FOR LEGISLATIVE REVIEW

DEPARTMENT OF DEVELOPMENTAL SERVICES 2018-19 GOVERNOR'S BUDGET





STATE OF CALIFORNIA
JANUARY 2018

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Comparison of Enacted Budget to Governor's Budget 2017-18

	A Enacted Budget	B Governor's Budget	C Request (B - A)
I. BUDGET ITEMS:			
A. Operations (OPS)			
Caseload Growth			
1. Staffing	\$589,751	\$589,751	\$0
2. Federal Compliance	47,672	47,672	0
3. Projects	27,064	27,064	0
Agnews Ongoing Workload	2,894	2,894	0
5. Lanterman Developmental Center (DC) Closure	2,392	2,392	0
Intermediate Care Facility-Developmentally Disabled (ICF-DD) State Plan Amendment (SPA) Administration Fee	1,829	1,883	54
7. Total OPS Caseload Growth (Items 1 thru 6)	\$671,602	\$671,656	\$54
Policy			
8. DC Closure	\$5,434	\$5,434	\$0
a. Sonoma DC	3,616	3,616	0
b. Fairview DC	1,212	1,212	0
c. Porterville DC	606	606	0
BHT Psychological Evaluations for Fee-for-Service Consumers In Improve Service Coordinator Caseload Ratios	1,266	1,266	0
11. Compliance with HCBS Regulations	17,000	17,000	0
	1,422	1,422	0
 Regional Center Operations Increase Resources to Implement Assembly Bill (AB)X2 1 	56,600 4,164	56,600 4,164	0
14. Total Policy (Items 8 thru 13)	\$85,886	\$85,886	\$0
15. Total Operations (Items 7 and 14)	\$757,488	\$757,542	\$54
B. Purchase of Services (POS)			
Caseload Growth			
1. Community Care Facilities	\$1,427,479	\$1,463,005	\$35,526
2. Medical Facilities	16,064	13,424	-2,640
3. Day Programs	1,137,824	1,108,637	-29,187
4. Habilitation Services	177,434	170,724	-6,710
a. Work Activity Program	53,509	46,942	-6,567
b. Supported Employment Program (Group Placement)	100,423	96,580	-3,843
c. Supported Employment Program (Individual Placement)	23,502	27,202	3,700
5. Transportation	359,326	347,828	-11,498
6. Support Services	1,317,648	1,310,919	-6,729
7. In-Home Respite	431,352	409,250	-22,102
8. Out-of-Home Respite	45,559	49,968	4,409
9. Health Care	120,120	115,957	-4,163
10. Miscellaneous	457,066	460,461	3,395
 Quality Assurance Fees (Transfer from Department of Health Care Services) 	9,874	10,165	291
12. Total POS Caseload Growth (Items 1 thru 11)	\$5,499,746	\$5,460,338	-\$39,408

Comparison of Enacted Budget to Governor's Budget 2017-18

	A Enacted Budget	B Governor's Budget	C Request (B - A)
Policy			
13. BHT Consumers with no Autism Spectrum Disorder Diagnosis	-3,300	-1,821	1,479
14. DC Closure	20,244	20,244	0
a. Sonoma DC	13,322	13,322	0
b. Fairview DC	4,570	4,570	0
c. Porterville DC	2,352	2,352	0
15. Compliance with HCBS Regulations	15,000	15,000	0
16. Safety Net Resources	5,622	5,622	0
17. Competitive, Integrated Employment Incentives	29,000	29,000	0
18. SB 3 Minimum Wage Increase: Effective January 1, 2018	53,476	66,862	13,386
19. Best Buddies	1,600	1,600	0
20. Total Policy (Items 13 thru 19)	\$121,642	\$136,507	\$14,865
21. Total POS (Items 12 and 20)	\$5,621,388	\$5,596,845	-\$24,543
C. Early Start/ Part C: Other Agency Cost	\$19,109	\$19,109	\$0
D. Early Start Family Resource Services	\$2,003	\$2,003	\$0
E. GRAND TOTAL	\$6,399,988	\$6,375,499	-\$24,489

Comparison of Enacted Budget to Governor's Budget 2017-18

	A Enacted Budget	B Governor's Budget	C Request (B - A)
II. FUND SOURCES:			
A. General Fund Total	\$3,820,981	\$3,786,315	-\$34,666
General Fund Match	2,291,823	2,301,341	9,518
2. General Fund - Other	1,529,158	1,484,974	-44,184
B. Reimbursements	\$2,522,322	\$2,532,793	\$10,471
 Home and Community-Based Services (HCBS) Waiver 	1,721,780	1,707,394	-14,386
2. HCBS Waiver Administration	14,105	14,700	595
3. Medicaid Administration	15,952	16,132	180
4. Targeted Case Management (TCM)	195,934	204,122	8,188
5. TCM Administration	5,893	6,473	580
6. Title XX Block Grant	213,421	213,421	0
a. Social Services	136,264	136,264	0
 Temporary Assistance for Needy Families 	77,157	77,157	0
7. ICF-DD SPA	60,964	62,760	1,796
Quality Assurance Fees (QAF)	10,788	11,106	318
9. 1915(i) SPA	238,291	247,610	9,319
Money Follows the Person	11,396	11,396	0
 Early Periodic Screening Diagnosis and Treatment 	26,368	26,857	489
12. Behavioral Health Treatment Fee-for-Service	7,430	10,822	3,392
C. Program Development Fund / Parental Fees	\$2,537	\$2,537	\$0
D. Developmental Disabilities Services Account	\$150	\$150	\$0
E. Mental Health Services Fund	\$740	\$740	\$0
F. Federal Funds	\$53,258	\$52,964	-\$294
Early Start/Part C Grant	52,161	51,867	-294
Foster Grandparent Program	1,097	1,097	0
G. GRAND TOTAL	\$6,399,988	\$6,375,499	-\$24,489

Comparison of Enacted Budget to Governor's Budget 2018-19

	A Enacted Budget	B Governor's Budget	C Request (B - A)
I. BUDGET ITEMS:	L .		
A. Operations (OPS)			
Caseload Growth			
1. Staffing	\$589,751	\$620,545	\$30,794
2. Federal Compliance	47,672	47,777	105
3. Projects	27,064	27,612	548
Agnews Ongoing Workload	2,894	2,894	0
5. Lanterman DC Closure	2,392	2,392	0
6. ICF-DD SPA Administration Fee	1,829	1,883	54
7. Total OPS Caseload Growth (Items 1 thru 6)	\$671,602	\$703,103	\$31,501
Policy			
8. DC Closure	\$5,434	\$5,434	\$0
a. Sonoma DC	3,616	3,616	0
b. Fairview DC	1,212	1,212	0
c. Porterville DC9. BHT Psychological Evaluations for Fee-for-Service Consumers	<i>606</i> 1,266	<i>606</i> 1,266	<i>0</i> 0
Improve Service Coordinator Caseload Ratios	17,000	17,000	0
11. Compliance with HCBS Regulations	1,422	1,422	0
12. Regional Center Operations Increases	56,600	56,600	0
13. Resources to Implement ABX2 1	4,164	4,164	0
14. Total Policy (Items 8 thru 13)	\$85,886	\$85,886	\$0
15. Total Operations (Items 7 and 14)	\$757,488	\$788,989	\$31,501
B. Purchase of Services (POS)	4.0.,.00	ψ. σσίσσο	ψο.,σο.
Caseload Growth			
Community Care Facilities	\$1,427,479	\$1,547,509	\$120,030
Medical Facilities	16,064	12,024	-4,040
3. Day Programs	1,137,824	1,147,335	9,511
4. Habilitation Services	177,434	172,311	-5,123
a. Work Activity Program	53,509	43,658	-9,851
b. Supported Employment Program (Group Placement)	100,423	98,317	-2,106
c. Supported Employment Program (Individual Placement)	23,502	30,336	6,834
5. Transportation	359,326	368,955	9,629
6. Support Services	1,317,648	1,407,655	90,007
7. In-Home Respite	431,352	468,100	36,748
8. Out-of-Home Respite	45,559	52,002	6,443
9. Health Care	120,120	123,699	3,579
10. Miscellaneous	457,066	480,442	23,376
11. QAF (Transfer from DHCS)	9,874	10,165	291
12. POS Subtotal (Items 1 thru 11)	\$5,499,746	\$5,790,197	\$290,451

Comparison of Enacted Budget to Governor's Budget 2018-19

	A Enacted Budget	B Governor's Budget	C Request (B - A)
Policy			
13. BHT Consumers with no Autism Spectrum Disorder Diagnosis14. DC Closure	-3,300 20,244	-48,786 23,032	-45,486 2,788
a. Sonoma DCb. Fairview DCc. Porterville DC	13,322 4,570 2,352	10,278 8,420 4,334	-3,044 3,850 1,982
15. Compliance with HCBS Regulations	15,000	15,000	0
16. Uniform Holiday17. Competitive Integrated Employment Incentives18. SB 3 Minimum Wage Increase: Effective January 1, 2018	0 29,000 53,476	-5,610 29,000 122,357	-5,610 0 68,881
19. SB 3 Minimum Wage Increase: Effective January 1, 2019	0	122,996	122,996
20. Best Buddies	1,600	0	-1,600
21. Safety Net Resources	5,622	0	-5,622
22. Total Policy (Items 13 thru 21)	\$121,642	\$257,989	\$136,347
23. Total POS (Items 12 and 22)	\$5,621,388	\$6,048,186	\$426,798
C. Early Start/Part C: Other Agency Costs	\$19,109	\$19,109	\$0
D. Early Start Family Resource Services	\$2,003	\$2,003	\$0
E. GRAND TOTAL	\$6,399,988	\$6,858,287	\$458,299

Comparison of Enacted Budget to Governor's Budget 2018-19

	A Enacted Budget	B Governor's Budget	C Request (B - A)
II. FUND SOURCES:			
A. General Fund Total	\$3,820,981	\$4,105,886	\$284,905
General Fund Match	2,291,823	2,446,616	154.793
2. General Fund - Other	1,529,158	1,659,270	130,112
B. Reimbursements	\$2,522,322	\$2,696,107	\$173,785
1. HCBS Waiver	1,721,780	1,850,044	128,264
2. HCBS Waiver Administration	14,105	14,696	591
3. Medicaid Administration	15,952	16,132	180
4. TCM	195,934	209,939	14,005
5. TCM Administration	5,893	6,473	580
6. Title XX Block Grant	213,421	213,421	0
a. Social Services	136,264	136,264	0
 Temporary Assistance for Needy Families 	77,157	77,157	0
7. ICF-DD SPA	60,964	62,760	1,796
8. QAF	10,788	11,106	318
9. 1915(i) SPA	238,291	266,897	28,606
Money Follows the Person	11,396	0	-11,396
 Early Periodic Screening Diagnosis and Treatment 	26,368	29,488	3, 120
12. Behavioral Health Treatment Fee-for-Service	7,430	15,151	7,721
C. Program Development Fund / Parental Fees	\$2,537	\$2,537	\$0
D. Developmental Disabilities Services Account	\$150	\$150	\$0
E. Mental Health Services Fund	\$740	\$740	\$0
F. Federal Funds	\$53,258	\$52,867	-\$391
Early Start/Part C Grant	52,161	51,867	-294
Foster Grandparent Program	1,097	1,000	-97
G. GRAND TOTAL	\$6,399,988	\$6,858,287	\$458,299

\$5,790,197

\$5,460,338

\$329,859

Comparison of Updated 2	017-18 to 2018-19		
	A Fiscal Year 2017-18	B Fiscal Year 2018-19	C Incremental Increase (B-A)
I. BUDGET ITEMS:			
A. Operations (OPS) Caseload Growth			
	¢500.754	\$600 E4E	¢20.704
1. Staffing	\$589,751	\$620,545	\$30,794
Federal Compliance Projects	\$47,672 \$27,064	47,777 27,612	105 548
Frojects Agnews Ongoing Workload	\$27,064 \$2,894	2,894	0
Agriews Origonia Workload Lanterman DC Closure	\$2,394 \$2,392	2,392	0
Carnelman Bo closure ICF-DD SPA Administration Fee	\$1,883	1,883	0
7. Total OPS Caseload Growth (Items 1 thru 6)	\$671,656	\$703,103	\$31,447
Policy	φον 1,000	ψ100,100	φοι,
8. DC Closure	\$5,434	\$5,434	\$0
a. Sonoma DC	3,616	3,616	0
b. Fairview DC	1,212	1,212	0
c. Porterville DC	606	606	0
9. BHT Psychological Evaluations for Fee-for-Service Consumers	1,266	1,266	0
Improve Service Coordinator Caseload Ratios	17,000	17,000	0
11. Compliance with HCBS Regulations	1,422	1,422	0
12. Regional Center Operations Increases AB X2 1	56,600	56,600	0
13. Resources to Implement ABX2 1	4,164	4,164	0
14. Total Policy (Items 8 thru 13)	\$85,886	\$85,886	\$0
15. Total OPS (Items 7 and 14)	\$757,542	\$788,989	\$31,447
B. Purchase of Services (POS)			
Caseload Growth			
Community Care Facilities	\$1,463,005	\$1,547,509	\$84,504
2. Medical Facilities	13,424	12,024	-1,400
3. Day Programs	1,108,637	1,147,335	38,698
4. Habilitation Services	170,724	172,311	1,587
a. Work Activity Program	46,942	43,658	-3,284
b. Supported Employment (Group Placement)	96,580	98,317	1,737
c. Supported Employment (Individual Placement)	27,202	30,336	3,134
5. Transportation	347,828	368,955	21,127
6. Support Services	1,310,919	1,407,655	96,736
7. In-Home Respite	409,250	468,100	58,850
8. Out-of-Home Respite	49,968	52,002	2,034
9. Health Care	115,957	123,699	7,742
10. Miscellaneous	460,461	480,442	19,981
11. QAF (Transfer from DHCS)	10,165	10,165	0

12. Total POS Caseload (Items 1 thru 11)

Comparison of Updated 2017-18 to 2018-19

	A Fiscal Year 2017-18	B Fiscal Year 2018-19	C Incremental Increase (B-A)
Policy			
13. BHT Consumers - Fee-for-Service	-1,821	-48,786	-46,965
14. DC Closure	20,244	23,032	2,788
a. Sonoma DC	13,322	10,278	-3,044
b. Fairview DC	4,570	<i>8,4</i> 20	3,850
c. Porterville DC	2,352	4,334	1,982
15. Compliance with HCBS Regulations	15,000	15,000	0
16 Uniform Holiday	0	-5,610	-5,610
17. Competitive Integrated Employment Incentives	29,000	29,000	0
18. SB 3 Minimum Wage Increase, Effective January 1, 2018	66,862	122,357	55,495
19. SB 3 Minimum Wage Increase, Effective January 1, 2019	0	122,996	122,996
20. Best Buddies	1,600	0	-1,600
21. Safety Net Resources	\$5,622	\$0	-\$5,622
22. Total Policy (Item 13 thru 21)	\$136,507	\$257,989	\$121,482
23. Total POS (Items 12 and 22)	\$5,596,845	\$6,048,186	\$451,341
C. Early Start/Part C: Other Agency Costs	\$19,109	\$19,109	\$0
D. Early Start Family Resource Services	\$2,003	\$2,003	\$0
F. GRAND TOTAL	\$6,375,499	\$6,858,287	\$482,788

Comparison of Updated 2017-18 to 2018-19

	A Fiscal Year 2017-18	B Fiscal Year 2018-19	C Incremental Increase (B - A)
II. FUND SOURCES:			
A. General Fund Total	\$3,786,315	\$4,105,886	\$319,571
General Fund Match	2,301,341	2,446,616	145,275
2. General Fund - Other	1,484,974	1,659,270	174,296
B. Reimbursements	2,532,793	\$2,696,107	\$163,314
1. HCBS Waiver	1,707,394	1,850,044	142,650
HCBS Waiver Administration	14,700	14,696	-4
Medicaid Administration	16,132	16,132	0
4. TCM	204,122	209,939	5,817
TCM Administration	6,473	6,473	0
Title XX Block Grant	213,421	213,421	0
a. Social Services	136,264	136,264	0
 b. Temporary Assistance for Needy Families 	77,157	77,157	0
7. ICF-DD SPA	62,760	62,760	0
8. QAF	11,106	11,106	0
9. 1915(i) SPA	247,610	266,897	19,287
Money Follows the Person	11,396	0	-11,396
 Early Periodic Screening Diagnosis and Treatment 	26,857	29,488	2,631
12 Behavioral Health Treatment Fee-for-Service	10,822	15,151	4,329
C. Program Development Fund / Parental Fees	\$2,537	\$2,537	\$0
D. Developmental Disabilities Services Account	\$150	\$150	\$0
E. Mental Health Services Fund	\$740	\$740	\$0
F. Federal Funds	\$52,964	\$52,867	-\$97
 Early Start/Part C Grant 	51,867	51,867	0
Foster Grandparent Program	1,097	1,000	-97
H. GRAND TOTAL	\$6,375,499	\$6,858,287	\$482,788

Comparison of Enacted Budget to Governor's Budget 2017-18 OPERATIONS

	Α	В	С
	Enacted Budget	Updated 2017-18	2017-18 Request (B - A)
I. BUDGET ITEMS:			
Caseload Growth			
1. Staffing	\$589,751	\$589,751	\$0
2. Federal Compliance	47,672	47,672	0
3. Projects	27,064	27,064	0
4. Agnews Ongoing Workload	2,894	2,894	0
5. Lanterman DC Closure	2,392	2,392	0
6. ICF-DD SPA Administration Fee	1,829	1,883	54
7. Total OPS Caseload Growth (Items 1 thru 6)	\$671,602	\$671,656	\$54
Policy			
8. DC Closure	\$5,434	\$5,434	\$0
a. Sonoma DC	3,616	3,616	0
b. Fairview DCc. Porterville DC	1,212 606	1,212 606	0 0
Portervine BC BHT Psychological Evaluations for Fee-for-Service Consumers	1,266	1,266	0
Improve Service Coordinator Caseload	17,000	17,000	0
11. Compliance with HCBS Regulations	1,422	1,422	0
12. Regional Center Operations Increase ABX2 1	56,600	56,600	0
13. Resources to Implement ABX2 1	4,164	4,164	0
14. Total Policy (Items 8 thru 12)	\$85,886	\$85,886	\$0
15. Total OPS (Items 7 and 13)	\$757,488	\$757,542	\$54
II. FUND SOURCES:	4.0.,.00	¥1.01,10.12	***
A. General Fund Total	\$514,275	\$504,759	-\$9,516
General Fund Match	224,651	234,424	9,773
2. General Fund Other	289,624	270,335	-19,289
B. Reimbursements	\$241,226	\$250,796	\$9,570
HCBS Waiver Administration	14,105	14,700	595
Medicaid Administration	15,952	16,132	180
3. TCM	195,934	204,122	8,188
4. TCM Administration	5,893	6,473	580
5. QAF	914	941	27
6. Money Follows the Person	8,428	8,428	0
C. Developmental Disabilities Services Account	\$150	\$150	\$0
D. Mental Health Services Fund	\$740	\$740	\$0 \$0
E. Federal Funds	\$1,097	\$1,097	\$0
Foster Grandparent Program	1,097	1,097	0
F. Grand Total	\$757,488	\$757,542	\$54

Comparison of Enacted Budget to Governor's Budget 2018-19 OPERATIONS

	Α	В	С
	Enacted Budget	2018-19	2018-19 Request (B - A)
	Buaget	2010-13	(B - A)
I. BUDGET ITEMS:			
Caseload Growth			
1. Staffing	\$589,751	\$620,545	\$30,794
2. Federal Compliance	47,672	47,777	105
3. Projects	27,064	27,612	548
Agnews Ongoing Workload	2,894	2,894	0
5. Lanterman DC Closure	2,392	2,392	0
ICF-DD SPA Administration Fee	1,829	1,883	54
7. Total OPS Caseload Growth (Items 1 thru 6)	\$671,602	\$703,103	\$31,501
Policy			
8. DC Closure	\$5,434	\$5,434	\$0
a. Sonoma DC	3,616	3,616	0
b. Fairview DCc. Porterville DC	1,212 606	1,212 606	0 0
9. BHT Psychological Evaluations for Fee-for-Service Consumers	1,266	1,266	0
Improve Service Coordinator Caseload Ratios	17,000	17,000	0
11. Compliance with HCBS Regulations	1,422	1,422	0
12. Regional Center Operations Increases AB X2 1	56,600	56,600	0
13. Resources to Implement ABX2 1	4,164	4,164	0
14. Total Policy (Items 8 thru 12)	85,886	85,886	0
15. Total OPS (Items 7 and 14)	\$757,488	\$788,989	\$31,501
II. FUND SOURCES:	Ψ131,400	\$700,909	φ31,301
A. General Fund Total	\$514,275	\$538,918	\$24,643
	224,651	237,427	12,776
General Fund Other General Fund Other	289,624	301,491	11,867
General Fund Other	209,024	301,491	11,007
B. Reimbursements	\$241,226	\$248,181	\$6,955
1. HCBS Waiver Administration	14,105	14,696	591
2. Medicaid Administration	15,952	16,132	180
3. TCM	195,934	209,939	14,005
4. TCM Administration	5,893	6,473	580
5. QAF	914	941	27
6. Money Follows the Person	8,428	0	-8,428
C. Developmental Disabilities Services Account	\$150	\$150	\$0
D. Mental Health Services Fund	\$740	\$740	\$0
E. Federal Funds	\$1,097	\$1,000	-\$97
Foster Grandparent Program	1,097	1,000	-97
F. Grand Total	\$757,488	\$788,989	\$31,501

Comparison of Enacted Budget to Governor's Budget 2017-18 PURCHASE OF SERVICES

	Α	В	С
	Forested	Undeted	2017-18
	Enacted Budget	Updated 2017-18	Request (B - A)
I. BUDGET ITEMS:	Duagot	2011 10	(5 7.)
Caseload Growth			
A. Purchase of Services (POS)			
1. Community Care Facilities	\$1,427,479	\$1,463,005	\$35,526
2. Medical Facilities	16,064	13,424	-2,640
3. Day Programs	1,137,824	1,108,637	-29,187
4. Habilitation Services	177,434	170,724	-6,710
a. Work Activity Program	53,509	46,942	-6,567
b. Supported Employment Program (Group Placement)	100,423	96,580	-3,843
c. Supported Employment Program (Individual Placement)	23,502	27,202	3,700
5. Transportation	359,326	347,828	-11,498
6. Support Services	1,317,648	1,310,919	-6,729
7. In-Home Respite	431,352	409,250	-22,102
8. Out-of-Home Respite	45,559	49,968	4,409
9. Health Care	120,120	115,957	-4,163
10. Miscellaneous	457,066	460,461	3,395
11. QAF (Transfer from DHCS)	9,874	10,165	291
12. Total POS Caseload Growth (Items 1 thru 11)	\$5,499,746	\$5,460,338	-\$39,408
Policy			
13. BHT Consumers with no Autism Spectrum Disorder Diagnosis	-3,300	-1,821	1,479
14. DC Closure	20,244	20,244	0
a. Sonoma DC	13,322	13,322	0
b. Fairview DC	4,570	4,570	0
c. Porterville DC	2,352	2,352	0
15. Compliance with HCBS Regulations	15,000	15,000	0
16. Safety Net Resources	5,622	5,622	0
17. Competitive, Integrated Employment Incentives	29,000	29,000	0
18. SB 3 Minimum Wage Increase Effective January 01, 2017	53,476	66,862	13,386
19. Best Buddies	1,600	1,600	0
20. Total Policy (Items 13 thru 19)	\$121,642	\$136,507	\$14,865
21. Total POS (Items 12 and 20)	\$5,621,388	\$5,596,845	-\$24,543

Comparison of Enacted Budget to Governor's Budget

2017-18 PURCHASE OF SERVICES

	A	В	C 2017-18
	Enacted Budget	Updated 2017-18	Request (B - A)
II. FUND SOURCES:	<u></u>		
A. General Fund Total	\$3,304,703	\$3,279,553	-\$25,150
General Fund Match	2,067,171	2,066,917	-254
2. General Fund Other	1,237,532	1,212,636	-24,896
B. Reimbursements	\$2,281,096	\$2,281,997	\$901
1. HCBS Waiver	1,721,780	1,707,394	-14,386
2. Title XX Block Grant	213,421	213,421	0
a. Social Services	136,264	136,264	0
b. Temporary Assistance for Needy Families	77,157	77,157	0
3. ICF-DD SPA	60,964	62,760	1,796
4. QAF	9,874	10,165	291
5. 1915(i) SPA	238,291	247,610	9,319
6. Money Follows the Person	2,968	2,968	0
7. Early Periodic Screening Diagnosis and Treatment	26,368	26,857	489
8. BHT Fee-For-Services	7,430	10,822	3,392
C. Program Development Fund / Parental Fees	\$2,537	\$2,537	\$0
D. Federal Funds	\$33,052	\$32,758	-\$294
Early Start/Part C Grant	33,052	32,758	-294
F. Grand Total	\$5,621,388	\$5,596,845	-\$24,543

2018-19 Governor's Budget

Comparison of Enacted Budget to Governor's Budget 2018-19 PURCHASE OF SERVICES

	A Enacted	B 2018-19	C 2018-19 Request
	Budget	2010-19	(B - A)
I. BUDGET ITEMS:			
Caseload Growth			
A. Purchase of Services (POS)	•	•	
Community Care Facilities	\$1,427,479	\$1,547,509	\$120,030
2. Medical Facilities	16,064	12,024	-4,040
3. Day Programs	1,137,824	1,147,335	9,511
4. Habilitation Services	177,434	172,311	-5,123
a. Work Activity Program	53,509	43,658	-9,851
b. Supported Employment Program (Group Placement)	100,423	98,317	-2,106
c. Supported Employment Program (Individual Placement)	23,502	30,336	6,834
5. Transportation	359,326	368,955	9,629
6. Support Services	1,317,648	1,407,655	90,007
7. In-Home Respite	431,352	468,100	36,748
8. Out-of-Home Respite	45,559	52,002	6,443
9. Health Care	120,120	123,699	3,579
10. Miscellaneous	457,066	480,442	23,376
11. QAF (Transfer from DHCS)	9,874	10,165	291
12. Total POS Caseload Growth (Items 1 thru 11)	\$5,499,746	\$5,790,197	\$290,451
Policy			
13. BHT Consumers with no Autism Spectrum Disorder Diagnosis	-3,300	-48,786	-45,486
14. DC Closure	20,244	23,032	2,788
a. Sonoma DC	13,322	10,278	-3,044
b. Fairview DC	4,570	8,420	3,850
c. Porterville DC	2,352	4,334	1,982
15. Uniform Holiday	0	-5,610	-5,610
16. Compliance with HCBS Regulations	15,000	15,000	0
17. Safety Net Resources	5,622	0	-5,622
18. Competitive, Integrated Employment Incentives	29,000	29,000	0
19. SB 3 Minimum Wage Increase Effective January 01, 2018	53,476	122,357	68,881
20. SB 3 Minimum Wage Increase Effective January 01, 2019	0	122,996	122,996
21. Best Buddies	1,600	0	-1,600
22. Total Policy (Items 13 thru 21)	\$121,642	\$257,989	\$136,347
23. Total POS (Items 12 and 22)	\$5,621,388	\$6,048,186	\$426,798

Comparison of Enacted Budget to Governor's Budget 2018-19 PURCHASE OF SERVICES

	A Enacted Budget	B 2018-19	C 2018-19 Request (B - A)
II. FUND SOURCES:			
A. General Fund Total	\$3,304,703	\$3,564,965	\$260,262
1. General Fund Match	2,067,171	2,209,189	142,018
2. General Fund Other	1,237,532	1,355,776	118,244
B. Reimbursements	\$2,281,096	\$2,447,926	\$166,830
1. HCBS Waiver	1,721,780	1,850,044	128,264
2. Title XX Block Grant	213,421	213,421	0
a. Social Services	136,264	136,264	0
b. Temporary Assistance for Needy Families	77,157	77,157	0
3. ICF-DD SPA	60,964	62,760	1,796
4. QAF	9,874	10,165	291
5. 1915(i) SPA	238,291	266,897	28,606
6. Money Follows the Person	2,968	0	-2,968
7. Early Periodic Screening Diagnosis and Treatment	26,368	29,488	3,120
8. Behavioral Health Treatment - Fee-for-Service	7,430	15,151	7,721
C. Program Development Fund / Parental Fees	\$2,537	\$2,537	\$0
D. Federal Funds	\$33,052	\$32,758	-\$294
Early Start/Part C Grant	33,052	32,758	-294
F. Grand Total	\$5,621,388	\$6,048,186	\$426,798

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EXECUTIVE HIGHLIGHTS Overview

This document provides a brief, high-level summary of notable changes in the Department's 2018-19 Governor's Budget Regional Center Estimate.

GENERAL BUDGET OVERVIEW

2017-18

Costs and Fund Sources

The 2017-18 updated Regional Center budget totals \$6.4 billion (\$3.8 billion General Fund [GF]), which is a net decrease of \$24.5 million (\$34.7 million GF decrease) as compared to the enacted budget. The decrease includes a projected \$24.5 million reduction (\$25.1 million GF decrease) in Purchase of Service (POS) expenditures. This includes a reduction in regular POS to reflect updated, actual past year expenditures, offset by an increase in Policy items. The updated budget also includes an increase of \$54,000 (\$9.5 million GF decrease) in Operations costs. The significant GF decrease as compared to the minor OPS expenditure increase reflects an estimated increase in reimbursements from Targeted Case Management (TCM), which offsets the GF. The following tables reflect the updated current and budget year projected costs by fund sources and caseload changes.

Costs and Fund Sources (Values in thousands)				
	Enacted Budget	Updated 2017-18	Request	
Total Costs	\$6,399,988	\$6,375,499	(\$24,489)	
Operations	757,488	757,542	54	
Purchase of Services	5,621,388	5,596,845	(24,543)	
Early Start - Other Agency Costs	19,109	19,109	0	
Early Start Family Resource Services	2,003	2,003	0	
Fund Sources	\$6,399,988	\$6,375,499	(\$24,489)	
General Fund (GF)	3,820,981	3,786,315	(34,666)	
GF Match	2,291,823	2,301,341	9,518	
GF Other	1,529,158	1,484,974	(44, 184)	
Reimbursements	2,522,322	2,532,793	10,471	
Program Development Fund	2,537	2,537	0	
Developmental Disabilities Services Account	150	150	0	
Mental Health Services Fund	740	740	0	
Federal Funds	53,258	52,964	(294)	

Population

There is no change to the caseload projections as compared to the enacted budget.

	Enacted Budget	Updated 2017-18	Difference
CASELOAD			
Active (Age 3 & Older)	275,177	275,177	0
Total Early Start (Birth through 35 Months)	42,660	42,660	0
Total Community Caseload	317,837	317,837	0

Regional Center Operations

The Operations budget reflects a net increase of \$54,000 (\$9.5 million GF decrease) over the enacted budget due to a slight increase in Intermediate Care Facility – Developmentally Disabled (ICF/DD) Administration Fees.

	Enacted Budget	Updated 2017-18	Difference
	(Va	lues in thousan	ds)
Operations Total			
Core Staffing	\$589,751	589,751	\$0
Federal Compliance	47,672	47,672	0
Projects	27,064	27,064	0
Agnews Ongoing Workload	2,894	2,894	0
Lanterman Developmental Center Closure	2,392	2,392	0
Intermediate Care Facility-Developmentally Disabled (ICF-DD) Administration Fee	1,829	1,883	54
Total Operations	\$671,602	\$671,656	\$54

POS Expenditures

TOTAL

Updated POS expenditures reflect a net decrease of \$39.4 million (\$29 million GF decrease), or a 0.7 percent decrease, as compared to the enacted budget. The Department updated expenditures within the POS categories by including prior year policies for which actual expenditures were realized (Assembly Bill [AB]X2 1 - Community Based Services Increases, Senate Bill [SB] 3 - Minimum Wage, effective January 1, 2017, and AB 10 Minimum Wage, effective January 1, 2016). Previously, these POS policy increases were displayed in separate policy items. Actual SB 3 expenditures in 2016-17 were lower than originally estimated, which resulted in decreased expenditures projected for 2017-18.

Purchase of Services Caseload (Utilization and Growth) (Values in thousands)							
Enacted Updated Percent Budget 2017-18 Difference Change							
Community Care Facilities	\$1,427,479	\$1,463,005	\$35,526	2.49%			
Medical Facilities	16,064	13,424	(2,640)	-16.43%			
Day Programs	1,137,824	1,108,637	(29,187)	-2.57%			
Habilitation	177,434	170,724	` ' '				
Work Activity Program	53,509	46,942	(6,567)	-12.27%			
Supported Employment Program - Group	100,423	96,580	(3,843)				
Supported Employment Program - Individual	23,502	27,202	3,700	15.74%			
Transportation	359,326	347,828	(11,498)	-3.20%			
Support Services	1,317,648	1,310,919	(6,729)	-0.51%			
In-Home Respite	431,352	409,250	(22,102)	-5.12%			
Out-of-Home Respite	45,559	49,968	4,409	9.68%			
Health Care	120,120	115,957	(4,163)	-3.47%			
Miscellaneous	457,066	460,461	3,395	0.74%			
Quality Assurance Fees	9,874	10,165	291	2.95%			

\$5,499,746

(\$39,408)

\$5,460,338

-0.72%

Policy

There are no changes to Operations Policy items as compared to the enacted budget. However, there is a net increase of \$14.9 million (\$7.8 million GF increase) for POS Policy items as compared to the enacted budget. This includes an increase of \$1.5 million GF due to a delay in implementing the transition of consumers without an Autism Spectrum Disorder (ASD) Diagnosis who receive Behavioral Health Treatment (BHT) services, to the Department of Health Care Services. Originally planned for January 1, 2018, the Department will now transition children who receive BHT services on a fee-for-service basis on March 1, 2018. These children will continue to receive services through the regional centers, and DCHS will reimburse the Department for the related expenditures. Children who receive these services through Medi-Cal Managed Care will transition to DHCS on July 1, 2018.

POS Policy also includes an increase of \$13.4 million (\$6.3 million GF increase) to reflect anticipated expenditures resulting from the \$10.50 to \$11.00 SB 3 Minimum Wage Increase effective January 1, 2018.

Policy					
(Values in thousands)					
	Enacted Budget	Updated 2017-18	Difference		
Operations					
Improve Service Coordinator Caseload Ratios	\$17,000	\$17,000	\$0		
Compliance with HCBS Regulations - Operations	\$1,422	\$1,422	0		
Regional Center Operations Increases	\$56,600	\$56,600	0		
Resources to Implement ABX2 1	\$4,164	\$4,164	0		
BHT Psychological Evaluations for Fee-for Services Consumers	\$1,266	\$1,266	0		
DC Closure	\$5,434	\$5,434	0		
Sonoma DC	\$3,616	\$3,616	0		
Fairview DC	\$1,212	\$1,212	0		
Porterville DC	\$606	\$606	0		
Total Operations Policy	\$85,886	\$85,886	\$0		
Purchase of Services (POS)					
BHT Consumers with no ASD	(\$3,300)	(\$1,821)	\$1,479		
DC Closure	20,244	20,244	0		
Sonoma DC	13,322	13,322	0		
Fairview DC	4,570	4,570	O		
Porterville DC	2,352	2,352	O		
Compliance with HCBS Regulations - POS	15,000	15,000	0		
Safety Net Resources	5,622	5,622			
Competitive, Integrated Employment Incentives	29,000	29,000			
SB 3 Minimum Wage Increase, Effective 1/1/2018	53,476	66,862	13,386		
Best Buddies	1,600	1,600	0		
Total POS Policy	\$121,642	\$136,507	\$14,865		
TOTAL	\$207,528	\$222,393	\$14,865		

Reimbursements

Updated 2017-18 reimbursements reflect an increase of \$10.5 million from the enacted budget due to an increase in Targeted Case Management and 1915(i) State Plan Amendment eligible expenditures, offset by a decrease in Home and Community Based Services (HCBS) Waiver eligible expenditures.

Reimbursements (Values in thousands)					
	Enacted Budget	Updated 2017-18	Request		
Home and Community-Based Services (HCBS) Waiver	\$1,721,780	\$1,707,394	(\$14,386)		
HCBS Waiver Administration	14,105	14,700	595		
Medicaid Administration	15,952	16,132	180		
Targeted Case Management (TCM)	195,934	204,122	8,188		
TCM Administration	5,893	6,473	580		
Title XX Block Grant	213,421	213,421	0		
(1) Social Services	136,264	136,264	0		
(2) Temporary Assistance for Needy Families	77,157	77,157	0		
ICF-DD	60,964	62,760	1,796		
QAF	10,788	11,106	318		
1915(i) State Plan Amendment (SPA)	238,291	247,610	9,319		
Money Follows the Person	11,396	11,396	0		
Early Periodic Screening Diagnostic and Treatment (EPSDT)	26,368	26,857	489		
Behavioral Health Treatment Fee-for-Service	7,430	10,822	3,392		
TOTAL	\$2,522,322	\$2,532,793	\$10,471		

2018-19

Costs and Fund Sources

The 2018-19 Governor's Budget proposes \$6.9 billion (\$4.1 billion GF) for the Regional Center system; an increase of \$482.8 million (\$319.6 million GF increase), or a 7.6 percent increase, from the revised current year budget. As compared to the enacted budget, this is a \$458.3 million increase (\$284.9 million GF increase). The increase over the revised current year includes \$451.3 million (\$285.4 million GF) in POS, and \$31.5 million (\$34.2 million GF) in Operations.

Costs and Fund Sources (Values in thousands)				
·	Updated 2017-18	2018-19	Request	
Total Costs	\$6,375,499	\$6,858,287	\$482,788	
Operations	757,542	788,989	31,447	
Purchase of Services	5,596,845	6,048,186	451,341	
Early Start - Other Agency Costs	19,109	19,109	0	
Early Start Family Resource Services	2,003	2,003	0	
Fund Sources	\$6,375,499	\$6,858,287	\$482,788	
General Fund (GF)	3,786,315	4,105,886	319,571	
GF Match	2,301,341	2,446,616	145,275	
GF Other	1,484,974	1,659,270	174,296	
Reimbursements	2,532,793	2,696,107	163,314	
Program Development Fund	2,537	2,537	0	
Developmental Disabilities Services Account	150	150	0	
Mental Health Services Fund	740	740	0	
Federal Funds	52,964	52,867	(97)	

Population

There is a net increase of 15,187 consumers, or 4.8 percent, over the enacted budget, comprised of 4,180 Early Start consumers and 11,007 Active consumers.

	Updated 2017-18	2018-19	Difference
CASELOAD			
Active (Age 3 & Older)	275,177	286,184	11,007
Total Early Start (Birth through 35 Months)	42,660	46,840	4,180
Total Community Caseload	317,837	333,024	15,187

Regional Center Operations

Regional Center Operations increased \$31.4 million (\$34.2 million GF increase), or 4.7 percent, as compared to the Revised Current Year estimate. Core Staffing expenditures increased as a result of increased caseload projections, and Projects and Federal Compliance have minor increases as well. Additional GF for Operations in 2018-19 provides a backfill for the loss of funds from the Money Follows the Person grant, which expires in 2017-18.

	Updated 2017-18	2018-19	Difference
	(Va	lues in thousan	ds)
Operations Total			
Core Staffing	\$589,751	\$620,545	\$30,794
Federal Compliance	47,672	47,777	105
Projects	27,064	27,612	548
Agnews Ongoing Workload	2,894	2,894	0
Lanterman Developmental Center Closure	2,392	2,392	0
ICF-DD - Administration Fee	1,883	1,883	0
Total Operations	\$671,656	\$703,103	\$31,447

POS Expenditures

Regular POS increased a net \$329.9 million (\$241.2 GF increase), or 6.0 percent, from the revised current year budget. Community Care Facilities, Support Services, In-Home Respite, and Day Programs are estimated to have the largest expenditure increases.

Purchase of Services Caseload (Utilization and Growth) (Values in thousands)					
	Updated 2017-18	2018-19	Difference	Percent Change	
Community Care Facilities	\$1,463,005	\$1,547,509	\$84,504	5.78%	
Medical Facilities	13,424	12,024	(1,400)	-10.43%	
Day Programs	1,108,637	1,147,335	38,698	3.49%	
Habilitation Work Activity Program	170,724 46,942	·	,	0.93% -7.00%	
Supported Employment Program - Group Supported Employment Program - Individual	96,580 27,202		•	1.80% 11.52%	
Transportation	347,828			6.07%	
Support Services	1,310,919	•	•		
In-Home Respite	409,250	468,100	58,850	14.38%	
Out of Home Respite	49,968	52,002	2,034	4.07%	
Health Care	115,957	123,699	7,742	6.68%	
Miscellaneous Quality Assurance Fees	460,461 10,165	480,442 10,165	•	4.34% 0.00%	
TOTAL	\$5,460,338				

<u>Policy</u>

<u>Operations</u>
There are no changes to Operations Policy Items as compared to the revised current year estimate.

Policy (Values in thousands)				
Operations				
Improve Service Coordinator Caseload Ratios	\$17,000	\$17,000	\$0	
Compliance with HCBS Regulations - Operations	\$1,422	\$1,422	0	
Regional Center Operations Increases	\$56,600	\$56,600	0	
Resources to Implement ABX2 1	\$4,164	\$4,164	O	
BHT Psychological Evaluations for FFS Consumers	1,266	1,266	O	
DC Closure	\$5,434	\$5,434	O	
Sonoma DC	\$3,616	\$3,616	q	
Fairview DC	\$1,212	\$1,212	d	
Porterville DC	\$606	\$606	a	
Total Operations Policy	\$85,886	\$85,886	\$0	

POS

POS Policy increased a net \$121.5 million (\$44.2 million GF increase) as compared to the revised current year estimate for the following items:

- Impacts from Other Departments, DHCS BHT Consumers with no ASD Diagnosis – Net Decrease of \$47.0 million GF (\$47 million GF decrease) resulting from the full year transition of BHT fee-for-service and managed care consumers with no ASD diagnosis.
- DC Closure Increase of \$2.8 million (\$3.7 million GF increase) in DC-specific CPP funding for DC movers.
- Uniform Holiday, July 1, 2018 Decrease of \$5.6 (\$2.9 million GF) million resulting from re-implementing the 14-day holiday schedule.
- SB 3 Minimum Wage, January 1, 2018 Increase of \$55.5 million (\$30.3 million GF) reflects a full year impact of \$10.50 to \$11.00 per hour.
- SB 3 Minimum Wage, January 1, 2019 Increase of \$123.3 million (\$67.4 million GF) reflects a half-year impact of \$11.00 to \$12.00 per hour.
- Best Buddies Decrease \$1.6 million GF as this was a one-time appropriation.
- Safety-Net Decrease \$5.6 million GF as this was a one-time appropriation.

