice system. Many of these individuals are court ordered to the STP to receive training to determine if they can gain the competency needed to stand trial for their alleged crimes. Although some of these individuals are Medi-Cal eligible, DDS does not receive federal matching funds from Centers for Medicaid and Medicare (CMS) for the STP due to lack of federal certification for this population. As a result, the sole source of funding is the GF. The Porterville DC STP was originally certified at the time it was opened; however, it was subsequently decertified due to the "correctional-type" of setting with fences, guard posts and sally ports. In 2009, the DDS pursued certification efforts again, but was unsuccessful due to a variety of factors including the "correctional-type" setting.

As of January 7, 2015, there are an estimated 52 individuals who have been issued court orders to receive competency training, and due to the statutorily limited bed availability, these individuals continue to be in jail or juvenile hall, pending availability of services at Porterville DC's STP. Due to the statutory limitation on the number of beds available at Porterville DC, Superior Courts have begun issuing "orders to show cause" to the Department requiring legal counsel to appear in court to justify the lengthy wait for admission of these individuals, some of whom have been waiting up to a year. Since 2012, the STP has admitted 45 individuals, but the admission need continues to exceed the available beds. To address this situation, DDS has begun evaluating the need to increase community-based programs that offer competency services that meet the needs of the court for secure settings, increase the number of beds within the STP, or both.

New Major Assumption Porterville Incompetent to Stand Trial Expansion

Staffing Level of Care	CY 2014-15		BY 2015-16	
	Positions	Salaries	Positions	Salaries
Medical	0.5	90,978	1.0	181,956
Psychology	1.5	412,650	3.0	825,300
Social Work	0.5	36,144	1.0	72,288
Rehab Therapy	1.5	99,585	3.0	199,170
Education	4.5	242,649	9.0	485,298
Nursing	34.5	2,184,885	69.0	4,369,770
Subtotal, Level of Care	43.0	3,066,891	86.0	6,133,782
Non Level of Care				
Health Recd Tech II/I/OT	2.2	81,002	4.4	162,004
Prog Tech/OT/OA/Acct Clerk	2.0	62,340	4.0	124,680
Pers Serv Spec I	0.5	17,556	1.0	35,112
Nurse/Psych Tech Instr	0.5	38,547	1.0	77,093
Residence Managers (RNIII/Unit Sup)	2.9	281,193	5.8	562,385
Shift Sup (RNII/SPT)	4.7	337,006	9.5	674,012
Program Assistant	0.5	33,929	1.0	67,857
Psych Tech (Escorts)	1.2	72,490	2.4	144,979
Psych Tech (Active Treatment)	4.2	254,659	8.4	509,318
Pharmacist I/Pharm Asst	1.2	87,239	2.4	174,478
Physical & Surgeon	0.5	84,322	1.0	168,643
Community Prog Spec II	0.5	29,688	1.0	59,376
Stds Compliance Coordinator	0.5	34,187	1.0	68,373
IPC	2.4	116,179	4.8	232,358
AGPA/SSA	0.5	29,688	1.0	59,376
Nurse Practitioner	0.5	45,187	1.0	90,374
RN/LVN/Psych Tech	0.5	37,812	1.0	75,623
Fac Env Audit Tech	1.2	40,547	2.4	81,094
Cook II/I	0.5	17,940	1.0	35,880
Food Servie Super I	1.2	40,008	2.4	80,016
Food Service Worker I/II-Production	1.2	34,649	2.4	69,298
Food Service Worker I/II-Presentation	7.7	222,054	15.4	444,108
Supervising Housekeeper I	1.2	36,499	2.4	72,998
Custodian	4.9	137,425	9.7	274,849
Automotive Equipment Operator I	5.6	224,789	11.1	449,577
Bldg Maint Worker	0.5	21,076	1.0	42,151
Subtotal, Non Level of Care	49.3	2,418,006	98.5	4,836,012
Total, Salaries	92.3	5,484,897	184.5	10,969,794
Benefits				
OASDI/Medicare	7.65%	419,592		839,184
Health	20.19%	962,425		1,924,849
Retirement	24.28%	1,326,117		2,652,234
Total, Benefits	52.12%	2,708,134		5,416,267
Total, Personal Services	92.3	\$8,193,031	184.5	\$16,386,061

New Major Assumption Porterville Incompetent to Stand Trial Expansion

Operating Expense and Equipment (OE&E)