Policy				
(Values in thousands)				
	Updated 2017-18	2018-19	Difference	
Purchase of Services (POS)				
BHT FFS Consumers with no ASD, Effective 3/1/18	(\$1,821)	(\$48,786)	(\$46,965)	
BHT MCP Consumers with no ASD, Effective 7/1/18	\$0	\$0	\$0	
DC Closure	20,244	23,032	2,788	
Sonoma DC	13,322	10,278	(3,044)	
Fairview DC	4,570	8,420	3,850	
Porterville DC	2,352	4,334	1,982	
Compliance with HCBS Regulations - POS	15,000	15,000	0	
Uniform Holiday Schedule	0	(5,610)	(5,610)	
Competitive, Integrated Employment Incentives	29,000	29,000	0	
SB 3 Minimum Wage Increase, Effective 1/1/2018	66,862	122,357	55,495	
SB 3 Minimum Wage Increase, Effective 1/1/2019	0	122,996	122,996	
Best Buddies	1,600	0	(1,600)	
Safety Net Resources	5,622	0	(5,622)	
Total POS Policy	\$136,507	\$257,989	\$121,482	
TOTAL	\$222,393	\$343,875	\$121,482	

Reimbursements

Reimbursements in 2018-19 will increase by a net \$163.3 million. The largest increase is from HCBS Waiver reimbursements. There are also increases in 1915(i) SPA and TCM reimbursements resulting from additional expenditures eligible for federal reimbursement. These amounts are offset by a decrease in funds from the Money Follows the Person grant, which will be fully exhausted in 2017-18.

Reimbursements (Values in thousands)				
	Updated 2017-18	2018-19	Request	
Home and Community-Based Services (HCBS) Waiver	\$1,707,394	\$1,850,044	\$142,650	
HCBS Waiver Administration	14,700	14,696	(4)	
Medicaid Administration	16,132	16,132	0	
Targeted Case Management (TCM)	204,122	209,939	5,817	
TCM Administration	6,473	6,473	0	
Title XX Block Grant	213,421	213,421	0	
(1) Social Services	136,264	136,264	0	
(2) Temporary Assistance for Needy Families	77,157	77,157	0	
ICF-DD	62,760	62,760	0	
QAF	11,106	11,106	0	
1915(i) State Plan Amendment (SPA)	247,610	266,897	19,287	
Money Follows the Person	11,396	0	(11,396)	
Early Periodic Screening Diagnostic and Treatment	26,857	29,488	2,631	
Behavioral Health Treatment Fee - for - Service	10,822	15,151	4,329	
TOTAL	\$2,532,793	\$2,696,107	\$163,314	

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SECTION	ON C: NEW/REVISED POLICY	
Re	evised Major Assumptions	C-1

REVISED MAJOR ASSUMPTIONS

Senate Bill (SB) 3 Minimum Wage Increase - Regional Center Operations

SB 3, Chapter 4, Statutes of 2016, provides for a series of scheduled increases to the State's minimum wage such that, depending on economic and budgetary conditions, the minimum wage would reach \$15.00 per hour by January 1, 2022, after which it will be indexed to inflation.

The 2018-19 estimate includes \$123 million (\$67.4 million General Fund [GF]) to implement the Purchase of Service minimum wage increase from \$11.00 to \$12.00 per hour effective January 1, 2019. This includes expenditures for businesses with 26 or more employees. An additional \$4.1 million (\$2.7 million GF) is included for regional center operations positions that are below \$11.00 per hour.

<u>Behavioral Health Treatment (BHT) Services for Children without a Diagnosis of</u> Autism Spectrum Disorder

The Department of Health Care Services (DHCS) obtained approval from the Centers for Medicare & Medicaid Services (CMS) to include BHT as a Medi-Cal benefit for children with a diagnosis of Autism Spectrum Disorder (ASD). Between February and October 2016, children with an ASD diagnosis transitioned to DHCS for BHT services. Children without an ASD diagnosis did not transition, and it was expected their BHT services would remain eligible for federal financial participation (FFP) under the 1915(i) State Plan Amendment (SPA) or the Home and Community-Based Services (HCBS) Waiver. However, CMS determined Medi-Cal must cover medically necessary BHT services for all children, regardless of their diagnoses. Effective October 1, 2016, FFP is not available under either the 1915(i) SPA or HCBS Waiver for BHT services provided to children without an ASD diagnosis.

As a result of this CMS determination, the Department is working with DHCS to transition to Medi-Cal Fee-for-Service, those children whose BHT services will be determined as medically necessary by Medi-Cal. These children will continue to receive services through the regional centers, and DCHS will reimburse the Department for the related expenditures. Originally planned for January 1, 2018, the Department will now transition children who receive BHT services on a fee-for-service basis on March 1, 2018. As a result of the delay, the Governor's Budget includes a \$1.5 million GF increase in 2017-18. In total, the Governor's Budget reflects a \$1.8 million decrease in 2017-18, and a \$5.7 million GF decrease in 2018-19 for the transition of Fee-For-Service beneficiaries.

In addition, effective July 1, 2018, the Department will transition to Medi-Cal Managed Care, children whose BHT services have been determined to be medically necessary. These children will then receive services through their Medi-Cal Managed Care providers. The 2018-19 estimate reflects a decrease of \$43.1 million GF for the transition of Managed Care beneficiaries.

Uniform Holiday Schedule

Welfare and Institutions Code Section 4692, Statutes of 2009, implemented the Uniform Holiday Schedule as a cost savings measure. The purpose was to standardize and increase to 14, the number of holidays observed in the regional center system. After implementing the Uniform Holiday Schedule, The Arc of California and the United Cerebral Palsy Association of San Diego filed suit in federal court seeking to prevent enforcement. In May 2017, after subsequent appeals, the 9th Circuit affirmed the ability for the Department to implement the policy. Therefore, the Department will reinstate the Uniform Holiday Schedule beginning July 1, 2018. This will result in increased savings of \$5.6 million (\$2.9 million GF) over savings built into previous estimates when the measure was first implemented.

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SECTION D: FUTURE FISCAL ISSUES	

FUTURE FISCAL ISSUES

Self-Determination

Senate Bill (SB) 468, Chapter 683, Statutes of 2013, requires the Department to implement a statewide Self-Determination Program (SDP), subject to approval of federal funding. The SDP will enable regional center consumers and their families more freedom, control, and responsibility in choosing services, supports and providers to help meet the objectives in their individual program plans. Participation is limited to 2,500 individuals in the first 3 years of the SDP, including approximately 100 participants in the current State-only funded self-determination pilot project. To achieve the cost neutrality of the SDP, which is required in statute, SB 468 requires the additional federal reimbursements generated by former self-determination pilot participant's savings be used to offset administrative costs to the Department, including the required criminal background checks. Any remaining funds can be used to offset regional center costs to implement the SDP. The Budget Act of 2017 also includes provisional language to administer the SDP once federal approval has been received.

The Department submitted a Home and Community-Based Services (HCBS) Waiver application for federal funding to the Centers for Medicare & Medicaid Services (CMS) on December 31, 2014. As is typical when submitting an application for federal funding, CMS requested additional information regarding the Waiver application. The Department has responded to all subsequent requests for information, and has resolved the majority of CMS' questions/issues. It is anticipated that CMS will approve the Waiver application for federal funding in 2018-19.

CMS Final Regulations for Home and Community-Based Services

The Department administers both a 1915(c) Waiver (the HCBS Waiver for Persons with Developmental Disabilities) and a 1915(i) State Plan program. These programs enable the State to receive federal funding for services provided to approximately 180,000 consumers.

In early 2014, CMS published final regulations affecting 1915(c) Waiver programs, 1915(i) State Plan programs, and 1915(k) Community First Choice State Plans for HCBS provided through Medicaid. The purpose of the regulations is to provide services to individuals in HCBS settings that are integrated in and support full access to the community. Originally, CMS required states to comply with the new federal regulations by March 17, 2019, to maintain waiver and state plan funding (estimated at \$2.1 billion for the Department in 2018-19). However, on May 9, 2017, CMS notified states that given the difficult and complex nature of achieving compliance, it extended compliance by three years to March 17, 2022.

On November 23, 2016, the Department of Health Care Services (DHCS) submitted the revised Statewide Transition Plan (STP) for CMS approval. The STP describes at a high level, California's overall commitment to, and plan for achieving compliance including the potential need for changes in statute and/or regulation to comply with federal regulations. DHCS received feedback from CMS and a revised STP was re-

submitted to CMS on September 1, 2017. The Department will continue to work with DHCS on any additional changes requested by CMS subsequent to the September 1, 2017 submission.

Concurrent with the development of the STP, the Department is engaged in the multiyear process of implementing the federal regulations with the guidance of a comprehensive stakeholder group. To enable the Department to complete some of the required activities, the 2016 Budget Act appropriated funding for regional center staffing to assist with conducting individual provider assessments as well as funding to enable service providers to make modifications to comply with federal regulations.

Developmental Services Task Force

On July 24, 2014, the California Health and Human Services Secretary convened a task force to strengthen developmental services in the community. The task force includes consumers, consumer advocates, regional centers, community service providers, labor organizations, families of developmental center residents, legislative staff, and staff from the Department. The DS Task Force's early discussions focused on five subject areas, their scopes, level of urgency, additional data needs, and the identification of overarching guiding principles to be considered when examining all of the subject areas. Based on the five subject areas identified, four distinct workgroups were created to help move the work of the DS Task Force forward.

The workgroups analyzed data to craft recommendations to present to the full DS Task Force and public. Once presented, workgroup recommendations were finalized by the DS Task Force and summarized in the December 2017 report titled: "Developmental Services Task Force: Examination of Opportunities to Strengthen the Community-Based Services System." (Online at: http://www.chhs.ca.gov/DSTaskForce/06-FinalizedDSTaskForceReport-Dec2017.pdf)

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Early Start Population (Birth through 35 Months) Graph	E-3
Community Population Bar Chart	E-4

Population

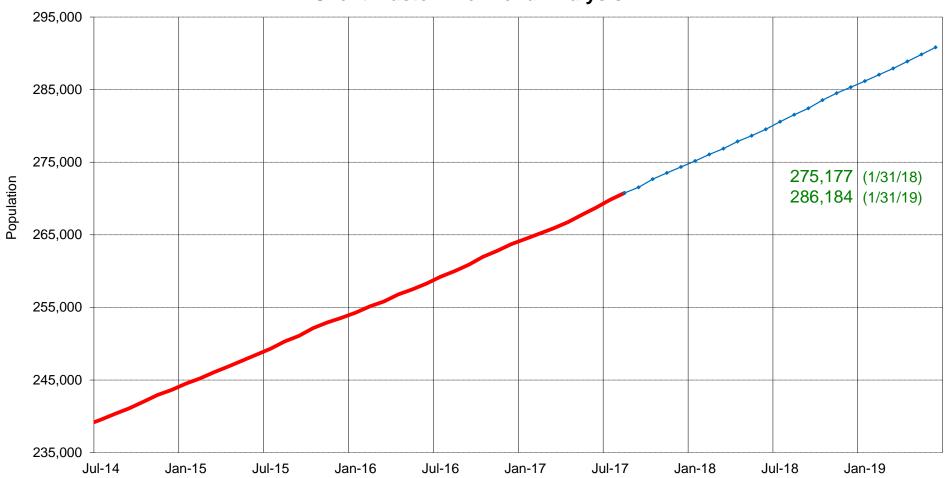
2017-18

Estimated Population as of 1/31/18				
ENACTED BUDGET	GOVERNOR'S BUDGET	Change	Percent Change	
275,177	275,177	0	0.00%	
42,660	42,660	0	0.00%	
317,837	317,837	0	0.00%	
	ENACTED BUDGET 275,177 42,660	ENACTED GOVERNOR'S BUDGET BUDGET 275,177 275,177 42,660 42,660	ENACTED BUDGET GOVERNOR'S BUDGET Change 275,177 275,177 0 42,660 42,660 0	

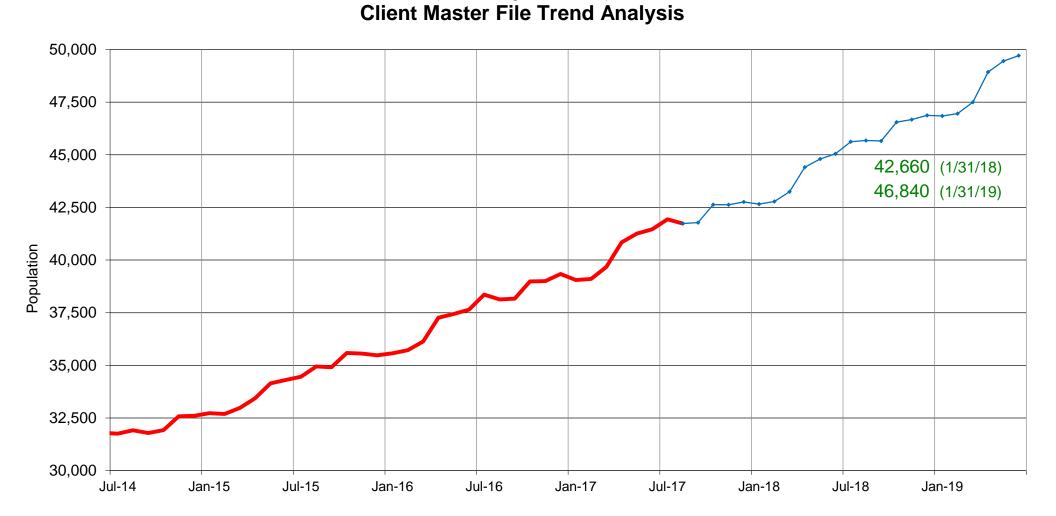
2018-19

Estimated Population as of 1/31/19					
ENACTED GOVERNOR'S Perce BUDGET BUDGET Change Chan					
A. Active Status (Age 3 & Older) B. Total Early Start (Birth through 35 Months)	275,177 42,660	286,184 46,840	11,007 4,180	4.00% 9.80%	
C. Total Community Population	317,837	333,024	15,187	4.78%	

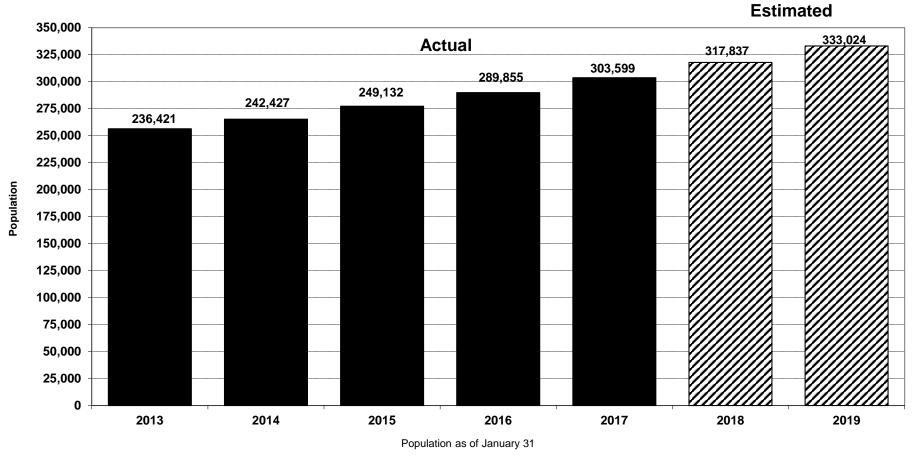
Active Status Population (Age 3 & Older) Client Master File Trend Analysis



Early Start
(Birth through 35 Months)



Community Population (Active Status, Early Start, and Prevention)



*The Prevention Program ended on June 30, 2012

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SECTION F: OPERATIONS

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Operations

POPULATION AND CASELOAD GROWTH EXPENDITURE SUMMARY Comparison of the Enacted Budget to the 2018-19 Governor's Budget 2017-18

	Enacted Budget	Governor's Budget	Request
POPULATION			
Active Status (Age 3 & Older)	275,177	275,177	0
Early Start (Birth through 35 Months)	42,660	42,660	0
Total Population	317,837	317,837	0
OPERATIONS - CASELOAD GROWTH	,	,	
I. STAFFING			
A. Core Staffing	\$614,127	\$614,127	\$0
B. Enhanced Caseload Ratio 1:45 for Two Years	344	344	0
C. Community Placement Plan	15,265	15,265	0
D. Staffing for Collection of FFP for Contracted Services	1,893	1,893	0
E. Less: Intake and Assessment (2003-04)	-4,465	-4,465	0
F. Less: Unallocated Reduction (2001-02)	-10,559	-10,559	0
G. Less: Cost Containment (2004-05)	-5,968	-5,968	0
H. Less: Savings Target (2009-10)	-12,000	-12,000	0
I. Less: Cost Containment (2011-12)	-3,486	-3,486	0
J. Less: Unallocated Reduction (2011-12)	-5,400	-5,400	0
K. Total Staffing	\$589,751	\$589,751	\$0
II. A. Agnews Ongoing Workload	2,894	2,894	0
B. Lanterman Development Center Closure	2,392	2,392	0
C. Total Developmental Centers Closure	\$5,286	\$5,286	\$0
III. FEDERAL COMPLIANCE	ψ3,200	ψ3,200	ΨΟ
A. HCBS Waiver	21,135	21,135	0
B. Compliance with HCBS Waiver Requirements	8,700	8,700	0
C. Case Managers to Meet HCBS Waiver Requirements	12,251	12,251	0
D. Targeted Case Management	4,129	4,129	0
E. Nursing Home Reform/Pre-Admission Screening and	4,129	4,129	U
Resident Review	472	472	0
	473 984	473 984	0
F. Federal Medicaid Requirement for RC HCBS Services			0
G. Total Federal Compliance	\$47,672	\$47,672	\$0
IV. PROJECTS	2 707	2 707	0
A. Information Technology Costs:	3,797	3,797	0
Regional Center Application Support	2,547	2,547	0
2. Data Processing	1,250	1,250	0
B. Clients' Rights Advocacy Contract	6,791	6,791	0
C. Quality Assessment Contract	4,044	4,044	0
D. Direct Support Professional Training	3,037	3,037	0
E. Office of Administrative Hearings Contract	3,350	3,350	0
F. Wellness Projects	100	100	O
G. Foster Grandparent / Senior Companion Programs	3,035	3,035	0
H. Special Incident Reporting/Risk Assessment Contract	938	938	0
I. Increased Access to Mental Health Services	740	740	0
J. Sherry S. Court Case / Los Angeles County Hops	211	211	0
K. Enhancing FFP, Phase II, Proposal C, Consultant	500	500	0
L. University Enterprises, Inc.	123	123	0
M. Affordable Housing	128	128	0
N. Review of SB 1175 Housing Proposals	150	150	0
O. Denti-Cal Infrastructure for RC Dental Services	120	120	0
P. Total Projects	\$27,064	\$27,064	\$0
V. ICF-DEVELOPMENTALLY DISABLED ADMIN. FEES	\$1,829	\$1,883	\$54
VI. GRAND TOTAL - OPERATIONS CASELOAD GROWTH	\$671,602	\$671,656	\$54

Operations

POPULATION AND CASELOAD GROWTH EXPENDITURE SUMMARY Comparison of the Updated 2017-18 to the 2018-19 Governor's Budget 2018-19

	Updated 2017-18	Governor's Budget	Request
POPULATION			
Active Status (Age 3 & Older)	275,177	286,184	11,007
Early Start (Birth through 35 Months)	42,660	46,840	4,180
Total Population	317,837	333,024	15,187
OPERATIONS - CASELOAD GROWTH			
I. STAFFING			
A. Core Staffing	\$614,127	\$644,921	\$30,794
B. Enhanced Caseload Ratio 1:45 for Two Years	344	344	0
C. Community Placement Plan	15,265	15,265	0
D. Staffing for Collection of FFP for Contracted Services	1,893	1,893	0
E. Less: Intake and Assessment (2003-04)	-4,465	-4,465	0
F. Less: Unallocated Reduction (2001-02)	-10,559	-10,559	0
G. Less: Cost Containment (2004-05)	-5,968	-5,968	0
H. Less: Savings Target (2009-10)	-12,000	-12,000	0
I. Less: Cost Containment (2011-12)	-3,486	-3,486	0
J. Less: Unallocated Reduction (2011-12)	-5,400	-5,400	0
K. Total Staffing	\$589,751	\$620,545	\$30,794
II. A. Agnews Ongoing Workload	2,894	2,894	0
B. Lanterman Development Center Closure	2,392	2,392	0
C. Total Developmental Centers Closure	\$5,286	\$5,286	\$0
III. FEDERAL COMPLIANCE	, ,	. ,	•
A. HCBS Waiver	21,135	21,135	0
B. Compliance with HCBS Waiver Requirements	8,700	8,700	0
C. Case Managers to Meet HCBS Waiver Requirements	12,251	12,356	105
D. Targeted Case Management	4,129	4,129	0
E. Nursing Home Reform/Pre-Admission Screening and	.,	.,	
Resident Review	473	473	0
F. Federal Medicaid Requirement for RC HCBS Services	984	984	0
G. Total Federal Compliance	\$47,672	\$47,777	\$105
IV. PROJECTS	, ,	· ,	,
A. Information Technology Costs:	3,797	3,797	0
Regional Center Application Support	2,547	2,547	0
2. Data Processing	1,250	1,250	0
B. Clients' Rights Advocacy Contract	6,791	7,111	320
C. Quality Assessment Contract	4,044	3,705	-339
D. Direct Support Professional Training	3,037	3,037	0
E. Office of Administrative Hearings Contract	3,350	3,350	0
F. Wellness Projects	100	100	0
G. Foster Grandparent / Senior Companion Programs	3,035	3,765	730
H. Special Incident Reporting/Risk Assessment Contract	938	938	0
I. Increased Access to Mental Health Services	740	740	0
J. Sherry S. Court Case / Los Angeles County Hops	211	211	0
K. Enhancing FFP, Phase II, Proposal C, Consultant	500	500	0
L. University Enterprises, Inc.	123	123	0
M. Affordable Housing	128	85	-43
N. Review of SB 1175 Housing Proposals	150	150	0
O. Denti-Cal Infrastructure for RC Dental Services	120	0	-120
P. Total Projects	\$27,064	\$27,612	\$ 548
V. ICF-DEVELOPMENTALLY DISABLED ADMIN. FEES			\$0
V ICE-DEVELOPMENTALLY DISABLED ADMIN FEES	\$1,883	\$1,883	VII.

Staffing Expenditures

DESCRIPTION:

Staffing includes personal services and operating expenses for Core Staffing, Community Placement Plan, and Placement Continuation.

ASSUMPTIONS:	<u>2017-18*</u>	<u>2018-19*</u>
 Population Projections: (See Section E, Population, for detail) Active Status (Age 3 and Older) Early Start (Birth through 35 Months) Subtotal: Developmental Center Population: Total Population: Informational Community Care Facility Consumers (including Placement Continuation) Home and Community-Based Services Waiver-Enrolled Consumers Early Start (with Assessment) Placement Continuation Consumers Intake cases per month Vendors 	275,177 42,660 317,837 495 318,332 25,243 129,970 48,212 296 7,196 44,158	286,184 46,840 333,024 351 333,375 25,243 131,438 52,379 204 7,547 44,158
Mediations per year	400	400
METHODOLOGY: CORE STAFFING: PERSONAL SERVICES: • Direct Services and Administration: Enacted Budget Governor's Budget 2016-17 11,443.91 2017-18 11,864.59	2017-18* \$419,922	2018-19* \$441,365
2017-18 11,864.59 2018-19 12,361.96 See Attachment A for Core Staffing Expenditure Detail. See Attachment B for Core Staffing Formulas.		
See Attachment A for Core Staffing Expenditure Detail.	99,521	104,603
See Attachment A for Core Staffing Expenditure Detail. See Attachment B for Core Staffing Formulas. • Fringe Benefits:	99,521	104,603 -18,353

^{*} Values in thousands (000's)

Staffing Expenditures

METHODOLOGY (continued):	<u>2017-18*</u>	<u>2018-19*</u>
 Early Start /Part C Administrative and Clinical Support: Includes salaries, fringe benefits, and salary savings. 	694	694
TOTAL PERSONAL SERVICES:	\$502,746	\$528,309
OPERATING EXPENSES:		
 Operating Expenses: Base amount plus the following adjustments: Professional Positions: \$3,400 Per New Position Clerical Positions: \$2,400 Per New Position 	45,305	46,906
 Rent: See Attachment C for rent details. 	66,076	69,706
TOTAL OPERATING EXPENSES:	\$111,381	\$116,612
TOTAL CORE STAFFING:	\$614,127	\$644,921
 Enhanced Caseload Ratio 1:45 for Two Years: 	344	344
Community Placement Plan:		
See Community Placement Plan Methodology for details.	15,265	15,265
STAFFING FOR COLLECTION OF FEDERAL FINANCIAL PARTICIPATION (FFP) FOR CONTRACTED SERVICES:		
 Funding provides one Community Program Specialist I and one Account Clerk II for each regional center. This funding will be required until the regional centers have a billing system that allows the processing of vendor invoices that do not include the individual consumer data required to support Home and Community Based Services Waiver billing. 	1,893	1,893
LESS INTAKE AND ASSESSMENT (2003-04):	-4,465	-4,465
LESS UNALLOCATED REDUCTION (2001-02):	-10,559	-10,559
LESS COST CONTAINMENT (2004-05):	-5,968	-5,968
LESS SAVINGS TARGET (2009-10):	-12,000	-12,000
LESS COST CONTAINMENT (2011-12):	-3,486	-3,486
LESS UNALLOCATED REDUCTION (2011-12):	-5,400	-5,400
TOTAL EXPENDITURES:	\$589,751	\$620,545

Staffing Expenditures

FUNDING:

Funding for Staffing expenditures is comprised of reimbursements from: Medicaid Administration (75% FFP, 25% General Fund [GF] Match), Home and Community Based Services Waiver Administration (50% FFP, 50% GF Match), Targeted Case Management (50% FFP, 50% GF Match), Targeted Case Management Administration (50% FFP, 50% GF Match), and Money Follows the Person (100% FFP). The State GF portion is that which is non-FFP.

CURRENT YEAR CHANGE FROM ENACTED:

There is no change.

REASON FOR YEAR-OVER-YEAR CHANGE:

Budget year expenditures are estimated to increase by a net \$30.8 million (\$33.5 million GF), comprising increases in personal services and operating expenses due to caseload growth, rent, and Senate Bill 3 minimum wage increase from \$11 to \$12, effective January 1, 2019.

EXPENDITURES:		<u>2017-18*</u>	<u>2018-19*</u>
	TOTAL	\$589,751	\$620,545
	GF	380,994	414,451
	Reimbursements	208 757	206 094

^{*} Values in thousands (000's)

Attachment A CORE STAFFING ESTIMATE - 2017-18 Comparison of the Enacted Budget to the 2018-19 Governor's Budget

I.	CORE STAFFING FORMULA
	A. PERSONAL SERVICES
	1. DIRECT SERVICES

ESTAFFING FORMULA ERSONAL SERVICES			2019-10 Go	vernor's Budget	
I. DIRECT SERVICES	Enacted		Budgeted	vernor s budget	
a. Clinical	Budget	Positions	Salary	Cost	Difference
(1) Intake and Assessment	Daaget	1 031110113	Galary	0031	Billerenee
(a) Physician	\$12,617,565	159.17	\$79,271	\$12,617,565	\$0
(b) Psychologist	13,291,551	318.33	41,754	13,291,551	0
(c) Nurse	5,916,508	159.17	37,171	5,916,508	0
(d) Nutritionist	4,477,452	159.17	28,130	4,477,452	0
(2) Clinical Support Teams	.,,.02		_0,.00	.,,	ŭ
(a) Physician/Psychiatrist	7 151 751	81.00	92,034	7,454,754	0
(b) Consulting Pharmacist	7,454,754 4,896,450	81.00	60,450	4,896,450	0
(c) Behavioral Psychologist	4,452,732	81.00	54,972	4,452,732	0
(d) Nurse	4,088,718	81.00	50,478	4,088,718	0
(3) SB 1038 Health Reviews	4,000,710	01.00	30,476	4,000,710	U
(a) Physician	2,697,517	29.31	92,034	2,697,517	0
(b) Nurse	6,904,381	136.78	50,478	6,904,381	0
• •	0,304,301	130.70	30,476	0,304,361	U
b. Intake / Case Management					
(1) Supervising Counselor (Intake)	0.040.404	400.00	20.020	2 040 404	0
(1:10 Intake Workers in Item (2) below)	3,910,101	102.80	38,036	3,910,101	0
(2) Intake Worker	32,415,842	1,028.03	31,532	32,415,842	0
(3) Supervising Counselor (Case Management)	00.054.004	500.00	50.000	00.054.004	
(1:10 CPCs in Items (6), (7) and (8) below)	26,354,224	503.02	52,392	26,354,224	0
(4) Supervising Counselor (Capitol People First)	0.40.500				
(DC Case Management 1:10 CPCs)	242,592	3.61	67,200	242,592	0
(5) Client Program Coordinator (CPC), 1:66 DC Consumers					_
Capitol People First	1,698,326	36.12	47,019	1,698,326	0
(6) CPC, 1:66 Consumers(Total Pop w/o DCs,CPP,ES)	74,785,660	2,197.51	34,032	74,785,660	0
(7) CPC (Waiver, Early Start only), 1:62 Consumers	94,756,659	2,784.34	34,032	94,756,659	0
(8) CPC, Quality Assurance for ARM	1,646,128	48.37	34,032	1,646,128	0
(9) Supervising Counselor, DSS Incidental Medical					_
Care Regulations (1:10 CPCs)	84,875	1.62	52,392	84,875	0
(10) CPC, DSS Incidental Medical Care Regs	611,992	16.18	37,824	611,992	0
c. Quality Assurance / Quarterly Monitoring					
(1) Supervising Counselor	2,210,942	42.20	52,392	2,210,942	0
(2) CPC	14,361,504	422.00	34,032	14,361,504	0
d. Early Intervention					
(1) <u>General</u>					
(a) Prevention Coordinator	876,792	21.00	41,752	876,792	0
(b) High-Risk Infant Case Manager	856,905	21.00	40,805	856,905	0
(c) Genetics Associate	798,714	21.00	38,034	798,714	0
(2) Early Start / Part C					
(a) Supervising Counselor	1,539,277	29.38	52,392	1,539,277	0
(b) CPC	9,997,240	293.76	34,032	9,997,240	0
(c) Administrative and Clinical Support (see next page)					
e. Community Services					
(1) Special Incident Coordinator	1,100,232	21.00	52,392	1,100,232	0
(2) Vendor Fiscal Monitor	1,248,729	24.56	50,844	1,248,729	0
(3) Program Evaluator	898,653	21.00	42,793	898,653	0
(4) Resource Developer	898,653	21.00	42,793	898,653	0
(5) Transportation Coordinator	898,653	21.00	42,793	898,653	0
(6) Administrative Services Analyst (SB 1039					
Consumer Complaints)	449,327	10.50	42,793	449,327	0
(7) Developmental Center Liaison	107,262	2.82	38,036	107,262	0
(8) Diversion	126,584	4.00	31,646	126,584	0
(9) Placement Continuation:					
(a) Supervising Counselor	9,431	0.18	52,392	9,431	0
(b) CPC (Supplement at 1:45 Consumers)	61,598	1.81	34,032	61,598	0
f. Special Incident Reporting (SIR)					
(1) Supervising Counselor	443,236	8.46	52,392	443,236	0
(2) QA/CPC	2,878,086	84.57	34,032	2,878,086	0
(3) Nurses	2,134,210	42.28	50,478	2,134,210	0
g. <u>Mediation</u>			•	•	
(1) Clinical Staff	7,093	0.11	64,484	7,093	0
(2) Supervising Counselor	52,916	1.01	52,392	52,916	0
(3) CPC	17,356	0.51	34,032	17,356	0
h. Expansion of Autism Spectrum Disorders (ASD) Initiative			•	•	
(1) ASD Clinical Specialist	- 1,371,888	21.00	65,328	1,371,888	0
(2) ASD Program Coordinator	1,318,464	21.00	62,784	1,318,464	0
i. SUBTOTAL DIRECT SERVICES	\$347,967,772	9164.68	02,704	\$347,967,772	<u> </u>
" OCD TO THE DIRECT CERTIFIED	ψυτι,συι,τι2	3104.00	_	QUT1,001,112	φ0

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C.

Attachment A CORE STAFFING ESTIMATE - 2017-18

Comparison of the Enacted Budget to the 2018-19 Governor's Budget	get

			2018-19 Go	vernor's Budget	
	Enacted		Budgeted		
2. ADMINISTRATION	Budget	Positions	Salary	Cost	Difference
a. Executive Staff					
(1) Director	1,279,698	21.00	60,938	1,279,698	0
(2) Administrator	1,009,449	21.00	48,069	1,009,449	0
(3) Chief Counselor	986,643	21.00	46,983	986,643	0
b. <u>Fiscal</u>					
(1) Federal Program Coordinator (Enh. FFP, Phase I)	1,206,177	21.00	57,437	1,206,177	0
(2) Federal Compliance Specialist (Enh. FFP, Phase II)	5,184,113	129.97	39,887	5,184,113	0
(3) Fiscal Manager	963,480	21.00	45,880	963,480	0
(4) Program Tech II (FCPP)	883,255	24.22	36,468	883,255	0
(5) Revenue Clerk	1,284,829	56.72	22,652	1,284,829	0
(6) Account Clerk (Enh. FFP, Phase II)	584,640	21.00	27,840	584,640	0
(7) Account Clerk	8,935,649	397.92	22,456	8,935,649	0
c. Information Systems and Human Resources					
(1) Information Systems Manager	1,397,844	21.00	66,564	1,397,844	0
(2) Information Systems Assistant	1,000,692	21.00	47,652	1,000,692	0
(3) Information Systems Assistant (SIR)	500,346	10.50	47,652	500,346	0
(4) Privacy Officer (HIPAA)	898,653	21.00	42,793	898,653	0
(5) Personal Computer Systems Manager	1,397,844	21.00	66,564	1,397,844	0
(6) Training Officer	1,099,728	21.00	52,368	1,099,728	0
(7) Training Officer (SIR)	549,864	10.50	52,368	549,864	0
(8) Human Resources Manager	1,067,724	21.00	50,844	1,067,724	0
d. Clerical Support					
(1) Office Supervisor	489,867	21.00	23,327	489,867	0
(2) PBX/Mail/File Clerk	1,415,115	63.00	22,462	1,415,115	0
(3) Executive Secretary	1,179,262	52.50	22,462	1,179,262	0
(4) MD/Psychologist Secretary II	342,868	14.66	23,388	342,868	0
(5) MD/Psychologist Secretary I	5,362,835	238.75	22,462	5,362,835	0
(6) Secretary II	4,312,046	184.37	23,388	4,312,046	0
(7) Secretary I	28,410,432	1,237.18	22,964	28,410,432	0
(8) Secretary I (DC Case Management - Capitol People First)	210,834	6.62	31,848	210,834	0
e. SUBTOTAL ADMINISTRATION	\$71,953,887	2,699.91	_	\$71,953,887	\$0
3. TOTAL POSITIONS AND SALARIES			· -		
(Item A.1.i. + Item A.2.e.)	\$419,921,659	11,864.59		\$419,921,659	\$0
a. CPCs	200,814,549		=	200,814,549	0
b. All Other Staff	219,107,110			219,107,110	0
4. Fringe Benefits	-, - , -			., . ,	
a. CPCs 23.7%	47,593,048			47,593,048	0
b. All Other Staff 23.7%	51,928,385			51,928,385	0
c. Total Fringe Benefits	\$99,521,433		_	\$99,521,433	\$0
5. Salary Savings	, ,			, ,	• •
a. CPCs 1.0%	-2,484,076			-2,484,076	0
b. All Other Staff 5.5%	-14,906,952			-14,906,952	0
c. Total Salary Savings	-\$17,391,028		_	-\$17,391,028	\$0
6. Early Start / Part C Administrative and	, , ,-			, , , , , , ,	• •
Clinical Support (salaries, fringe benefits					
and salary savings)	\$694,000			\$694,000	\$0
7. TOTAL PERSONAL SERVICES			_		*-
(Items A.3. + A.4. + A.5. + A.6.)	\$502,746,064			\$502,746,064	\$0
ROUNDED	\$502,746,000	11,865.00		\$502,746,000	\$0
OPERATING EXPENSES AND RENT	4002,170,000	,500.00	=	4002ji 10,000	Ψ0
	45.005.005			45.005.000	=
1. Operating Expenses	45,305,000			45,305,000	0
2. Rent	66,076,000		_	66,076,000	0
3. Subtotal Operating Expenses and Rent	\$111,381,000		_	\$111,381,000	\$0
TOTAL CORE STAFFING (Items A.7. + B.3.)	\$614,127,000		=	\$614,127,000	\$0
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Attachment A CORE STAFFING ESTIMATE - 2018-19 Comparison of the Enacted Budget to the 2018-19 Governor's Budget

I. CORE STAFFING FORMULA A. PERSONAL SERVICES

E STAFFING FORMULA ERSONAL SERVICES			2018-19 6	overnor's Budget	
I. DIRECT SERVICES	Enacted		Budgeted	overnor's Budget	
a. Clinical	Budget	Positions	Salary	Cost	Difference
(1) Intake and Assessment			•		
(a) Physician	\$12,617,565	166.69	\$79,271	\$13,213,683	\$596,118
(b) Psychologist	13,291,551	333.38	41,754	13,919,949	628,398
(c) Nurse	5,916,508	166.69	37,171	6,196,034	279,526
(d) Nutritionist	4,477,452	166.69	28,130	4,688,990	211,538
(2) Clinical Support Teams					
(a) Physician/Psychiatrist	7,454,754	84.00	92,034	7,730,856	276,102
(b) Consulting Pharmacist	4,896,450	84.00	60,450	5,077,800	181,350
(c) Behavioral Psychologist	4,452,732	84.00	54,972	4,617,648	164,916
(d) Nurse	4,088,718	84.00	50,478	4,240,152	151,434
(3) SB 1038 Health Reviews					
(a) Physician	2,697,517	31.17	92,034	2,868,700	171,183
(b) Nurse	6,904,381	145.47	50,478	7,343,035	438,654
b. Intake / Case Management					
(1) Supervising Counselor (Intake)	0.040.404	407.04	20.020	4 400 004	400 500
(1:10 Intake Workers in Item (2) below)	3,910,101	107.81	38,036	4,100,661	190,560
(2) Intake Worker	32,415,842	1,078.12	31,532	33,995,280	1,579,438
(3) Supervising Counselor (Case Management)	00.054.004	F00 07	F0 000	07 500 005	4 000 074
(1:10 CPCs in Items (6), (7) and (8) below)	26,354,224	526.67	52,392	27,593,295	1,239,071
(4) Supervising Counselor (Capitol People First)	242 502	2.64	67 200	242 F02	0
(DC Case Management 1:10 CPCs)	242,592	3.61	67,200	242,592	0
(5) Client Program Coordinator (CPC), 1:66 DC Consumers	4 600 226	20.42	47.040	4 600 226	0
Capitol People First	1,698,326	36.12	47,019	1,698,326	0
(6) CPC, 1:66 Consumers(Total Pop w/o DCs,CPP,ES)	74,785,660	2,342.83	34,032	79,731,191	4,945,531
(7) CPC (Waiver, Early Start only), 1:62 Consumers	94,756,659	2,875.45	34,032	97,857,314	3,100,655
(8) CPC, Quality Assurance for ARM	1,646,128	48.37	34,032	1,646,128	0
(9) Supervising Counselor, DSS Incidental Medical	04.075	4.07	F0 000	74 777	40.000
Care Regulations (1:10 CPCs)	84,875	1.37	52,392	71,777	-13,098
(10) CPC, DSS Incidental Medical Care Regs	611,992	13.73	37,824	519,324	-92,668
c. Quality Assurance / Quarterly Monitoring	0.040.040	40.05	50.000	0.040.770	0.000
(1) Supervising Counselor	2,210,942	42.25	52,392	2,213,772	2,830
(2) CPC	14,361,504	422.54	34,032	14,379,881	18,377
d. Early Intervention					
(1) General	070 700	04.00	44.750	070 700	0
(a) Prevention Coordinator	876,792	21.00	41,752	876,792	0
(b) High-Risk Infant Case Manager	856,905 708,714	21.00	40,805	856,905 709 714	0
(c) Genetics Associate	798,714	21.00	38,034	798,714	U
(2) Early Start / Part C (a) Supervising Counselor	1,539,277	31.92	52,392	1,672,353	133,076
(b) CPC	9,997,240	319.16	34,032	10,861,653	864,413
(c) Administrative and Clinical Support (see next page)	9,997,240	319.10	34,032	10,001,000	004,413
e. Community Services					
(1) Special Incident Coordinator	1,100,232	21.00	52,392	1,100,232	0
(2) Vendor Fiscal Monitor	1,248,729	24.56	50,844	1,248,729	0
(3) Program Evaluator	898,653	21.00	42,793	898,653	0
(4) Resource Developer	898,653	21.00	42,793	898,653	0
(5) Transportation Coordinator	898,653	21.00	42,793	898,653	0
(6) Administrative Services Analyst (SB 1039	090,000	21.00	42,793	090,033	U
Consumer Complaints)	449,327	10.50	42,793	449,327	0
(7) Developmental Center Liaison	107,262	2.82	38,036	107,262	0
(8) Diversion	126,584	4.00	31,646	126,584	0
(9) Placement Continuation:	120,304	4.00	31,040	120,304	U
(a) Supervising Counselor	9,431	0.12	52,392	6,287	-3,144
(b) CPC (Supplement at 1:45 Consumers)	61,598	1.24	34,032	42,200	-19,398
f. Special Incident Reporting (SIR)	01,390	1.24	34,032	42,200	-19,390
(1) Supervising Counselor	443,236	8.76	52,392	458,954	15,718
(1) Supervising Counselor (2) QA/CPC	2,878,086	87.60	34,032	2,981,203	103,117
(3) Nurses	2,134,210	43.80	50,478	2,981,203 2,210,936	76,726
` '	Z, 134,Z 10	43.00	30,470	2,210,930	10,120
g. Mediation (1) Clinical Staff	7,093	0.11	64,484	7,093	0
(2) Supervising Counselor	52,916	1.01	52,392	7,093 52,916	0
(3) CPC	17,356	0.51	34,032	17,356	0
h. Expansion of Autism Spectrum Disorders (ASD) Initiative	17,330	0.51	34,032	17,330	U
(1) ASD Clinical Specialist	1,371,888	21.00	65,328	1,371,888	0
(2) ASD Program Coordinator	1,318,464	21.00	62,784	1,318,464	0
i. SUBTOTAL DIRECT SERVICES	\$347,967,772	9,570.07	02,704	\$363,208,195	\$15,240,423
I. SUBTUTAL DIRECT SERVICES	411,10E,14CG	9,370.07	_		φ13,24U,423

Attachment A CORE STAFFING ESTIMATE - 2018-19 Comparison of the Enacted Budget to the 2018-19 Governor's Budget

	Enacted		Budgeted	overnor's Budget	
2. ADMINISTRATION	Budget	Positions	Salary	Cost	Difference
a. Executive Staff					
(1) Director	1,279,698	21.00	\$60,938	1,279,698	9
(2) Administrator	1,009,449	21.00	48,069	1,009,449	
(3) Chief Counselor	986,643	21.00	46,983	986,643	
b. Fiscal					
(1) Federal Program Coordinator (Enh. FFP, Phase I)	1,206,177	21.00	57,437	1,206,177	
(2) Federal Compliance Specialist (Enh. FFP, Phase II)	5,184,113	131.44	39,887	5,242,747	58,63
(3) Fiscal Manager	963,480	21.00	45,880	963,480	
(4) Program Tech II (FCPP)	883,255	24.22	36,468	883,255	
(5) Revenue Clerk	1,284,829	54.57	24,474	1,335,523	50,69
(6) Account Clerk (Enh. FFP, Phase II)	584,640	21.00	27,840	584,640	
(7) Account Clerk	8,935,649	416.72	24,265	10,111,748	1,176,09
c. Information Systems and Human Resources					
(1) Information Systems Manager	1,397,844	21.00	66,564	1,397,844	
(2) Information Systems Assistant	1,000,692	21.00	47,652	1,000,692	
(3) Information Systems Assistant (SIR)	500,346	10.50	47,652	500,346	
(4) Privacy Officer (HIPAA)	898,653	21.00	42,793	898,653	
(5) Personal Computer Systems Manager	1,397,844	21.00	66,564	1,397,844	
(6) Training Officer	1,099,728	21.00	52,368	1,099,728	
(7) Training Officer (SIR)	549,864	10.50	52,368	549,864	
(8) Human Resources Manager	1,067,724	21.00	50,844	1,067,724	
d. Clerical Support	, ,		, .	, ,	
(1) Office Supervisor	489,867	21.00	24,280	509,887	20,02
(2) PBX/Mail/File Clerk	1,415,115	63.00	24,263	1,528,542	113,42
(3) Executive Secretary	1,179,262	52.50	24,263	1,273,785	94,52
(4) MD/Psychologist Secretary II	342,868	15.59	24,306	378,926	36,05
(5) MD/Psychologist Secretary I	5,362,835	250.04	24,263	6,066,614	703,77
(6) Secretary II	4,312,046	186.07	24,306	4,522,568	210,52
(7) Secretary I	28,410,432	1,297.12	24,785	32,149,533	3,739,10
(8) Secretary I (DC Case Management - Capitol People First)	210,834	6.62	31,848	210,834	2,122,12
e. SUBTOTAL ADMINISTRATION	\$71,953,887	2,791.89	<u> </u>	\$78,156,744	\$6,202,85
B. TOTAL POSITIONS AND SALARIES		,	_		· · · · · ·
(Item A.1.i. + Item A.2.e.)	\$419,921,659	12,361.96		\$441,364,939	\$21,443,28
a. CPCs	200,814,549	12,001.00	_	209,734,576	8,920,02
b. All Other Staff	219,107,110			231,630,363	12,523,25
4. Fringe Benefits	219,107,110			231,030,303	12,023,20
a. CPCs 23.7%	47 502 049			40 707 005	¢2 114 04
b. All Other Staff 23.7%	47,593,048			49,707,095	\$2,114,04
	51,928,385 \$99,521,433		_	54,896,396	2,968,01
c. Total Fringe Benefits	Φ99,521,455			\$104,603,491	\$5,082,05
5. Salary Savings	0.404.070			0.504.447	£440.04
a. CPCs 1.0%	-2,484,076			-2,594,417	-\$110,34
b. All Other Staff 5.5%	-14,906,952		_	-15,758,972	-852,02
c. Total Salary Savings	-\$17,391,028			-\$18,353,389	-\$962,36
Early Start / Part C Administrative and					
Clinical Support (salaries, fringe benefits	****			****	
and salary savings)	\$694,000		_	\$694,000	
7. TOTAL PERSONAL SERVICES					
(Items A.3. + A.4. + A.5. + A.6.)	\$502,746,064			\$528,309,041	\$25,562,97
ROUNDED	\$502,746,000	12,362.00	_	\$528,309,000	\$25,563,00
PERATING EXPENSES AND RENT					
1. Operating Expenses	45,305,000			46,906,000	1,601,00
2. Rent	66,076,000			69,706,000	3,630,00
3. Subtotal Operating Expenses and Rent	\$111,381,000			\$116,612,000	\$5,231,00
					. , , , .

CORE STAFFING FORMULAS

CORE STAFFING CLASSIFICATION

STAFFING FORMULA

A. PERSONAL SERVICES

1. DIRECT SERVICES

. DIRECT SERVICES			
a. <u>Clinical</u>			
(1) Intake and Assessment			
(a) Physician (minimum of 1)	1.0 position	:	2,000 total consumers
(b) Psychologist	1.0 position	:	1,000 total consumers
(c) Nurse (minimum of 1)	1.0 position	:	2,000 total consumers
(d) Nutritionist (minimum of 1)	1.0 position		2,000 total consumers
(2) Clinical Support Teams	no position	•	2,000 total container
(a) Physician/Psychiatrist	1.0 position		1,700 consumers in community care
(a) i riyaldariri ayorllatirist	1.0 розноп	•	facilities (CCF) and supported living
			and those with severe behavior
			and/or medical problems
(b) Consulting Pharmacist	1.0 position		1,700 " "
(c) Behavioral Psychologist	1.0 position	:	1,700 " "
• • •	•	•	1,700
(d) Nurse	1.0 position	:	1,700 " "
(3) SB 1038 Health Reviews			
(a) Physician	1.5 hours	:	Referral/1,778 hrs./
			full-time equivalent (FTE) position
(b) Nurse	1.75 hours	:	Individual program plan (IPP)
			review/1,778 hrs./FTE position
b. Intake/Case Management			
(1) Supervising Counselor: Intake	1.0 position	:	10 Intake Workers
(2) Intake Worker	1.0 position	:	14 monthly intake cases (assume
			average intake case lasts 2 mos.)
(3) Supervising Counselor:	1.0 position	:	10 CPCs in Items b.(6, 7 and 8)
Case Management		•	below
(4) Supervising Counselor:	1.0 position	:	10 CPCs in Items b.(5) below
Capitol People First		-	(2, 22
(5) Client Program Coordinator (CPC)	1.0 position		66 consumers (Developmental
Capitol People First	6 6 6 6	•	Center residents)
(6) CPC	1.0 position		66 consumers (all other consumers,
(0) 61 6	1.0 position	•	excluding Waiver, Early Start, and
			CPP placements)
(7) CPC	1.0 position		62 Waiver and Early Start
(1) GPG	1.0 position	•	consumers (excluding CPP
			placements)
(9) CDC Quality Assurance for	1.0 position	_	527 CCF consumers
(8) CPC, Quality Assurance for	1.0 position	•	527 CCF consumers
Alternative Residential Model	1.0 position		10 CDCs in item b (10) below
(9) Supervising Counselor: DSS	1.0 position	:	10 CPCs in item b.(10) below
Incidental Medical Care			
Regulations (40) CRC DSS Incidental Medical	1.0 position		2. E. bro. v. 9. vioito nor voor to CCC
(10) CPC, DSS Incidental Medical	1.0 position	:	2.5 hrs x 8 visits per year to CCF
Care Regulations			consumers who rely on others to
			perform activities of daily living

CORE STAFFING FORMULAS

CORE STAFFING CLASSIFICATION STAFFING FORMULA

A. PERSONAL SERVICES (continued)

1. DIRECT SERVICES (continued)

c. Quality Assurance/Quarterly Monitoring

(1) Supervising Counselor 1.0 position : 10 CPCs in Item c.(2) below (2) CPC 10 hrs/yr. : CCF consumer/1,778 hrs./FTE 14 hrs/yr. : Supported/Independent Living consumer/1,778 hrs./FTE

10 hrs/yr. : Skilled Nursing Facility and

Intermediate Care Facility consumer/1,778 hrs./FTE

10 hrs/yr. : Family Home Agency consumer/1,778 hrs./FTE

d. Early Intervention

(1) General (a) Prevention Coordinator 1.0 position: RC (b) High-Risk Infant Case Mgr. 1.0 position: RC (c) Genetics Associate 1.0 position : RC

(2) Early Start/Part C

(a) Supervising Counselor 1.0 position: 10 CPCs in Item d.(2)(b) below

(b) CPC:

Marginal positions from: 1.0 position : 62 children<age 3yrs. to:

1.0 position: 45 children<age 3yrs.*

e. Community Services

(1) Special Incident Coordinator 1.0 position: RC

(2) Vendor Fiscal Monitor 0.5 position : RC plus 1: every 3,140 vendors

1.0 position : RC (3) Program Evaluator (4) Resource Developer 1.0 position: RC (5) Transportation Coordinator 1.0 position : RC 0.5 position: RC (6) Administrative Services Analyst

(SB 1039, Chapter 414, Statutes of 1997) Consumer Complaints

1.0 position : 400 DC consumers (7) Developmental Center Liaison

(8) Diversion 4.0 positions : 21 RCs

(9) Placement Continuation

(a) Supervising Counselor 1.0 position: 10 CPCs in Item e.(9)(b) below

(b) CPC:

1. Marginal positions from: 1.0 position : 62 CPP Placements 1.0 position : 45 CPP Placements to:

^{*} Note: This 1:45 staffing ratio is a funding methodology, not a required caseload ratio.

CORE STAFFING FORMULAS

CORE STAFFING CLASSIFICATION

STAFFING FORMULA

A. FLISONAL SLIVICES (COILLINGED)	Α.	PERSONAL SERVICES	(continued))
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1.	DIRECT	SERVICES	(continued)
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f. Special Incident Report	tina (SIR)

(1) Supervising Counselor	1.0 position	10 CPCs in Item f. (2) below
(2) QA/CPC	1.0 position:	RC plus 1: every 5,000 consumers
(3) Nurse	0.5 position:	RC plus 0.5: every 5,000 consumers

g. Mediation

(1) Clinical Staff

2.0 hours : 25% of annual mediations/ 1,778 hrs /FTE position

(2) Supervising Counselor 4.5 hours : Mediation/1,778 hrs/FTE position

(3) CPC 4.5 hours : 50% of annual mediations/ 1,778 hrs./FTE position

h. Expansion of Autism Spectrum Disorders (ASD) Initiative

(1) ASD Clinical Specialist 1.0 position : RC (effective January 1, 2007)

(2) ASD Program Coordinator 1.0 position : RC

(effective January 1, 2007)

2. ADMINISTRATION

a. Executive Staff

(1) Director	1.0 position	:	RC
(2) Administrator	1.0 position	:	RC
(3) Chief Counselor	1.0 position	:	RC

b. Fiscal

(1) Federal Program Coordinator 1.0 position: RC (Enhancing FFP, Phase I)

(2) Federal Compliance Specialist

(Enhancing FFP, Phase II) 1.0 position : 1,000 HCBS Waiver consumers

(3) Fiscal Manager 1.0 position : RC (4) Program Technician II, FCPP 0.5 position : RC

1.0 position : 1,778 hours of FCPP determinations

(5) Revenue Clerk 1.0 position : 400 consumers for whom RCs are

representative payee

(6) Account Clerk 1.0 position : RC

(Enhancing FFP, Phase II)

(7) Account Clerk 1.0 position : 800 total consumers

c. Information Systems and Human Resources

(1) Information Systems Manager 1.0 position: RC (2) Information Systems Assistant 1.0 position : RC (3) Information Systems Assistant, 0.5 position: RC SIR (4) Privacy Officer, HIPAA 1.0 position : RC (5) Personal Computer Systems 1.0 position: RC Manager

(6) Training Officer
 (7) Training Officer, SIR
 (8) Human Resources Manager
 1.0 position : RC
 1.0 position : RC

CORE STAFFING FORMULAS

CORE STAFFING CLASSIFICATION STAFFING FORMULA

A. PERSONAL SERVICES (continued)

2. ADMINISTRATION (continued)

d. Clerical Support

(1) Office Supervisor1.0 position: RC(2) PBX/Mail/File Clerk3.0 positions: RC(3) Executive Secretary2.5 positions: RC

(4) MD/Psychologist Secretary II 1.0 position : 2 Physicians in Item 1.a.(3)(a),

SB 1038 Health Reviews

(5) MD/Psychologist Secretary I 1.0 position : 2 Physicians/Psychologists in

Items 1.a.(1)(a) and (b), Clinical

Intake and Assessment

(6) Secretary II

1.0 position

: 6 professionals in Items:

1.a.(3)(b), SB 1038 Health

Reviews

1.b.(9) and (10), the Department's

Incidental Medical Care

Regulations

1.c., Quality Assurance/ Quarterly Monitoring

1.e.(1), (2) and (9)(a) and (b)

Community Services

1.e.(9) b 2., Community Services (see Secty I, line 1.e.(9) b 2.,) 1.f.(1) thru (3), Special Incident

Reporting

2.b.(1), Federal Program Coordinators (FFP Phase I) 2.b.(2), Federal Compliance Coordinators (FFP Phase II) 2.c., Information Systems and

Human Resources

(7) Secretary I 1.0 position : 6 professionals in Items:

1.a.(1)(c) and (d), Clinical Intake

and Assessment

1.b.(1) to (3) and (6) to (8),

Intake/Case Mgt.

1.b.(5) and (6) Capitol People

First

1.d., Early Intervention

1.e.(3), (4), (6) to (8), Community

Services

1.e.(9) b 1., Community Services (see Secty II, line 1.e.(9) b 1.,)

(8) Secretary I (DC Case Management Capitol People First)

1.0 position

: 6 CPCs and Supervisors

Regional Center Rent

Regional Center	2017-18	2018-19 _{/1}	Difference	% Change	Footnote
Alta	\$2,963,186	\$2,996,502	\$33,316	1.12%	
Central Valley	3,281,287	3,443,001	161,714	4.93%	а
East Bay	4,085,238	4,253,593	168,355	4.12%	а
East LA	3,491,224	3,838,310	347,086	9.94%	а
Far Northern	1,349,908	1,322,784	-27,124	-2.01%	
Golden Gate	2,312,741	2,648,541	335,800	14.52%	а
Harbor	4,365,698	4,330,749	-34,949	-0.80%	
Inland	7,400,016	7,333,010	-67,006	-0.91%	
Kern	1,938,478	1,945,110	6,632	0.34%	
Lanterman	2,022,716	2,384,573	361,857	17.89%	а
North Bay	1,851,837	1,898,598	46,761	2.53%	
North LA	3,601,442	3,936,702	335,260	9.31%	а
Orange	3,535,742	3,694,174	158,432	4.48%	а
Redwood	980,694	1,027,772	47,078	4.80%	а
San Andreas	2,271,163	2,953,032	681,869	30.02%	а
San Diego	4,382,298	4,502,751	120,453	2.75%	
San Gabriel	2,708,000	2,643,500	-64,500	-2.38%	
South Central	5,290,202	5,940,280	650,078	12.29%	а
Tri Counties	4,099,721	4,230,351	130,630	3.19%	
Valley Mt.	2,316,019	2,430,027	114,008	4.92%	а
Westside	<u>1,828,527</u>	<u>1,952,589</u>	<u>124,062</u>	<u>6.78%</u>	а
Total	<u>\$66,076,137</u>	<u>\$69,705,949</u>	<u>\$3,629,812</u>	5.49%	
TOTAL ROUNDED	\$66,076,000	\$69,706,000	\$3,630,000	5.49%	

Footnotes:

a: Increased costs due to annual rent escalation plus regional center's estimate of additional square footage required to house new staff and/or meet operational needs. The Department will verify costs and review leasing documents to confirm fair market value before allocating additional funds to the regional centers.

⁷¹ Rent requested by the regional centers for 2018-19 based on November 2017 Rent Survey.

Agnews Ongoing Workload

•	Community	Placement	Plan	Staffing:
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Unified Operations Costs:	<u>2017-18*</u>	<u>2018-19*</u>
Personal Services:		
Quality Assurance/Management (6.5 positions)	\$503	\$503
Health Care Community Specialists (4 positions)	503	503
Total Personal Services:	\$1,006	\$1,006
Operating Expenses:	\$28	\$28
State Employees in the Community:		
Personal Services (13.4 positions)	1,194	1,194
Operating Expenses	74	74
Total State Employees in the Community:	\$1,268	\$1,268
Placement Continuation Staffing:		
Nurse Consultants (3 positions)	356	356
Oral Health Care (3 positions)	236	236
Total Placement Continuation Staffing:	\$592	\$592
• Total:	\$2,894	\$2,894

FUNDING:

Funding for Agnews Ongoing Workload expenditures is comprised of General Fund (GF) and reimbursements from the Home and Community-Based Services Waiver Administration and Medicaid Administration.

CURRENT YEAR CHANGE FROM ENACTED:

There is no change.

REASON FOR YEAR-TO-YEAR CHANGE:

There is no change.

EXPENDITURES:		<u>2017-18*</u>	<u>2018-19*</u>
	TOTAL	\$2,894	\$2,894
	GF	1,212	1,212
	Reimbursements	1,682	1,682

Lanterman Developmental Center Closure/Ongoing Workload

Community Placement Plan Staffing:

Personal Services:	<u>2017-18*</u>	<u>2018-19*</u>
Quality Assurance/Management (3 positions)	\$255	\$255
Oral Health Care Consultant (8 positions)	624	624
Nurse Consultants (5 positions)	425	425
Health Care Community Specialists (8 positions)	1,006	1,006
Total Personal Services:	\$2,310	\$2,310
Operating Expenses:	\$82	\$82
Grand Total:	\$2,392	\$2,392

FUNDING:

Funding for Lanterman Developmental Center Closure/Ongoing Workload expenditures is comprised of General Fund (GF) and reimbursements from the Medicaid Administration.

CURRENT YEAR CHANGE FROM ENACTED:

There is no change.

REASON FOR YEAR-TO-YEAR CHANGE:

There is no change.

EXPENDITURES:		<u>2017-18*</u>	<u>2018-19*</u>
	TOTAL	\$2,392	\$2,392
	GF	999	999
	Reimbursements	1,393	1,393

8.700

8.700

Federal Compliance

DESCRIPTION:

There are both fiscal and program requirements placed on the regional centers that enable the State to receive federal funding. This includes ongoing tasks such as reviewing choice statements, handling complex notice of action issues related to the Home and Community-Based Services (HCBS) Waiver, completing annual HCBS Waiver certification/recertification forms, preparing for program audits, determining billable services, reconciling data, maintaining records in accordance with applicable federal requirements for accuracy and completeness, reviewing case records, participating in training on HCBS Waiver policies and procedures, resolving eligibility/compliance issues, etc. In addition, regional centers are required to complete ongoing tasks related to the Targeted Case Management (TCM) and Nursing Home Reform (NHR) programs such as complying with Medicaid State Plan requirements for case management activities and completing appropriate screenings for those admitted to the nursing facilities.

ASSUMPTIONS/METHODOLOGY:	<u>2017-18*</u>	<u>2018-19*</u>
HCBS Waiver:	\$21,135	\$21,135
Operations costs for HCBS Waiver activities in 2017-18 and 2018-19 are based upon 6.5% of 1995-96 HCBS Waiver reimbursements of \$325,148,000. This amount is fixed and is not adjusted for growth.		

Provides funding for regional center compliance with the HCBS Waiver. Functions include maintaining average service coordinator-to-consumer caseload ratios at not more than 1:62; performing quarterly face-to-face monitoring of consumers residing in out-of-home living arrangements; providing clinical consultations, monitoring and reviewing consumers' health status; and developing and annually reviewing Waiver consumers' individual program plans and Client Developmental Evaluation Reports.

Compliance with HCBS Waiver Requirements:

^{*} Values in thousand (000's)

Federal Compliance

ASSUMPTIONS/METHODOLOGY (continued):

<u>2017-18*</u> <u>2018-19*</u>

Case Managers to Meet HCBS Waiver Requirements:

12,251 12,356

In a letter dated April 21, 2006, the Centers for Medicare & Medicaid Services (CMS) indicated that the State must "review and revise, as needed, its policies to assure that the waiver participant to case manager ratio of 62:1 is consistently met." This augmentation by the California Legislature is intended to assist in this.

Enacted Budget:

2017-18: \$6,125,000 GF Match, \$6,126,000 TCM.

Governor's Budget:

Updated 2017-18: \$6,125,000 GF Match, \$6,126,000 TCM

2018-19: \$6,178,000 GF Match, \$6,178,000 TCM

Reason for Change from Enacted:

Reflects the increase of HCBS Waiver-related positions.

• TCM: 4,129 4,129

Operations costs for TCM activities in 2017-18 and 2018-19 are based upon 5.8% of 1995-96 TCM reimbursements of \$71,181,000. This amount is fixed and is not adjusted for growth.

NHR/Pre-Admission Screening and Resident Review (PASRR):

473 473

Operations costs for regional centers to perform activities associated with NHR and to handle the increased workload of processing PASRR Levels I and II screening and evaluation activities. Persons determined to be eligible for services under the Lanterman Act will result in an increase in the number of consumers who require regional center case management and other specialized services. Regional centers, through clinical assessments, will identify individuals who meet the expanded federal definition of developmental disability. (100% GF)

^{*} Values in thousand (000's)

Federal Compliance

ASSUMPTIONS/METHODOLOGY (continued):

<u>2017-18*</u> <u>2018-19*</u>

 Federal Medicaid Requirement for Regional Center HCBS Services: 984 984

\$47,777

Pursuant to federal law and mandated by CMS, regional centers are required to gather and review business ownership, control, and relationship information from current and prospective vendors. Additionally, regional centers are required to determine that all vendors are eligible to participate as Medicaid service providers. Furthermore, on a periodic basis, regional centers are required to verify that vendors continue to meet all applicable vendorization requirements (e.g. professional licensure), in order for the State to comply with federal law and meet the CMS mandated HCBS Waiver assurance that only qualified providers deliver Medicaid funded services. (Funding is 50% HCBS Waiver Administration, 50% GF)

Funding: \$492,000 GF Match, \$492,000 HCBS Waiver Administration.

• EXPENDITURES: \$47,672

FUNDING:

The funding for Federal Compliance is comprised of reimbursements from: Medicaid Administration (75% FFP, 25% GF Match), HCBS Waiver Administration (50% FFP, 50% GF Match), and TCM (50% FFP, 50% GF Match).

CURRENT YEAR CHANGE FROM ENACTED:

There is no change.

REASON FOR YEAR-TO-YEAR CHANGE:

The minor increase in budget year reflects an increase in Case Managers to Meet HCBS Waiver Requirements due to the increase of HCBS Waiver-related CPC positions, Supervising Counselor positions, and Secretary II positions pursuant to the core staffing formula.

EXPENDITURES:		<u>2017-18*</u>	<u>2018-19*</u>	
	TOTAL	\$47,672	\$47,777	
	GF	35,293	35,346	
	Reimbursements	12.379	12.431	

^{*} Values in thousand (000's)

DESCRIPTION:

This category of regional center operating expenses includes various contracts, programs, and projects as described below:

ASSUMPTIONS/METHODOLOGY:	<u>2017-18</u>	<u>2018-19</u>
Information Technology Costs:	\$3,797	\$3,797
 Regional Center Application Support: Data Processing: 100% General Fund (GF) 	2,547 1,250	2,547 1,250
Clients' Rights Advocacy:	6,791	7,111
The Department contracts for clients' rights advocacy services for regional center consumers, of which 45% of the costs are eligible for Home and Community Based Services (HCBS) Waiver Administration: 50% GF Match / 50% federal financial participation (FFP). Contract amount shown does not reflect an additional \$21,155 increase for administrative costs per Assembly Bill (AB) X2 1. Refer to the AB X2 1 Regional Center Operations Increases Policy page. Budget year reflects an adjustment to account for caseload growth.		
Quality Assessment Contract:	4,044	3,705

AB X4 9 added Welfare and Institutions Code (W&I Code) 4571 to consolidate the Life Quality Assessment and the Movers Study, which sunset on June 30, 2009, into one improved quality assurance survey to measure consumer and family satisfaction, provision of services and personal outcomes. 45% of costs are eligible for HCBS Waiver Administration: 50% GF Match / 50% FFP. Budget year reflects the decrease in mailing costs due to completion of family mail survey disbursement in 2018-19.

^{*} Values in thousand (000's)

ASSUMPTIONS/METHODOLOGY (continued):

<u>2017-18</u> <u>2018-19</u>

• Direct Support Professional Training:

3,037 3,037

W&I Code Section 4695.2 mandates all direct support service professionals working in licensed community care facilities to complete two 35-hour competency-based training courses or pass challenge tests within the first two years of employment. The Department contracts with the Department of Education, which in turn administers the training through the Regional Occupational Centers and Programs. 88% of the costs are eligible for HCBS Waiver Administration: 50% GF Match / 50% FFP.

Office of Administrative Hearings:

3,350 3,350

Federal law requires the Department to have an adjudication process for disputes involving Medicaid beneficiaries; both the fair hearing and mediation processes satisfy this requirement. The Department contracts with the Office of Administrative Hearings to: (1) conduct fair hearings to resolve conflicts between regional centers and their consumers, and (2) provide mediation services. Section 4700 et seq. of the Lanterman Act provides mediation as a potential option to consumers whose services are proposed to be terminated, reduced, or suspended; 45% of the costs are eligible for HCBS Waiver Administration: 50% GF Match / 50% FFP.

• Wellness Projects:

100 100

W&I Code Sections 4696 and 4646.5 contain requirements that are fulfilled through the Wellness Initiative. Project priorities are determined annually by a selection committee comprised of legislative staff, advocacy groups, consumers, regional center representatives, and the Department's Community Services Division. The types of projects generally fall into the following categories: health professional training programs, medication reviews, health assessments, specialty clinics, telemedicine, resource development for persons with a dual diagnosis, training programs for parents and consumers, and dental health programs and services. (100% GF)

^{*} Values in thousand (000's)

AS	SSUMPTIONS/METHODOLOGY (continued):	2017-18	<u>2018-19</u>
•	Foster Grandparent/Senior Companion (FG/SC):	3,035	3,765
	Through FG/SC programs, men and women aged 55 years and older devote up to 20 hours a week to help people with developmental disabilities lead more independent and productive lives. Budget year reflects current program costs as well as changes in program staffing and service delivery.		
•	Special Incident Reporting/Risk Assessment:	938	938
	The Department contracts for the services of an independent, specialized risk-assessment and mitigation contractor to conduct key activities such as data analysis, training, mortality reviews, site reviews, and to provide services related to protecting the health, safety, and well-being of consumers. 45% of the costs are eligible for HCBS Waiver Administration: 50% GF Match / 50% FFP.		
•	Increased Access to Mental Health Services:	740	740
	Consistent with the requirements of the Mental Health Services Act, the Department, in consultation with the Department of Health Care Services, identifies best-practice models and provides training to enhance the effectiveness of the regional center and county mental health service systems to better identify and provide a competent response for those consumers who are dually diagnosed (i.e. have a developmental disability and a mental illness). 100% Mental Health Services Fund		
•	Sherry S. Court Case:	211	211
	In 1981, the Supreme Court ruled In re Hop that before an adult is admitted to a developmental center, he/she must be afforded due process through a court hearing to determine if such a placement is warranted. Subsequently, in the Sherry S. case, the court ruled that a conservator or parent of an adult has authority to admit that adult through the Hop process. This estimate reflects the regional center costs of processing Hop actions for regional center consumers. (100% GF)		
•	2003-04 FFP Enhancement, Phase II:	500	500
	These costs are associated with legal support for federal program activities. (100% GF)		

^{*} Values in thousand (000's)

\$27,064

\$27,612

Projects

AS	SSUMPTIONS/METHODOLOGY (continued):	<u>2017-18</u>	<u>2018-19</u>
•	University Enterprises, Inc.:	123	123
	The Department contracts with University Enterprises, Inc. for statistical forecasting assistance in estimating regional center costs. (100% GF)		
•	Affordable Housing:	128	85
	In 1994, pursuant to the court decision commonly referred to as the Coffelt Settlement Agreement, funds were allocated to create affordable housing for persons with developmental disabilities. Funding was allocated on a per capita basis to four geographic regions throughout California to provide affordable housing to very low-income individuals receiving services from the regional centers. Annual loan forgiveness for the term of twenty years was stipulated to occur based on each project's compliance with the Standard and Regulatory Agreement. Fiscal review and site monitoring activities are required annually. Technical assistance on additional housing-related issues is obtained through an interagency agreement with the Department of Housing and Community Development, as needed. (100% GF) The budget year decrease reflects functional re-alignment and eight projects receiving loan forgiveness.		
•	Review of Senate Bill (SB) 1175 Housing Proposals:	150	150
	Pursuant to Chapter 617, Statutes of 2008, (SB 1175), the Developmental Disabilities Account is used as a depository for application fees collected by the Department for conducting the review and approval of housing proposals.		
•	Extension of Denti-Cal Infrastructure for Regional Center Funded Dental:	120	-
	This project allows the regional center to use the Department of Health Care Services (DHCS) system for reviewing treatment plans and approving claims for dental services consistent with the DHCS Denti-Cal program. (100% GF). Current year is held to the Enacted Budget. Budget year reflects restoration of adult benefits to pre-2009 levels on January 1, 2018.		

• TOTAL EXPENDITURES:

^{*} Values in thousand (000's)

FUNDING:

Funding for Project expenditures is compromised of General Fund (GF), reimbursements from the Home and Community-Based Waiver Administration, the Developmental Disabilities Services Account, the Mental Health Services Fund, and Federal Funds from the FG/SC Programs.

CURRENT YEAR CHANGE FROM ENACTED:

There is no change.

REASON FOR YEAR-TO-YEAR CHANGE:

Budget year expenditures are estimated to have a minor increase comprised of increases in Clients' Rights Advocacy and Foster Grandparent/Senior Companion offset by minor decreases in Quality Assessment Contract and Extension of Denti-Cal Infrastructure for Regional Center Funded Dental.

EXPENDITURES:		<u>2017-18</u>	<u>2018-19</u>
	TOTAL	\$27,064	\$27,612
	GF	20,274	20,923
	Reimbursements	4,803	4,799
	Developmental Disabilities Services Account	150	150
	Mental Health Services Fund	740	740
	Federal Funds	1,097	1,000

^{*} Values in thousand (000's)

Quality Assurance Fees Regional Center Costs and Intermediate Care Facility-Developmentally Disabled Vendor Costs Operations

DESCRIPTION:

To obtain federal financial participation (FFP) associated with the Intermediate Care Facilities-Developmentally Disabled (ICF-DD), regional centers incur administrative costs for billing on behalf of the ICF-DD.

ASSUMPTIONS/METHODOLOGY:

Billing costs are 1.5% of the cost of Day Program and Transportation.

2017-18 and 2018-19: Total billing costs are \$1.8 million for regional center administration.

• Purchase of Services costs for Day Program and Transportation in 2016-17 total \$125.5 million, of which 1.5% equals \$1.8 million.

FUNDING:

The Federal Medical Assistance Percentages establishes the FFP for expenditures associated with Operations, which is 50% for 2017-18 and 2018-19.

CURRENT YEAR CHANGE FROM ENACTED:

The slight increase reflects updated expenditure data as actual expenditures increased compared to projected cost in the 2017 May Revision.

REASON FOR YEAR-TO-YEAR CHANGE:

No change.

EXPENDITURES:		2017-18	2018-19
	Total	\$1,883	\$1,883
	General Fund	942	942
	Reimbursements	941	941

Operations Funding Detail

	Enacted Budget	Updated 2017-18	2017-18 Request	2018-19	2018-19 Over 2017-18	2018-19 Over Enacted Budget
Staffing						
TOTAL	\$589,751	\$589,751	\$0	\$620,545	\$30,794	\$30,794
GF	\$390,241	\$380,994	(\$9,247)	\$414,451	\$33,457	\$24,210
GF Match	185,072	194,556	9,484	197,512	2,956	12,440
GF Other	205,169	186,438	(18,731)	216,939	30,501	11,770
Reimbursements	\$199,510	\$208,757	\$9,247	\$206,094	(\$2,663)	\$6,584
Medicaid Admin	11,073	11,354	281	11,354	0	281
HCBS Waiver Admin	5,090	4,910	(180)	4,910	0	(180)
TCM	169,026	177,592	8,566	183,357	5,765	14,331
TCM Admin	5,893	6,473	580	<i>6,4</i> 73	0	580
Money Follows the Person	8,428	8,428	0	0	(8,428)	(8,428)
Federal Compliance						
TOTAL	\$47,672	\$47,672	\$0	\$47,777	\$105	\$105
GF	\$35,210	\$35,293	\$83	\$35,346	\$53	\$136
GF Match	10,996	11,079	83	11,131	52	135
GF Other	24,214	24,214	0	24,215	1	1
Reimbursements	\$12,462	\$12,379	(\$83)	\$12,431	\$52	(\$31)
HCBS Waiver Admin	1,203	1,203	0	1,203	0	0
Medicaid Admin	2,033	1,951	(82)	1,951	0	(82)
TCM	9,226	9,225	(1)	9,277	52	51

Operations Funding Detail

	Enacted Budget	Updated 2017-18	2017-18 Request	2018-19	2018-19 Over 2017-18	2018-19 Over Enacted Budget
Projects						
TOTAL	\$27,064	\$27,064	\$0	\$27,612	\$548	\$548
GF	\$20,345	\$20,274	(\$71)	\$20,923	\$649	\$578
GF Match	4,732	4,803	71	4,798	(5)	66
GF Other	15,613	15,471	(142)	16,125	654	512
Reimbursements	\$4,732	\$4,803	\$71	\$4,799	(\$4)	\$67
HCBS Waiver Admin	4,732	4,803	71	4,799	(4)	67
Developmental Disabilities Services Account	150	150	\$0	150	\$0	0
Mental Health Services Fund	740	740	\$0	740	\$0	o
Federal Funds	\$1,097	\$1,097	\$0	\$1,000	(\$97)	(\$97)
Agnews Ongoing Worl	kload					
TOTAL	\$2,894	\$2,894	\$0	\$2,894	\$0	\$0
GF	\$932	\$1,212	\$280	\$1,212	\$0	\$280
GF Match	1,260	1,325	65	1,325	0	65
GF Other	(328)	(113)	215	(113)	0	215
Reimbursements	\$1,962	\$1,682	(\$280)	\$1,682	\$0	(\$280)
HCBS Waiver Admin	676	759	83	759	0	83
Medicaid Admin	1,286	923	(363)	923	0	(363)
Lanterman Developme	ntal Center Cl	osure/Ongoi	ng Workload			
TOTAL	\$2,392	\$2,392	\$0	\$2,392	\$0	\$0
GF	\$1,587	\$999	(\$588)	\$999	\$0	(\$588)
GF Match	845	878	33	878	0	33
GF Other	742	121	(621)	121	0	(621)
Reimbursements	\$805	\$1,393	\$588	\$1,393	\$0	\$588
HCBS Waiver Admin	0	621	621	621	0	621
Medicaid Admin	805	772	(33)	772	0	(33)

Operations Funding Detail

	Enacted Budget	Updated 2017-18	2017-18 Request	2018-19	2018-19 Over 2017-18	2018-19 Over Enacted Budget
Intermediate Care Faci	lity-Developm	entally Disab	led - Admin F	ees		
TOTAL	\$1,829	\$1,883	\$54	\$1,883	\$0	\$54
GF	\$915	\$942	\$27	\$942	\$0	\$27
GF Match	915	942	27	942	0	27
Reimbursements	\$914	\$941	\$27	\$941	\$0	\$27
FFP (Quality Assurance Fees)	914	941	27	941	0	27

Total Operations Funding	ng Detail					
TOTAL	\$671,602	\$671,656	\$54	\$703,103	\$31,447	\$31,501
GF	\$449,230	\$439,714	(\$9,516)	\$473,873	\$34,159	\$24,643
GF Match	203,820	213,583	9,763	216,586	3,003	12,766
GF Other	245,410	226,131	(19,279)	257,287	31,156	11,877
Reimbursements	\$220,385	\$229,955	\$9,570	\$227,340	(\$2,615)	\$6,955
HCBS Waiver Admin	11,701	12,296	595	12,292	(4)	591
Medicaid Admin	15,197	15,000	(197)	15,000	0	(197)
TCM	178,252	186,817	8,565	192,634	5,817	14,382
TCM Admin	5,893	<i>6,4</i> 73	580	6,473	0	580
Money Follows the Person	8,428	8,428	0	0	(8,428)	(8,428)
FFP (Quality Assurance Fees)	914	941	27	941	0	27
Developmental Disabilities Services Account	150	150	0	150	o	0
Mental Health Services Fund	740	740	0	740	0	0
Federal Funds	\$1,097	\$1,097	\$0	\$1,000	(\$97)	(\$97)

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2017-18

2018-19

Community Care Facilities

DESCRIPTION:

Regional centers contract with vendors of facilities licensed by the Department of Social Services (DSS) to provide 24-hour residential care to children and adults with developmental disabilities who are in need of personal services, supervision, and/or assistance essential for self-protection or sustenance of daily living activities.

ASSUMPTIONS:

- Community Care Facilities (CCF) Expenditure Data Source: State Claims Data file, dated September 1, 2017, with actuals through June 2017. Data was adjusted for lag based on historical trends.
- Supplemental Security Income/State Supplementary Program (SSI/SSP) payment is a grant received by persons in CCFs from the Social Security Administration (the "SSI" portion), along with a supplemental payment from the State (the "SSP" portion). For individuals who receive SSI/SSP (an estimated 94.9% of persons in CCFs), the regional centers fund only the portion of the facility costs that is above the SSI/SSP level of payment (i.e., the "net" costs). Funds for the SSI/SSP grants are in the DSS budget. This factor is incorporated in the CCF estimate.

METHODOLOGY:

		<u> 2017-10</u>	<u> 2010-19</u>
•	Base: Actual 2016-17 expenditures were used to develop the 2017-18 Base. The 2018-19 Base equals the prior year estimate for Base and Growth. Both years include expenditures resulting from policies related to SB 3 Minimum Wage Increase that was effective January 1, 2017, the ABX2 1 Community Based Services Increase, and the Alternate Residential Model 4-Bed Rate policy increase.	\$1,344,281	\$1,406,686
•	Total Utilization Change/Growth:	62,406	65,437
•	Subtotal Base and Growth	\$1,406,687	\$1,472,123
•	Community Placement Plan: See Community Placement Plan methodology for detail.	18,451	18,451

Community Care Facilities

METHODOLOGY (continued):

<u>2017-18</u> <u>2018-19</u>

• SSI/SSP Increases Effective January 1, 2018 and January 1, 2019:

-\$3,104

-\$3,806

The SSI/SSP rate is estimated to increase from \$1,026 to \$1,039 per month on January 1, 2018. The SSI/SSP rate is estimated to increase from \$1,039 to \$1,057 per month on January 1, 2019. An increase in these rates results in a decrease in amounts paid by the Department. The updated current year estimate has a slight reduction in SSI/SSP savings as compared to the enacted budget, and a slight savings increase in the budget year.

• Continuation Costs: Second year costs for Developmental Center movers.

40,971

60,741

TOTAL EXPENDITURES

\$1,463,005 \$1,547,509

FUNDING:

CCF expenditures are funded by the General Fund (GF) and reimbursements from the Home and Community-Based Services (HCBS) Waiver, 1915 (i) State Plan Amendment (SPA), Intermediate-Care Facility-Developmentally Disabled (ICF-DD), Money Follows the Person, and Temporary Assistance to Needy Families. Based on actual 2016-17 billing data, approximately 80% of CCF expenditures are eligible for HCBS Waiver reimbursement. Of the amount eligible for HCBS Waiver, 1915 (i) SPA, and ICF-DD, 50% is federal financial participation (FFP). Of the amount eligible for Money Follows the Person, 75% is FFP.

CURRENT YEAR CHANGE FROM ENACTED:

The current year increased by \$35.5 million (\$61.8 million GF) which reflects an increase in the Base due to ABX2 1 Community Based Services and Alternate Residential Model 4-Bed Rate expenditures coming in higher than previously estimated. It also includes an increase of \$28.1 million in Utilization and Growth, a slight increase in SSI/SSP, and Continuation Costs. The increase in Growth and Utilization is driven by Staff Operated CCFs for Adults, and DSS-Licensed Special Residential Facilities for Habilitation.

REASON FOR YEAR-TO-YEAR CHANGE:

The budget year increased by \$84.5 million (\$63.2 million GF) which reflects a \$62.4 million increase in the Base, a \$3.0 million increase in Utilization and Growth, a \$19.8 million increase in Continuation Costs, and a slight decrease in SSI/SSP savings. The increase in the Base is driven by Staff Operated CCFs for Adults and DSS-Licensed Special Residential Facilities for Habilitation. The increase in Continuation Costs reflects an increase in the number of developmental center residents that will move to community living arrangements in 2017-18.