General Expense	10,000	20,000
Minor Equipment	122,000	127,000
Major Equipment	260,000	260,000
Communications	1,000	2,000
Travel	2,000	3,000
Training	1,000	1,000
Facilities Operations	52,000	65,000
Janitorial Supplies	5,000	10,000
Utilities	75,000	150,000
Consultant and Professional Services	0	305,000
License Renewal Fees	7,000	15,000
Health & Medical	47,000	95,000
External Other	9,000	19,000
Data Processing	1,000	1,000
Clothing & Personal Supplies	13,000	44,000
Foodstuff	48,000	149,000
Housekeeping	6,000	12,000
Laundry Master Contract	17,000	33,000
Laundry Supplies	2,000	3,000
Resident Wages	9,000	17,000
All Other Misc. Client Costs	2,000	4,000
Drugs, Lab & Central Supply	139,000	304,000
Educational Supplies	7,000	14,000
Lottery	6,000	12,000
Uniform Allowance	1,000	2,000
Vehicle Operations	4,000	8,000
Total, OE&E	\$846,000	\$1,675,000
Total Request	92.3 \$9,039,031	184.5 \$18,061,061
Total Request, Rounded	92.3 \$9,039,000	184.5 \$18,061,000
Funding		
General Fund	9,039,000	18,061,000
Reimbursement	0	0

REVISED MAJOR ASSUMPTION

Sonoma Developmental Center Medi-Cal Reimbursement Backfill

DESCRIPTION:

The Department of Developmental Services (DDS) had entered into a Program Improvement Plan (PIP) with the California Department of Public Health (CDPH) to address deficiencies in the Intermediate Care Facility (ICF) at the Sonoma Developmental Center (DC). CDPH is the State survey and certification agency on behalf of the federal Centers for Medicare and Medicaid Services. Extensive survey activity had occurred since May 2012 for the Intermediate Care Facility (ICF) at Sonoma DC, resulting in federal findings of non-compliance and State licensing citations. All the federal findings were in relation to the ICF at Sonoma DC, and did not apply to the Nursing Facility.

The Sonoma DC ICF currently consists of eleven occupied residential units. While deficiencies were noted in the management, training, and staffing affecting all ICF units, the problems were more significant in four of those ICF units. DDS amended the Medicaid Provider Agreement to discontinue Medicaid certification for these four ICF units with the most significant problems, effective January 17, 2013. DDS committed to fixing problems with all of the ICF units, but addressing the problems in these four would take additional time. The withdrawal also allows the four units to be re-certified under the existing Medicaid Provider Agreement without requiring extensive infrastructure modification. As a condition of the PIP, DDS can request re-certification of the four units once the conditions of the PIP are met, including a clean survey by CDPH. The withdrawal of these four ICF units resulted in a Federal Fund loss of \$1.1 Million per month, based on current population and costs.

The May Revise of 2014 for 2014-15, assumed Sonoma DC's seven ICF units would successfully complete the PIP process and pass the certification survey. Further assumption was the four remaining ICF units would quickly follow with a successful recertification in June 2014. CDPH found that deficiencies had not been corrected to a level that satisfied federal certification standards. DDS has appealed these findings; however, the appeal only covers the seven ICF units, resulting in the loss of Federal Funding of \$1.1 Million per month for the four other ICF units at Sonoma DC.

DDS assumes a successful certification outcome for the seven ICF units to occur in February 2015; followed by a successful recertification of the remaining four ICF units. DDS will need to backfill the loss of \$8.8 Million in Medi-Cal

Reimbursements for 2014-15 for the period July 2014 through February 2015
for the four units voluntarily withdrawn from certification.

Revised Major Assumption

SDC FFP Backfill

The Department of Developmental Services (DDS) is requesting \$8.8 million in General Fund to replace lost FFP at SDC for the 4 decertified units.

Current Year 2014-15 Total	\$0
General Fund	\$8,800,000
Reimbursements	-\$8,800,000

Revised Major Assumption
Fairview and Porterville Program Improvement Plan
CY 2014-15 and BY 2015-16

The California Department of Public Health (CDPH), in partnership with the Centers for Medicare and Medicaid Services (CMS), conduct annual surveys at the developmental centers for compliance with licensing and certification regulatory requirements. Extensive survey activity has occurred since May 2013 for the Intermediate Care Facilities (ICF) at Fairview (FDC) and Porterville (PDC) DCs by teams of state and federal surveyors, resulting in federal findings of non-compliance and state licensing citations.

DDS entered into a Program Improvement Plan (PIP) with CDPH on January 15, 2014. The PIP addresses deficiencies in the Intermediate Care Facilities (ICF) at Fairview, Porterville and Lanterman DCs. In addition, the PIP allows DDS to retain federal funding for services in the ICF units while the facilities continue to make improvements in their services and systems.