Community Care Facilities

EXPENDITURES:	<u>2017-18</u>	<u>2018-19</u>
TOTAL	\$1,463,005	\$1,547,509
GF	844,431	907,588
Reimbursements	618.574	639.921

Medical Facilities

DESCRIPTION:

Pursuant to Health and Safety Code Sections 1250, 1255.6, 1255.7, and others, regional centers vendor/contract with Intermediate Care Facilities - Developmentally Disabled (CF-DD, ICF-DD-N, and ICF-DD-H) and Continuous Nursing Care facilities, to provide services for consumers not eligible for Medi-Cal. The types of Non-ICFs providing services for individuals with developmental disabilities are Specialized Residential Facilities (Health) and Nursing Facilities (NF).

ASSUMPTIONS:

ICF/DD:

 Assumptions regarding caseload and facility growth for 2017-18 and 2018-19 are based on information provided by the regional centers via the 2017 Regional Center Spring Survey.

Non-ICF/DD:

 Non-ICF Expenditure Data Source: State Claims Data file, dated September 1, 2017, with actuals through June 2017. Data was adjusted for lag based on historical trends.

METHODOLOGY:

		<u>2017-18</u>	<u>2018-19</u>
•	Base: Actual 2016-17 expenditures were used to develop the 2017-18 Base. The 2018-19 Base equals the prior year estimate for Base and Growth. Both years include expenditures resulting from policies related to the ABX2 1 Community Based Services Increase.	\$13,413	\$12,917
•	Total Utilization Change/Growth:	-496	-1,400
	ICF-DD	131	131
	Non ICF-DD	-627	-1,531
•	Subtotal Base and Growth:	\$12,917	\$11,517

Medical Facilities

METHODOLOGY (continued):	<u>2017-18</u>	<u>2018-19</u>
 Gap Resource Development (ICF-DD): Gap is the time period between licensure and certification of small health facilities when Medi-Cal does not cover any person's facility costs. 	336	336
In 2017-18 and 2018-19 it is assumed that three Health facilities will require gap funding for two consumers each for not more than 60 days, and seven NFs will need gap funding for two consumers each for not more than 60 days.		
 Community Placement Plan: See Community Placement Plan methodology for detail. 	171	171
 Continuation Costs: Second year costs for developmental center movers. 	0	0
TOTAL EXPENDITURES:	\$13,424	\$12,024

FUNDING:

Medical Facility expenditures are funded by the General Fund (GF).

CURRENT YEAR CHANGE FROM ENACTED:

The current year decrease of \$2.6 million GF is a result of a decrease in the Base, Gap Resource Development, and Continuation Costs. The decrease in the Base reflects a lower number of consumers residing in DSS Licensed Specialized Residential Facilities.

REASON FOR YEAR-TO-YEAR CHANGE:

The budget year decreased by \$1.4 million GF, reflecting slight decreases in the Base, and in Utilization and Growth.

EXPENDITURES:	<u>2017-18</u>	<u>2018-19</u>	
TOTAL	\$13,424	\$12,024	
GF	13,424	12,024	

Day Programs

DESCRIPTION:

Day Program services may be at a fixed location or out in the community. Types of services available through a Day Program include:

- Self-help and self-care skill development.
- Interaction and communication skills development.
- Self-advocacy and employment skills development.
- Community integration skill development.
- Behavior management skill development.
- Social and recreational skill development.

ASSUMPTIONS:

Day Program Expenditure Data Source: State Claims Data file, dated September 1, 2017 with actuals through June 2017. Data was adjusted for lag based on historical trends.

METHODOLOGY:

	<u>2017-18</u>	<u>2018-19</u>
 Base: Actual 2016-17 expenditures were used to develop the 2017-18 Base. The 2018-19 Base equals the prior year estimate for Base and Growth. Both years include expenditures resulting from the SB 3 Minimum Wage Increase that was effective January 1, 2017, and the ABX2 1 Community Based Services Increase. 	\$1,058,251	\$1,106,033
Total Utilization Change/Growth:	47,782	37,890
Subtotal Base and Growth:	\$1,106,033	\$1,143,923
 Community Placement Plan: See Community Placement Plan methodology for detail. 	929	929
Continuation Costs: Second year costs for developmental center movers.	er 1,675	2,483
TOTAL EXPENDITURES:	\$1,108,637	\$1,147,335

Day Programs

FUNDING:

Day Program expenditures are funded by the General Fund (GF), reimbursements from the Home and Community-Based Services (HCBS) Waiver, 1915(i) State Plan Amendment (SPA), Title XX Block Grant, which includes Social Services and Temporary Assistance to Needy Families, Intermediate Care Facility-Developmentally Disabled (ICF-DD), Early Periodic Screening Diagnosis and Treatment (EPSDT), and federal funds from the Early Start Grant. Based on actual 2016-17 billing data, approximately 54% of Day Program expenditures are eligible for HCBS Waiver reimbursement. Of the amount eligible for HCBS Waiver, 1915(i) SPA, ICF-DD, and EPSDT, 50% is federal financial participation.

CURRENT YEAR CHANGE FROM ENACTED:

The current year decreased by \$29.2 million (\$3.1 million GF increase) due to a decrease in the Base and Continuation Costs. The decrease in the Base is due to SB 3 Minimum Wage expenditures coming in lower than previously estimated.

REASON FOR YEAR-TO-YEAR CHANGE:

The budget year increased by a net \$38.7 million (\$23.0 million GF) due to a \$47.8 million increase in the Base and a slight increase in Continuation Costs, offset by a \$9.9 million decrease in Utilization and Growth. The increase in the Base is due to continued growth in Adult Development Center, Behavior Management Program, and Infant Development Program. Utilization and Growth continues to increase, but at a slower pace than the previous year.

EXPENDITURES:	<u>2017-18</u>	<u>2018-19</u>
TOTAL	\$1,108,637	\$1,147,335
GF	616,074	639,044
Reimbursements	474,717	490,445
Federal Funds	17,846	17,846

Habilitation Work Activity Program (WAP)

DESCRIPTION:

Work Activity Program (WAP) services are provided, for the most part, in a sheltered setting, and may include work experiences in integrated group settings within the community.

ASSUMPTIONS:

WAP Expenditure Data Source: State Claims file, dated September 1, 2017 with actuals through June 2017. Data was adjusted for lag based on historical trends.

METHODOLOGY:

	<u>2017-18</u>	<u>2018-19</u>
 Base: Actual 2016-17 expenditures were used to develop the 2017-18 base. The 2018-19 Base equals the prior year estimate for Base and Growth. Both years include expenditures resulting from the SB3 Minimum Wage Increase and the ABX2 1 Community Based Services Increase. 	\$48,974	\$46,937
Total Utilization Change/Growth:	-2,037	-3,281
Subtotal Base and Growth:	\$46,937	\$43,656
 Community Placement Plan: See Community Placement Plan methodology for detail. 	2	2
 Continuation Costs: Second year costs for developmental center movers. 	3	0
TOTAL EXPENDITURES:	\$46,942	\$43,658

Habilitation Work Activity Program (WAP)

FUNDING:

WAP Service expenditures are funded by the General Fund (GF) and reimbursements from the Home and Community-Based Services (HCBS) Waiver, Intermediate Care Facility - Developmentally Disabled (ICF-DD), and 1915(i) State Plan Amendment (SPA). Based on actual 2016-17 billing data, approximately 61% of WAP expenditures are eligible for HCBS Waiver reimbursement. Of the amount eligible for HCBS Waiver, 1915(i) SPA, and ICF-DD, 50% is federal financial participation.

CURRENT YEAR CHANGE FROM ENACTED:

The current year decreased by \$6.6 million (\$2.1 million GF), due to a decrease in the Base and Continuation Costs. The decrease in the Base is largely attributable to SB 3 Minimum Wage and AB X2 1 - Community Based Services expenditures coming in lower than originally estimated.

REASON FOR YEAR-TO-YEAR CHANGE:

The budget year decreased by \$3.3 million (\$3.7 million GF), due to a \$2.0 million decrease in the Base, a \$1.2 million decrease in Utilization and Growth, and a slight decrease in Continuation Costs.

EXPENDITURES:	<u>2017-18</u>	<u>2018-19</u>	
TOTAL	\$46,942	\$43,658	
GF	27,488	23,771	
Reimbursements	19.454	19.887	

Habilitation Supported Employment Program (Group Placement)

DESCRIPTION:

Supported Employment Program - Group Placement (SEP-G) provides opportunities for persons with developmental disabilities to work through integrated group settings and with support services provided by community rehabilitation programs. These services enable consumers to learn necessary job skills and maintain employment.

ASSUMPTIONS:

SEP-G Expenditure Data Source: State Claims file, dated September 1, 2017 with actuals through June 2017. Data was adjusted for lag based on historical trends.

METHODOLOGY:

		<u>2017-18</u>	<u>2018-19</u>
•	Base: Actual 2016-17 expenditures were used to develop the 2017-18 Base. The 2018-19 Base equals the prior year estimate for Base and Growth. Both years include expenditures resulting from the ABX2 1 Community Based Services Increase.	\$93,183	\$96,574
•	Total Utilization Change/Growth:	3,391	1,734
•	Subtotal Base and Growth:	\$96,574	\$98,308
•	Continuation Costs: Second year costs for developmental center movers.	6	9
•	TOTAL EXPENDITURES:	\$96,580	\$98,317

Habilitation Supported Employment Program (Group Placement)

FUNDING:

SEP-G expenditures are funded by the General Fund (GF) and reimbursements from the Home and Community-Based Services (HCBS) Waiver, Intermediate Care Facility - Developmentally Disabled (ICF-DD), and 1915(i) State Plan Amendment (SPA). Based on actual 2016-17 billing data, approximately 35% of SEP-G expenditures are eligible for HCBS Waiver reimbursement. Of the amount eligible for HCBS Waiver, 1915(i) SPA, and ICF-DD, 50% is federal financial participation.

CURRENT YEAR CHANGE FROM ENACTED:

The current year decreased by \$3.8 million (-\$4.4 million GF) due to decreases in the Base and in amounts estimated for Continuation Costs.

REASON FOR YEAR-TO-YEAR CHANGE:

The budget year increased by a net \$1.7 million (\$0.9 million GF) due to a \$3.4 million increase in the Base, and a slight increase in Continuation Costs, offset by a \$1.7 million decrease in Utilization and Growth.

EXPENDITURES:	<u>2017-18</u>	<u>2018-19</u>	
TOTAL	\$96,580	\$98,317	
GF	72,708	73,641	
Reimbursements	23.872	24.676	

Habilitation Supported Employment Program (Individual Placement)

DESCRIPTION:

Supported Employment Program - Individual Placement (SEP-I) provides opportunities for persons with developmental disabilities to work through integrated individual settings and with support services provided by community rehabilitation programs. These services enable consumers to learn necessary job skills and maintain employment.

ASSUMPTIONS:

SEP-I Expenditure Data Source: State Claims file, dated September 1, 2017 with actuals through June 2017. Data was adjusted for lag based on historical trends.

METHODOLOGY:

		<u>2017-18</u>	<u>2018-19</u>
•	Base: Actual 2016-17 expenditures were used to develop the 2017-18 Base. The 2018-19 Base equals the prior year estimate for Base and Growth. Both years include expenditures resulting from the ABX2 1 Community Based Services Increase.	\$24,394	\$27,199
•	Total Utilization Change/Growth:	2,805	3,128
•	Subtotal Base and Growth:	\$27,199	\$30,327
•	Continuation Costs: Second year costs for developmental center movers.	3	9
•	TOTAL EXPENDITURES:	\$27,202	\$30,336

Habilitation Supported Employment Program (Individual Placement)

FUNDING:

SEP-I expenditures are funded by the General Fund (GF) and reimbursements from the Home and Community-Based Services (HCBS) Waiver, Intermediate Care Facility - Developmentally Disabled (ICF-DD), and 1915(i) State Plan Amendment (SPA). Based on actual 2016-17 billing data, approximately 23% of SEP-I expenditures are eligible for HCBS Waiver reimbursement. Of the amount eligible for HCBS Waiver, 1915(i) SPA, and ICF-DD, 50% is federal financial participation.

CURRENT YEAR CHANGE FROM ENACTED:

The current year increased by \$3.7 million (\$2.9 million GF) due to a \$1.5 million increase in the Base, and a \$2.2 million increase in Utilization and Growth.

REASON FOR YEAR-TO-YEAR CHANGE:

The budget year increased by \$3.1 million (\$2.8 million GF) due to a \$2.8 million increase in the Base, and increases in Utilization and Growth and Continuation Costs.

EXPENDITURES:	<u>2017-18</u>	<u>2018-19</u>
TOTAL	\$27,202	\$30,336
GF	22,304	25,111
Reimbursements	4,898	5,225

Transportation

DESCRIPTION:

Transportation services are provided so persons with a developmental disability may participate in programs and/or other activities identified in their Individual Program Plan. A variety of sources may be used to provide transportation including public transit, specialized transportation companies, day programs and/or residential vendors, and family members, friends, or others. Transportation services may include assistance boarding and exiting a vehicle as well as assistance and monitoring while being transported.

ASSUMPTIONS:

Transportation Expenditure Data Source: State Claims Data file, dated September 1, 2017, with actuals through June 2017. Data was adjusted for lag based on historical trends.

METHODOLOGY:

		<u>2017-18</u>	<u>2018-19</u>
•	Base: Actual 2016-17 expenditures were used to develop the 2017-18 Base. The 2018-19 Base equals the prior year estimate for Base and Growth. Both years include expenditures resulting from the SB 3 Minimum Wage Increase and the ABX2 1 Community Based Services Increase.	\$327,270	\$346,939
•	Total Utilization Change/Growth:	19,669	20,852
•	Subtotal Base and Growth:	\$346,939	\$367,791
•	Community Placement Plan: See Community Placement Plan methodology for detail.	320	320
•	Continuation Costs: Second year costs for developmental center movers.	569	844
•	TOTAL EXPENDITURES:	\$347,828	\$368,955

Transportation

FUNDING:

Transportation expenditures are funded by the General Fund (GF) and reimbursements from the Home and Community-Based Services (HCBS) Waiver, 1915(i) State Plan Amendment (SPA), Title XX Block Grant, which includes Social Services and Temporary Assistance for Needy Families, and Intermediate Care Facility - Developmentally Disabled (ICF-DD). Based on actual 2016-17 billing data, approximately 64% of Transportation expenditures are eligible for HCBS Waiver reimbursement. Of the amount eligible for HCBS Waiver, 1915(i) SPA, and ICF-DD, 50% is federal financial participation.

CURRENT YEAR CHANGE FROM ENACTED:

The current year decreased by \$11.5 million (\$12.6 million GF increase) due to a decrease in the Base, offset by a slight increase in Growth and Utilization and Continuation Costs. The decrease in the Base is due to actual expenditures from the ABX2 1 Community Based Services increase and SB 3 Minimum Wage increase coming lower than originally estimated.

REASON FOR YEAR-TO-YEAR CHANGE:

The budget year increased by \$21.1 million (\$16.4 million GF), due to increases in the Base, Utilization and Growth, and Continuation Costs. The main cost drivers in Utilization and Growth are Transportation Company, Transportation-Additional component, and Transportation-Public/Rental Car Agency/Taxi. These service codes make up over 90% of Transportation expenditures.

EXPENDITURES:	<u>2017-18</u>	<u>2018-19</u>
TOTAL	\$347,828	\$368,955
GF	202,881	219,261
Reimbursements	144,947	149,694

Support Services

DESCRIPTION:

Support Services include a broad range of services to assist adults who choose to live in homes they themselves own or lease in the community. Included in the Support Services expenditures are Independent Living Supplement payments to adults who are in Supported/Independent Living (SL/IL) settings and receiving Supplementary Security Income/State Supplementary Payment (SSI/SSP). Regional centers supplement the reduction in the SSP portion of the SSI/SSP grant to enable consumers to remain in these settings rather than moving into community care facilities.

ASSUMPTIONS:

Support Services Expenditure Data Source: State Claims Data file, dated September 1, 2017 with actuals through June 2017. Data was adjusted for lag based on historical data.

METHODOLOGY:

•		<u>2017-18</u>	<u>2018-19</u>
•	Base: Actual 2016-17 expenditures were used to develop the 2017-18 Base. The 2018-19 Base equals the prior year estimate for Base and Growth. Both years include expenditures resulting from policies related to the SB 3 Minimum Wage Increase that was effective January 1, 2017, the ABX2 1 Community Based Services Increases, and the February 1, 2016 BHT Transition.	\$1,205,002	\$1,297,704
•	Total Utilization Change/Growth	92,702	91,970
•	Subtotal Base and Growth	\$1,297,704	\$1,389,674

Support Services

METHODOLOGY (continued):		<u>2017-18</u>	<u>2018-19</u>	
 Community Placement Plan: See Community Placement Plan methodology for detail. 		2,700	2,700	
Continuation Costs: movers.	Second year costs for c	levelopmental center	10,095	14,967
• Independent Living Supplement Based on Client Master File data as of June 4, 2017, it is estimated the following number of consumers will live in SL/IL arrangements. Due to an SSP California Necessities Index increase of 2.76%, effective January 1, 2017, the consumers who are part of a couple will receive a monthly supplemental payment of \$83.10, while those receiving the monthly supplemental payment as an individual will receive \$56.88. The number of estimated consumers receiving this supplement is based on information provided by the regional centers via the 2017 Regional Center Spring Survey. All consumers are assumed to receive their payments in each month of the fiscal year. Prior year costs remain in the base, therefore only the incremental costs are reflected.		420	314	
	Current Year	Budget Year		
Total SL/IL Consume	rs 26,427	26,886		
Part of a Couple	1,078	-1,078		
Individuals	25,349	25,808		

• TOTAL EXPENDITURES

\$1,310,919 \$1,407,655

FUNDING:

Support Services expenditures are funded by the General Fund (GF) and reimbursements from the Home and Community-Based Services (HCBS) Waiver, 1915(i) State Plan Amendment (SPA), Title XX Block Grant, which includes Social Services and Temporary Assistance to Needy Families, Intermediate-Care Facility-Developmentally Disabled (ICF-DD), Department of Health Care Services for Behavioral Health Treatment Fee-for-Service, and federal funds from the Early Start Grant. Based on actual 2016-17 billing data, approximately 74% of Support Services expenditures are eligible for HCBS Waiver reimbursement. Of the amount eligible for HCBS Waiver, 1915(i) SPA, and ICF-DD, 50% is federal financial participation.

Support Services

CURRENT YEAR CHANGE FROM ENACTED:

The current year decreased by a net \$6.7 million (\$77.7 million GF), reflecting a \$7.8 million decrease in the Base. This decrease is largely attributable to SB 3 Minimum Wage expenditures coming in lower than expected, offset by slight increases in Continuation Costs and the Independent Living Supplement.

REASON FOR YEAR-TO-YEAR CHANGE:

The budget year increased by a net \$96.7 million (\$73.3 million GF), reflecting a \$92.7 million increase in the Base. This increase reflects continued growth in the category, primarily in Comminuty Integration Training Program, Personal Assistant, and Supported Living Services, which total more than 80% of all expenditures. The budget year also includes a \$4.9 million increase in Continuation Costs, offset by slight decreases in the Independent Living Supplement, and in Utilization and Growth.

EXPENDITURES:	<u>2017-18</u>	<u>2018-19</u>
TOTAL	\$1,310,919	\$1,407,655
GF	705,164	778,511
Reimbursements	605,499	628,888
Federal Funds	256	256

In-Home Respite

DESCRIPTION:

In-Home Respite services include intermittent or regularly scheduled, temporary non-medical care and/or supervision services provided in the consumer's home, except for the provision of incidental medical services as expressly allowed in statute.

ASSUMPTIONS:

In-Home Respite Expenditure Data Source: State Claims Data file, dated September 1, 2017, with actuals through June 2017. Data was adjusted for lag based on historical trends.

METHODOLOGY:

	2017-18	2018-19
 Base: Actual 2016-17 expenditures were used to develop the 2017-18 Base. The 2018-19 Base equals the prior year estimate for Base and Growth. Both years include expenditures resulting from policies related to the SB 3 Minimum Wage Increase that was effective January 1, 2017, and the ABX2 1 Community Based Services Increase. 	\$357,802 r	\$408,768
Total Utilization Change/Growth:	39,144	34,129
Restore Respite	11,822	24,591
Subtotal Base and Growth:	\$408,768	\$467,488
 Community Placement Plan: See Community Placement Plan methodology for detail. 	212	212
Continuation Costs: Second year costs for developmental center movers.	270	400
TOTAL EXPENDITURES:	\$409,250	\$468,100

In-Home Respite

FUNDING:

In-Home Respite expenditures are funded by the General Fund (GF) and reimbursements from the Home and Community-Based Services (HCBS) Waiver, Title XX Block Grant, which includes Social Services and Temporary Assistance for Needy Families, 1915(i) State Plan Amendment (SPA), and federal funds from the Early Start Grant. Based on actual 2016-17 billing data, approximately 76% of In-Home Respite expenditures are eligible for HCBS Waiver reimbursement. Of the amount eligible for HCBS Waiver and 1915 (i) SPA, 50% is federal financial participation.

CURRENT YEAR CHANGE FROM ENACTED:

The current year decreased by a net \$22.1 million (\$36.2 million GF) due to a refinement of the actual level of growth in the Base. It is offset by a slight increase in Continuation Costs, and a \$1.7 million increase anticipated from the restoration of Respite services effective January 1, 2018. In-Home Respite Services Agency is the cost driver with a \$68 million increase in expenditures. This service accounts for 81.6% of this budget category.

REASON FOR YEAR-TO-YEAR CHANGE:

The budget year increased by a net \$58.8 million (\$52.8 million GF) over the current year, due to an increase in the Base, Continuation Costs, and a \$12.8 million increase anticipated from the restoration of Respite services, offset by a decrease in Utilization and Growth. The increase in the Base reflects continued growth in In-Home Respite Services Agency, but at a slower pace than current year.

EXPENDITURES	<u>2017-18</u>	<u>2018-19</u>
TOTAL	\$409,250	\$468,100
GF	210,848	263,683
Reimbursements	198,330	204,345
Federal Funds	72	72

Out-of-Home Respite

DESCRIPTION:

Out-of-Home Respite includes supervision services that are provided in licensed residential and day care facilities.

ASSUMPTIONS:

Out-of-Home Respite Expenditure Data Source: State Claims Data file, dated September 1, 2017, with actuals through June 2017. Data was adjusted for lag based on historical trends.

METHODOLOGY:

		<u>2017-18</u>	<u>2018-19</u>
 Base: Actual 2016-17 expenditures we 2017-18 Base. The 2018-19 Base equ for Base and Growth. Both years inclu- from policies related to the SB 3 Minim- effective January 1, 2017, and the ABX Services Increase. 	als the prior year estimate de expenditures resulting um Wage Increase that was	\$48,008	\$49,614
Total Utilization Change/Growth:		1,365	1,404
Restore Respite		241	502
Subtotal Base and Growth:		\$49,614	\$51,520
 Community Placement Plan: See Comethodology for detail. 	ommunity Placement Plan	87	87
 Continuation Costs: Second year cosmovers. 	sts for developmental center	267	395
• TOTAL EXPENDITURES:		\$49,968	\$52,002

Out-of-Home Respite

FUNDING:

Out-of-Home Respite expenditures are funded by the General Fund (GF), reimbursements from the Home and Community-Based Services (HCBS) Waiver, Title XX Block Grant, which includes Social Services and Temporary Assistance for Needy Families, 1915(i) State Plan Amendment (SPA), and federal funds from the Early Start Grant. Based on actual 2016-17 billing data, approximately 66% of Out-of-Home Respite expenditures are eligible for HCBS Waiver reimbursement. Of the amount eligible for HCBS Waiver and 1915 (i) SPA, 50% is federal financial participation.

CURRENT YEAR CHANGE FROM ENACTED:

The current year increase of \$4.4 million (\$5.8 million GF) reflects an increase in the Base due to ABX2 1 Community Based Services expenditures coming in higher than estimated. It also includes an increase in Utilization and Growth, Continuation Costs, and a slight increase for restoration of Respite services effective January 1, 2018.

REASON FOR YEAR-TO-YEAR CHANGE:

The budget year increased by \$2.0 million (\$1.4 million GF) over the current year, and reflects a \$1.6 million increase in the Base, slight increases in Utilization and Growth and Continuation Costs, and an increase for the restoration of Respite services. The increase in the Base reflects continued growth in Day Care-Family Member Services and In-Home Respite Services Agency, the main expenditure drivers.

EXPENDITURES:	<u>2017-18</u>	<u>2018-19</u>
TOTAL	\$49,968	\$52,002
GF	29,075	30,446
Reimbursements	20,823	21,486
Federal Funds	70	70

Health Care

DESCRIPTION:

Health Care services include those that are medical and/or health care-related.

ASSUMPTIONS:

Health Care Expenditure Data Source: State Claims Data file dated September 1, 2017, with actuals through June 2017. Data was adjusted for lag based on historical data.

METHODOLOGY:

To estimate expenditures, the Department begins with base expenditures, to which it adds increases expected during the year (utilization change/growth). In the current year, base expenditures equal actual prior year expenditures plus estimated outstanding claims. In the budget year, base expenditures equal the current year subtotal for base and growth. Utilization change/growth is the estimated increase in expenditures during the fiscal year based on analysis of actual, historical expenditure trends.

	<u>2017-18</u>	<u>2018-19</u>
 Base: Actual 2016-17 expenditures were used to develop the 2017-18 Base. The 2018-19 Base equals the prior year estimate for Base and Growth. Both years include expenditures resulting from the ABX2 1 Community Based Services Increase. 	\$105,712	\$113,885
Total Utilization Change/Growth:	8,173	7,001
Subtotal Base and Growth:	\$113,885	\$120,886
 Community Placement Plan: See Community Placement Plan methodology for detail. 	539	539
Continuation Costs: Second year costs for developmental center movers.	1,533	2,274
TOTAL EXPENDITURES:	\$115,957	\$123,699

FUNDING:

Health Care expenditures are funded by the General Fund (GF), reimbursements from the Home and Community-Based Services (HCBS) Waiver, Title XX Block Grant, which includes Temporary Assistance for Needy Families, 1915(i) State Plan Amendment (SPA), and federal funds from the Early Start Grant. Based on actual 2016-17 billing data, approximately 23% of Health Care expenditures are eligible for HCBS Waiver reimbursement. Of the amount eligible for HCBS Waiver, and 1915(i) SPA, 50% is federal financial participation.

Health Care

CURRENT YEAR CHANGE FROM ENACTED:

The current year decreased by \$4.2 million (\$3.4 million GF) due to a \$4.4 million decrease in the Base, offset by a slight increase in Continuation Costs. The decrease in the Base is due to ABX2 1 Community Based Services increase expenditures coming in lower than previously estimated.

REASON FOR YEAR-TO-YEAR CHANGE:

The budget year increased by \$7.7 million (\$7.2 million GF) due to an \$8.2 million increase in the Base and a slight increase in Continuation Costs, offset by a slight decrease in Utilization and Growth. The main cost drivers for this budget category are Acute Care Hospital and Speech Pathology, which accounts for over 31% of the expenditures. Expenditures continue to increase but at a slower pace than current year.

EXPENDITURES:	<u>2017-18</u>	<u>2018-19</u>
TOTAL	\$115,957	\$123,699
GF	95,645	102,838
Reimbursements	18,239	18,788
Federal Funds	2.073	2.073

Miscellaneous Services

DESCRIPTION:

The Miscellaneous Services category includes a wide variety of services identified in a consumer's Individual Program Plan or Individualized Family Service Plan. Due to the wide variety and often unique qualities of the services in this category, they cannot be classified in the other Purchase of Services budget categories. Services in this category include, but are not limited to, behavior intervention, early intervention programs, interdisciplinary assessments, translators, and tutors. Historically, approximately two thirds of the expenditures in this category were related to Behavioral Health Treatment (BHT) services. However, as a result of the transition of costs for BHT services to the Department of Health Care Services (DHCS), these expenditures in Miscellaneous are decreasing.

ASSUMPTIONS:

Miscellaneous Services Expenditure Data Source: State Claims Data file, dated September 1, 2017 with actuals through June 2017. Data was adjusted for lag based on historical data.

METHODOLOGY:

To estimate expenditures, the Department begins with base expenditures, to which it adds increases expected during the year (utilization change/growth). In the current year, base expenditures equal actual prior year expenditures plus estimated outstanding claims. In the budget year, base expenditures equal the current year subtotal for base and growth. Utilization change/growth is the estimated increase in expenditures during the fiscal year based on analysis of actual, historical expenditure trends.

	<u>2017-18</u>	<u> 2018-19</u>
 Base: Actual 2016-17 expenditures were used to develop the 2017-18 Base. The 2018-19 Base equals the prior year estimate for Base and Growth. Both years include expenditures resulting from policies related to the SB 3 Minimum Wage Increase that was effective January 1, 2017, the ABX2 1 Community Based Services Increases, and the February 1, 2016 BHT Transition. 	\$411,078	\$429,446
Total Utilization Change/Growth	18,368	19,095
Subtotal Base and Growth	\$429,446	\$448,541
 Community Placement Plan: See Community Placement Plan methodology for detail. 	29,178	29,178
 Continuation Costs: Second year costs for developmental center movers. 	1,837	2,723
TOTAL EXPENDITURES	\$460,461	\$480,442

Miscellaneous Services

FUNDING:

Miscellaneous Services expenditures are funded by the General Fund (GF), reimbursements from the Home and Community-Based Services (HCBS) Waiver, Title XX Block Grant, which includes Social Services and Temporary Assistance to Needy Families, 1915(i) State Plan Amendment (SPA), Intermediate-Care Facility-Developmentally Disabled (ICF-DD), Department of Health Care Services for Behavioral Health Treatment Fee-for-Service, and federal funds from the Early Start Grant and Program Development Funds (PDF). Based on actual 2016-17 billing data, approximately 21% of Miscellaneous Services expenditures are eligible for HCBS Waiver reimbursement. Of the amount eligible for HCBS Waiver, 1915(i) SPA, and ICF-DD, 50% is federal financial participation.

CURRENT YEAR CHANGE FROM ENACTED:

The current year increased by a net \$3.4 million (\$11.1 million GF), reflecting a slight increase in the Base, and a \$3.7 million increase in Growth and Utilization, offset by a decrease of \$1.2 million in Continuation Costs. Miscellaneous is impacted by the transition of BHT services to DHCS, resulting in less expenditure growth for these services. Utilization and Growth includes decreases in Behavior Analyst and Client/Parent Support Behavior Intervention Training, offset by an increase in Specialized Therapeutic Services for children under age 3. These services accounted for more than 40% of Miscellaneous expenditures in 2016-17.

REASON FOR YEAR-TO-YEAR CHANGE:

The budget year increased by a net \$20.0 million (\$5.4 million GF), reflecting an increase in the Base of \$18.4 million, as well as slight increases in Growth and Utilization and Continuation Costs. The increase in the Base is due to continued growth in Specialized Therapeutic Services for children under age 3, and Interdisciplinary Assessments.

EXPENDITURES:	<u>2017-18</u>	<u>2018-19</u>
TOTAL	\$460,461	\$480,442
GF	350,341	355,708
Reimbursements	95,142	109,756
Federal Funds	12,441	12,441
PDF	2,537	2,537

Quality Assurance Fees Intermediate Care Facility-Developmentally Disabled Costs Purchase of Services

DESCRIPTION:

To realize the federal financial participation (FFP) associated with the Intermediate Care Facility-Developmentally Disabled (ICF-DD) State Plan Amendment, there are administrative costs for the ICF-DD and Quality Assurance Fees (QAF) the ICF-DD must remit to the Department of Health Care Services (DHCS) for these supplemental payments.

ASSUMPTIONS/METHODOLOGY:

Billing costs are 1.5% of the cost of Day Programs and Transportation, and regional center administrative fees for ICF-DD. QAF are set by DHCS.

2017-18 and 2018-19: Total billing costs are \$1.9 million ICF-DD administration and \$8.2 million QAF.

Purchase of Services costs for Day Program and Transportation for 2016-17 totals \$125.5 million. ICF-DD administration costs are 1.5% of the total or \$1.9 million and QAF are \$8.2 million. Total administration and QAF is \$10.1 million.

FUNDING:

The funding for QAF is 100% reimbursement to the Department from DHCS.

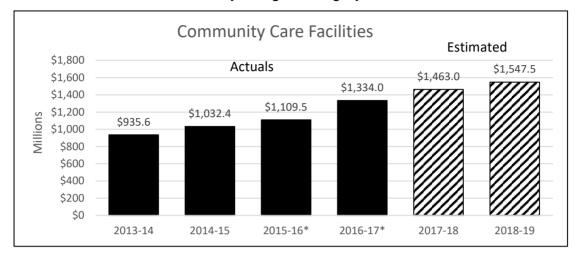
CURRENT YEAR CHANGE FROM ENACTED:

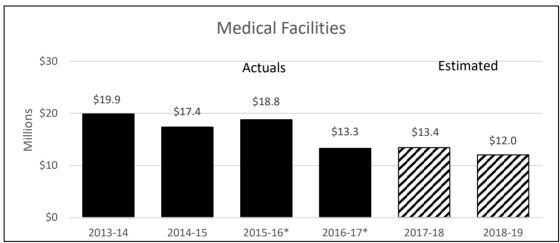
The slight increase reflects updated expenditure data as actual expenditures increased compared to projected cost in the 2017 May Revision.

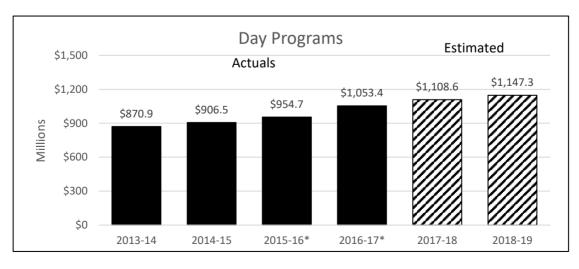
REASON FOR YEAR-TO-YEAR CHANGE:

No change.

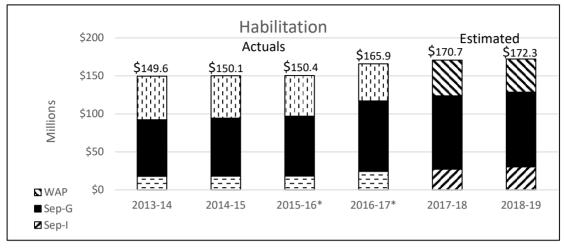
EXPENDITURES:		2017-18	2018-19
	Total	\$10,165	\$10,165
	Reimbursements	10,165	10,165
	QAF Admin Fees	5,083	5,083
	Transfer from DHCS	5.082	5.082

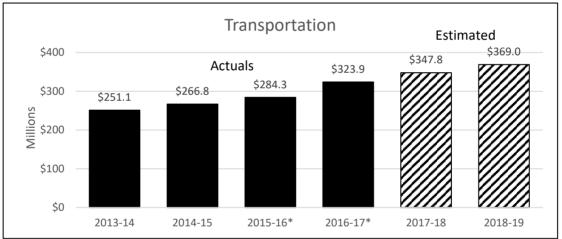


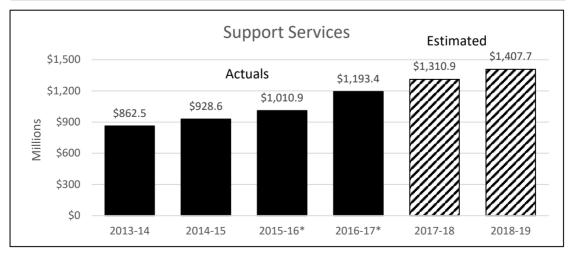




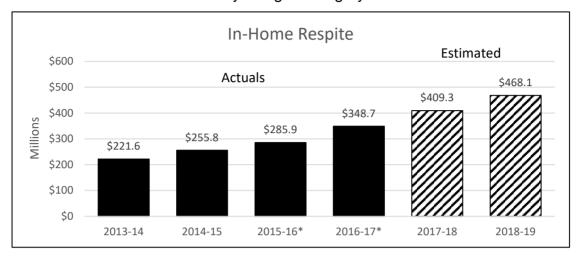
^{*} Claims for these years are still open and eligible for payment and reflect actuals through November 2018.

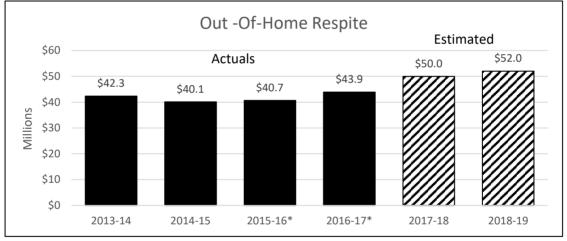


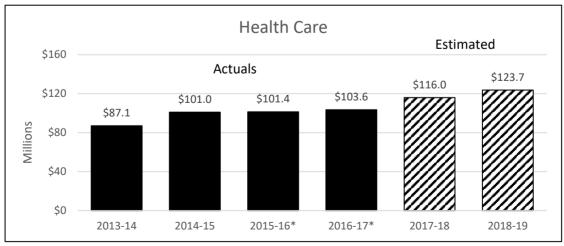




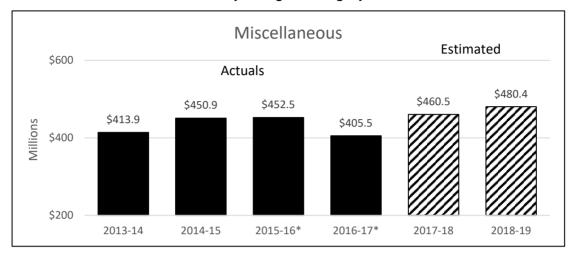
^{*} Claims for these years are still open and eligible for payment and reflect actuals through November 2018.

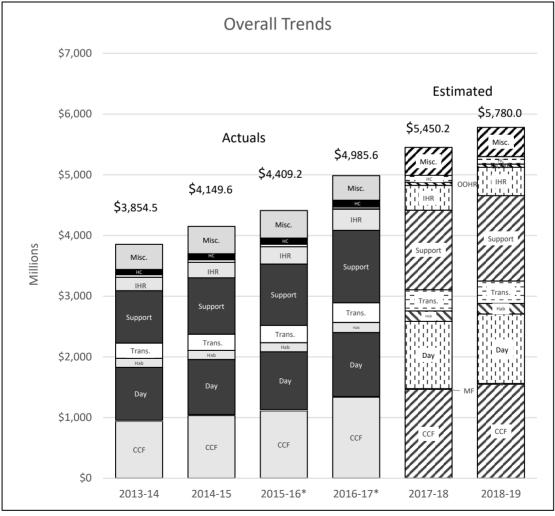






^{*} Claims for these years are still open and eligible for payment and reflect actuals through November 2018.





^{*} Claims for these years are still open and eligible for payment and reflect actuals through November 2018.

						2018-19
					2018-19	Over
	Enacted	Updated	2017-18		Over	Enacted
L	Budget	2017-18	Request	2018-19	2017-18	Budget
Community Care Facil	ities					
TOTAL	\$1,427,479	\$1,463,005	\$35,526	\$1,547,509	\$84,504	\$120,030
GF	\$782,597	\$844,431	\$61,834	\$907,588	\$63,157	\$124,991
GF Match	634,843	608,957	(25,886)	633,267	24,310	(1,576)
GF Other	147,754	235,474	87,720	274,321	38,847	126,567
Reimbursements	\$644,882	\$618,574	(\$26,308)	\$639,921	\$21,347	(\$4,961)
HCBS Waiver	583,212	559,513	(23,699)	583,830	24,317	618
1915 (i) SPA	<i>51,45</i> 2	49,442	(2,010)	49,440	(2)	(2,012)
Title XX TANF	7,250	6,651	(599)	6,651	0	(599)
Money Follows the Person	2,968	2,968	0	0	(2,968)	(2,968)
Medical Facilities						
TOTAL	\$16,064	\$13,424	(\$2,640)	\$12,024	(\$1,400)	(\$4,040)
GF	\$16,064	\$13,424	(\$2,640)	\$12,024	(\$1,400)	(\$4,040)
GF Other	16,064	13,424	(2,640)	12,024	(1,400)	(4,040)
Day Programs						
TOTAL	\$1,137,824	\$1,108,637	(\$29,187)	\$1,147,335	\$38,698	\$9,511
GF	\$612,911	\$616,074	\$3,163	\$639,044	\$22,970	\$26,133
GF Match	<i>4</i> 57,892	426,883	(31,009)	442,613	15,730	(15,279)
GF Other	155,019	189,191	34,172	196,431	7,240	41,412
Reimbursements	\$506,793	\$474,717	(\$32,076)	\$490,445	\$15,728	(\$16,348)
HCBS Waiver	313,641	301,314	(12,327)	314,410	13,096	769
1915 (i) SPA	79,840	<i>59,64</i> 8	(20, 192)	59,649	1	(20,191)
Title XX Social Services	48,802	47,750	(1,052)	47,750	0	(1,052)
Title XX TANF	47	84	37	84	0	37
ICF-DD	38,095	39,064	969	39,064	0	969
EPSDT	26,368	26,857	489	29,488	2,631	3,120
Federal Funds	\$18,120	\$17,846	(\$274)	\$17,846	\$0	(\$274)
Early Start Grant	18,120	17,846	(274)	17,846	0	(274)

	Enacted Budget	Updated 2017-18	2017-18 Request	2018-19	2018-19 Over 2017-18	2018-19 Over Enacted Budget
Habilitation: WAP						
TOTAL	\$53,509	\$46,942	(\$6,567)	\$43,658	(\$3,284)	(\$9,851)
GF	\$29,545	\$27,488	(\$2,057)	\$23,771	(\$3,717)	(\$5,774)
GF Match	23,960	19, 4 53	(4,507)	19,886	433	(4,074)
GF Other	5,585	8,035	2,450	3,885	(4,150)	(1,700)
Reimbursements	\$23,964	\$19,454	(\$4,510)	\$19,887	\$433	(\$4,077)
HCBS Waiver	19,499	15,743	(3,756)	16, 4 27	684	(3,072)
1915 (i) SPA	3,930	3,198	(732)	2,947	(251)	(983)
ICF-DD	535	513	(22)	513	0	(22)
Habilitation: SEP-G						
TOTAL	\$100,423	\$96,580	(\$3,843)	\$98,317	\$1,737	(\$2,106)
GF	\$77,085	\$72,708	(\$4,377)	\$73,641	\$933	(\$3,444)
GF Match	23,336	23,872	536	24,676	804	1,340
GF Other	53,749	48,836	(4,913)	48,965	129	(4,784)
Reimbursements	\$23,338	\$23,872	\$534	\$24,676	\$804	\$1,338
HCBS Waiver	16,306	17,158	852	17,905	747	1,599
1915 (i) SPA	6,904	6,579	(325)	6,636	57	(268)
ICF-DD	128	135	7	135	0	7
Habilitation: SEP-I						
TOTAL	\$23,502	\$27,202	\$3,700	\$30,336	\$3,134	\$6,834
GF	\$19,412	\$22,304	\$2,892	\$25,111	\$2,807	\$5,699
GF Match	4,089	4,897	808	5,224	327	1,135
GF Other	15,323	17,407	2,084	19,887	2,480	4,564
Reimbursements	\$4,090	\$4,898	\$808	\$5,225	\$327	\$1,135
HCBS Waiver	2, <i>4</i> 52	3,019	567	3,150	131	698
1915 (i) SPA	1,617	1,853	236	2,049	196	432
ICF-DD	21	26	5	26	0	5

	Enacted Budget	Updated 2017-18	2017-18 Request	2018-19	2018-19 Over 2017-18	2018-19 Over Enacted Budget
Transportation						
TOTAL	\$359,326	\$347,828	(\$11,498)	\$368,955	\$21,127	\$9,629
GF	\$190,233	\$202,881	\$12,648	\$219,261	\$16,380	\$29,028
GF Match	159,934	136,001	(23,933)	140,748	4,747	(19,186)
GF Other	30,299	66,880	36,581	78,513	11,633	48,214
Reimbursements	\$169,093	\$144,947	(\$24,146)	\$149,694	\$4,747	(\$19,399)
HCBS Waiver	108,449	109,228	779	113,975	4,747	5,526
1915 (i) SPA	36,284	10,985	(25,299)	10,985	0	(25,299)
Title XX Social Services	8,117	8,260	143	8,260	0	143
Title XX TANF	1,023	685	(338)	685	0	(338)
ICF-DD	15,220	15,789	569	15,789	0	569
Support Services						
TOTAL	\$1,317,648	\$1,310,919	(\$6,729)	\$1,407,655	\$96,736	\$90,007
GF	\$782,894	\$705,164	(\$77,730)	\$778,511	\$73,347	(\$4,383)
GF Match	469,975	536,166	66,191	553,861	17,695	83,886
GF Other	312,919	168,998	(143,921)	224,650	55,652	(88,269)
Reimbursements	\$534,518	\$605,499	\$70,981	\$628,888	\$23,389	\$94,370
HCBS Waiver	435,109	458,505	23,396	480,564	22,059	45,455
1915 (i) SPA	24,288	66,070	41,782	66,348	278	42,060
Title XX Social Services	54,905	57,296	2,391	57,296	0	2,391
Title XX TANF	13,505	14,050	<i>545</i>	14,050	0	545
ICF-DD	6,711	6,948	237	6,948	0	237
BHT- FFS	0	2,630	2,630	3,682	1,052	3,682
Federal Funds	\$236	\$256	\$20	\$256	\$0	\$20
Early Start Grant	236	256	20	256	0	20

	Enacted Budget	Updated 2017-18	2017-18 Request	2018-19	2018-19 Over 2017-18	2018-19 Over Enacted Budget
In-Home Respite						
TOTAL	\$431,352	\$409,250	(\$22,102)	\$468,100	\$58,850	\$36,748
GF	\$247,073	\$210,848	(\$36,225)	\$263,683	\$52,835	\$16,610
GF Match	147,710	158,970	11,260	164,986	6,016	17,276
GF Other	99,363	51,878	(47,485)	98,697	46,819	(666)
Reimbursements	\$184,206	\$198,330	\$14,124	\$204,345	\$6,015	\$20,139
HCBS Waiver	133,934	138,414	4,480	144,430	6,016	10,496
1915 (i) SPA	13,794	20,556	6,762	20,555	(1)	6,761
Title XX Social Services	19,977	19, 4 21	(556)	19, 4 21	0	(556)
Title XX TANF	16,501	19,939	3,438	19,939	0	3,438
Federal Funds	\$73	\$72	(\$1)	\$72	\$0	(\$1)
Early Start Grant	73	72	(1)	72	0	(1)
Out-of-Home Respite						
TOTAL	\$45,559	\$49,968	\$4,409	\$52,002	\$2,034	\$6,443
GF	\$23,226	\$29,075	\$5,849	\$30,446	\$1,371	\$7,220
GF Match	18,939	17,000	(1,939)	17,662	662	(1,277)
GF Other	4,287	12,075	7,788	12,784	709	8,497
Reimbursements	\$22,234	\$20,823	(\$1,411)	\$21,486	\$663	(\$748)
HCBS Waiver	15,318	15,257	(61)	15,920	663	602
1915 (i) SPA	3,625	1,742	(1,883)	1,742	0	(1,883)
Title XX Social Services	687	606	(81)	606	0	(81)
Title XX TANF	2,604	3,218	614	3,218	0	614
Federal Funds	\$99	\$70	(\$29)	\$70	\$0	(\$29)
Early Start Grant	99	70	(29)	70	0	(29)

					2018-19	2018-19 Over
	Enacted	Updated	2017-18		Over	Enacted
	Budget	2017-18	Request	2018-19	2017-18	Budget
L	Daaget	2017 10	Request	2010 13	2017 10	Daaget
Health Care						
TOTAL	\$120,120	\$115,957	(\$4,163)	\$123,699	\$7,742	\$3,579
GF	\$99,059	\$95,645	(\$3,414)	\$102,838	\$7,193	\$3,779
GF Match	17,391	17,206	(185)	17,756	550	365
GF Other	81,668	78,439	(3,229)	85,082	6,643	3,414
Reimbursements	\$18,561	\$18,239	(\$322)	\$18,788	\$549	\$227
HCBS Waiver	11,459	12,655	1,196	13,205	550	1,746
1915 (i) SPA	5,934	4,552	(1,382)	<i>4,5</i> 51	(1)	(1,383)
Title XX TANF	1,168	1,032	(136)	1,032	Ô	(136)
Federal Funds	\$2,500	\$2,073	(\$427)	\$2,073	\$0	(\$427)
Early Start Grant	2,500	2,073	(427)	2,073	0	(427)
Miscellaneous						
TOTAL	\$457,066	\$460,461	\$3,395	\$480,442	\$19,981	\$23,376
GF	\$339,246	\$350,341	\$11,095	\$355,708	\$5,367	\$16,462
GF Match	72,817	71,205	(1,612)	63,858	(7,347)	(8,959)
GF Other	266,429	279,136	12,707	291,850	12,714	25,421
Reimbursements	\$103,259	\$95,142	(\$8,117)	\$109,756	\$14,614	\$6,497
HCBS Waiver	52,110	37,682	(14,428)	47,897	10,215	(4,213)
1915 (i) SPA	4,630	14,554	9,924	15,676	1,122	11,046
Title XX Social Services	3,776	2,931	(845)	2,931	0	(845)
Title XX TANF	35,059	31, 49 8	(3,561)	31, 4 98	0	(3,561)
ICF-DD	254	285	31	285	0	31
BHT - FFS	7,430	8,192	762	11,469	3,277	4,039
Federal Funds	\$12,024	\$12,441	\$417	\$12,441	\$0	\$417
Early Start Grant	12,024	12,441	417	12,441	0	417
Program Development Fund	\$2,537	\$2,537	\$0	\$2,537	\$0	\$0

	Enacted Budget	Updated 2017-18	2017-18 Request	2018-19	2018-19 Over 2017-18	2018-19 Over Enacted Budget
Quality Assurance Fee	s					
TOTAL	\$9,874	\$10,165	\$291	\$10,165	\$0	\$291
Reimbursements	\$9,874	\$10,165	\$291	\$10,165	\$0	\$291
QAF Admin Fees	4,937	5,083	146	5,083	0	146
Transfer from DHCS	4,937	5,082	145	5,082	0	145

Total Purchase of Servi	ice Funding	Detail				
TOTAL	\$5,499,746	\$5,460,338	(\$39,408)	\$5,790,197	\$329,859	\$290,451
GF	\$3,219,345	\$3,190,383	(\$28,962)	\$3,431,626	\$241,243	\$212,281
GF Match	2,030,886	2,020,610	(10,276)	2,084,537	63,927	53,651
GF Other	1,188,459	1,169,773	(18,686)	1,347,089	177,316	158,630
Reimbursements	\$2,244,812	\$2,234,660	(\$10,152)	\$2,323,276	\$88,616	\$78,464
HCBS Waiver	1,691,489	1,668,488	(23,001)	1,751,713	83,225	60,224
1915 (i) SPA	232,298	239,179	6,881	240,578	1,399	8,280
Title XX Social Services	136,264	136,264	0	136,264	0	0
Title XX TANF	77,157	77,157	0	77,157	0	0
Money Follows the Person	2,968	2,968	0	0	(2,968)	(2,968)
ICF-DD	60,964	62,760	1,796	62,760	Ö	1,796
EPSDT	26,368	26,857	<i>4</i> 89	29,488	2,631	3,120
QAF Admin Fees	4,937	5,083	146	5,083	0	146
Transfer from DHCS	4,937	5,082	145	5,082	0	1 4 5
BHT - FFS	7,430	10,822	3,392	15, 151	4,329	7,721
Federal Funds	\$33,052	\$32,758	(\$294)	\$32,758	\$0	(\$294)
Early Start Grant	33,052	32,758	(294)	32,758	0	(294)
Program Development Fund	\$2,537	\$2,537	\$0	\$2,537	\$0	\$0

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SECTION H: COMMU	JNITY PLACEMENT PLAN	
Community Placer	ement Plan	H-1

DESCRIPTION:

The purpose of Community Placement Plan (CPP) funding is to enhance the capacity of the community service delivery system and to reduce reliance on developmental centers, Institutions for Mental Disease (IMD) [e.g., Mental Health Rehabilitation Centers (MHRCs)] that are ineligible for federal financial participation (FFP), and out-of-state placements. This estimate comprises projected costs and historical experience derived from individualized assessments of community services and support needs, and reflects what is needed to place an individual from a developmental center, IMD, MHRC, or out-of-state placement into the community, in addition to deflecting an individual to avoid admission to an acute crisis facility, a mental health facility ineligible for FFP, or an out-of-state placement. It also reflects costs associated with performing individualized assessments and developing necessary community resources. CPPs are developed through negotiations with each regional center and are based on individualized planning efforts. CPP was first implemented in 2002-03.

This estimate reflects Operations and Purchase of Service (POS) resources needed to:

- Establish resources in the community for individuals transitioning from another environment.
- Facilitate transitions to the community from a developmental center, IMD, or out-of-state
 placement, as well as to deflect the admission of individuals to acute crisis units, an IMD, or
 out-of-state placements.
- Work with the developmental centers and families in identifying individuals for movement.
- Stabilize current community living arrangements.

Regular CPP funding provides resources for both Operations and POS as follows:

Operations

- Positions: Positions and costs for employees at the regional centers who focus on CPP, to
 pursue resource development, complete assessments, lead the transition of consumers into
 community settings, provide quality assurance, and provide clinical expertise.
- Operating Expenses: Costs for office space, furniture, computers, travel, training, and rent.

Purchase of Services

- Start-Up: Start-Up funding for the development of residential and non-residential services in the community for individuals transitioning from a developmental center, IMD, or out-of-state placement.
- Assessment: Assessment funding for comprehensive assessments for individuals who are living
 in developmental centers, and planning for services when individuals move from the
 developmental center.
- **Placement:** Placement funds to cover costs of consumers moving into community settings based on consumer-specific information.
- **Deflection:** Deflection funding POS for residential costs of facilities developed with prior year CPP POS Start-Up funding to deflect admissions into more restrictive settings.

ASSUMPTIONS:

- Due to the announced plans to close the Sonoma, Fairview, and Porterville General Treatment
 Area developmental centers, additional regional center Operations and POS funding is needed to
 ensure there are adequate resources available for safe and successful transitions of consumers
 to community living.
- Department of Health Care Services approved rates used for:
 - Intermediate Care Facilities/Developmentally Disabled Nursing Facilities
 - Intermediate Care Facilities/Developmentally Disabled Habilitation Facilities

FUNDING:

CPP expenditures are funded by the General Fund (GF) and reimbursements from the Home and Community-Based Services Waiver and Money Follows the Person Grant.

EXPENDITURES:	2017-18	2018-19
<u>Operations</u>		
Regular	15,265	15,265
SDC	3,616	3,616
FDC	1,212	1,212
PDC	606	606
Total Regional Center Operations	20,699	20,699
<u>POS</u>		
Regular Regional Center POS		
Community Care Facilities	18, 4 51	18, 4 51
Medical Facilities	171	171
Day Programs	929	929
Work Activity Program	2	2
Transportation	320	320
Support Services	2,700	2,700
In-Home Respite	212	212
Out-of-Home Respite	87	87
Health Care	539	539
Miscellaneous Services	29,178	29,178
Total Regular Regional Center POS	52,589	52,589
SDC POS	13,322	10,278
FDC POS	4,570	8,420
PDC POS	2,352	4,334
TOTAL	\$93,532	\$96,320
GF	\$67,975	\$86,158
Reimbursements	\$25,557	\$10,162

Regular CPP

	Enacted Budget	Updated 2017-18	2017-18 Request	2018-19	2018-19 Over 2017-18	2018-19 Over Enacted Budget
I. OPERATIONS	\$15,265	\$15,265	\$0	\$15,265	\$0	\$0
II. PURCHASE OF SERVICES (POS)						
A. Start-Up	\$27,265	\$27,265	\$0	\$27,265	\$0	\$0
B. Assessment	\$1,500	\$1,500	\$0	\$1,500	\$0	\$0
C. Placement	\$22,824	\$22,824	\$0	\$22,824	\$0	\$0
D. Deflection	\$1,000	\$1,000	\$0	\$1,000	\$0	\$0
E. SUBTOTAL POS	\$52,589	\$52,589	\$0	\$52,589	\$0	\$0
III. TOTAL CPP	\$67,854	\$67,854	\$0	\$67,854	\$0	\$0
IV. FUND SOURCES						
A. TOTAL CPP	\$67,854	\$67,854	\$0	\$67,854	\$0	\$0
B. GF GF Match GF Other	\$55,171 <i>4,097 51,074</i>	\$46,234 13,034 33,200	-\$8,937 8,937 -17,874	\$60,788 7,066 53,722	\$14,554 -5,968 20,522	\$5,617 2,969 2,648
C. Reimbursements HCBS Waiver MFP Grant	\$12,683 1,287 11,396	\$21,620 10,224 11,396	\$8,937 8,937 0	\$7,066 7,066 0	-\$14,554 -3,158 -11,396	-\$5,617 5,779 -11,396

Sonoma Developmental Center Closure

	Enacted Budget	Updated 2017-18	2017-18 Request	2018-19	2018-19 Over 2017-18	2018-19 Over Enacted Budget
I. OPERATIONS	\$3,616	\$3,616	\$0	\$3,616	\$0	\$0
II. PURCHASE OF SERVICES (POS)						
A. Start-Up	\$0	\$0	\$0	\$0	\$0	\$0
B. Assessment	\$0	\$0	\$0	\$0	\$0	\$0
C. Placement	\$13,322	\$13,322	\$0	\$10,278	-\$3,044	-\$3,044
D. Deflection	\$0	\$0	\$0	\$0	\$0	\$0
E. SUBTOTAL POS	\$13,322	\$13,322	\$0	\$10,278	-\$3,044	-\$3,044
III. TOTAL CPP	\$16,938	\$16,938	\$0	\$13,894	-\$3,044	-\$3,044
IV. FUND SOURCES						
A. TOTAL CPP	\$16,938	\$16,938	\$0	\$13,894	-\$3,044	-\$3,044
B. GF	\$9,676	\$14,348	\$4,672	\$12,513	-\$1,835	\$2,837
C. Reimbursements	\$7,262	\$2,590	-\$4,672	\$1,381	-\$1,209	-\$5,881

Fairview Developmental Center Closure

	Enacted Budget	Updated 2017-18	2017-18 Request	2018-19	2018-19 Over 2017-18	2018-19 Over Enacted Budget
I. OPERATIONS	\$1,212	\$1,212	\$0	\$1,212	\$0	\$0
II. PURCHASE OF SERVICES (POS)						
A. Start-Up	\$0	\$0	\$0	\$0	\$0	\$0
B. Assessment	\$0	\$0	\$0	\$0	\$0	\$0
C. Placement	\$4,570	\$4,570	\$0	\$8,420	\$3,850	\$3,850
D. Deflection	\$0	\$0	\$0	\$0	\$0	\$0
E. SUBTOTAL POS	\$4,570	\$4,570	\$0	\$8,420	\$3,850	\$3,850
III. TOTAL CPP	\$5,782	\$5,782	\$0	\$9,632	\$3,850	\$3,850
IV. FUND SOURCES						
A. TOTAL CPP	\$5,782	\$5,782	\$0	\$9,632	\$3,850	\$3,850
B. GF	\$2,178	\$4,893	\$2,715	\$8,500	\$3,607	\$6,322
C. Reimbursements	\$3,604	\$889	-\$2,715	\$1,132	\$243	-\$2,472

Porterville Developmental Center

	Enacted Budget	Updated 2017-18	2017-18 Request	2018-19	2018-19 Over 2017-18	2018-19 Over Enacted Budget
I. OPERATIONS	\$606	\$606	\$0	\$606	\$0	\$0
II. PURCHASE OF SERVICES (POS)						
A. Start-Up	\$0	\$0	\$0	\$0	\$0	\$0
B. Assessment	\$0	\$0	\$0	\$0	\$0	\$0
C. Placement	\$2,352	\$2,352	\$0	\$4,334	\$1,982	\$1,982
D. Deflection	\$0	\$0	\$0	\$0	\$0	\$0
E. SUBTOTAL POS	\$2,352	\$2,352	\$0	\$4,334	\$1,982	\$1,982
III. TOTAL CPP	\$2,958	\$2,958	\$0	\$4,940	\$1,982	\$1,982
IV. FUND SOURCES						
A. TOTAL CPP	\$2,958	\$2,958	\$0	\$4,940	\$1,982	\$1,982
B. GF	\$1,702	\$2,500	\$798	\$4,357	\$1,857	\$2,655
C. Reimbursements	\$1,256	\$458	-\$798	\$583	\$125	-\$673

Purchase of Services Summary of Costs by POS Category 2017-18

CPP Activity	Community Care Facilities	Medical Facilities	Supported Living	Day Programs	Work Activity Program	Transpor- tation	Support Services	In-Home Respite	Out- of- Home Respite	Health Care	Misc.	Total
A. Start-Up	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$27,265	\$27,265
B. Assessment	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$1,500	\$1,500
C. Placement	\$30,863	\$52	\$2,782	\$1,163	\$4	\$379	\$3,372	\$301	\$185	\$2,636	\$1,331	\$43,068
D. Deflection a/	\$1,000	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$1,000
E. 2018-19 Governor's Budget 2017-18 TOTAL	\$31,863	\$52	\$2,782	\$1,163	\$4	\$379	\$3,372	\$301	\$185	\$2,636	\$30,096	\$72,833
F. Enacted Budget 2017-18 TOTAL	\$33,930	\$323	\$2,184	\$1,753	\$4	\$603	\$2,911	\$401	\$164	\$1,016	\$29,544	\$72,833
G. DIFFERENCE	-\$2,067	-\$271	\$598	-\$590	\$0	-\$224	\$461	-\$100	\$21	\$1,620	\$552	\$0

a/ Deflection is defined as Placement POS for first year of operational residential costs of facilities developed with CPP Start-Up to deflect admission to a more restrictive setting.

b/ Supported Living and Support Services expenses equal Total Support Services on page H2.

Purchase of Services Summary of Costs by POS Category 2018-19

CPP Activity	Community Care Facilities	Medical Facilities	Supported Living	Day Programs	Work Activity Program	Transpor- tation	Support Services	In-Home Respite	Out- of- Home Respite	Health Care	Misc.	Total
A. Start-Up	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$27,265	\$27,265
B. Assessment	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$1,500	\$1,500
C. Placement	\$32,860	\$55	\$2,962	\$1,238	\$5	\$404	\$3,591	\$321	\$197	\$2,806	\$1,417	\$45,856
D. Deflection a/	\$1,000	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$1,000
E. 2018-19 Governor's Budge 2018-19 TOTAL	t \$33,860	\$55	\$2,962	\$1,238	\$5	\$404	\$3,591	\$321	\$197	\$2,806	\$30,182	\$75,621
F. Enacted Budget 2017-18 TOTAL	\$33,930	\$323	\$2,184	\$1,753	\$4	\$603	\$2,911	\$401	\$164	\$1,016	\$29,544	\$72,833
G. DIFFERENCE	-\$70	-\$268	\$778	-\$515	\$1	-\$199	\$680	-\$80	\$33	\$1,790	\$638	\$2,788

a/ Deflection is defined as Placement POS for first year of operational residential costs of facilities developed with CPP Start-Up to deflect admission to a more restrictive setting.

b/ Supported Living and Support Services expenses equal Total Support Services on page H2.

Purchase of Services Cost and Service Utilization Assumptions for Placements 2017-18

Living	L	Living Arrangement		Day Work		Supported Employment Program		Transpor- Support	ort Home	Out- of-	Health			
Arrangement	CCF	Intermediate Care Facilities	Supported Living	Programs	Activity Program	Group	Individual	tation	Services	Home Respite	Home Respite	Care	Misc.	Total
Total CPP														
• Community Care Facilities (CCF) ^{1/}	\$30,863	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$56	\$30,919
Intermediate Care Facilities (ICF)	\$0	\$52	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$52
Supported Living	\$0	\$0	\$2,782	\$1,163	\$4	\$0	\$0	\$379	\$0	\$0	\$185	\$2,636	\$1,275	\$8,424
Other (Own Home, etc.)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$3,372	\$301	\$0	\$0	\$0	\$3,673
TOTAL	\$30,863	\$52	\$2,782	\$1,163	\$4	\$0	\$0	\$379	\$3,372	\$301	\$185	\$2,636	\$1,331	\$43,068

^{1/} CCF's include Residential Facilities, Specialized Residential Facilities, and Adult Residential Facilities for Persons with Special Health Care Needs

Purchase of Services Cost and Service Utilization Assumptions for Placements 2018-19

Living	Living Arrangement		Day Work		Supported Employment Program			Support		Out- of-	Health	Misc.	Total	
Arrangement	CCF	Intermediate Care Facilities	Supported Living	Programs	Program	Group	Individual	tation	Services	Respite	Home Respite	Care	WIISC.	Total
Total CPP														
 Community Care Facilities (CCF)^{1/} 	\$32,860	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$60	\$32,920
Intermediate Care Facilities (ICF)	\$0	\$55	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$55
Supported Living	\$0	\$0	\$2,962	\$1,238	\$5	\$0	\$0	\$404	\$0	\$0	\$197	\$2,806	\$1,357	\$8,969
• Other (Own Home, etc.)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$3,591	\$321	\$0	\$0	\$0	\$3,912
TOTAL	\$32,860	\$55	\$2,962	\$1,238	\$5	\$0	\$0	\$404	\$3,591	\$321	\$197	\$2,806	\$1,417	\$45,856

^{1/} CCF's include Residential Facilities, Specialized Residential Facilities, and Adult Residential Facilities for Persons with Special Health Care Needs

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General Fund

DESCRIPTION:

The General Fund (GF) is the main operating fund of the State. It accounts for transactions related to resources obtained and used for those services that do not need to be accounted for in another fund.

ASSUMPTIONS/METHODOLOGY:

The Department's appropriation for GF consists of two components: (1) GF Match and (2) GF Other. The detail of these two components are as follows:

•	GF Match:		<u>2017-18</u> \$2,301,341	<u>2018-19</u> \$2,446,616
	This portion of GF is required to use as a mat reimbursements received from the Departmer Services (DHCS). These reimbursements are funded by the federal government and passed (the federally-recognized single state agency The federal financial participation (FFP) costs by utilizing the Federal Medical Assistance Pr percentages. They are as follows:			
	FMAP % of GF Match			
	Home and Community-Based Services (HCBS) Waiver	50.00%	1,727,919	1,850,044
	HCBS Waiver Administration	50.00%	14,700	14,695
	Medicaid Administration	25.00%	5,377	5,377
	Targeted Case Management (TCM)	50.00%	204,122	209,940
	TCM Administration	50.00%	6,473	6,473
	Intermediate Care	50.00%		
	Facility/Developmentally Disabled (ICF-DD)		62,760	62,760
	Quality Assurance Fees	50.00%	942	942
	(Operations) Portion only*			
	1915 (i) State Plan Amendment	50.00%	2 <i>4</i> 9,381	266,897
	Money Follows the Person (MFP)*	25.00%	2,810	0
	Early Periodic Screening Diagnosis and Treatment	50.00%	26,857	29,488
•	GF Other:		\$1,484,974	\$1,659,270
	These costs consist of the remainder of total expenditures not included in the GF Match, re Program Development Fund, Developmental Services Account, Mental Health Services Funds.	eimbursements, Disabilities		

TOTAL EXPENDITURES

\$3,786,315

\$4,105,886

General Fund

FUNDING:

These amounts are reflected in the Operations and Purchase of Services methodology pages.

TOTAL	<u>2017-18</u> \$3,786,315	<u>2018-19</u> \$4,105,886	
GF	\$3,786,315	\$4,105,886	
GF Match	2,301,341	2,446,616	
GF Other	1,484,974	1,659,270	

^{*} For Quality Assurance Fees, the GF Match for Purchase of Services is in the DHCS Budget. For MFP, the GF Match is included in the HCBS Waiver (\$2,968 for Updated 2017-18 and \$0 for 2018-19)

Reimbursements Summary of Reimbursements and General Fund (GF) Match

•	ia General Funa (G	· I	
REIMBURSEMENTS a/	Enacted Budget 2017-18	Updated 2017-18	Updated 2018-19
A. Home and Community-Based Services (HCBS) Waiver	\$3,460,959	\$3,435,313	\$3,700,088
1. Reimbursement (from DHCS)	1,721,780	1,707,394	1,850,044
2. DDS GF Match	1,739,179	1,727,919	1,850,044
(Purchase of Services)	1,1 00,110	1,121,010	1,000,011
B. HCBS Waiver Administration	\$28,210	\$29,400	\$29,391
Reimbursement (from DHCS) = 50%	14,105	14,700	14,696
2. DDS GF Match = 50%	14,105	14,700	14,695
(Operations)	14,100	14,700	14,000
C. Medicaid Administration	\$20,945	\$21,509	\$21,509
Reimbursement (from DHCS) = 75%	15,952	16,132	16,132
2. DDS GF Match = 25%	4,993	5,377	5,377
(Operations)			
D. Targeted Case Management (TCM)	\$391,869	\$408,244	\$419,879
1. Reimbursement (from DHCS) = 50%	195,934	204,122	209,939
2. DDS GF Match = CY 50% and BY 50%	195,935	204,122	209,940
(Operations)	111,000	,	
E. Targeted Case Management Administration	\$11,786	\$12,946	\$12,946
1. Reimbursement (from DHCS) = 50%	5,893	6,473	6,473
2. DDS GF Match = 50%	5,893	6,473	6,473
(Operations)	7,000	-, -	-, -
F. Title XX Block Grant	\$213,421	\$213,421	\$213,421
1a. Social Services (from DSS) = 100%	136,264	136,264	136,264
1b. Temporary Assistance for Needy Families (TANF)		,	,
(from DSS) = 100%	77,157	77,157	77,157
2. DDS GF Match	0	0	0
(Purchase of Services)			
G. Intermediate Care Facility-Developmentally Disabled (ICF-DD)	\$121,928	\$125,520	\$125,520
1. Reimbursement (from DHCS) = 50% 2. DDS GF Match = 50%	60,964 60,964	62,760 62,760	62,760 62,760
(Purchase of Services)	00,904	02,700	02,700
H. Quality Assurance Admin Fees (Transfer from DHCS) b/	\$11,703	\$12,048	\$12,048
1a. Operations:	1,829	1,883	1,883
Reimbursements from DHCS = 50%	914	941	941
DDS GF Match = 50%	915	942	942
1b. Purchase of Services:	9,874	10,165	10,165
Reimbursements from DHCS = 100%	9,874	10,165	10,165
DDS GF Match = 0% I. 1915(i) State Plan Amendment	() (*479.0FF	0	() \$522.704
I. 1915(i) State Plan Amendment 1. Reimbursement (from DHCS)	\$478,955 238,294	\$496,991	\$533,794 266,897
2. DDS GF Match	240,661	247,610 249,381	266,897
(Purchase of Services)	240,001	270,301	200,037
J. Money Follows the Person Grant	\$14,206	\$14,206	\$0
1a. Operations:	11,238	11,238	0
Reimbursements from DHCS = 75%	8,428	8,428	0
DDS GF Match = 25%	2,810	2,810	0
1b. Purchase of Services:	2,968	2,968	0
Reimbursements from DHCS	2,968	2,968	0
K. Impacts from Other Departments BHT-FFS	\$7,430	\$10,822	\$15,151
Reimbursement (from DHCS)	7,430	10,822	15,151
2. DDS GF Match	0	0	0
(Purchase of Services)	A=====	*	A=A A==
L. Early Periodic Screening Diagnosis and Treatment 1. Reimbursement (from DHCS) = 50%	\$52,735 26,368	\$53,713 26,857	\$58,976 29,488
2. DDS GF Match = 50%	26,367	26,856	29,488 29,488
(Purchase of Services)	20,307	20,000	
M. TOTAL	\$4,814,147	\$4,834,133	\$5,142,723
1. Reimbursements	\$2,522,325	\$2,532,793	\$2,696,107
2. Total GF Match	\$2,291,822	\$2,301,340	\$2,446,616

a/ Reimbursements are funds received via other state agencies.

Values in thousands (000's)

Home and Community-Based Waiver

DESCRIPTION:

The Home and Community-Based Services (HCBS) Waiver program enables the Department to provide a broad array of services to eligible individuals in their communities who would otherwise require a level of care provided in an intermediate care facility for the developmentally disabled.

ASSUMPTIONS:

Data Source: Medicaid Waiver Total Billed Dollar Amounts and Client Counts report, for the period of July 2016 through June 2017.

METHODOLOGY:	<u>2017-18</u>	<u>2018-19</u>
Base : 2016-17	\$3,262,562	\$3,415,013
Total estimated expenditures based on billing data for the period July 2016 - July 2017.	3,262,562	
 Total estimated prior-year HCBS Waiver expenditures 		3,435,313
 Less Competitive, Integrated Employment Incentives 		-15,840
 Less Compliance with HCBS Regulations. 		-7,440
 Plus Supplemental Security Income/State Supplementary Payment (SSI/SSP) regional center savings in Community Care Facility. 		2,980
 Annual Growth, New regional center consumers: 2017-18 Annual Growth Add annual growth costs in 2017-18 for 3,486 consumers who will be new to the regional center system and added to the HCBS Waiver with \$1,250 monthly cost per consumer, phased-in. 	58,501 27,595	53,769
 2017-18 Annual Growth Continuation costs for regional center consumers added in 2016-17. 	30,906	
 2018-19 Annual Growth Add annual costs in 2018-19 for 3,581 consumers who will be new to the regional center system and added to the HCBS Waiver with \$1,250 monthly cost per consumer, phased-in. 		29,074
 2018-19 Annual Growth, Continuation costs for regional center consumers added in 2017-18. 		24,695

Home and Community-Based Waiver

METHODOLOGY (continued):	<u>2017-18</u>	<u>2018-19</u>		
Community Placement Program (CPP):				
• 2017-18				
Add CPP & HCBS Waiver costs in 2016-17 for 283 consumers in the regional center system with \$15,500 monthly cost per consumer, phased-in.	20,448			
• 2018-19				
Add CPP & HCBS Waiver costs in 2017-18 for 199 consumers in the regional center system with \$15,500 monthly cost per consumer, phased-in.		14,132		
Placement Continuation:				
• 2017-18				
The annual estimated Placement Continuation costs for 202 HCBS Waiver-eligible consumers in each living arrangement with \$15,500 monthly cost per consumer, phased-in.	18,972			
• 2018-19				
The annual estimated Placement Continuation costs for 283 HCBS Waiver-eligible consumers in each living arrangement with \$15,500 monthly cost per consumer, phased-in.		24,320		
 SSI/SSP Increase/Regional center savings in Community Care Facilities. 	-2,980	-3,806		
Developmental center closure.	7,872	6,190		
 ABX2 1 Competitive, Integrated employment Incentives 	15,840	15,840		
 Compliance with HCBS Regulations. 	7,440	7,440		
Uniform Holiday Schedule	0	-4,024		

Home and Community-Based Waiver

METHODOLOGY (continued):	<u>2017-18</u>	<u>2018-19</u>
 SB 3 - Minimum Wage Increase, January 1, 2018 	46,658	85,384
 SB 3 - Minimum Wage Increase, January 1, 2019 	0	85,830
EXPENDITURES:	<u>2017-18</u>	<u>2018-19</u>
Total	3,435,313	3,700,088
GF Match	1,727,919	1,850,044
FFP	1,707,394	1,850,044

FUNDING:

The expenditures of HCBS Waiver reimbursements are in all of the Purchase of Services budget categories, except Medical Facilities.

Home and Community-Based Waiver Estimated Distribution in Purchase of Services

EXPENDITURES: % of Actual

2016-17

Expenditures by

		Budget Category	<u>2017-18</u>	<u>2018-19</u>
Total Estimated HCBS Waiver-Billabl General Fund (GF) Match Federal financial participation (FFP)		Expenditures	\$3,435,313 1,727,919 1,707,394	\$3,700,088 1,850,044 1,850,044
Purchase of Se	rvices: Budget Catego	ries		
Community Care	Facilities GF Match FFP	33.33%	1,119,024 559,512 559,512	1,167,659 583,829 583,830
Day Programs	GF Match FFP	17.95%	602,628 301,314 301,314	628,821 314,411 314,410
Work Activity Pro	ogram GF Match FFP	0.94%	31,485 15,743 15,742	32,854 16,427 16,427
Supported Emplo	oyment Placement (SEF GF Match FFP	?) - Group 1.02%	34,318 17,158 17,160	35,810 17,905 17,905
SEP - Individual	GF Match FFP	0.18%	6,039 3, <i>0</i> 19 3, <i>0</i> 20	6,301 3,150 3,151
Transportation	GF Match FFP	6.51%	218,456 109,228 109,228	227,950 113,975 113,975
Support Services	GF Match FFP	27.43%	921,096 462,591 458,505	961,129 480,565 480,564
In-Home Respite	e GF Match FFP	8.25%	276,828 138,414 138,414	288,859 144,429 144,430
Out-of-Home Re	spite GF Match FFP	0.91%	30,516 15,259 15,257	31,841 15,921 15,920

Home and Community-Based Waiver Estimated Distribution in Purchase of Services

EXPENDITURES (continued): % of Actual

2016-17

		Expenditures by Budget Category	<u>2017-18</u>	<u>2018-19</u>
Health Care		-	25,309	26,410
	GF Match	0.75%	12,654	13,205
	FFP		12,655	13,205
Miscellaneous			91,804	95,794
	GF Match	2.73%	54,122	47,897
	FFP		37,682	47,897
Polices				
ABX2 1 - Competitive, Integrated Employment Incentives			15,840	15,840
	GF Match		7,920	7,920
	FFP		7,920	7,920
DC Closure - CPP			7,872	6,190
	GF Match		3,936	3,095
	FFP		3,936	3,095
Compliance with HCBS Regulations		3	7,440	7,440
•	GF Match		3,720	3,720
	FFP		3,720	3,720
Uniform Holiday			0	-4,024
	GF Match		0	-2,012
	FFP		0	-2,012
SB 3 - Minimum	Wage Increase, Ja	nuary 1, 2018	46,658	85,384
	GF Match		23,329	42,692
	FFP		23,329	<i>4</i> 2,692
SB 3 - Minimum	Wage Increase, Ja	nuary 1, 2019	0	85,830
	GF Match		0	<i>4</i> 2,915
	FFP		0	<i>4</i> 2,915

Home and Community-Based Services Waiver Administration DESCRIPTION:

The Home and Community-Based Services (HCBS) Waiver enables the Department to provide a broad array of home and community-based services to eligible individuals who, without these services, would require the level of care provided in an intermediate care facility for the developmentally disabled. These HCBS Waiver Administration funds are for the proper and efficient administration of the HCBS Waiver.

ASSUMPTIONS/METHODOLOGY:

Training for Direct Support Professional Staff:

Welfare and Institutions Code Sections 4695.2, Statutes of 1998, mandates all Direct Support Professional's (DSP) working in licensed Community Care Facilities (CCFs) to either pass a competency test or satisfactory complete each of two consecutive, 35-hour training segments within two years of their hire. The testing and training program is conducted through an Interagency Agreement (IA) with the California Department of Education (CDE). This estimate of Operations costs covers the costs of challenge tests and training through the IA with CDE.

Training for DSP Staff

2017-18 2018-19 \$2,658

- Total cost for DSP Training is \$3,037.
- 88% of the consumers residing in CCFs are HCBS Waiver eligible; therefore, it is assumed that 88% of the cost are eligible for federal financial participation (FFP).

These costs are reflected under Operations, Projects.

Collection of FFP for Contracted Services:

Regional center staff renegotiate contracts with vendors, liaison with Department experts on changes required to expand and enhance existing billing options, and train vendors and regional center personnel involved in the billing processes. These billing processes include entering necessary attendance and other required billing data from paper invoices submitted by vendors, and reviewing, adjusting, and/or correcting attendance data after it is uploaded to the Uniform Fiscal System. These resources allow the State to collect HCBS Waiver Administration reimbursements.

Staffing for Collection of FFP for Contracted Services

757

757

- Total cost of Staffing for Collection of FFP for Contracted Services is \$1,893.
- 40% of the total community population is FFP eligible, therefore it is assumed that 40% of the costs are eligible for FFP.

These costs are reflected under Operations, Staffing.

Home and Community-Based Services Waiver Administration

ASSUMPTIONS/METHODOLOGY (continued):

Collection of FFP for Contracted Services:

The Centers for Medicare & Medicaid Services (CMS) approved the rate-setting methodology for the Targeted Case Management (TCM) program which distributes administrative costs previously in TCM to other programs.

FFP Enhancement (related to 2003-04 Enhancing FFP	<u>2017-18</u>	<u>2018-19</u>
Budget Change Proposal)	11,728	11,728
 Total regional center administrative cost for 2017-18 		

- and 2018-19 is \$11.728. • 100% of costs are eligible for FFP.
- These costs are reflected under Operations, Core Staffing.

2007-08 Legislative Augmentation: Resources for **Health Care Community Specialist**

1.518 1,518

1,422

- Total cost for Resources for Health Care Community Specialist is \$1,549.
- 98% of Agnews and Lanterman consumers are HCBS Waiver eligible, therefore it is assumed that 98% of these cost are eligible for FFP. These costs are reflected under Operations, Agnews Ongoing Workload and Lanterman Development Closure.

Compliance with HCBS Settings Regulations:

In January 2014, CMS published final regulations defining what constitutes a home and community-based setting for Medicaid reimbursement purposes under Section 1915(c) HCBS waivers, and Section 1915(i) HCBS State Plan programs. The effective date of the regulations was March 17, 2014, and states are allowed up to a five year transition period to make any modifications necessary to comply with the regulations. These expenditures fund additional staffing needed to perform the initial and ongoing efforts and activities necessary to ensure compliance with CMS final regulations. Subsequently, CMS notified states on May 9, 2017, that compliance is required by March 17, 2022.

Compliance with HCBS Settings Regulations:

1,422 Total cost of Compliance with HCBS Settings Regulations is \$1,422 in 2017-18 and 2018-19.

• 100% of the costs are eligible for FFP. These costs are reflected under Policies, Operations.

Home and Community-Based Services Waiver Administration

ASSUMPTIONS/METHODOLOGY (continued):

	<u>2017-18</u>	<u>2018-19</u>
Federal Medicaid Requirements for Regional Center HCBS Services	984	984
 Total cost: \$984 100% of cost are eligible for FFP. These costs are reflected in the Federal Medicaid Requirements for regional center HCBS Services estimate under Operations, Federal Compliance. 		
 Office of Administrative Hearings: Total cost for 2017-18 and 2018-19 is \$3,350 46% of cost are eligible for FFP. These costs are reflected in the Office of Administrative Hearings estimate under Operations, Projects. 	1,541	1,541
 Clients Rights Advocacy Total costs for 2017-18 is \$6,791 and \$7,111 for 2018-19. 46% of cost are eligible for FFP. These costs are reflected in the Clients Rights Advocacy estimate under Operations, Projects. 	3,124	3,271
 Quality Assessment Contract: Total cost for 2017-18 is \$4,044 and \$3,705 for 2018-19. 46% of cost are eligible for FFP These costs are reflected in the Quality Assessment Contract estimate under Operations, Projects. 	1,860	1,704
 Special Incident Reporting/Risk Assessment: Total cost for 2017-18 and 2018-19 is \$938. 45% of cost are eligible for FFP. These costs are reflected in the Special Incident Reporting/Risk Assessment estimate under Operations, Projects. 	422	422
 Regional Center Salary Increase: Total cost for 2017-18 and 2018-19 is \$722. 100% of cost are eligible for FFP. These costs are reflected under Policies, Operations. 	722	722

Home and Community-Based Services Waiver Administration

ASSUMPTIONS/METHODOLOGY (continued):

 Resources to Implement Assembly Bill X2 1
 2017-18
 2018-19

 2,664
 2,664

• Total cost for 2017-18 and 2018-19 is \$2,664.

100% of cost are eligible for FFP.
 These costs are reflected under Policies, Operations

• TOTAL EXPENDITURES \$29,400 \$29,391

FUNDING:

Funding for HCBS Waiver Administration reimbursement is 50% FFP and 50% General Fund (GF).