The PIP established a structure for independent analysis and monitoring of the facilities over the next year that will improve the services to the individuals residing there. As a condition of the PIP, DDS entered into a contract with an ICRE to conduct a root cause analysis (RCA) and develop an Action Plan that will acknowledge improvements already made at these facilities, as well as the steps still needed to bring them back into compliance. The current timeline based on the ICRE contract to fully execute the PIP is as follows:

Fairview DC Milestones:

2013	California Department of Public Health annual (CDPH) recertification survey identifies four Conditions of Participation as not met: Governing Body, Active Treatment, Client Protection, and Health Care Services and four conditions of participation met: Facility Staffing, Client Behavior and Facility Practice, Physical Environment, and Dietary
1/16/2014	CDPH and the Department of Developmental Services reach agreement that will enable Fairview to retain federal Medicare and Medi-Cal funding while it makes improvements to meet federal standards
4/1/2014	The Delmarva Foundation contract is effective with DDS as the Independent Consultative Review Expert (ICRE)
5/28/2014	CDPH approves Root Cause Analysis submitted by DelMarva
6/5/14 to 6/19/14	Delmarva on campus monitoring
7/21/2014	CDPH approves Action Plan submitted by DelMarva
8/14/14 to 8/28/14	Delmarva on campus monitoring
9/10/2014	Review occurred with CDPH on the 30 day monitoring report
10/15/2014	Review occurred with CDPH on the 60 day monitoring report
11/19/2014	Review occurred with CDPH on the 90 day monitoring report
12/12/2014	Review occurred with CDPH on the 120 day monitoring report
12/18/2014	<i>Earliest date FDC can request a certification survey revisit.</i>

Porterville DC Milestones:

2013	California Department of Public Health annual (CDPH) recertification survey identifies six Conditions of Participation as not met: Governing Body, Active Treatment, Client Protection, and Health Care Services, Facility Staffing, and Physical Environment and two conditions of participation met: Client Behavior and Facility Practice, and Dietary; 7 ICF Units in the GTA were impacted.
1/16/2014	CDPH and the Department of Developmental Services reach agreement that will enable Poterville to retain federal Medicare and Medi-Cal funding while it makes improvements to meet federal standards
4/1/2014	Medication Error Reduction Program (MERP) Survey plan of correction accepted
4/1/2014	H & W Mock Nursing Facility Survey
5/12/2014	CDPH Centers for Medicare and Medicaid conduct Skilled Nursing Facility Survey
6/12/2014	CDPH approves Root Cause Analysis submitted by DelMarva
7/28/2014 to	Delmarva on campus monitoring
9/5/2014	CDPH approves Action Plan submitted by DelMarva
10/24/2014	Review occurred with CDPH on the 30 day monitoring report
11/19/2014	Review occurred with CDPH on the 60 day monitoring report
12/17/2014	Review occurred with CDPH on the 90 day monitoring report
1/20/2015	<i>Scheduled review with CDPH on the 120 day monitoring report</i>
2/2/2015	<i>Earliest date FDC can request a certification survey revisit.</i>

Porterville Certification		CY	BY	CY	BY
PDC PIP					
Personal Services		POS.*		COST	
Level of Care - Nursing					
VAR LOC-Nursing		30.3	45.5	\$1,417,128	\$2,125,692
Program Residence Administration					
1139 OT/OA (Unit Clerks)		4.7	7.0	146,939	220,409
Central Program Services/Off Residence Training					
8230 Unit Supervisor		0.7	1.0	41,671	62,506
8231 Sr Psych Tech		0.7	1.0	36,718	55,077
8154 Nurse/PT Instructor		0.7	1.0	46,791	70,187
9890 IPC		2.0	3.0	96,816	145,224
8232 PT (Act Treat)		8.7	13.0	347,767	521,651
Medical and Allied Services					
VAR RN/LVN/PT		2.7	4.0	128,173	192,260
Support Services					
2198 Food Svc Tech		4.7	7.0	132,123	198,184
PDC Total Salaries and Wages		55.0	82.5	\$2,394,126	\$3,591,190
Benefits					
OASDI/Medicare	7.65%			\$183,151	\$274,726
Health	20.19%			483,374	725,061
Retirement	24.28%			581,294	871,941
PDC Total Benefits				\$1,247,818	\$1,871,728
PDC Total Personal Services		55.0	82.5	\$3,641,944	\$5,462,918
OE&E					
C&PS External: Clinical Dietitian and Psychologist		1.3	2.0	107,600	215,200
Training				300,000	
Overtime for Training				1,600,000	
PDC Total OE&E				2,007,600	215,200
PDC TOTAL		55.0	82.5	\$5,649,544	\$5,678,118
Rounding				\$5,649,544	\$5,678,000
General Fund				\$4,213,430	\$3,027,000
Madi-Cal Reimbursements				\$1,436,114	\$2,651,000