EXPENDITURES:		<u>2017-18</u>	<u> 2018-19</u>
	Total	\$29,400	\$29,391
	GF Match	14,700	14,696
	FFP	14,700	14,696

Medicaid Administration

DESCRIPTION:

Clinical Support Teams and Senate Bill (SB) 1038 Health Reviews (Regional Center Operations)

Clinical Support Teams assist the regional centers to adequately monitor the health care of consumers with severe behavior and/or medical problems, by providing health-related consultation to consumers, their families, providers, and other community health professionals, completing mortality reviews following consumer deaths, and assuring health care access and advocacy for consumers.

In addition, clinical support teams complete yearly reviews of medications, health care plans, and behavior plans for all consumers in community care facilities and in supported and independent living arrangements. Clinical teams also review circumstances leading to all deaths of these consumers.

Pursuant to SB 1038 (Chapter 1043, Statue of 1998), regional center physicians and nurses (with clerical support) provide medical reviews for the remainder of the community consumers who are not receiving medical reviews from the clinical support teams.

These activities are eligible for federal Medicaid Administration (MA) reimbursement.

<u>Compliance with Home and Community-Based Services (HCBS) Waiver Requirements (Regional Center Operations).</u>

Regional center physicians and psychiatrists perform activities, including clinical consultation, monitoring, and review of consumers' medications, to maintain regional center compliance with the HCBS Waiver.

Agnews Ongoing Workload (AOW) and Lanterman Development Center Closure (Regional Center Operations).

Regional center physicians and psychiatrists perform activities, including clinical consultation, monitoring, and review of consumers' medications, to maintain regional center compliance with the HCBS Waiver.

Consistent with the passage of Assembly Bill 1378 (Chapter 538, Statue of 2005) AOW employees provide clinical support services to monitor the health and well-being of Agnews residents who transitioned into the community consistent with the Department's Interagency Agreement for MA with the Department of Health Care Services.

Nurse consultants monitor consumer health care plans and health care for Agnews and Lanterman residents living in SB 962 homes. Eleven dental coordinators promote and coordinate dental resources for Agnews and Lanterman residents that have moved into the community.

State employees in the community may participate in all MA activities, including clinical support teams, SB 1038 health reviews, and compliance with HCBS Waiver requirements. (AOW only)

Medicaid Administration

ASSUMPTIONS/METHODOLOGY:

	2017-18	2018-19
 Costs for Clinical Support Teams and SB 1038 Health Reviews are based on 2015-16 data collected from the regional centers. 	\$ 15,138	\$ 15,138
 The Federal Financial Participation (FFP) portion of total MA-eligible costs is 77%. 	11,354	11,354
 Staffing for Compliance with HCBS Waiver Requirements Total personal services and operating costs 	2,600	2,600
related to MA.	2,000	2,000
100% of these costs are eligible for MA because related staff will be working only with HCBS Waiver consumers.		
 The FFP portion of total MA-eligible costs is 75%. 	1,950	1,950
 Agnews Ongoing Workload and Lanterman Developmental Closure 		
 Nurse Consultants 		
 Total personal services and operating costs related to MA. 	523	523
Consistent with the Community Placement Plan (CPP) assumptions, 98% of these costs are eligible for MA.		
 The FFP portion of total MA-eligible costs is 75%. 	392	392
State Employees in the Community		
 Total personal services and operating costs related to MA. 	871	871
Consistent with CPP assumptions, 98% of these costs are eligible for MA.		
 The FFP portion of total MA-eligible costs is 75%. 	653	653
Dental Coordinators		
 Total personal services and operating costs related to MA. 	867	867
Consistent with CPP assumptions, 98% of these costs are eligible for MA.		
 The FFP portion of total MA-Eligible costs is 75%. 	650	650

Medicaid Administration

ASSUMPTIONS/METHODOLOGY (continued):

 Regional Center Salary Increase 	2017-18	2018-19
 Increased funding for regional center staff and Operations. 	1,510	1,510
 It is assumed that 100% of these costs are eligible for MA. 		
 The FFP portion of total MA-eligible costs is 50%. 	1,133	1,133

FUNDING:

The MA reimbursement is 75% FFP and 25% General Fund (GF). These MA funds are reflected in Operations, Staffing, Compliance with HCBS Waiver Requirements, Agnews Ongoing Workload, and Regional Center Salary Increase estimates.

EXPENDITURES:		2017-18	2018-19
	Total	\$21,509	\$21,509
	FFP	16,132	16,132
	GF Match	5.377	5.377

Targeted Case Management

DESCRIPTION:

The Targeted Case Management (TCM) program provides matching federal Medicaid funds for case management services provided by a regional center for specific client groups. There are approximately 208,000 Medi-Cal eligible persons in the regional center system as of August 3, 2017. Federal legislation enacted in 1986 defined these case management services as services which "...will assist individuals...in gaining access to needed medical, social, educational, and other services." This program provides federal financial participation (FFP) for most of regional center case managers time spent on Medi-Cal eligible activities.

ASSUMPTIONS:

Source data is from the TCM Regional Center Billed Units report dated October 4, 2017 for the period of June 2016- June 2017.

	2017-18	<u>2018-19</u>	
METHODOLOGY:			
 Base: TCM expenditures are based on actual TCM billable units for a 12-month period (June 2016 - June 2017 [excludes May 2017]) multiplied by the regional center TCM rates effective July 1, 2017. 	\$372,486	\$384,121	
 AB 10 Minimum Wage Increase, January 1, 2016 	1,148	1,148	
 Improve Service Coordinator Caseload Ratios 	8,000	8,000	
 Regional Center Salary Increases 	26,014	26,014	
 Psychological Evaluations for BHT- Fee for service 	596	596	
Total Expenditures:	\$ 408,244	\$ 419,879	

FUNDING:

Funding for TCM reimbursement is 50% FFP and 50% General Fund. TCM funds are reflected in the Core Staffing and Federal Compliance estimates, in the Operations section.

	<u>2017-18</u>		<u>2018-19</u>	
Total	\$	408,244	\$	419,879
FFP		204,122		209,939
GF Match		204,122		209.940

Targeted Case Management Administration

DESCRIPTION:

The Targeted Case Management (TCM) program provides matching federal Medicaid funds for case management services for specific client groups. There are approximately 208,000 Medi-Cal eligible persons in the regional center system as of August 3, 2017. Federal legislation enacted in 1986 defined case management services as those which "...will assist individuals...in gaining access to needed medical, social, educational, and other services." This means that the cost for most of the regional center case manager's time spent on Medi-Cal eligible developmentally disabled persons and the cost of providing administrative support to the case management program are both eligible for federal financial participation (FFP). These TCM Administration funds are for the proper and efficient administration of the TCM program. Department headquarters staff work a certain percentage of their workload administering the TCM program, which is reimbursed to allocate salaries, wages, and benefits.

KEY DATA/ASSUMPTIONS:

Source of Data: The Departments Fiscal Systems - California State Accounting and Reporting System.

	<u>2017-18</u>	<u> 2018-19</u>
METHODOLOGY:		
Utilizing a time survey, the Department gathers records of time spent by the Departments headquarter personnel providing administrative case management assistance to the regional centers. These surveys are used to allocate headquarters salaries, wages, and benefits, as well as a portion of the Department's statewide cost allocation, to administrative case management support.	\$12,946	\$12,946

FUNDING:

Funding for the TCM Administration reimbursement is 50% FFP and 50% General Fund (GF). TCM Administration funds are reflected in the Core Staffing estimate under Operations.

EXPENDITURES:

TOTAL	\$12,946	\$12,946
FFP	6,473	6,473
GF Match	6,473	6,473

Title XX Block Grant

DESCRIPTION:

The State has received federal Title XX Block Grant funds for social services programs since 1981, and the funds are administered by the Department of Social Services (DSS). Although each state has wide discretion in determining the range of services to be provided and how the funds are to be distributed, federal statute establishes five service goals as follows:

Federal statue establishes five service goals:

- Achieving or maintaining economic self-support to prevent, reduce, or eliminate dependency;
- Achieving or maintaining self-sufficiency, including the reduction or prevention of dependency;
- Preventing or remedying neglect, abuse, or exploitation of children and adults unable to protect their own interests, or preserving, rehabilitating, or reuniting families;
- Preventing or reducing inappropriate institutional care by providing for community-based care, home-based care, or other forms of less intensive care; and
- Securing referral or admission for institutional care when other forms of care are not appropriate.

Temporary Assistance for Needy Families (TANF): Title XX Block Grants funds are available for regional center expenditures for individuals under age 18 whose family income is less than 200% of the official income poverty line (as defined by the federal Office of Management and Budget) applicable to a family of the size involved.

KEY DATA/ASSUMPTIONS:

The Department's portion of the Title XX Block Grant is determined by DSS. There is no state matching requirements for these funds.

	2017-18	2018-19
Total	\$213,421	\$213,421
Social Services	136,264	136,264
TANF	77,157	77,157

Title XX Block Grant

FUNDING:

The Title XX Block Grant amount is determined by the DSS.

EXPENDITURES:

EXPENDITORES.	2017-18	2018-19
Total Title XX Block Grant -	\$213,421	\$213,421
Social Services		
Estimated Distribution in	\$136,264	\$136,264
Regional Center Purchases of Services		
Day Programs	47,750	47,750
Transportation	8,260	8,260
Support Services	57,296	57,296
In-Home Respite	19, 42 1	19, 4 21
Out-of-Home Respite	606	606
Miscellaneous	2,931	2,931
TANF		
Estimated Distribution in	\$77,157	\$77,157
Regional Center Purchases of Services		
Community Care Facilities	6,651	6,651
Day Programs	84	84
Transportation	685	685
Support Services	14,050	14,050
In-Home Respite	19,939	19,939
Out-of-Home Respite	3,218	3,218
Healthcare	1,032	1,032
Miscellaneous	31,498	<i>31,498</i>

Intermediate Care Facility- Developmentally Disabled State Plan Amendment

DESCRIPTION:

In 2007, the Department, in conjunction with the Department of Health Care Services, submitted a State Plan Amendment (SPA) seeking federal financial participation (FFP) for the Day Program and Transportation Services. The services provided are for consumers residing in Intermediate Care Facility - Developmentally Disabled (ICF-DD) settings. The Centers for Medicare & Medicaid Services approved the SPA on April 14, 2011.

IMPLEMENTATION DATE:

The SPA was approved April 14, 2011, retroactive to July 1, 2007.

ASSUMPTIONS/METHODOLOGY:

The total expenditures for adult day treatment and non-medical transportation services received by regional center consumers residing in an ICF-DD are based on actual expenditures from 2016-17.

FUNDING:

Funding for ICF-DD is 50% FFP and 50% General Fund (GF) for Day Treatment and Transportation Services for consumers residing in an ICF-DD. It is assumed that 62% of this funding is for Day Programs, 25% is for Transportation services, 11% is for Support Services, 1% is for Habilitation Services, and the remaining 1% is for Miscellaneous. Please refer to the corresponding Purchase of Service Methodology for additional information.

EXPENDITURES:		2017-18	2018-19
	TOTAL	\$125,520	\$125,520
	FFP	62,760	62,760
	GF Match	62,760	62,760

Quality Assurance Fees Regional Center Costs and Intermediate Care Facility - Developmentally Disabled Vendor Costs

DESCRIPTION:

To realize the federal financial participation (FFP) associated with the Intermediate Care Facilities - Developmentally Disabled (ICF-DD) State Plan Amendment, there are administrative costs for regional center billing on behalf of the ICF-DD, administrative costs for the ICF-DD, and Quality Assurance Fees (QAF) the ICF-DD must remit to the Department of Health Care Services (DHCS) for these supplemental payments.

ASSUMPTIONS/METHODOLOGY:

- Source of Data: State Claims Purchase of Services (POS) Claims data file, actuals based on 2016-17.
- ICF-DD Administrative Costs and QAF are set by DHCS.
- Regional center administration costs are 1.5% of Day Programs and Transportation expenditures.
- ICF-DD Administration costs are 1.5% of the cost of Day Program and Transportation expenditures for both the regional center and ICF-DD.
- POS costs for Day Program and Transportation total \$125.5 million. QAF is \$10.1 million.
- 2017-18 and 2018-19: Total billing costs: \$1.8 million for regional center administration,
 \$1.9 million for ICF-DD administration, and \$8.2 million QAF.

EXPENDITURES:	2017-18	2018-19
Total	\$12,048	\$12,048
Operations	1,883	1,883
General Fund (GF)	942	942
GF Match	942	942
Reimbursements		
Federal Financial Participation (FFP) QAF	941	941
POS	10,165	10,165
QAF Admin Fees (FFP)	5,083	5,083
Transfer from DHCS	5,082	5,082

Quality Assurance Fees Regional Center Costs and Intermediate Care Facility - Developmentally Disabled Vendor Costs

FUNDING:

Funding for regional center Administration fees is 50% FFP and 50% GF and are reflected in ICF-DD Administration Fee in Operations. QAF is 100% FFP with the GF Match in DHCS' Budget, and are reflected in Quality Assurance Fees - POS.

EXPENDITURES:		2017-18	2018-19
	TOTAL	\$12,048	\$12,048
	FFP	11,106	11,106
	GF Match	942	942

1915 (i) State Plan Amendment

DESCRIPTION:

Section 6086 of the Deficit Reduction Act of 2005, (Public Law 109-171) established an optional Medicaid benefit giving states a new method for covering Home and Community-Based services for Medicaid beneficiaries beginning in January 2007. To date only a few other states have exercised this option for mental health benefits delivery. The Department in a joint effort with the Department of Health Care Services (DHCS), submitted a 1915 (i) State Plan Amendment (SPA) to Centers for Medicare & Medicaid Services (CMS) to be effective October 2009 to cover habilitation, respite, and other services allowable under a 1915 (i) SPA. Subsequent changes to federal law have allowed the Department to seek further expansion of the services covered under the 1915(i) SPA.

ASSUMPTIONS:

Expenditure Data Source: Purchase of Services (POS) Claims Data file, for the period of July 2016 through June 2017.

METHODOLOGY:	<u>2017-18</u>	<u>2018-19</u>
 Base: Actual 2016-17 expenditures were used to develop the 2017-18 base. For 2018-19, the prior year estimate for base and growth, with the following adjustments, was used as the base. 	\$496,991	\$533,794
 Updated Costs without Community Placement Plan ABX2 1 - Competitive, Integrated Employment Incentives Alternative Residential Model (ARM) 4-Bed Rate Model Compliance with Home and Community-Based Services (HCBS) Regulations Purchase of Services SB3 Minimum Wage, 01/1/2018 Purchase of Services SB3 Minimum Wage, 01/1/2019 	481,156 2,160 0 560 13,115 0	481,156 2,160 -1,372 560 25,878 25,412
Total Expenditures:	\$496,991	\$533,794

FUNDING:

The 1915(i) SPA funds a broad array of POS costs for eligible individuals in all of the POS budget categories except for Medical Facilities. 1915 (i) SPA expenditures are funded by federal financial participation (FFP) determined by the Federal Medical Assistance Percentage of 50% and 50% General Fund (GF).

1915 (i) State Plan Amendment

EXPENDITURES:		2017-18	2018-19
	Total GF Match	\$496,991	\$533,794
	FFP	249,381 247,610	266,897 266,897
% of Expenditures by l Category 2017-18 & 2	Budget	211,010	200,007
Community Care Facilities	20.55%	98,882	98,882
GF Match		49,441	49,441
FFP		49,441	49,441
Day Programs	24.79%	119,298	119,300
<i>GF Match</i>		<i>59,64</i> 9	<i>59,650</i>
<i>FFP</i>		<i>59,64</i> 9	<i>59,650</i>
Habilitation	4.83%	23,260	23,260
<i>GF Match</i>		11,630	11,630
<i>FFP</i>		11,630	11,630
Transportation	4.57%	21,969	21,969
<i>GF Match</i>		10,984	10,984
<i>FFP</i>		10,985	10,985
Support Services	27.58%	132,697	132,696
GF Match		<i>66,627</i>	<i>66,348</i>
FFP		<i>66,070</i>	<i>66,34</i> 8
In-Home Respite	8.54%	41,112	41,112
<i>GF Match</i>		20,556	20,557
<i>FFP</i>		20,556	20,555
Out-of-Home Respite	0.72%	3,483	3,483
GF Match		1,741	1,741
FFP		1,742	1,742
Health Care	1.89%	9,104	9,102
GF Match		<i>4,552</i>	<i>4,551</i>
FFP		<i>4,55</i> 2	<i>4,551</i>
Miscellaneous	6.52%	31,352	31,352
GF Match		16,798	<i>15,676</i>
FFP		14,554	<i>15,676</i>

1915 (i) State Plan Amendment

EXPENDITURES (Continued):

Uniform Holiday	0	-1,372
GF Match	0	-686
FFP	0	-686
Compliance with HCBS Regulations	560	560
GF Match	280	280
FFP	280	280
ABX2 1 - Competitive, Integrated Employment		
Incentives	2,160	2,160
GF Match	1,080	1,080
FFP	1,080	1,080
SB 3 Min Wage increase, 01/01/18	13,114	25,878
GF Match	6,043	12,939
FFP	7,071	12,939
SB 3 Min Wage increase, 01/01/19	0	25,412
GF Match	0	12,706
FFP	0	12,706

Money Follows the Person Grant

DESCRIPTION:

The Department of Health Care Service (DHCS) administers California's Money Follows the Person (MFP) Grant. The federal MFP Grant (also known as California Community Transitions) provides federal funding for eligible services needed to assist consumers in transitioning to the community from institutions. The available MFP Grant funds will be fully exhausted in 2017-18 as this Grant is set to expire. The last MFP transition of participants is to occur no later than December 31, 2017, with services provided to these participants to be completed by December 31, 2018.

OPERATIONS ASSUMPTIONS:

		<u>2017-18</u>	<u>2018-19</u>
The MFP Grant funds regional center transition coordination activities for	Total	\$11,238	\$0
Community Placement Plan, Resources Development, see Community Placement Plan methodology page for details. These amounts are based on an amount per transition fee multiplied by the number of transitions.	Funding: FFP GF Match	8,428 2,810	0 0

FUNDING:

The MFP Grant reimbursement is 75% federal financial participation (FFP) with 25% General Fund (GF) Match for specified Centers for Medicare & Medicaid Services approved transition coordination activities.

OPERATION EXPENDITURES:		<u>2017-18</u>	<u>2018-19</u>
	Total	\$11,238	<i>\$0</i>
	FFP	8, 4 28	0
	GF Match	2,810	0
PURCHASE OF SERVICES ASSUMPTIO	NS:		
		<u>2017-18</u>	<u>2018-19</u>
The MFP Grant funds regional center transition coordination activities for Community Placement Pl	an,	\$2,968	\$0

coordination activities for Community Placement Plan,
Purchase of Services, See Community Placement Plan
methodology page for details. These amounts are
calculated based on the Regular Community Placement
Plan federally eligible amounts.

Money Follows the Person Grant

FUNDING:

The MFP Grant reimbursement for Purchase of Services is 25% FFP of the total cost and there is no GF Match.

TOTAL OPERATIONS and PURCHASE OF SERVICE EXPENDITURES:		<u>2017-18</u>	<u>2018-19</u>
	Total	\$14,206	\$0
	FFP	11,396	0
	GF	2,810	0

Early Periodic Screening Diagnosis and Treatment

DESCRIPTION:

Early Periodic Screening, Diagnosis, and Treatment (EPSDT) is a Medicaid (Medi-Cal) benefit for individuals under the age of 21 who have full-scope Medi-Cal eligibility. In addition to the regular Medi-Cal benefits, a beneficiary may receive EPSDT Supplemental Services. The Department submitted a State Plan Amendment (SPA 11-040) to the Centers for Medicare & Medicaid Services that will cover some regional center funded services for children under age 3 that are not eligible for federal reimbursement under other Medicaid funded programs. The SPA 11-040 was approved in October 2015 and is retroactive to October 2011.

ASSUMPTIONS:

The Estimate is based on actual billed expenditures for 2016-17. EPSDT funding is only in the Day Program budget category.

FUNDING:

Funding for EPSDT services is 50% federal financial participation (FFP) and 50% General Fund (GF).

EXPENDITURES:

	2016-17	2017-18
Total	\$53,713	\$58,976
FFP	26,857	29,488
GF Match	26,856	29,488

Department of Health Care Services-Behavioral Health Treatment Fee-for-Service

DESCRIPTION:

Senate Bill 870 (Chapter 40, Statutes of 2014) added Welfare and Institutions Code Section 14132.56 to direct the Department of Health Care Services (DHCS) to implement Behavioral Health Treatment (BHT) services, to the extent it is required by the federal government, to be covered by Medi-Cal for individuals up to the age of 21. Behavioral Health Treatment (BHT) services are effective retroactively to July 1, 2014.

DHCS obtained approval from the Centers for Medicare & Medicaid Services (CMS) to include BHT services as a Medi-Cal benefit for children with a diagnosis of Autism Spectrum Disorder (ASD). Individuals who were receiving BHT services through the regional centers became eligible to receive these services under the proposed Medi-Cal benefit. Those receiving BHT services through the Department before September 15, 2014, transitioned to DHCS between February and October 2016.

Children without an ASD diagnosis did not transition, and it was expected their BHT services would remain eligible for federal financial participation. However, CMS determined Medi-Cal must cover BHT services for all children whose services have been determined to be medically necessary, regardless of their ASD diagnosis. As a result, effective March 1, 2018, the Department will begin transition of these children to DHCS on a Fee-for-Service (FFS) basis.

The estimate reflects savings from BHT FFS consumers who transitioned to DHCS beginning February 1, 2016 and those scheduled to transition March 1, 2018. These children will continue to receive services through the regional centers, and DHCS will reimburse the Department for the

ASSUMPTIONS:

Reimbursements were estimated based on FFS consumers who transitioned beginning February 1, 2016 and are scheduled to transition March 1, 2018. Full year costs for these consumers were grown consistent with Miscellaneous and Support Services budget categories to estimate 2017-18 and 2018-19. Of the savings from the BHT Transition Plan for FFS, an estimated 73.6% is attributed to Miscellaneous Services while 26.4% is attributed to Support Services.

FUNDING:

Effective 2017-18 expenditures are reimbursed from DHCS.

EXPENDITURES:		2017-18	2018-19
	TOTAL	\$10,822	\$15,151
	Reimbursements	10,822	15,151

Program Developmental Fund/Parental Fees

DESCRIPTION:

Parents of children under the age of 18 who receive 24-hour out-of-home services provided by the State, are purchased with state funds through a regional center, are required to pay a fee depending on their ability to do so. Similarly, parents of children under the age of 18 who live at home and receive qualifying services from a regional center whose adjusted gross family income is at or above 400% of the federal poverty level are required to pay an annual fee. The Department deposits parental fees received into the Program Development Fund. Amounts received are then utilized to provide resources needed to initiate new programs which are consistent with the State Plan (Welfare and Institution Code Sections 4677, 4782, and 4785.)

ASSUMPTIONS/METHODOLOGY:

Deposits into the Program Development Fund are based on historical revenue averages.

FUNDING:

Program Development Fund expenditures are reflected in the Purchase of Services, Miscellaneous Services Expenditure category.

EXPENDITURES:		<u>2017-18</u>	<u>2018-19</u>
	Total	\$2.537	\$2.537

Developmental Disabilities Services Account

DESCRIPTION:

The Developmental Disabilities Services Account is used as a depository for application fees collected by the Department for reviewing and approving housing proposals pursuant to Senate Bill (SB) 1175 (Chapter 617, Statutes of 2008).

ASSUMPTIONS/METHODOLOGY:

Based on historical and current data, the Department expects to receive housing proposals with application fees totaling \$150,000.

FUNDING:

These costs are reflected in the review of SB 1175 Housing Proposals, under Operations, Projects.

EXPENDITURES:		2017-18	2018-19
	Total	\$150	\$150

Mental Health Services Fund

DESCRIPTION:

Initiative Statute Proposition 63, also known as the Mental Health Services Act (MHSA), imposes an additional tax on taxable income over \$1 million to provide funds to counties to expand services and develop innovative programs and integrated service plans for mentally ill children, adults, and seniors. Consistent with the requirements of the MHSA, the Department, in consultation with the Department of Health Care Services, identifies best-practice models and provides training to enhance the effectiveness of the regional center and county mental health service systems to better identify and provide a competent response for those consumers who are dually diagnosed (i.e. have a developmental disability and a mental illness).

ASSUMPTIONS/METHODOLOGY:

Funding is used to ensure ongoing statewide technical assistance to promote interagency collaboration regarding access to mental health services and improve clinical capacity and effectiveness of direct services. Specifically, regional centers develop innovative projects, which focus on prevention, early intervention, and treatment for children and adult consumers with mental health diagnoses, and provide support for families.

FUNDING:

These funds are a separate fund source and do not require General Fund match. These funds are reflected in the Increased Access to Mental Health Services estimate, under regional center Operations, Projects.

EXPENDITURES:		2017-18	2018-19
	Total	\$740	\$740

Early Start Part C Grant, Federal Funds/ Early Start Family Resource Center

DESCRIPTION:

Part C of the federal Individuals with Disabilities Education Act (IDEA) provides federal grant funding for states to develop and operate early intervention programs for families and their children from birth up to age 3 with developmental delays, disabilities, or conditions which place them at a high risk of disabilities. The program, known as Early Start in California, is administered according to Title 34 of the Code of Federal Regulations, Sections 303.1 through 303.654. The program is also administered according to the California Early Intervention Services Act (CEISA) and Title 17 of the California Code of Regulations, Sections 52000 through 52175.

California has designated the Department to act as its lead agency for preparing the annual grant application and for receiving and administering federal grant funds. The Department allocates a significant portion of the federal funding to regional centers for local program operation. In addition, the Department has an interagency agreement with the California Department of Education (CDE) to provide funding for local education agency programs and services in accordance with the CEISA, contained in Title 14 of the Government Code (GC), Sections 95000 through 95029. Further, in accordance with the CEISA, the Department is the lead agency for the administration of the Early Start program, which provides services for infants and toddlers with developmental delays, disabilities, or conditions that place them at risk of disabilities. As noted in GC 95001, family-to-family support, provided through California's network of Family Resource Centers (FRCs), strengthens families' ability to fully participate in service planning and their capacity to care for their infants and toddlers. This was formerly called Prevention Program in prior estimates.

KEY DATA/ASSUMPTIONS:

Annual grant amounts are determined by the federal Office of Special Education Programs (OSEP). The Department received a grant award letter dated July 1, 2017, for federal fiscal year 2017.

METHODOLOGY:

The Part C IDEA Grant funds are used to pay costs for the additional federal requirements imposed by the Part C program. Funds are distributed in this order (1) other agencies and (2) regional center Purchase of Services (POS). Services and costs for this age group are identified below. Costs for POS expenditures are already included in the forecasts for each of the POS budget categories, in the POS section of the Estimate.

Early Start Part C Grant, Federal Funds/ Early Start Family Resource Center

METHODOLOGY: (Continued):

	2017-18	2018-19
Other Agencies	\$19,109	\$19,109
 CDE: Additional federal requirements include shorter time lines for conducting evaluations, assessment and program plan development, provision of year-round services, service coordination and administrative services, and provision of services to children with solely low incidence disabilities in regions where such services to this age group were not provided prior to Part C implementation. 		
Local Education Agencies Support	14,245 355	14,245 355
 System Requirements: Funding is required for public awareness and a comprehensive system of personal development, mediation, and due process hearings conducted by the State Office of Administrative Hearings, and collaboration with the Department of Health Care Services-Children Medical Services. 	1,850	1,850
 Early Start FRC: Funds pay for services that are provided by 33 contractors. Services, which are specified in GC 95024(d)(2), include parent-to- parent support, information dissemination, public awareness, and family professional collaboration activities. 	2,659	2,659
 Family Resource Services: Funds provide services for infants and toddlers with developmental delays, disabilities, or conditions that place them at risk of disabilities. Services, which are specified in GC 95001, include family-to-family support provided through FRCs to strengthen families' ability to participate in service planning. 	2,003	2,003

Early Start Part C Grant, Federal Funds/ Early Start Family Resource Center

METHODOLOGY (Continued):

	2017-18	2018-19
 Regional Center POS The remaining Part C Grant funds, after funding CDE and FRC system requirements, are used for POS. The following estimates are based on the proportion of total POS expenditures in 2016-17 by budget category. 	32,758	32,758
Day Programs	17,846	17,846
Support Services	256	256
In-Home Respite	72	72
Out-of-Home Respite	70	70
Health Care	2,073	2,073
Miscellaneous Services	12,441	12,441
Total Expenditures	\$51,867	\$51,867

FUNDING:

The annual Part C Grant is independently determined by OSEP. It is 100% federal funds and requires a Maintenance of Effort from the State. Family Resources Services are 100% General Fund.

:

	2017-18	2018-19
Total	\$53,870	\$53,870
Grant	51,867	51,867
GF	2,003	2,003

Foster Grandparent Program

DESCRIPTION:

The Foster Grandparent Program (FGP) is a federal grant which provides men and women age 55 and older, the opportunity to serve their community by sharing their time and attention with children under the age of 22 who have developmental disabilities. Foster grandparents volunteer in community schools, developmental centers, Head Start centers, foster homes, and pre-schools (see Regional Center Operations, Projects, for more detail on the total regional center costs for this program).

ASSUMPTIONS/METHODOLOGY:

The FGP grant is used as a fund source for specified regional center Operations costs in six regional centers: Valley Mountain, Tri-Counties, Kern, Central Valley, San Andreas, and San Gabriel. The annual funding is calculated based on each of the participating regional centers' costs for Personal Service and Operating Expense.

FUNDING:

Federal funds are reflected in the Foster Grandparent/Senior Companion Programs estimate, under regional center Operations, Projects.

EXPENDITURES:		2017-18	2018-19	
	Grant Amount:	\$1,097	\$1,000	

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Impacts from Other Departments Behavioral Health Treatment Consumers with No Autism Spectrum Disorder Diagnosis Transition - Effective March 1, 2018 & July 1, 2018

DESCRIPTION:

The Department of Health Care Services (DHCS) obtained approval from the Centers for Medicare & Medicaid Services (CMS) to include Behavioral Health Treatment (BHT) as a Medi-Cal benefit for children with a diagnosis of Autism Spectrum Disorder (ASD). Between February and October 2016, children with an ASD diagnosis transitioned to DHCS for BHT services. Children without an ASD diagnosis did not transition, and it was expected their BHT services would remain eligible for federal financial participation (FFP) under the 1915(i) State Plan Amendment (SPA) or the Home and Community-Based Services (HCBS) Waiver. However, CMS determined Medi-Cal must cover medically necessary BHT services for all children, regardless of their diagnoses. Therefore, beginning October 1, 2016, FFP was no longer available under the Department's 1915(i) SPA or HCBS Waivers for BHT services provided to children without an ASD diagnosis.

Effective March 1, 2018, the Department will transition to DHCS on a fee-for-service basis, children who receive BHT services and whose services have been determined to be medically necessary. These children will continue to receive services through the regional centers, and DHCS will fully reimburse the Department for the related expenditures.

Effective July 1, 2018, the Department will coordinate with DHCS to transition to Medi-Cal Managed Care, children whose BHT services have been determined to be medically necessary. These children will then receive services through their Medi-Cal Managed Care providers.

ASSUMPTIONS:

Savings were estimated based on actual costs of BHT services for children without an ASD diagnosis and ineligible for FFP.

METHODOLOGY:	2017-18	2018-19
Fee-for-service	-\$1,821	-\$5,723
 Medi-Cal Managed Care 	0	-43,063
TOTAL EXPENDITURES	-\$1,821	-\$48,786

FUNDING:

Expenditures for BHT consumers with no ASD diagnosis are funded by 100% General Fund (GF). The fee-for-service expenditures are reimbursed by DHCS.

Impacts from Other Departments Behavioral Health Treatment Consumers with No Autism Spectrum Disorder Diagnosis Transition - Effective March 1, 2018 & July 1, 2018

CURRENT YEAR CHANGE FROM ENACTED:

The current year change is due to an increase in the transition population, postponement of the FFS transition from January 1, 2018 to March 1, 2018, and a slight increase in average cost per consumer reflecting recent expenditure data.

REASON FOR YEAR-TO-YEAR CHANGE:

The year-over-year increase in savings reflects the full-year impact of the FFS transition and the transition of Medi-Cal Managed Care consumers.

EXPENDITURES:		2017-18	2018-19
	TOTAL	-\$1,821	-\$48,786
	GF	-1,821	-48,786
	Reimbursements	0	0

Psychological Evaluations for Behavioral Health Treatment Fee-for-Service Consumers

DESCRIPTION:

On January 21, 2016, the Centers for Medicare & Medicaid Services approved an amendment to the Medi-Cal state plan, requiring recommendations for Behavioral Health Treatment (BHT) services to be issued by a physician, surgeon, or psychologist, in order for these services to qualify for federal financial participation (FFP) reimbursement through Department of Healthcare Services (DHCS). In 2016, regional center consumers under the age of 21 with an Autism Spectrum Disorder (ASD) diagnosis transitioned to DHCS and Medi-Cal Managed Care for BHT services. Fee-for-service consumers transitioned to DHCS on paper, but continued to receive BHT services through the regional centers with the expectation that DHCS would reimburse the Department for the expenditures. In addition to fee-for-service consumers with an ASD diagnosis, consumers without an ASD diagnosis will be eligible for FFP for BHT services.

The Department proposes to fund resources to enable regional centers to hire or contract with psychologists to assess consumers with or without an ASD diagnosis and provide medical referrals for BHT services.

ASSUMPTIONS:

Based on the current Clinical Psychologist salary, the funding proposed will enable regional centers to hire 10.5 psychologists who will assess children's needs for BHT services, thus allowing the BHT services for FFS consumers to qualify for FFP reimbursements through DHCS.

METHODOLOGY:

Clinical Psychologist:	<u>2017-18</u>	<u> 2018-19</u>
Salary:	\$59,496	\$59,496
Fringe Benefits at 34%:	20,232	20,232
Operating Expenses:	40,800	40,800
Total Per Psychologist:	\$120,528	\$120,528
Multiplied by 10.5 (Total Annual Rounded)	\$1,266,000	\$1,266,000

FUNDING:

Expenditures related to these psychologist positions are assumed to be funded by the General Fund (GF) and Targeted Case Management, with 50% FFP and 50% GF.

Psychological Evaluations for Behavioral Health Treatment Fee-for-Service Consumers

CURRENT YEAR CHANGE FROM ENACTED:

There is no change.

REASON FOR YEAR-TO-YEAR CHANGE:

There is no change.

EXPENDITURES:		<u>2017-18</u>	<u>2018-19</u>	
	TOTAL	\$1,266	\$1,266	
	GF	\$968	\$968	
	Reimbursements	\$298	\$298	

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SECTION K: POLICIES

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Improve Service Coordinators Caseload Ratios

DESCRIPTION:

Case management is the core function of the regional centers. Service Coordinators perform this critical function for consumers and families by increasing awareness of and helping to access needed services to maximize the independence and fully integrate into communities.

Since 2003, regional centers are required to have overall service coordinator-to-consumer ratios, as follows:

- 1:62 for consumers on the Home and Community-Based Services (HCBS) Waiver.
- 1:62 for consumers under age 3.
- 1:62 for consumers who move from a developmental center into the community and have lived in the community for more than 12 months.
- 1:45 for consumers who move from a developmental center into the community and have lived in the community for less than 12 months.
- 1:66 for consumers who are not on the HCBS Waiver, not under age 3, and have not moved from a developmental center into the community.

The caseload ratio for consumers on the HCBS Waiver was established in response to the 1997 Centers for Medicare & Medicaid Services (CMS) compliance review of the HCBS Waiver, which found that case management activities were not adequate, in part due to excessive caseloads. Compliance with CMS requirements is necessary for the State to continue receiving HCBS Waiver funding (currently over \$1.8 billion).

Regional centers are required to report their caseload ratios to the Department in all of the above categories.

ASSUMPTIONS:

Based on the current average Service Coordinator salary, the funding proposed will enable regional centers to hire more than 200 additional Service Coordinators to improve caseload ratios. Most importantly, reduced caseloads will improve the quality of services that consumers receive.

METHODOLOGY:

	Whole Dollars
Client Program Coordinators (CPC):	
• Salary:	<i>\$48,000</i>
Fringe Benefits at 34%:	16,320
• Rent:	8,086
Operating Expenses:	3,400
Total per CPC	\$75.806

Improve Service Coordinators Caseload Ratios

FUNDING:

Expenditures related to Service Coordinators are assumed to be funded by the General Fund (GF) and reimbursements from Targeted Case Management, with 50% federal financial participation and 50% GF.

CURRENT YEAR CHANGE FROM ENACTED:

There is no change.

REASON FOR YEAR-TO-YEAR CHANGE:

There is no change.

	<u>2017-18*</u>	<u>2018-19*</u>
TOTAL	\$17,000	\$17,000
GF	13,000	13,000
Reimbursements	4,000	4,000

Compliance with Home and Community-Based Services Regulations - Operations

DESCRIPTION:

In January 2014, the Centers for Medicare & Medicaid Services (CMS) published final regulations defining what constitutes a home and community-based setting for Medicaid reimbursement purposes under Section 1915(c) Home and Community-Based (HCBS) Waivers, and Section 1915(i) HCBS State Plan programs. The effective date of the regulations was March 17, 2014, and states were allowed up to a five year transition period to make any modifications necessary to comply with the regulations. Subsequently, CMS notified states on May 9, 2017, that compliance is required by March 17, 2022. To operate in full compliance with the CMS final regulations, HCBS settings must be integrated in and support full access to the greater community for individuals receiving Medicaid HCBS. This includes opportunities to seek employment and work in competitive, integrated settings, engage in community life, control personal resources, and receive services in the community to the same degree of access as individuals not receiving Medicaid HCBS.

ASSUMPTIONS:

Operations expenditures will fund 21 additional Program Evaluators needed to perform the initial and ongoing efforts and activities necessary to ensure compliance with CMS final regulations.

METHODOLOGY:

	<u>Whole Dollars</u>		
	2017-18	2018-19	
 Program Evaluator Salary: 	\$48,000	\$48,000	
 Fringe Benefits at 34% 	16,320	16,320	
Operating Expense:	3,400	3,400	
Total per Program Evaluator	\$67,720	\$67,720	
Multiplied by 21	\$1,422,000	\$1,422,000	

FUNDING:

Expenditures related to Complying with HCBS Regulations are funded by the General Fund (GF) and reimbursements from the HCBS Waiver Administration, with 50% federal financial participation and 50% GF.

CURRENT YEAR CHANGE FROM ENACTED:

There is no change.

Compliance with Home and Community-Based Services Regulations - Operations

REASON FOR YEAR-TO-YEAR CHANGE:

There is no change.

	<u>2017-18*</u>	<u> 2018-19*</u>
TOTAL	\$1,422	\$1,422
GF	711	711
Reimbursements	711	711

Assembly Bill (AB)X2 1 Regional Center Operations Increases Effective July 1, 2016 Operations

DESCRIPTION:

Chapter 3, Statutes of 2016 (AB 1, 2nd Extraordinary Session - Thurmond [ABX2 1]), included additions and amendments to the Welfare and Institutions (W&I) Code, as well as an appropriation of \$31.1 million General Fund (GF) plus matching funds for regional centers' staffing, benefits, and administrative expenses, as well as \$11 million GF for regional centers to implement plans for promoting equity in the purchase of services for individuals with developmental disabilities.

ASSUMPTIONS: INCREASED FUNDING FOR REGIONAL CENTER STAFF AND OPERATIONS

ABX2 1 amends W&I Code Section 4639.5 to require the Department, to the extent funds are appropriated in the annual Budget Act, to allocate \$31.1 million, plus any associated matching funds, for regional center staff salary and/or benefit increases beginning July 1, 2016. Of this amount, \$29.7 million, plus associated matching funds, shall be used for salary increases, benefit increases, or both, for regional center staff, and excludes salary or benefit increases to regional center executive staff and unfunded retirement liabilities. The remaining \$1.4 million, plus associated matching funds shall be used for administrative costs, consistent with those specified in W&I Code Section 4629.7(b).

ASSUMPTIONS: EFFORTS TO REDUCE DISPARITIES

W&I Code Section 4519.5 requires regional centers to implement recommendations and plans to promote equity and reduce disparities in the purchase of services. ABX2 1 amends this section to require the Department, subject to available funding, to allocate funding to regional centers in order to assist with the implementation of the recommendations and plans. Allocated funding may be used to fund activities including, but not limited to, pay differentials supporting community-based service providers direct-care bilingual staff, parent or caregiver education programs, regional center staff cultural competency training, outreach to underserved populations, and additional culturally appropriate service types or service delivery models.

METHODOLOGY:

The Department calculated salary increases based on estimated Operations costs multiplied by the applicable increases.

The \$11 million GF to reduce disparities is a fixed amount of funding.

0047.40

0040 40

Assembly Bill (AB)X2 1 Regional Center Operations Increases Effective July 1, 2016 Operations

FUNDING:

Expenditures for amounts appropriated per ABX2 1 are funded by the GF and reimbursements from Medicaid Admin, Home and Community Based Services Waiver Admin, Targeted Case Management (TCM), and TCM Admin.

CURRENT YEAR CHANGE FROM ENACTED:

There is no change.

REASON FOR YEAR-TO-YEAR CHANGE:

There is no change.

	<u>2017-18</u>	<u> 2018-19</u>
TOTAL	\$56,600	\$56,600
GF	42,100	42,100
Reimbursements	14,500	14,500

Resources to Implement Assembly Bill (AB)X2 1 Operations

DESCRIPTION:

Chapter 3, Statutes of 2016 (AB 1, 2nd Extraordinary Session - Thurmond [ABX2 1] amended the Welfare & Institutions Code to require regional centers to implement the recommendations and plans to reduce disparities in the provision of services to underserved populations, as well as requirements to establish and report on a provider-administered competitive integrated employment program. ABX2 1 also requires the Department to submit a rate study to the Legislature by March 1, 2019, that addresses the sustainability, quality, and transparency of community-based services for individuals with developmental disabilities. A one time funding of \$3 million was given in 2016-17 for rate study.

ASSUMPTIONS:

Each regional center will require staff to oversee implementation of cultural programs to promote equity and reduce disparities, and lead competitive integrated employment activities at the local level.

METHODOLOGY:

	Whole Do	<u>llars</u>
	2017-18	2018-19
Employment Specialist Salary:	\$71,454	\$71,454
• Fringe Benefits at 34%:	24,294	24,294
Operating Expense:	3,400	3,400
Total per Employment Specialist:	<u>99,148 </u>	<u>99,148</u>
21 positions	\$2,082,000	\$2,082,000
Cultural Specialist Salary:	<i>\$71,454</i>	<i>\$71,454</i>
• Fringe Benefits at 34%:	24,294	24,294
Operating Expense:	3,400	3,400
Total per Cultural Specialist:	<u>99,148 </u>	<u>99,148</u>
21 Positions	\$2,082,000	\$2,082,000
 Total Costs for Positions (rounded) 	\$4,164,000	\$4,164,000
Total Expenditures:	\$4,164,000	\$4,164,000

FUNDING:

Expenditures related to regional center positions are funded by the General Fund (GF) and reimbursements from the Home and Community-Based Services Waiver Administration, with 50% federal financial participation and 50% GF.

Resources to Implement Assembly Bill (AB)X2 1 Operations

CURRENT YEAR CHANGE FROM ENACTED:

There is no change.

REASON FOR YEAR-TO-YEAR CHANGE:

There is no change.

	<u>2017-18*</u>	<u>2018-19*</u>
TOTAL	\$4,164	\$4,164
GF	2,832	2,832
Reimbursements	1,332	1,332

Operations Policy Funding Detail

					2018-19
				2018-19	Over
Enacted	Updated	2017-18		Over	Enacted
Budget	2017-18	Request	2018-19	2017-18	Budget

BHT Psychological Eva	luation for F	FS Consumer	rs			
TOTAL	\$1,266	\$1,266	\$0	\$1,266	\$0	\$0
GF	\$968	\$968	\$0	\$968	\$0	\$0
GF Match	298	298	0	298	0	0
GF Other	670	670	0	670	0	0
Reimbursements	\$298	\$298	\$0	\$298	\$0	\$0
Targeted Case Management (TCM)	298	298	0	298	0	0

Improve Service Coord	linator Casel	oad Ratios				
TOTAL	\$17,000	\$17,000	\$0	\$17,000	\$0	\$0
GF	\$13,000	\$13,000	\$0	\$13,000	\$0	\$0
GF Match	4,000	4,000	0	4,000	0	0
GF Other	9,000	9,000	0	9,000	0	0
Reimbursements	\$4,000	\$4,000	\$0	\$4,000	\$0	\$0
Targeted Case Management (TCM)	4,000	4,000	0	4,000	0	0

Compliance with HCBS	Regulations	s - Operations				
TOTAL	\$1,422	\$1,422	\$0	\$1,422	\$0	\$0
GF	\$711	\$711	\$0	\$711	\$0	\$0
GF Match	711	711	0	711	0	0
GF Other	0	0	0	0	0	0
Reimbursements	\$711	\$711	\$0	\$711	\$0	\$0
HCBS Waiver Admin	711	711	0	711	0	0

Operations Policy Funding Detail

						2018-19
					2018-19	Over
	Enacted	Updated	2017-18		Over	Enacted
	Budget	2017-18	Request	2018-19	2017-18	Budget
ABX2 1 - Regional Ce	enter Operation	ons Increase	 9s			
TOTAL	\$56,600	\$56,600	\$0	\$56,600	\$0	\$0
GF	\$42,100	\$42,100	\$0	\$42,100	\$0	\$0
GF Match	14,500	14,500	0	14,500	0	0
GF Other	27,600	27,600	0	27,600	0	0
Reimbursements	\$14,500	\$14,500	\$0	\$14,500	\$0	\$0
Medicaid Admin	<i>755</i>	1,132	377	1,132	0	377
HCBS Waiver Admin	361	361	0	361	0	0
ТСМ	13,384	13,007	(377)	13,007	0	(377)
Resources to Implem	nent ARY21 -	Operations				
TOTAL	\$4,164	\$4,164	\$0	\$4,164	\$0	\$0
GF	\$2,832	\$2,832	\$0	\$2,832	\$0	\$0
GF Match	1,332	1,332	0	1,332	0	0
GF Other	1,500	1,500	0	1,500	0	0
Reimbursements	\$1,332	\$1,332	\$0	\$1,332	\$0	\$0
HCBS Waiver Admin	1,332	1,332	0	1,332	0	0
Community Placeme	nt Plan - DC (Closure				
TOTAL	\$5,434	\$5,434	\$0	\$5,434	\$0	\$0
GF	\$5,434	\$5,434	\$0	\$5,434	\$0	\$0
GF Match	0	0	0	ψ 3, + 3 + 0	0	0
GF Other	5,434	5,434	0	5,434	0	0
Total Operations Pol	•					
TOTAL	\$85,886	\$85,886	\$0	\$85,886	\$0	\$0
GF	\$65,045	\$65,045	\$0	\$65,045	\$0	\$0
GF Match	20,841	20,841	0	20,841	0	0
GF Other	44,204	44,204	0	44,204	0	0
Reimbursements	\$20,841	\$20,841	\$0	\$20,841	\$0	\$0
HCBS Waiver Admin	2,404	2,404	0	2,404	0	0
	47.000	47.005	(0.77)		_	(0)

TCM

Medicaid Admin

17,682

755

(377)

377

17,305

1,132

0

(377)

377

17,305

1,132

Compliance with Home and Community-Based Services Regulations - Purchase of Services

DESCRIPTION:

In January 2014, the Centers for Medicare & Medicaid Services (CMS) published final regulations defining what constitutes a home and community-based setting for Medicaid reimbursement purposes under Section 1915(c) Home and Community-Based (HCBS) Waivers, and Section 1915(i) HCBS State Plan programs. The effective date of the regulations was March 17, 2014, and states were allowed up to a five year transition period to make any modifications necessary to comply with the regulations. Subsequently, CMS notified states on May 9, 2017, that compliance is required by March 17, 2022. To operate in full compliance with the CMS final regulations, HCBS settings must be integrated in and support full access to the greater community for individuals receiving Medicaid HCBS. This includes opportunities to seek employment and work in competitive, integrated settings, engage in community life, control personal resources, and receive services in the community to the same degree of access as individuals not receiving Medicaid HCBS.

ASSUMPTIONS:

Purchase of Services expenditures will provide resources for modifications and additional staffing as needed for service providers to achieve compliance with the CMS final regulations.

METHODOLOGY:

The funding will be distributed to service providers upon approval of modification plans submitted to the regional centers and the Department.

 2017-18
 2018-19

 TOTAL EXPENDITURES:
 \$15,000
 \$15,000

FUNDING:

Expenditures related to complying with HCBS Regulations are funded by the General Fund (GF) and reimbursements from the HCBS Waiver and the 1915(i) State Plan Amendment, with 50% federal financial participation and 50% GF.

CURRENT YEAR CHANGE FROM ENACTED:

There is no change.

REASON FOR YEAR-TO-YEAR CHANGE:

There is no change.

Compliance with Home and Community-Based Services Regulations - Purchase of Services

	<u>2017-18</u>	<u>2018-19</u>
TOTAL	\$15,000	\$15,000
GF	11,000	11,000
Reimbursements	4,000	4,000

Assembly Bill (AB)X2 1 Competitive, Integrated Employment Incentives Effective July 1, 2016 Purchase of Services

DESCRIPTION:

Welfare and Institutions Code (WIC) was amended to add section 4870(d-g) to increase sustained competitive integrated employment (CIE) placements by regional center service providers. CIE is full or part-time work for which an individual is paid minimum wage or greater in a setting with others who do not have disabilities. Section 4870(d) authorizes funding to the Department for incentive payments to providers for placement and retention of regional center consumers, consistent with a consumer's Individual Program Plan.

The regional center will be responsible for making incentive payments to service providers within their catchment area. The incentive payment amount for each individual placed in CIE is as follows:

- 1. A payment of one thousand dollars (\$1,000) shall be made to the service provider who, on or after July 1, 2016, places an individual into CIE, and the individual is still competitively employed after 30 consecutive days.
- 2. An additional payment of one thousand two hundred fifty dollars (\$1,250) shall be made to the service provider for an individual described in paragraph (1) who remains in CIE for six consecutive months.
- 3. An additional payment of one thousand five hundred dollars (\$1,500) shall be made to the service provider for an individual described in paragraphs (1) and (2) who remains in CIE for 12 consecutive months.

METHODOLOGY:

Competitive, Integrated Employment Incentives (fixed amount)	2017-18 \$29.000	2018-19 \$29.000
TOTAL EXPENDITURES:	\$29,000	\$29,000

FUNDING:

Expenditures related to Competitive, Integrated Employment Incentives are funded by General Fund (GF) and reimbursements from the Home and Community-Based Services Waiver and the 1915 (i) State Plan Amendment.

CURRENT YEAR CHANGE FROM ENACTED:

There is no change.

Assembly Bill (AB)X2 1 Competitive, Integrated Employment Incentives Effective July 1, 2016 Purchase of Services

REASON FOR YEAR-TO-YEAR CHANGE:

There is no change.

<u>2018-19</u>	<u>2017-18</u>	
\$29,000	\$29,000	TOTAL
20,000	20,000	GF
9,000	9,000	Reimbursements

Senate Bill (SB) 3, Minimum Wage Increase Effective January 1, 2018 Purchase of Services

DESCRIPTION:

SB 3, Chapter 4, Statutes of 2016, requires the minimum wage to increase to \$11.00 per hour on January 1, 2018, for businesses with 26 or more employees, with further increases each year until the minimum wage reaches \$15 per hour in 2022. The next increase from \$11.00 to \$12.00 per hour will occur on January 1, 2019.

ASSUMPTIONS:

Costs are calculated using Purchase of Service expenditures based on actual rate increases to service providers effective January 1, 2018.

METHODOLOGY:

	<u>2017-18</u>	<u>2018-19</u>
Community Care Facilities	\$19,067	\$34,892
Day Program Services	16,099	29,461
Habilitation Services	2,352	4,304
Transportation	4,985	9,122
Support Services	18,521	33,894
In-Home Respite	5,273	9,649
Out-of-Home Respite	565	1,035
TOTAL EXPENDITURES:	\$66,862	\$122,357

FUNDING:

Expenditures from the minimum wage increases are assumed to be funded by the General Fund (GF) and reimbursements from the Home and Community-Based Services Waiver and 1915(i) with 50% Federal Financial Participation and 50% GF.

CURRENT YEAR CHANGE FROM ENACTED:

The increase is due to the half-year impact of the minimum wage increase from \$10.50 to \$11.00 per hour, effective January 1, 2018.

Senate Bill (SB) 3, Minimum Wage Increase Effective January 1, 2018 Purchase of Services

REASON FOR YEAR-TO-YEAR CHANGE:

The increase is due to the full-year impact of the minimum wage increase from \$10.50 to \$11.00 per hour, effective January 1, 2018.

	<u>2017-18</u>	<u>2018-19</u>
TOTAL	\$66,862	\$122,357
GF	36,462	66,726
Reimbursements	30,400	55,631

Senate Bill (SB) 3, Minimum Wage Increase Effective January 1, 2019 Purchase of Services

DESCRIPTION:

SB 3, Chapter 4, Statutes of 2016, requires the minimum wage to increase to \$12.00 per hour on January 1, 2019, for businesses with 26 or more employees, with further increases each year until the minimum wage reaches \$15 per hour in 2022. The next increase from \$12.00 to \$13.00 per hour will occur on January 1, 2020.

ASSUMPTIONS:

Costs are calculated using Purchase of Service expenditures based on actual rate increases to service providers effective January 1, 2019.

METHODOLOGY:

	<u>2017-18</u>	<u>2018-19</u>
Community Care Facilities	\$0	\$35,075
Day Program Services	0	29,615
Habilitation Services	0	4,326
Transportation	0	9,170
Support Services	0	34,071
In-Home Respite	0	9,699
Out-of-Home Respite	0	1,040
TOTAL EXPENDITURES:	\$0	\$122,996

FUNDING:

Expenditures from the minimum wage increases are assumed to be funded by the General Fund (GF) and reimbursements from the Home and Community-Based Services Waiver and 1915(i) with 50% Federal Financial Participation and 50% GF.

CURRENT YEAR CHANGE FROM ENACTED:

N/A

Senate Bill (SB) 3, Minimum Wage Increase Effective January 1, 2019 Purchase of Services

REASON FOR YEAR-TO-YEAR CHANGE:

This is a new policy effective January 1, 2019, and reflects the half-year impact of the minimum wage increase from \$11.00 to \$12.00 per hour.

	<u>2017-18</u>	<u>2018-19</u>
TOTAL	\$0	\$122,996
GF	0	67,375
Reimbursements	0	55,621

Safety Net Resources

DESCRIPTION:

The 2017-18 regional center budget included one-time funding to develop two Stabilization, Training, Assistance, and Reintegration (STAR) crisis facilities in Northern California, and to establish intensive transition services for residents leaving secure treatment facilities. These new services and supports are part of the Department's overall Safety Net Plan to provide access to crisis services after the closure of the development centers.

- \$2.6 million General Fund (GF) to develop two STAR acute crisis facilities in Northern California.
- \$3.0 million GF to establish intensive transition services for residents leaving secure treatment facilities.

FUNDING:

Safety Net Resources are funded by the General Fund (GF).

CURRENT YEAR CHANGE FROM ENACTED:

This is one time funding for 2017-18.

REASON FOR YEAR-TO-YEAR CHANGE:

N/A

<u>2018-19</u>	<u>2017-18</u>	
\$0	\$5,622	TOTAL
0	5,622	GF

Uniform Holiday Schedule Effective July 1, 2018 Purchase of Services

DESCRIPTION:

Welfare and Institutions Code Section 4692, Statutes of 2009, implemented the Uniform Holiday Schedule as a cost savings measure. The purpose was to standardize and increase to 14, the number of holidays observed in the regional center system, and to prevent payment to providers of work activity programs, activity centers, adult developmental centers, behavior management programs, social recreation programs, infant developmental programs, program support group day services, client/parent support behavior intervention training, community integration training programs, community activities support services, and creative arts programs, as well as transportation to these programs, on the specified holidays. After implementing the Uniform Holiday Schedule, The Arc of California and the United Cerebral Palsy Association of San Diego filed suit in federal court seeking to prevent enforcement. On February 13, 2015, the United States District Court issued an injunction preventing the Department from enforcing the policy, and the Department subsequently withdrew the schedule. Following the State's appeal, the United States District Court vacated the injunction in August 2016. The plaintiffs subsequently appealed that ruling, and in May 2017, the 9th Circuit rejected the appeal and affirmed the ruling to vacate the injunction. Therefore, the Department will reinstate the Uniform Holiday Schedule beginning July 1, 2018.

ASSUMPTIONS:

When originally implemented, savings estimated from the Uniform Holiday Schedule was based on 2009 expenditures, and it was assumed that continued savings would be realized in expenditure trends. However, because of the injunction, current expenditure trends do not reflect expected savings. Therefore, the Department re-estimated savings based on 2016-17 Purchase of Services expenditures for the relevant service codes.

METHODOLOGY:

	<u>2017-18</u>	<u> 2018-19</u>
 Day Program Services 	\$0	-\$2,646
Habilitation Services	0	141
Transportation	0	-1,170
Support Services	0	-2,546
In-Home Respite	0	-314
Miscellaneous	0	925
TOTAL EXPENDITURES	\$0	-\$5,610

Uniform Holiday Schedule Effective July 1, 2018 Purchase of Services

FUNDING:

Expenditures from the Uniform Holiday are funded by the General Fund (GF) and reimbursements from Home and Community-Based Services Waiver and 1915(i) State Plan Amendment, with 50% federal financial participation and 50% GF.

CURRENT YEAR CHANGE FROM ENACTED:

N/A

REASON FOR YEAR-TO-YEAR CHANGE:

The estimated savings result from reinstating the policy effective July 1, 2018.

	<u>2017-18</u>	<u>2018-19</u>
TOTAL	\$0	-\$5,610
GF	0	-2,912
Reimbursements	0	-2,698

Purchase of Service Policy Funding Detail

					2018-19
				2018-19	Over
Enacted	Updated	2017-18		Over	Enacted
Budget	2017-18	Request	2018-19	2017-18	Budget

BHT Consumers without an ASD Diagnosis							
TOTAL	(\$3,300)	(\$1,821)	\$1,479	(\$48,786)	(\$46,965)	(\$45,486)	
GF	(\$3,300)	(\$1,821)	\$1,479	(\$48,786)	(\$46,965)	(\$45,486)	
GF Match	0	0	0	0	0	0	
GF Other	(3,300)	(1,821)	1,479	(48,786)	(46,965)	(45,486)	

Compliance with HCE	3S Regulation	ons - Purchas	se of Servi	ce		
TOTAL	\$15,000	\$15,000	\$0	\$15,000	\$0	\$0
GF	\$11,000	\$11,000	\$0	\$11,000	\$0	\$0
GF Match	4,000	4,000	0	4,000	0	0
GF Other	7,000	7,000	0	7,000	0	0
Reimbursements	\$4,000	\$4,000	\$0	\$4,000	\$0	\$0
HCBS Waiver	3,720	3,720	0	3,720	0	0
1915(i)	280	280	0	280	0	0

Community Based Se	ervices Incre	eases - ABX2	1			
TOTAL	\$29,000	\$29,000	\$0	\$29,000	\$0	\$0
GF	\$20,000	\$20,000	\$0	\$20,000	\$0	\$0
GF Match	9,000	9,000	0	9,000	0	0
GF Other	11,000	11,000	0	11,000	0	0
Reimbursements	\$9,000	\$9,000	\$0	\$9,000	\$0	\$0
HCBS Waiver	7,920	7,920	0	7,920	0	0
1915(i)	1,080	1,080	0	1,080	0	0

Purchase of Service Policy Funding Detail

					2018-19
				2018-19	Over
Enacted	Updated	2017-18		Over	Enacted
Budget	2017-18	Request	2018-19	2017-18	Budget

SB 3 - Minimum Wage	e Increase -	Effective J	anuary 1, 20	018		
TOTAL	\$53,476	\$66,862	\$13,386	\$122,357	\$55,495	\$68,881
GF	\$30,190	\$36,462	\$6,272	\$66,726	\$30,264	\$36,536
GF Match	23,286	29,372	6,086	55,631	26,259	32,345
GF Other	6,904	7,090	186	11,095	4,005	4,191
Reimbursements	\$23,286	\$30,400	\$7,114	\$55,631	\$25,231	\$32,345
HCBS Waiver	18,652	23,329	4,677	<i>4</i> 2,692	19,363	24,040
1915(i)	4,634	7,071	2,437	12,939	5,868	8,305

SB 3 - Minimum Wage Increase - Effective January 1, 2019						
TOTAL	\$0	\$0	\$0	\$122,996	\$122,996	\$122,996
GF	\$0	\$0	\$0	\$67,375	\$67,375	\$67,375
GF Match	0	0	0	55,621	55,621	55,621
GF Other	0	0	0	11,754	11,754	11,754
Reimbursements	\$0	\$0	\$0	\$55,621	\$55,621	\$55,621
HCBS Waiver	0	0	0	<i>4</i> 2,915	<i>4</i> 2,915	<i>4</i> 2,915
1915(i)	0	0	0	12,706	12,706	12,706

Uniform Holiday Schedu	ule					
TOTAL	\$0	\$0	\$0	(\$5,610)	(\$5,610)	(\$5,610)
GF	\$0	\$0	\$0	(\$2,912)	(\$2,912)	(\$2,912)
GF Match	0	0	0	(2,694)	(2,694)	(2,694)
GF Other	0	0	0	(218)	(218)	(218)
Reimbursements	\$0	\$0	\$0	(\$2,698)	(\$2,698)	(\$2,698)
HCBS Waiver	0	0	0	(2,012)	(2,012)	(2,012)
1915(i)	0	0	0	(686)	(686)	(686)

Purchase of Service Policy Funding Detail

	Enacted Budget	Updated 2017-18	2017-18 Request	2018-19	2018-19 Over 2017-18	2018-19 Over Enacted Budget
Best Buddies						
TOTAL	\$1,600	\$1,600	\$0	\$0	(\$1,600)	(\$1,600)
GF	\$1,600	\$1,600	\$0	\$0	(\$1,600)	(\$1,600)
GF Match	0	0	0	0	0	0
GF Other	1,600	1,600	0	0	(1,600)	(1,600)
Safety Net						
TOTAL	\$5,622	\$5,622	\$0	\$0	(\$5,622)	(\$5,622)
GF	\$5,622	\$5,622	\$0	\$0	(\$5,622)	(\$5,622)
GF Match	0	0	0	0	0	0
GF Other	5,622	5,622	0	0	(5,622)	(5,622)
Community Placen	nent Plan - DC	Closure				
TOTAL	\$20,244	\$20,244	\$0	\$23,032	\$2,788	\$2,788
GF	\$20,244	\$16,307	(\$3,937)	\$19,936	\$3,629	(\$308)
GF Match	0	3,935	3,935	3,094	(841)	3,094
GF Other	20,244	12,372	(7,872)	16,842	4,470	(3,402)
Reimbursements	\$0	\$3,937	\$3,937	\$3,096	(\$841)	\$3,096
HCBS Waiver	0	3,937	3,937	3,096	(841)	3,096
Total POS Policy F	unding Detail					
TOTAL	\$121,642	\$136,507	\$14,865	\$257,989	\$121,482	\$136,347
GF	\$85,356	\$89,170	\$3,814	\$133,339	\$44,169	\$47,983
GF Match	36,286	46,307	10,021	124,652	78,345	88,366
GF Other	49,070	42,863	(6,207)	8,687	(34,176)	(40,383)
Reimbursements	\$36,286	\$47,337	\$11,051	\$124,650	\$77,313	\$88,364
HCBS Waiver	30,292	38,906	8,614	98,331	<i>59,4</i> 25	68,039
1915(i)	5,994	8,431	2,437	26,319	17,888	20,325

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Early Start Expenditures and Population

DESCRIPTION:

Per Legislative request, the Department is providing projected caseload and expenditures for the Early Start program.

ASSUMPTIONS:

Early Start Expenditure Data Source: State Claims Data file, dated November 2017. Data was adjusted for lag based on historical data and used to project 2017-18 and 2018-19 expenditures.

Fiscal Year	Estimated ^{1/}	Total POS	Estimated
	Population	Expenditures	Per Capita
2017-18	42,660	\$380,632,000	\$8,923
2018-19	46,840	\$423,003,000	\$9,031

^{1/} Ties to Section E - Population.

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SECTION M: STATE OPERATED RESIDENTIAL AND COMMUNITY FACILITIES

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EXECUTIVE HIGHLIGHTS

OVERVIEW

The Department of Developmental Services (Department) provides residential services at three developmental centers (DCs) and one State-operated community facility to individuals who have a developmental disability. Assembly Bill (AB) 1472, Chapter 25, Statues of 2012, placed a moratorium on general admissions to DCs that resulted in a continuing decline in the resident population. In addition, Senate Bill (SB) 82, Chapter 23, Statutes of 2015, required the Department to close the remaining DCs. In response, the Department submitted to the Legislature on October 1, 2015, a plan to close the Sonoma DC (Sonoma) by December 31, 2018. Subsequently on April 1, 2016, the Department released plans to close the Fairview DC (Fairview) and the General Treatment Area at the Porterville DC (Porterville GTA) by December 31, 2021. The Secure Treatment Program at Porterville (Porterville STP) and the Canyon Springs Community Facility will remain open.

On July 1, 2016, the Department entered into settlement agreements with the federal Centers for Medicare & Medicaid Services (CMS) to continue federal funding for individuals residing in the intermediate care facility units (ICFs) at Fairview and Porterville GTA. The Department's ongoing compliance with the provisions of the settlement agreements will allow the continued receipt of federal funding for those ICF units through December 2018. With the planned closures, the Department has increased resident transitions to community living arrangements, while preparing to cease facility operations as outlined in the closure plans.

The actual DC population on July 1, 2017, was 795. The Governor's Budget projects an ending population of 537 residents on June 30, 2018, which is an increase of 42 residents as compared to the estimated ending population in the 2017 May Revision. The additional residents are a result of delays in transitions to the community. The Department expects to increase placements in 2018-19, and will transition the last Sonoma resident by December 31, 2018. The projected ending DC population on June 30, 2019, is 361 residents.

FISCAL YEAR 2017-18

The Department proposes a net increase of \$28.8 million (\$18.4 million GF) and 72.8 positions for 2017-18, as compared to the enacted budget, resulting from the following adjustments:

Operations Expenditures

Net increase of \$4.5 million (\$2.6 million GF), which reflects an increase of \$7.3 million in Personal Services and OE&E expenditures to care for an additional 42 residents, offset by a \$2.8 million reduction in lease revenue bond payments.

Employee Compensation and Retirement

 Increase of \$17.2 million (\$11.1 million GF) for compensation and retirement adjustments approved through the collective bargaining process and included in Item 9800 - Employee Compensation Adjustments.

Sonoma and Fairview Lump Sum Payouts

• Increase of \$7.1 million (\$4.7 million GF) to fund lump sum leave balance payouts for separating employees.

FISCAL YEAR 2018-19

The Department proposes a net decrease of \$119.2 million (\$74.7 million GF decrease) and -827.4 positions as compared to the revised Current Year Budget. The net decrease results from the following adjustments:

Operations Expenditures

 Decrease of \$120.5 million (\$74.8 million GF decrease) as compared to the revised current year budget, reflecting decreases in Personal Services and OE&E due to resident placements, offset by an increase in lease revenue bond payments. Within this adjustment is an increase of \$5.6 million GF and 53.2 positions to operate two additional STAR homes as part of the Department's safety net plan.

Employee Compensation and Retirement

 Increase of \$0.6 million (\$0.4 million GF increase) for compensation and retirement adjustments approved through the collective bargaining process as compared to the revised current year budget. In total, the Governor's Budget includes \$17.8 million (\$11.5 million GF) for employee compensation and retirement adjustments in 2018-19.

Centralized Functions at Headquarters

 Decrease of \$2.1 million (\$1.6 million GF decrease) to transfer 15.5 positions from the State Operated and Community Services Program to Headquarters for statewide oversight positions and activities that will continue beyond closure of the developmental centers, as detailed in a related Budget Change Proposal (BCP).

Sonoma and Fairview Lump Sum Payouts

 Increase of \$2.2 million (\$0.8 million GF increase) above the revised current year budget to fund lump sum leave balance payouts for separating employees. In total, the Governor's Budget proposes \$9.3 million (\$5.5 million GF) in 2018-19 to fund lump sum leave payouts.

Sonoma and Fairview Security Costs

• Increase of \$0.6 million (\$0.5 million GF increase) to provide physical security measures during warm shut down.

2017 - 18 STATE OPERATED RESIDENTIAL AND COMMUNITY FACILITIES PROGRAM BUDGET **EXECUTIVE SUMMARY TABLE**

(Dollars in thousands)

DC OPERATIONS	Canyon Springs	Fairview	Porterville GTA	Porterville STP	Sonoma	STAR & Mobile Crisis Team	Total 2017-18	2017-18 Enacted Budget	Request
A. Units	3.00	9.00	5.75	14.00	10.00	2.00	43.75	43.75	0.00
1. ICF	3.00	5.00	3.75	13.00	5.00	2.00	31.75	31.00	0.75
2. SNF	0.00	3.00	2.00	0.00	4.00	0.00	9.00	9.75	-0.75
3. Acute	0.00	1.00	0.00	1.00	1.00	0.00	3.00	3.00	0.00
B. Population									
Actual Beginning 7/1/2017	48	162	116	205	256	8	795	793	2
Population Adjustment	<u>8</u>	-68	<u>-33</u>	<u>6</u>	-173	2	<u>-258</u>	<u>-298</u>	40
3. Ending 6/30/2018	56	94	83	211	83	10	537	495	<u>40</u> 42
C. Positions	229.0	857.5	509.2	1,227.4	968.8	67.7	3,859.6	3,786.8	72.8
D. Operations Expenditures									
 Personal Services 	\$21,754	\$100,220	\$50,881	\$122,227	\$102,418	\$6,688	\$404,188	\$398,045	\$6,143
2. OE&E	5,109	13,873	7,973	16,622	15,558	843	59,978	58,797	1,181
Lease Revenue Bond	<u>0</u>	<u>0</u>	<u>0</u>	6,309	<u>0</u>	<u>0</u>	6,309	9,141	<u>-2,832</u>
Total Operations Expenditures	\$26,863	\$114,093	\$58,854	\$145,158	\$117,976	\$7,531	\$470,475	\$465,983	\$4,492
E. Control Section Adjustments Employee Compensation and Retirement	\$852	\$4,740	\$1,664	\$4,277	\$5,583	\$132	\$17,248	\$0	\$17,248
F. Major Assumptions Lump Sum Payouts	\$0	\$3,707	\$0	\$0	\$3,368	\$0	\$7,075	\$0	\$7,075
GRAND TOTAL	\$27,715	\$122,540	\$60,518	\$149,435	\$126,927	\$7,663	\$494,798	\$465,983	\$28,815

FUND SOURCES:	Canyon Springs	Fairview	Porterville GTA	Porterville STP	Sonoma	STAR & Mobile Crisis Team	Total 2017-18	2017-18 Enacted Budget	Request
A. General Funds	\$14,110	\$63,717	\$31,693	\$147,850	\$101,584	\$7,663	\$366,617	\$348,179	\$18,438
 General Fund Match 	13,558	58,713	28,770	1,530	25,287	0	127,858	117,510	10,348
General Fund Other	552	5,005	2,923	146,319	76,297	7,663	238,758	230,669	8,089
B. Reimbursements Medi-Cal	\$13,558 13,558	\$58,713 58,713	\$28,770 28,770	\$1,530 1,530	\$25,287 25,287	\$0 <i>0</i>	\$127,858 127,858	\$117,510 117,510	\$10,348 10,348
C. Lottery Education Fund	\$47	\$110	\$55	\$55	\$56	\$0	\$323	\$294	\$29
GRAND TOTAL	\$27,715	\$122,540	\$60,518	\$149,435	\$126,927	\$7,663	\$494,798	\$465,983	\$28,815

Notes:

The total number of units reflect planned partial year unit consolidations as populations decline due to community placements.

The amounts listed under Total 2017-18 column do not reflect the statewide item for Employee Retention Incentives of \$20.1 million (\$15.8 million GF) that was added by the Sovernor's Budget Galley.

Slight rounding differences may occur between the Executive Summary Table and DC Detail Sheets.

2018 - 19 STATE OPERATED RESIDENTIAL AND COMMUNITY FACILITIES PROGRAM BUDGET EXECUTIVE SUMMARY TABLE

(Dollars in thousands)

		Governor's Budget Proposed 2018-19							
DC OPERATIONS	Canyon Springs	Fairview	Porterville GTA	Porterville STP	Sonoma	STAR & Mobile Crisis Team	Total 2018-19	2017-18 Enacted Budget	Request
A. Units	3.00	4.50	3.50	14.00	3.00	4.00	32.00	43.75	-11.75
1. <i>ICF</i>	3.00	2.00	2.50	13.00	1.50	4.00	26.00	31.75	-5.75
2. SNF	0.00	1.50	1.00	0.00	0.50	0.00	3.00	9.00	-6.00
3. Acute	0.00	1.00	0.00	1.00	1.00	0.00	3.00	3.00	0.00
B. Population									
 Estimated Beginning 7/1/2018 	56	94	83	211	83	20	547	793	-246
Population Adjustment	<u>0</u>	<u>-68</u>	<u>-35</u>	<u>o</u>	-83	0	<u>-186</u>	<u>-298</u>	<u>112</u>
3. Ending 6/30/2019	56	26	48	211	0	20	361	495	-134
-									
C. Positions	229.0	542.4	327.6	1,260.9	551.4	120.9	3,032.2	3,786.8	-754.6
D. Operations Expenditures 1. Personal Services 2. OE&E 3. Lease Revenue Bond Total Operations Expenditures	\$21,057 4,913 <u>0</u> \$25,971	\$65,077 10,465 <u>0</u> \$75,542	\$31,455 6,022 <u>0</u> \$37,477	\$121,150 19,584 <u>9,156</u> \$149,889	\$34,013 13,998 <u>0</u> \$48,012	\$11,598 1,481 <u>0</u> \$13,078	\$284,350 56,463 <u>9,156</u> \$349,969	\$398,045 58,797 <u>9,141</u> \$465,983	-\$113,695 -2,334 <u>15</u> -\$116,014
E. Control Section Adjustments Employee Compensation and Retirement	\$879	\$4,905	\$1,718	\$4,418	\$5,778	\$132	\$17,830	\$0	\$17,830
F. BCP / Major Assumptions 1. DC Funded Positions to HQ 2. Lump Sum Payouts 3. Security Costs Total Major Assumptions	\$0 0 <u>0</u> \$0	-\$279 3,978 <u>67</u> \$3,766	-\$164 0 <u>0</u> -\$164	-\$354 0 0 0 -\$354	-\$1,313 5,322 <u>580</u> \$4,589	\$0 0 <u>0</u> \$0	-\$2,110 9,300 <u>647</u> \$7,837	\$0 0 <u>0</u> \$0	-\$2,110 9,300 <u>647</u> \$7,837
GRAND TOTAL	\$26,850	\$84,213	\$39,031	\$153,953	\$58,378	\$13,210	\$375,636	\$465,983	-\$90,347

FUND SOURCES:	Canyon Springs	Fairview	Porterville GTA	Porterville STP	Sonoma	STAR & Mobile Crisis Team	Total 2018-19	2017-18 Enacted Budget	Request
A. General Funds	\$13,703	\$43,522	\$20,245	\$152,350	\$48,922	\$13,210	\$291,953	\$348,179	-\$56,225
 General Fund Match 	13,100	40,581	18,731	1,548	9,400	0	83,360	117,510	-34,150
General Fund Other	603	2,941	1,514	150,801	39,522	13,210	208,593	230,669	-22,076
B. Reimbursements Medi-Cal	\$13,100 13,100	\$40,581 <i>40,581</i>	\$18,731 18,731	\$1,548 1,548	\$9,400 9,400	\$0 <i>0</i>	\$83,360 83,360	\$117,510 117,510	-\$34,150 -34,150
C. Lottery Education Fund	\$47	\$110	\$55	\$55	\$56	\$0	\$323	\$294	\$29
GRAND TOTAL	\$26,850	\$84,213	\$39,031	\$153,953	\$58,378	\$13,210	\$375,636	\$465,983	-\$90,347

Notes:

The total number of units reflect planned partial year unit consolidations as populations decline due to community placements. Slight rounding differences may occur between the Executive Summary Table and DC Detail Sheets.

2018 - 19 Comparison to Updated 2017 - 18 Executive Summary Table (Dollars in thousands)

1	Governor's Budget Proposed 2018-19									
DC OPERATIONS	Canyon Springs	Fairview	Porterville GTA	Porterville STP	Sonoma	STAR & Mobile Crisis Team	Total 2018-19	Updated 2017-18	2018-19 Request	
A. Units	3.00	4.50	3.50	14.00	3.00	4.00	32.00	43.75	-11.75	
1. ICF	3.00	2.00	2.50	13.00	1.50	4.00	26.00	31.75	-5.75	
2. SNF	0.00	1.50	1.00	0.00	0.50	0.00	3.00	9.00	-6.00	
3. Acute	0.00	1.00	0.00	1.00	1.00	0.00	3.00	3.00	0.00	
B. Population										
1. Estimated Beginning 7/1/2018	56	94	83	211	83	20	547	795	-248	
Population Adjustment	<u>0</u>	<u>-68</u>	<u>-35</u>	<u>0</u>	<u>-83</u>	<u>0</u>	<u>-186</u>	-258	<u>72</u>	
3. Ending 6/30/2019	56	26	48	211	0	20	361	537	-176	
C. Positions	229.0	542.4	327.6	1,260.9	551.4	120.9	3,032.2	3,859.6	-827.4	
D. Operations Expenditures										
Personal Services	\$21,057	\$65,077	\$31,455	\$121,150	\$34,013	\$11,598	\$284,350	\$404,188	-\$119,838	
2. OE&E	4,913	10,465	6,022	19,584	13,998	1,481	56,463	59,978	-3,515	
Lease Revenue Bond	<u>0</u>	<u>0</u>	<u>0</u>	<u>9,156</u>	<u>0</u>	<u>0</u>	<u>9,156</u>	<u>6,309</u>	<u>2,847</u>	
Total Operations Expenditures	\$25,971	\$75,542	\$37,477	\$149,889	\$48,012	\$13,078	\$349,969	\$470,475	-\$120,506	
E. Control Section Adjustments Employee Compensation and Retirement	\$879	\$4,905	\$1,718	\$4,418	\$5,778	\$132	\$17,830	\$17,248	\$582	
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F. BCP / Major Assumptions	•	CO70	# 404	COE 4	04 040	CO	CO 440	00	CO 440	
 DC Funded Positions to HQ Lump Sum 	\$0 0	-\$279 3,978	-\$164 0	-\$354 0	-\$1,313 5,322	\$0 0	-\$2,110 9,300	\$0 7,075	-\$2,110 2,225	
Security Costs	0	67	0	0	580	0	647	7,075	647	
Total Major Assumptions	\$0	\$3,766	-\$164	-\$354	\$4,589	\$0	\$7,837	\$7,075	\$762	
GRAND TOTAL	\$26,850	\$84,213	\$39,031	\$153,953	\$58,378	\$13,210	\$375,636	\$494,798	-\$119,162	

FUND SOURCES:	Canyon Springs	Fairview	Porterville GTA	Porterville STP	Sonoma	STAR & Mobile Crisis Team	Total 2018-19	Updated 2017-18	2018-19 Request
A. General Funds	\$13,703	\$43,522	\$20,245	\$152,350	\$48,922	\$13,210	\$291,953	\$366,617	-\$74,664
 General Fund Match 	13,100	40,581	18,731	1,548	9,400	0	83,360	127,858	-44,498
General Fund Other	603	2,941	1,514	150,801	39,522	13,210	208,593	238,758	-30,166
B. Reimbursements Medi-Cal	\$13,100 13,100	\$40,581 40,581	\$18,731 18,731	\$1,548 1,548	\$9,400 9,400	\$0 0	\$83,360 <i>83,360</i>	\$127,858 127,858	-\$44,498 <i>-44,4</i> 98
C. Lottery Education Fund	\$47	\$110	\$55	\$55	\$56	\$0	\$323	\$323	\$0
GRAND TOTAL	\$26,850	\$84,213	\$39,031	\$153,953	\$58,378	\$13,210	\$375,636	\$494,798	-\$119,162

Notes:

The total number of units reflect planned partial year unit consolidations as populations decline due to community placements. Slight rounding differences may occur between the Executive Summary Table and DC Detail Sheets.

SYSTEMWIDE POPULATION

	Current Year 2017-18										
	Canyon Springs	Fairview	Porterville GTA	Porterville STP	Sonoma	STAR & Mobile Crisis	Total				
2017-18 Enacted Budget											
Population, July 1, 2017	53	151	118	211	250	10	793				
Change (+/-)	3	-88	-34	0	-179	0	-298				
Ending Population, June 30, 2018	56	63	84	211	71	10	495				
Proposed Governor's Budget for C	Y 2017-18										
Population, July 1, 2017	48	162	116	205	256	8	795				
Change (+/-)	8	-68	-33	6	-173	2	-258				
Ending Population, June 30, 2018	56	94	83	211	83	10	537				
Population Change CY 2017-18											
Population, July 1, 2017	-5	11	-2	-6	6	-2	2				
Change (+/-)	5	20	1	6	6	2	40				
Ending Population, June 30, 2018	0	31	-1	0	12	0	42				

Budget Year 2018 -19										
	Canyon Springs	Fairview	Porterville GTA	Porterville STP	Sonoma	STAR & Mobile Crisis	Total			
2017-18 Enacted Budget										
Population, July 1, 2017	53	151	118	211	250	10	793			
Change (+/-)	3	-88	-34	0	-179	0	-298			
Ending Population, June 30, 2018	56	63	84	211	71	10	495			
Proposed Governor's Budget for B	Y 2018-19									
Population, July 1, 2018	56	94	83	211	83	20	547			
Change (+/-)	0	-68	-35	0	-83	0	-186			
Ending Population, June 30, 2019	56	26	48	211	0	20	361			
Population Change BY 2018-19										
Population, July 1, 2018	3	-57	-35	0	-167	10	-246			
Change (+/-)	-3	20	-1	0	96	0	112			
Ending Population, June 30, 2019	0	-37	-36	0	-71	10	-134			

Note: The July 1, 2018 population of 547 is 10 residents higher than the ending population on June 30, 2018. The difference reflects the estimated placement of 10 consumers into two new Department-operated Stabilization, Training, Assistance and Reintegration (STAR) acute crisis homes that are coming online in 2018-19.

Operations Program Update

2017-18

The Department proposes a net increase of \$28.8 million (\$18.4 million General Fund) and 72.8 positions over the enacted budget. The funds and positions are required to care for an additional 42 residents as a result of slower transitions to community living, and to fund employee compensation adjustments and cash payouts of leave balances for employees separating from the closing developmental centers. Specific adjustments by facility, are as follows:

Canyon Springs

The Governor's Budget increases funding by a net \$1 million (\$0.3 million GF) to reflect current staffing and resident populations, and for employee compensation adjustments. Specific adjustment include:

- Increase of \$0.1 million in Personal Services expenditures and OE&E.
- Increase of \$0.9 million for Item 9800 and Control Section 3.60 Employee Compensation Adjustments.

Fairview

The Governor's Budget increases funding by a net \$9.3 million (\$3 million GF) to reflect a net increase of 44.4 positions due to fewer resident placements, increased OE&E, employee compensation adjustments, and lump sum leave payouts. Fairview's revised budget also reflects the removal of Stabilization, Training, Assistance, and Reintegration (STAR) home and Mobile Crisis Team staff and expenditures that are now displayed separately in the Estimate. Specific adjustments include:

- Increase of \$4.1 million in Personal Services expenditures and 44.4 positions (4.9 Unit Staffing and 39.5 Program Support positions).
- Increase of \$0.6 million in OE&E.
- Increase of \$4.7 million for Item 9800 and Control Section 3.60 Employee Compensation Adjustments.
- Increase of \$3.7 million for lump sum cash payouts of leave balances.
- Decrease of \$3.8 million and 33.9 positions for STAR Homes and Mobile Crisis Teams.