*Positions are Full Time Equivalent and are not partial positions for the full year in FY 14-15

FUTURE FISCAL ISSUES

Sonoma Developmental Center Replacement of Sonoma Creek Pump Station Intake System (Phase II)

The Department of General Services estimate \$2 Million GF will be needed for Fiscal Year 2017-18, for the Construction portion (Phase II) of the project to complete the replacement of the water diversion intake structure at Sonoma Creek. The Preliminary Plans and Working Drawings (Phase I) have been requested as a New Major Assumption for 2015-16 in this estimate. The structure that was designed and built to divert water for use by the residents and staff at Sonoma Developmental Center (Sonoma DC) was damaged, and the various components require either replacement or repair.

United States Department of Justice (USDOJ) Civil Rights for Institutionalized Persons Act (CRIPA) Remedial Agreement

Over a period of more than eight years, the USDOJ has conducted investigations of Sonoma and Lanterman DCs and has issued findings pursuant to CRIPA. USDOJ may pursue resolution of these findings in the future, potentially resulting in General Fund costs.

USDOJ Civil Investigative Demand (CID)

DDS received notification from the USDOJ in March 2014 of a CID to determine whether a violation had occurred at the Sonoma DC relative to the Medicare and Medicaid programs. DDS is reviewing the CID, and has contracted with outside counsel to determine an appropriate response.

Fund Sources

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General Fund

DESCRIPTION:

The General Fund is used for two purposes: 1) as a match to Title XIX Reimbursement funds received for payment of resources/services for Medi-Cal eligible residents (these funds are referred to as "General Fund Match") and 2) to pay for non-Medi-Cal eligible resources/services for residents in the developmental centers and the state-operated community facility (DC/CF). These funds are referred to as "General Fund Other."

ASSUMPTIONS/METHODOLOGY:

CY 2014-15

BY 2015-16

General Fund:

The DCs'/CF's General Fund appropriation consists of two components: (1) General Fund Match and (2) General Fund Other. Details of these components are as follows:

• General Fund Match:			\$265,799,908	\$251,956,000
General Fund Match to FMAP	<u>CY 2014-15</u>	<u>BY 2015-16</u>		
Non-Proposition 98	50.00%	50.00%	260,188,334	246,649,000
Proposition 98	50.00%	50.00%	5,360,574	5,056,000
HIPAA	50.00%	50.00%	251,000	251,000

This portion of General Fund is required as a match to Medi-Cal Reimbursements received from the Department of Health Care Services (DHCS). These Reimbursements are originally funded by the federal government and passed through DHCS (the federally recognized single state agency for Medicaid). The federal financial participation costs are established by utilizing the federal medical assistance percentages (FMAP) provided by DHCS.

• General Fund Other			\$43,848,039	\$27,883,000
This funding is for services provided to the DC/CF residents who are not eligible for federal or other reimbursement funding. Funding also includes \$9,903,000 (CY) and \$9,903,000 (BY) for Lease-Revenue			43,848,039	27,883,000

- Lottery Education Fund**
See Lottery Education Fund's page for detail.

TOTAL GENERAL FUND			\$309,647,947	\$279,839,000
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Reimbursements Title XIX Medi-Cal and Other

DESCRIPTION:

Title XIX Medi-Cal Reimbursements are funds received for services provided to eligible residents in the developmental centers and the state-operated community facility (DC/CF). These funds require a General Fund match at the FMAP rate. Other Reimbursements are funds received for services provided to the DCs/CF residents who have no General Fund match requirements.

ASSUMPTIONS/METHODOLOGY:

CY 2014-15

BY 2015-16

Reimbursements:

The DCs/CF's appropriation for reimbursements consists of two components: (1) Title XIX Medi-Cal and (2) Other Reimbursements. The detail of these two components follows:

• Title XIX/Medi-Cal	\$237,174,908	\$223,331,000
<p>Title XIX Medi-Cal Reimbursements fund eligible services provided to residents in the DCs/CF system via the Department of Health Care Services (DHCS) (the federally recognized single state agency for Medicaid). The federal financial participation costs are established by utilizing the federal medical assistance percentages (FMAP) as provided by DHCS.</p>		
FMAP	<u>CY 2014-15</u>	<u>BY 2015-16</u>
Non-Proposition 98	50.00%	50.00%
Proposition 98	50.00%	50.00%
HIPAA	50.00%	50.00%
• Reimbursements - Other	\$15,320,000	\$11,391,000
<p>This funding is for services provided to the DC/CF residents who are not eligible for federal reimbursement funding. These costs consist of miscellaneous reimbursements for such services as the Community Industries Contract, Rental Income Contracts, and State Employees in the Community Program.</p>		
	<i>15,320,000</i>	<i>11,391,000</i>
TOTAL REIMBURSEMENTS	\$252,494,908	\$234,722,000

Federal Funds

DESCRIPTION:

The Federal Foster Grandparent Program Grant provides funds to establish person-to-person relationships between low income seniors, 60 years of age and older, and children with developmental disabilities and/or mental health issues.

ASSUMPTIONS/METHODOLOGY:

CY 2014-15

BY 2015-16

• **Foster Grandparent Program Grant**

\$384,000

\$285,000

The Foster Grandparent Program grant is used for specified operational costs, such as stipends and educational supplies in the developmental centers.

TOTAL FEDERAL FUNDS

\$384,000

\$285,000

Lottery Education Fund

DESCRIPTION:

Lottery Education Fund uses state General Fund revenues guaranteed for the support of school districts, community colleges districts, and state agencies that provide direct elementary and secondary level instructional services.

ASSUMPTIONS/METHODOLOGY:

CY 2014-15

BY 2015-16

Lottery Education Fund:

\$367,000

\$367,000

- The Lottery Education Fund is used for specified educational costs, such as training programs to establish curriculum as well as to support special needs and equipment costs in the developmental centers and state-operated community facilities (DC/CF). Funds received are based on the DC/CF resident average daily attendance.

TOTAL LOTTERY EDUCATION FUND

\$367,000

\$367,000

Capital Outlay

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CAPITAL OUTLAY PROJECT

Phase I Capital Outlay - Upgrade Fire Alarm System at Porterville Developmental Center

DESCRIPTION:

The Department of Developmental Services (DDS) is requesting \$0.8 Million GF through the Capital Outlay (CO) process, a separate and distinct CO Budget Change Proposal has been submitted along with a 5-Year Capital Outlay Infrastructure Plan. The funding will be used to prepare Preliminary Plans and Working Drawings for a high priority fire, life, and safety project at the Porterville Developmental Center (DC).

The purpose of the project is to improve the safety of the residents and staff by designing, purchasing, and installing an updated and integrated fire alarm system that meets current fire, life, and safety codes in thirteen resident-utilized buildings at Porterville DC. The existing fire alarm system is comprised of subsystems of varying ages (manufacture date and installation), all of which are outdated and well beyond useful life for components of a similar nature. None of the existing systems are integrated with each other, there are gaps in coverage and functionality, and the older systems do not meet current fire codes.

These systems employ outdated technology, are difficult and expensive to maintain due to unavailability of parts and maintenance services, and fail at an unacceptable rate. This unreliable performance is a significant life safety issue for the individuals living at Porterville DC, as well as the staff caring for them. Many of the residents are non-ambulatory, are medically frail, have vision or hearing deficiencies, cannot evacuate independently, and lack cognitive awareness to respond appropriately when a fire alarm is triggered. These challenges could be better met with a fire alarm system that enable responders and staff to determine exact location within the building and to discern what triggered the alarm. In most current instances, the majority of alarm triggers are the result of a false alarm caused by a system malfunction due to the age of the components.

Each alarm event is taken seriously and the residents are evacuated if the outcome is judged to be a false alarm, and then the system is reset. However, there are instances when the system's root problem cannot be identified, or when the alarm cannot be deactivated. When this occurs, the occupants of the building cannot reenter or they are placed on fire watch until the problem is identified. These resultant actions are costly and labor intensive.

Modern addressable, compliant systems are currently in place in nine buildings at Porterville DC, and these will not need to be replaced, as this project would replace only the old systems with a code compliant addressable fire alarm system with voice evacuation and manager systems. Additionally, this project would integrate the existing compliant systems that will be retained with the new systems.

Phase 1 would consist of completing the Preliminary Plans and developing Working Drawings, under the Department of General Services' (DGS) Project Management, and is estimated to be completed by end of FY 2015-16. Phase 2 Construction would begin only upon CO budgetary approval; DGS is estimating an additional \$7.2 Million GF in CO funding. Total project cost is estimated to be \$8.0 Million GF.