Porterville General Treatment Area (GTA)

The Governor's Budget increases funding by a net \$0.6 million (\$0.4 million GF), which includes reductions in Personal Services and OE&E expenditures resulting from reductions in staffing and resident placements, offset by an increase in employee compensation adjustments. Specific adjustments include:

- Decrease of \$1 million in Personal Services expenditures and 8.1 positions (5.8 Unit Staffing and 2.3 Program Support positions).
- Decrease of \$0.1 million in OE&E.
- Increase of \$1.7 million for Item 9800 and Control Section 3.60 Employee Compensation Adjustments.

Porterville STP

The Governor's Budget increases funding by a net \$1.8 million (\$1.3 million GF) due to the reallocation of program support positions and OE&E from the GTA. More specifically, DDS prorates support costs, including administrative functions and facility OE&E, between the GTA and STP. As resident populations in the GTA and related expenditures decrease, more program support and facility OE&E expenditures are allocated to the STP. Employee compensation adjustments also increase current year estimates. Specific adjustments include:

- Increase of \$0.2 million in Personal Services expenditures for 2.5 Program Support positions transferred from the GTA.
- Increase of \$0.1 million for facility OE&E.
- Increase of \$4.3 million for Item 9800 and Control Section 3.60 Employee Compensation Adjustments.
- Decrease of \$2.8 million for Lease Revenue Bond payments per Section 4.30 of the enacted budget.

Sonoma

The Governor's Budget increases funding by a net \$8.6 million (\$5.8 million GF). This includes a 34 position increase resulting from fewer resident placements and the need to retain staff, offset by a 33.8 position decrease in STAR staffing. STAR and Mobile Crisis Team expenditures are displayed separately in the Estimate. The budget also includes increases for facility and resident OE&E, and for employee compensation adjustments and lump sum leave payouts. Specific adjustments include:

- Increase of \$3 million in Personal Services expenditures and 34.0 positions (16.5 Unit Staffing and 17.5 Program Support positions).
- Increase of \$0.3 million in facility and resident OE&E.
- Increase of \$5.6 million for Item 9800 and Control Section 3.60 Employee Compensation Adjustments.
- Increase of \$3.4 million for lump sum cash payouts of leave balances.
- Decrease of \$3.7 million and 33.8 positions for STAR Homes and Mobile Crisis Teams.

STAR Homes and Mobile Crisis Teams

The Governor's Budget displays STAR Homes and Mobile Crisis Teams separately from the Fairview and Sonoma developmental centers where they were previously budgeted. In addition to identifying these expenditures distinctly from other facilities, the budget includes the following adjustments:

- Increase of \$132,000 GF for Item 9800 and Control Section 3.60 Employee Compensation Adjustments.
- Increase of \$34,000 GF Personal Services from the reclassification of one Psychiatric Technician to Psychiatric Technician Instructor.

2018-19

The 2018-19 Governor's Budget proposes a net decrease of \$119.2 million (\$74.7 million GF) and -827.4 positions as compared to the revised 2017-18 budget. The decreases are driven by the scheduled closure of Sonoma on December 31, 2018, and continued resident placements from Fairview and Porterville GTA. The position decrease includes adjustments to shift 15.5 positions to Headquarters for statewide oversight activities, to open and staff two additional STAR homes, fund employee compensation adjustments, and pay lump sum leave balances.

Canyon Springs

The Governor's Budget decreases funding by a net \$0.9 million (\$0.4 GF decrease) in personal services and OE&E to reflect current staffing and resident populations, and for employee compensation adjustments. Specific adjustments as compared to the revised current year budget include:

- Decrease of \$0.7 million in Personal Services expenditures resulting from updated benefit expenditures.
- Decrease of \$0.2 million in OE&E based on updated expenditures.
- Increase of \$27,000 for Item 9800 and Control Section 3.60 Employee Compensation Adjustments.

<u>Fairview</u>

The Governor's Budget decreases funding by a net \$38.2 million (\$20.2 million GF decrease) and -315.1 positions, largely driven by continued resident transitions. Included are adjustments to shift funds and positions with statewide oversight functions to Headquarters, to provide employee compensation adjustments and lump sum payouts, and increase security on the campus. Specific adjustments as compared to the revised current year budget include:

- Decrease of \$35.1 million in Personal Services expenditures resulting from continued resident transitions.
- Decrease of \$3.4 million in OE&E resulting from continued resident transitions.
- Decrease of \$0.3 million and 2.0 positions shifting to Headquarters for statewide oversight activities (related BCP).
- Increase of \$0.2 million for Item 9800 and Control Section 3.60 Employee Compensation Adjustments.
- Increase of \$0.3 million for lump sum cash payouts of leave balances.
- Increase of \$0.1 million for increased security costs.

Porterville GTA

The Governor's Budget decreases funding by a net \$21.5 million (\$11.4 million GF decrease) and -181.6 positions to reflect current staffing and resident populations, updated OE&E costs, and employee compensation adjustments. The position decrease includes the shifting of 33.5 position to Porterville STP. Specific adjustments as compared to the revised current year budget include:

- Decrease of \$19.4 million in Personal Services expenditures resulting from continued resident transitions.
- Decrease of \$2.0 million in OE&E resulting from change in population and staffing.
- Decrease of \$0.2 million and transfer of 0.9 positions to Headquarters for statewide oversight activities (related BCP).
- Increase of \$0.1 million for Item 9800 and Control Section 3.60 Employee Compensation Adjustments.

Porterville STP

The Governor's Budget increases funding by a net \$4.5 million GF due to updated Personal Services expenditures resulting from the shifting of 33.5 positions from Porterville GTA, an adjusted proration of Support Service costs, and employee compensation adjustments. Specific adjustments as compared to the revised current year budget include:

- Decrease of \$1.1 million in Personal Services expenditures resulting from changes in population and staffing in the GTA that is affecting the proration of Support Services staffing costs.
- Increase of \$3.0 million OE&E resulting from updating the average of actual expenditures and the proration of related Support Service employee OE&E.

- Decrease of \$0.4 million and transfer of 2.1 positions to Headquarters for statewide oversight activities (related BCP).
- Increase of \$0.2 million for Item 9800 and Control Section 3.60 Employee Compensation Adjustments.
- Increase of \$2.8 million for Lease Revenue Bond payments per Section 4.30 of the enacted budget.

Sonoma

The Governor's Budget decreases funding by a net \$68.5 million (\$52.7 million GF decrease) and -417.4 positions resulting from continued resident transitions and the closure of the facility. Specific adjustments as compared to the revised current year budget include:

- Decrease of \$68.4 million in Personal Services expenditures resulting from changes in population and staffing.
- Decrease of \$1.6 million in OE&E resulting from changes in population and staffing.
- Decrease of \$1.3 million and the transfer of 10.5 positions to Headquarters for statewide oversight activities.
- Increase of \$0.2 million for Item 9800 and Control Section 3.60 Employee Compensation Adjustments.
- Increase of \$2 million for lump sum cash payouts of leave balances.
- Increase of \$0.6 million for increased security costs.

STAR Homes and Mobile Crisis Teams

The Governor's Budget includes an increase of \$5.5 million GF and 53.2 positions (40.2 Unit Staffing and 13 Program Support positions) for two additional STAR homes.

Canyon Springs Community Facility

Resident Population and Staffing Detail Current Year 2017 - 18

Beginning Resident Population					
ICF SNF Acute Total Population					
48	0	0	48		

Units				
ICF	SNF	Acute	Total Units	
3.00	0.00	0.00	3.00	

Unit Staffing ICF SNF Acute **Total Positions** Clinical 152.0 0.0 0.0 152.0 Medical 0.0 2.0 0.0 2.0 **Support Services** 75.0 0.0 0.0 75.0 Total 229.0 0.0 0.0 229.0

Total Staffing	229.0	0.0	0.0	229.0

Increment	Incremental Position Change from 2017 Enacted Budget				
	2017 - 18	7 - 18 2018 - 19			
Staffing	Enacted	Governor's	Change		
	Budget	Budget			
Clinical	152.0	152.0	0.0		
Medical	2.0	2.0	0.0		
Support Services	75.0	75.0	0.0		
Total Positions	229.0	229.0	0.0		

Canyon Springs Community Facility

Expenditure and Funding Detail Current Year 2017 - 18 (Dollars in thousands)

Personal Services Staff OE&E Resident OE&E Total

	Unit Staffing Expenditures					
ſ	ICF SNF Acute Facility-Wide Total					
;[\$21,069	\$0	\$0	\$685	\$21,069	
:	1,715	0	0	0	1,715	
:	<u>1,291</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>1,291</u>	
I	\$24,075	\$0	\$0	\$685	\$24,075	

Employee Compensation

Control Section Adjustments				
ICF SNF Acute Facility-Wide Total				
\$0	\$0	\$0	\$852	\$852

Personal Services
OE&E
Staff OE&E
Resident OE&E
Fixed OE&E
Control Section Adjustments
Grand Total

	Total Facility Expenditures				
	ICF	SNF	Acute	Facility-Wide	Total
es	\$21,069	\$0	\$0	\$685	\$21,754
&E	3,006	0	0	2,103	5,109
ßΕ	1,715	0	0	0	1,715
ßΕ	1,291	0	0	0	1,291
ßΕ	0	0	0	2,103	2,103
nts	<u>0</u>	<u>0</u>	<u>0</u>	<u>852</u>	<u>852</u>
tal	\$24,075	\$0	\$0	\$3,640	\$27,715

General Fund Reimbursements Lottery Education Fund **Grand Total**

	Fund Sources					
	ICF SNF Acute Facility-Wide					
b	\$12,281	\$0	\$0	\$1,829	\$14,110	
s	11,747	0	0	1,811	13,558	
b	<u>47</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>47</u>	
l	\$24,075	\$0	\$0	\$3,640	\$27,715	

Fairview Developmental Center

Resident Population and Staffing Detail Current Year 2017 - 18

Beginning Resident Population				
ICF SNF Acute Total Population				
91	71	0	162	

Units*				
ICF SNF Acute Total Units				
5.00	3.00	1.00	9.00	

Clinical Medical Support Services

	Unit Staffing				
	ICF	SNF	Acute	Total Positions	
ıl	263.9	110.9	14.3	389.1	
al	6.3	6.0	0.5	12.8	
s	<u>57.8</u>	<u>18.8</u>	<u>2.1</u>	<u>78.8</u>	
al	328.0	135.8	16.9	480.6	

	Program Support Staffing						
	ICF	ICF SNF Acute Total Positions					
Clinical	20.3	9.5	1.3	31.0			
Medical	29.4	13.7	1.8	45.0			
Support Services	<u>196.7</u>	<u>91.9</u>	<u>12.3</u>	<u>300.9</u>			
Total	246.4	115.1	15.4	376.9			

_				
Total Staffing	574.3	250.9	32.3	857.5

Incremental Position Change from 2017 Enacted Budget					
	2017 - 18	2018 - 19			
Staffing	Enacted	Governor's	Change		
	Budget	Budget			
Clinical	408.3	420.1	11.8		
Medical	54.9	57.8	2.8		
Support Services	349.8	379.7	29.8		
Total Positions	813.1	857.5	44.4		

^{*}The total number of units reflect partial year consolidations as populations decline due to community placements. Note: Slight rounding differences may occur between the Executive Summary Table and DC Detail Sheets.

Fairview Developmental Center

Expenditure and Funding Detail Current Year 2017 - 18 (Dollars in thousands)

	Unit Staffing Expenditures						
	ICF	ICF SNF Acute Facility-Wide Total					
Personal Services	\$31,746	\$14,196	\$2,157	\$2,154	\$48,099		
Staff OE&E	1,982	816	101	0	2,899		
Resident OE&E	<u>2,366</u>	<u>1,846</u>	<u>0</u>	<u>0</u>	<u>4,212</u>		
Total	\$36,094	\$16,858	\$2,258	\$2,154	\$55,210		

	Program Support Expenditures				
	ICF	SNF	Acute	Facility-Wide	Total
Personal Services	\$31,559	\$14,744	\$1,975	\$1,690	\$49,967
Staff OE&E	1,489	696	93	0	2,278
Fixed Facility OE&E	<u>0</u>	<u>0</u>	<u>0</u>	<u>4,483</u>	4,483
Total	\$33,048	\$15,440	\$2,068	\$6,173	\$56,728

	Control Section Adjustments				
	ICF	SNF	Acute	Facility-Wide	Total
Employee Compensation	\$0	\$0	\$0	\$4,740	\$4,740

	Major Assumptions					
	ICF	SNF	Acute	Facility-Wide	Total	
Lump Sum	\$0	\$0	\$0	\$3,707	\$3,707	

1	Total Facility Expenditures						
	ICF						
Personal Services	\$63,305	\$28,940	\$4,132	\$3,844	\$100,220		
OE&E	5,837	3,358	195	4,483	13,873		
Staff OE&E	3,471	1,512	195	0	5,177		
Resident OE&E	2,366	1,846	0	0	4,212		
Fixed OE&E	0	0	0	<i>4,4</i> 83	<i>4,4</i> 83		
Control Section Adjustments	0	0	0	4,740	4,740		
Major Assumptions	<u>0</u>	<u>0</u>	<u>0</u>	<u>3,707</u>	<u>3,707</u>		
Grand Total	\$69,142	\$32,298	\$4,326	\$16,774	\$122,540		

	Fund Sources						
	ICF	ICF SNF Acute Facility-Wide Total					
General Fund	\$35,420	\$16,310	\$2,641	\$9,346	\$63,717		
Reimbursements	33,612	15,987	1,686	7,428	58,713		
Lottery Education Fund	<u>110</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>110</u>		
Grand Total	\$69,142	\$32,298	\$4,326	\$16,774	\$122,540		

Porterville Developmental Center- General Treatment Area

Resident Population and Staffing Detail Current Year 2017 - 18

Beginning Resident Population					
ICF SNF Acute Total Populat					
80	36	0	116		

Units*					
ICF SNF Acute Total Units					
3.75	2.00	0.00	5.75		

Clinical Medical Support Services Total

	Unit Staffing						
	ICF	SNF	Acute	Total Positions			
al	197.9	74.0	0.0	271.9			
al	4.7	4.0	0.0	8.7			
es	<u>43.4</u>	<u>12.6</u>	<u>0.0</u>	<u>55.9</u>			
al	246.0	90.5	0.0	336.5			

	Program Support Staffing				
	ICF	SNF	Acute	Total Positions	
Clinical	9.9	4.0	0.0	13.9	
Medical	13.5	5.4	0.0	18.9	
Support Services	<u>99.9</u>	<u>40.1</u>	<u>0.0</u>	<u>140.0</u>	
Total	123.3	49.4	0.0	172.7	

	Total Staffing	369.2	140.0	0.0	509.2
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Incremental Position Change from 2017 Enacted Budget						
Staffing	2017 - 18 Enacted	2018 - 19 Governor's	Change			
	Budget	Budget				
Clinical	290.8	285.8	-5.0			
Medical	28.5	27.5	-1.0			
Support Services	198.0	198.0 195.9				
Total Positions	517.3	509.2	-8.1			

^{*}The total number of units reflect partial year consolidations as populations decline due to community placements.

Porterville Developmental Center - General Treatment Area

Expenditure and Funding Detail Current Year 2017 - 18 (Dollars in thousands)

	Unit Staffing Expenditures					
Personal Services	\$23,408	\$9,305	\$0	\$1,185	\$33,898	
Staff OE&E	1,481	543	0	0	2,025	
Resident OE&E	<u>1,962</u>	<u>883</u>	<u>0</u>	<u>0</u>	<u>2,844</u>	
Total	\$26,851	\$10,731	\$0	\$1,185	\$38,767	

	Program Support Expenditures						
	ICF	SNF	Acute	Facility-Wide	Total		
Personal Services	\$11,699	\$4,676	\$0	\$608	\$16,983		
Staff OE&E	739	296	0	0	1,035		
Fixed Facility OE&E	<u>0</u>	<u>0</u>	<u>0</u>	<u>2,069</u>	<u>2,069</u>		
Total	\$12,438	\$4,972	\$0	\$2,678	\$20,087		

	Control Section Adjustments					
	ICF	SNF	Acute	Facility-Wide	Total	
Employee Compensation	\$0	\$0	\$0	\$1,664	\$1,664	

	Total General Treatment Area Expenditures						
	ICF	SNF	Acute	Facility-Wide	Total		
Personal Services	\$35,107	\$13,981	\$0	\$1,793	\$50,881		
OE&E	4,182	1,722	0	2,069	7,973		
Staff OE&E	2,221	839	0	0	3,059		
Resident OE&E	1,962	883	0	0	2,844		
Fixed Facility OE&E	0	0	0	2,069	2,069		
Control Section Adjustments	<u>0</u>	<u>0</u>	<u>0</u>	<u>1,664</u>	<u>1,664</u>		
Grand Total	\$39,289	\$15,703	\$0	\$5,526	\$60,518		

	Fund Sources						
	ICF SNF		Acute	Facility-Wide	Total		
General Fund	\$20,378	\$8,013	\$0	\$3,302	\$31,693		
Reimbursements	18,856	7,690	0	2,224	28,770		
Lottery Education Fund	<u>55</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>55</u>		
Grand Total	\$39,289	\$15,703	\$0	\$5,526	\$60,518		

Porterville Developmental Center - Secure Treatment Program

Resident Population and Staffing Detail Current Year 2017 - 18

Beginning Resident Population						
ICF SNF Acute Total Population						
205	0	0	205			

Units*					
ICF	SNF	Acute	Total Units		
13.00	0.00	1.00	14.00		

Unit Staffing ICF SNF Acute **Total Positions** 624.6 Clinical 14.3 0.0 638.9 Medical 16.5 0.0 0.5 17.0 **Support Services** <u>107.</u>8 0.0 2.1 109.9 16.9 Total 748.9 0.0 765.8

Program Support Staffing ICF SNF Acute **Total Positions** Clinical 30.3 0.0 8.0 31.1 Medical 41.0 0.0 1.1 42.1 Support Services 304.7 0.0 312.9 8.2 Total 376.1 0.0 10.1 386.1

Intensive Treatment Residence - Behavioral ICF SNF Total Positions Acute Clinical 29.5 0.0 0.0 29.5 Medical 0.8 0.0 0.0 0.8 Support Services 7.5 0.0 0.0 7.5 Total 37.8 0.0 0.0 37.8

Intensive Treatment Residence - Medical ICF SNF **Total Positions** Acute Clinical 29.5 29.5 0.0 0.0 Medical 8.0 0.0 0.0 8.0 Support Services 0.0 <u>7.5</u> 0.0 7.5 Total 37.8 0.0 0.0 37.8

Total Staffing 1,200.4 0.0 27.0 1,227.4

Incremental Position Change from 2017 Enacted Budget						
	2017 - 18	2018 - 19				
Staffing	Enacted	Governor's	Change			
	Budget	Budget				
Clinical	728.6	728.9	0.3			
Medical	60.7	60.6	-0.1			
Support Services	435.6	437.8	2.2			
Total Positions	1,224.9	1,227.4	2.5			

Porterville Developmental Center - Secure Treatment Program

Expenditure and Funding Detail Current Year 2017 - 18 (Dollars in thousands)

	Unit Staffing Expenditures					
	ICF	SNF	Acute	Facility-Wide	Total	
Personal Services	\$72,285	\$0	\$2,120	\$2,637	\$77,042	
Staff OE&E	4,500	0	101	0	4,601	
Resident OE&E	<u>5,174</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>5,174</u>	
Total	\$81,958	\$0	\$2,222	\$2,637	\$86,816	

	Program Support Expenditures					
	ICF	SNF	Acute	Facility-Wide	Total	
Personal Services	\$35,713	\$0	\$968	\$1,330	\$38,010	
Staff OE&E	2,257	0	61	0	2,318	
Fixed Facility OE&E*	<u>0</u>	<u>0</u>	<u>0</u>	<u>10,385</u>	<u>10,385</u>	
Total	\$37,970	\$0	\$1,029	\$11,714	\$50,713	

	Intensive Treatment Residence - Behavioral Staffing Expenditures				
	ICF	SNF	Acute	Facility-Wide	Total
Personal Services	\$3,458	\$0	\$0	\$130	\$3,588
Staff OE&E	<u>227</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>227</u>
Total	\$3,684	\$0	\$0	\$130	\$3,814

		Intensive Treatmer	nt Residence - Medica	al Staffing Expenditure	S
	ICF	SNF	Acute	Facility-Wide	Total
Personal Services	\$3,458	\$0	\$0	\$130	\$3,588
Staff OE&E	<u>227</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>227</u>
Total	\$3,684	\$0	\$0	\$130	\$3,814

		Control Section Adjustments			
	ICF	SNF	Acute	Facility-Wide	Total
Employee Compensation	\$0	\$0	\$0	\$4,277	\$4,277

		Total Secure Treatment Program Expenditures				
	ICF	SNF	Acute	Facility-Wide	Total	
Personal Services	\$114,913	\$0	\$3,088	\$4,226	\$122,227	
OE&E	12,384	0	163	10,385	22,931	
Staff OE&E	7,210	0	163	0	7,373	
Resident OE&E	5,174	0	0	0	5,174	
Fixed Facility OE&E*	0	0	0	10,385	10,385	
Control Section Adjustments	<u>0</u>	<u>0</u>	<u>0</u>	<u>4,277</u>	<u>4,277</u>	
Grand Total	\$127,296	\$0	\$3,251	\$18,888	\$149,435	

			Fund Sources		
	ICF	SNF	Acute	Facility-Wide	Total
General Fund	\$127,241	\$0	\$2,185	\$18,424	\$147,850
Reimbursements	0	0	1,066	463	1,530
Lottery Education Fund	<u>55</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>55</u>
Grand Total	\$127,296		\$3,251	\$18,888	\$149,435

^{*} Includes Lease Revenue Debt Service Payment.

Sonoma Developmental Center

Resident Population and Staffing Detail Current Year 2017 - 18

Beginning Resident Population				
ICF	SNF	Acute	Total	
141	115	0	256	

	Unit	ts*	
ICF	SNF	Acute	Total
5.00	4.00	1.00	10.00

Clinical Medical Support Services Total

		Unit St	affing	
	ICF	SNF	Acute	Total Positions
al	263.9	147.9	14.3	426.1
al	6.3	8.0	0.5	14.8
es	<u>57.8</u>	<u>25.1</u>	<u>2.1</u>	<u>85.0</u>
al	328.0	181.0	16.9	525.9

		Program Supp	oort Staffing	
	ICF	SNF	Acute	Total Positions
Clinical	20.0	12.5	1.6	34.0
Medical	29.9	18.7	2.4	51.0
Support Services	<u>210.1</u>	<u>131.3</u>	<u>16.5</u>	<u>358.0</u>
Total	260.0	162.5	20.4	443.0

_				
Total Staffing	588.0	343.5	37.3	968.8

Incremental Position Change from 2017 Enacted Budget				
	2017 - 18	2018 - 19		
Staffing	Enacted	Governor's	Change	
	Budget	Budget		
Clinical	444.8	460.1	15.3	
Medical	63.4	65.8	2.3	
Support Services	426.6	443.0	16.4	
Total Positions	934.8	968.8	34.0	

^{*}The total number of units reflect partial year consolidations as populations decline due to community placements. Note: Slight rounding differences may occur between the Executive Summary Table and DC Detail Sheets.

Sonoma Developmental Center

Expenditure and Funding Detail Current Year 2017 - 18 (Dollars in thousands)

	ICF	SNF	Acute	Facility-Wide	Total
Personal Services	\$31,154	\$18,575	\$2,116	\$2,613	\$54,458
Staff OE&E	1,647	906	85	0	2,638
Resident OE&E	<u>3,651</u>	<u>2,978</u>	<u>0</u>	<u>0</u>	<u>6,629</u>
Total	\$36,452	\$22,459	\$2,201	\$2,613	\$63,725
		Progra	m Support Expend	litures	
	ICF	Progra SNF	m Support Expend Acute	litures Facility-Wide	Total
Personal Services	ICF \$27,293				Total \$47,960
Personal Services Staff OE&E		SNF	Acute	Facility-Wide	
	\$27,293	SNF \$16,818	Acute \$1,648	Facility-Wide	\$47,960

Unit Staffing Expenditures

		Control Section Adjustments				
	ICF	SNF	Acute	Facility-Wide	Total	
Employee Compensation	\$0	\$0	\$0	\$5,583	\$5,583	

	Major Assumptions						
	ICF	SNF	Acute	Facility-Wide	Total		
Lump Sum	\$0	\$0	\$0	\$3,368	\$3,368		

	Total Facility Expenditures					
	ICF	SNF	Acute	Facility-Wide	Total	
Personal Services	\$58,447	\$35,393	\$3,765	\$4,814	\$102,418	
OE&E	6,655	4,720	166	4,017	15,558	
Staff OE&E	3,004	1,742	166	0	4,913	
Resident OE&E	3,651	2,978	0	0	6,629	
Fixed OE&E	0	0	0	4,017	4,017	
Control Section Adjustments	0	0	0	5,583	5,583	
Major Assumptions	<u>0</u>	<u>0</u>	<u>0</u>	<u>3,368</u>	<u>3,368</u>	
Grand Total	\$65,102	\$40,113	\$3,931	\$17,782	\$126,927	

	Fund Sources					
	ICF	SNF	Acute	Facility-Wide	Total	
General Fund	\$65,046	\$20,321	\$2,620	\$13,597	\$101,584	
Reimbursements	0	19,792	1,311	4,185	25,287	
Lottery Education Fund	<u>56</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>56</u>	
Grand Total	\$65,102	\$40,113	\$3,931	\$17,782	\$126,927	

STAR & Mobile Crisis Teams

Resident Population and Staffing Detail Current Year 2017 - 18

Beginning Resident Population						
ICF SNF Acute Total Population						
8	0	0	8			

Units						
ICF	SNF	Acute	Total Units			
2.00	0.00	0.00	2.00			

STAR Unit Staffing ICF SNF **Total Positions** Acute Clinical 39.5 0.0 0.0 39.5 Medical 0.7 0.0 0 0.7 **Support Services** 13.0 0.0 0.0 13.0 Total 53.2 0.0 0.0 53.2

Mobile Crisis Team Staffing ICF SNF Acute **Total Positions** Clinical 14.5 0.0 0.0 14.5 Medical 0.0 0.0 0.0 0.0 **Support Services** 0.0 0.0 0.0 0.0 Total 14.5 0.0 0.0 14.5

Total Staffing 67.7 0.0 0.0 67.7

Incremental Position Change from 2017 Enacted Budget						
	2017 - 18	2018 - 19				
Staffing	Enacted	Governor's	Change			
	Budget	Budget				
Clinical	54.0	54.0	0.0			
Medical	0.7	0.7	0.0			
Support Services	13.0	13.0	0.0			
Total Positions	67.7	67.7	0.0			

STAR & Mobile Crisis Teams

Expenditure and Funding Detail Current Year 2017 - 18 (Dollars in thousands)

	STAR Unit Expenditures						
	ICF	Total					
Personal Services	\$5,067	\$0	\$0	\$0	\$5,067		
Staff OE&E	293	0	0	0	293		
Resident OE&E	<u>259</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>259</u>		
Total	\$5,619	\$0	\$0	\$0	\$5,619		

	Mobile Crisis Team Expenditures						
	ICF	SNF	Acute	Facility-Wide	Total		
Personal Services	\$0	\$0	\$0	\$1,621	\$1,621		
Staff OE&E	0	0	0	290	290		
Fixed Facility OE&E	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>		
Total	\$0	\$0	\$0	\$1,912	\$1,912		

	Control Section Adjustments				
	ICF	SNF	Acute	Facility-Wide	Total
Employee Compensation	\$0	\$0	\$0	\$132	\$132

	Total STAR & Mobile Crisis Teams Expenditures						
	ICF	SNF	Acute	Facility-Wide	Total		
Personal Services	\$5,067	\$0	\$0	\$1,621	\$6,688		
OE&E	553	0	0	290	843		
Staff OE&E	293	0	0	290	584		
Resident OE&E	259	0	0	0	259		
Fixed Facility OE&E	0	0	0	0	0		
Control Section Adjustments	<u>0</u>	<u>0</u>	<u>0</u>	<u>132</u>	<u>132</u>		
Grand Total	\$5,619	\$0	\$0	\$2,044	\$7,663		

	Fund Sources					
	ICF	SNF	Acute	Facility-Wide	Total	
General Fund	\$5,619	\$0	\$0	\$2,044	\$7,663	
Reimbursements	0	0	0	0	0	
Lottery Education Fund	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	
Grand Total	\$5,619	\$0	\$0	\$2,044	\$7,663	

Canyon Springs Community Facility

Resident Population and Staffing Detail Budget Year 2018 - 19

Beginning Resident Population				
ICF SNF Acute Total Population				
56	0	0	56	

Units				
ICF	SNF	Acute	Total Units	
3.00	0.00	0.00	3.00	

	Unit Staffing				
	ICF SNF Acute Total Position				
Clinical	152.0	0.0	0.0	152.0	
Medical	2.0	0.0	0.0	2.0	
Support Services	<u>75.0</u>	<u>0.0</u>	<u>0.0</u>	<u>75.0</u>	
Total	229.0	0.0	0.0	229.0	

-				
Total Staffing	229.0	0.0	0.0	229.0

Incremental Position Change from 2017 Enacted Budget					
	2017 - 18	2018 - 19			
Staffing	Enacted	Governor's	Change		
	Budget	Budget			
Clinical	152.0	152.0	0.0		
Medical	2.0	2.0	0.0		
Support Services	75.0	75.0	0.0		
Total Positions	229.0	229.0	0.0		

Canyon Springs Community Facility

Expenditure and Funding Detail Budget Year 2018 - 19 (Dollars in thousands)

Personal Services
Staff OE&E
Resident OE&E
Total

	Unit Staffing Expenditures					
ICF SNF Acute Facility-Wide Total						
	\$21,057	\$0	\$0	\$0	\$21,057	
	1,722	0	0	0	1,722	
	<u>1,230</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>1,230</u>	
	\$24,010	\$0	\$0	\$0	\$24,010	

Employee Compensation

Control Section Adjustments				
ICF SNF Acute Facility-Wide Total				Total
\$0	\$0	\$0	\$879	\$879

Personal Services
OE&E
Staff OE&E
Resident OE&E
Fixed OE&E
Control Section Adjustments
Grand Total

	Total Facility Expenditures					
	ICF	SNF	Acute	Facility-Wide	Total	
es	\$21,057	\$0	\$0	\$0	\$21,057	
ŁΕ	2,953	0	0	1,961	4,913	
Ε	1,722	0	0	0	1,722	
·Ε	1,230	0	0	0	1,230	
·Ε	0	0	0	1,961	1,961	
ıts	<u>0</u>	<u>0</u>	<u>0</u>	<u>879</u>	<u>879</u>	
al	\$24,010	\$0	\$0	\$2,840	\$26,850	

General Fund Reimbursements Lottery Education Fund **Grand Total**

	Fund Sources				
	ICF SNF Acute		Facility-Wide	Total	
nd	\$12,248	\$0	\$0	\$1,455	\$13,703
ts	11,715	0	0	1,385	13,100
nd	<u>47</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>47</u>
al	\$24,010	\$0	\$0	\$2,840	\$26,850

Fairview Developmental Center

Resident Population and Staffing Detail Budget Year 2018 - 19

Beginning Resident Population				
ICF SNF Acute Total Population				
47	47	0	94	

Units*				
ICF	SNF	Acute	Total Units	
2.00	1.50	1.00	4.50	

Clinical Medical Support Services

	Unit Staffing					
	ICF	SNF	Acute	Total Positions		
I	105.9	55.5	14.3	175.7		
al	2.5	3.0	0.5	6.0		
s	<u>23.1</u>	<u>9.4</u>	<u>2.1</u>	<u>34.7</u>		
al	131.5	67.9	16.9	216.3		

Clinical Medical Support Services

	Program Support Staffing						
	ICF	SNF Acute		Total Positions			
linical	14.4	8.6	2.1	25.2			
ledical	24.1	14.5	3.6	42.3			
rvices	<u>146.8</u>	<u>89.6</u>	<u>22.3</u>	<u>258.7</u>			
Total	185.3	112.8	28.0	326.1			

Total Staffing	316.9	180.7	44.9	542 4
Total Stalling	310.3	100.7	44.3	J42.4

Incremental Position Change from 2017 Enacted Budget					
	2017 - 18	2018 - 19			
Staffing	Enacted	Governor's	Change		
	Budget	Budget			
Clinical	408.3	200.8	-207.5		
Medical	54.9	48.3	-6.7		
Support Services	349.8	293.3	-56.5		
Total Positions	813.1	542.4	-270.7		

^{*}The total number of units reflect partial year consolidations as populations decline due to community placements. Note: Slight rounding differences may occur between the Executive Summary Table and DC Detail Sheets.

Fairview Developmental Center

Expenditure and Funding Detail Budget Year 2018 - 19 (Dollars in thousands)

		Unit Staffing Expenditures						
	ICF	ICF SNF Acute Facility-Wide Total						
Personal Services	\$12,468	\$6,952	\$2,112	\$0	\$21,532			
Staff OE&E	750	382	95	0	1,227			
Resident OE&E	<u>1,552</u>	<u>1,552</u>	<u>0</u>	<u>0</u>	<u>3,105</u>			
Total	\$14,770	\$8,886	\$2,207	\$0	\$25,864			

	Program Support Expenditures					
	ICF SNF Acute Facility-Wide					
Personal Services	\$24,861	\$14,967	\$3,718	\$0	\$43,545	
Staff OE&E	1,061	639	159	0	1,858	
Fixed Facility OE&E	<u>0</u>	<u>0</u>	<u>0</u>	<u>4,275</u>	<u>4,275</u>	
Total	\$25,922	\$15,605	\$3,876	\$4,275	\$49,678	

	Control Section Adjustments				
	ICF	SNF	Acute	Facility-Wide	Total
Employee Compensation	\$0	\$0	\$0	\$4,905	\$4,905

	Major Assumptions						
	ICF	ICF SNF Acute Facility-Wide Total					
DC Funded Positions to HQ	\$0	\$0	\$0	-\$279	-\$279		
Lump Sum	0	0	0	3,978	3,978		
Security Costs	<u>0</u>	<u>0</u>	<u>0</u>	<u>67</u>	<u>67</u>		
Total	\$0	\$0	\$0	\$3,766	\$3.766		

	Total Facility Expenditures				
	ICF SNF Acute Facility-Wide				Total
Personal Services	\$37,329	\$21,918	\$5,830	\$0	\$65,077
OE&E	3,363	2,573	254	4,275	10,465
Staff OE&E	1,811	1,021	254	0	3,085
Resident OE&E	1,552	1,552	0	0	3,105
Fixed OE&E	0	0	0	4,275	4,275
Control Section Adjustments	0	0	0	4,905	4,905
Major Assumptions	<u>0</u>	<u>0</u>	<u>0</u>	<u>3,766</u>	<u>3,766</u>
Grand Total	\$40,692	\$24,491	\$6,084	\$12,946	\$84,213

	Fund Sources				
	ICF SNF Acute Facility-Wide Total				
General Fund	\$20,802	\$12,368	\$3,713	\$6,638	\$43,522
Reimbursements	19,780	12,123	2,370	6,308	40,581
Lottery Education Fund	<u>110</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>110</u>
Grand Total	\$40,692	\$24,491	\$6,084	\$12,946	\$84,213

Porterville Developmental Center- General Treatment Area

Resident Population and Staffing Detail Budget Year 2018 - 19

Beginning Resident Population						
ICF SNF Acute Total Population						
51	32	0	83			

Units*					
ICF SNF Acute Total Units					
2.50	1.00	0.00	3.50		

Clinical Medical Support Services Total

	Unit Staffing						
	ICF	ICF SNF Acute		Total Positions			
al	132.0	37.0	0.0	168.9			
al	3.1	2.0	0.0	5.1			
es	<u>28.9</u>	<u>6.3</u>	<u>0.0</u>	<u>35.2</u>			
tal	164.0	45.3	0.0	209.2			

	Program Support Staffing					
	ICF	SNF	Acute	Total Positions		
Clinical	7.0	2.3	0.0	9.2		
Medical	9.6	3.1	0.0	12.7		
Support Services	<u>72.9</u>	<u>23.6</u>	<u>0.0</u>	<u>96.5</u>		
Total	89.4	29.0	0.0	118.4		
Support Services	<u>72.9</u>	<u>23.6</u>	0.0	<u>96.5</u>		

	Total Staffing	253.4	74.2	0.0	327.6
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Incremental Position Change from 2017 Enacted Budget					
Staffing	2017 - 18 Enacted Budget	2018 - 19 Governor's Budget	Change		
Clinical	290.8		-112.6		
Medical	28.5	17.8	-10.6		
Support Services 198		131.7	-66.3		
Total Positions	517.3	327.6	-189.6		

^{*}The total number of units reflect partial year consolidations as populations decline due to community placements. Note: Slight rounding differences may occur between the Executive Summary Table and DC Detail Sheets.

Porterville Developmental Center - General Treatment Area

Expenditure and Funding Detail Budget Year 2018 - 19 (Dollars in thousands)

	Unit Staffing Expenditures				
Personal Services	\$15,572	\$4,643	\$0	\$0	\$20,215
Staff OE&E	1,010	277	0	0	1,288
Resident OE&E	<u>1,469</u>	<u>922</u>	<u>0</u>	<u>0</u>	<u>2,391</u>
Total	\$18,052	\$5,842	\$0	\$0	\$23,894

	Program Support Expenditures				
	ICF SNF Acute Facility-Wide Tot				Total
Personal Services	\$8,491	\$2,749	\$0	\$0	\$11,240
Staff OE&E	549	178	0	0	727
Fixed Facility OE&E	<u>0</u>	<u>0</u>	<u>0</u>	<u>1,618</u>	<u>1,618</u>
Total	\$9,040	\$2,926	\$0	\$1,618	\$13,584

	Control Section Adjustments				
	ICF	SNF	Acute	Facility-Wide	Total
Employee Compensation	\$0	\$0	\$0	\$1,718	\$1,718

	Major Assumptions				
	ICF	SNF	Acute	Facility-Wide	Total
DC Funded Positions to HQ	\$0	\$0	\$0	-\$164	-\$164

	Total General Treatment Area Expenditures				
	ICF	SNF	Acute	Facility-Wide	Total
Personal Services	\$24,063	\$7,391	\$0	\$0	\$31,455
OE&E	3,029	1,377	0	1,618	6,023
Staff OE&E	1,559	455	0	0	2,014
Resident OE&E	1,469	922	0	0	2,391
Fixed Facility OE&E	0	0	0	1,618	1,618
Control Section Adjustments	0	0	0	1,718	1,718
Major Assumptions	<u>0</u>	<u>0</u>	<u>0</u>	<u>-164</u>	<u>-164</u>
Grand Total	\$27,092	\$8,769	\$0	\$3,172	\$39,032

	Fund Sources					
	ICF	ICF SNF Acute Facility-Wide Total				
General Fund	\$14,035	\$4,475	\$0	\$1,737	\$20,247	
Reimbursements	13,002	4,294	0	1,434	18,730	
Lottery Education Fund	<u>55</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>55</u>	
Grand Total	\$27,092	\$8,769	\$0	\$3,172	\$39,032	

Porterville Developmental Center - Secure Treatment Program

Resident Population and Staffing Detail Budget Year 2018 - 19

Beginning Resident Population					
ICF	SNF	Acute	Total Population		
211	0	0	211		

Units*				
ICF	SNF	Acute	Total Units	
13.00	0.00	1.00	14.00	

Unit Staffing ICF SNF Acute **Total Positions** Clinical 624.6 0.0 14.3 638.9 Medical 0.0 0.5 16.5 17.0 Support Services 107.8 0.0 2.1 109.9 Total 748.9 0.0 16.9 765.8

	Program Support Staffing					
	ICF	SNF	Acute	Total Positions		
Clinical	31.9	0.0	0.9	32.8		
Medical	44.1	0.0	1.2	45.3		
Support Services	<u>332.6</u>	<u>0.0</u>	<u>9.0</u>	<u>341.6</u>		
Total	408.6	0.0	11.0	419.6		

	Intensive Treatment Residence - Behavioral							
	ICF	ICF SNF Acute Total Positions						
Clinical	29.5	0.0	0.0	29.5				
Medical	0.8	0.0	0.0	0.8				
Support Services	<u>7.5</u>	0.0	0.0	<u>7.5</u>				
Total	37.8	0.0	0.0	37.8				

	Intensive Treatment Residence - Medical					
	ICF	Total Positions				
Clinical	29.5	0.0	0.0	29.5		
Medical	0.8	0.0	0.0	0.8		
Support Services	<u>7.5</u>	<u>0.0</u>	<u>0.0</u>	<u>7.5</u>		
Total	37.8	0.0	0.0	37.8		
Total Staffing	1,233.0	0.0	27.9	1,260.9		

Incremental Position Change from 2017 Enacted Budget					
	2017 - 18	2018 - 19			
Staffing	Enacted	Governor's	Change		
	Budget	Budget			
Clinical	728.6	730.6	2.0		
Medical	60.7	63.8	3.1		
Support Services	435.6	466.5	30.9		
Total Positions	1,224.9	1,260.9	36.0		

^{*}Total ICF includes 2.0 Intensive Treatment Residence (Behavioral and Medical) Units licensed as ICF. Note: Slight rounding differences may occur between the Executive Summary Table and DC Detail Sheets.

Porterville Developmental Center - Secure Treatment Program

Expenditure and Funding Detail Budget Year 2018 - 19 (Dollars in thousands)

[Unit Staffing Expendit	tures			
	ICF	SNF	Acute	Facility-Wide	Total		
Personal Services	\$72,132	\$0	\$2,116	\$0	\$74,248		
Staff OE&E	4,596	0	104	0	4,700		
Resident OE&E	<u>6,080</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>6,080</u>		
Total	\$82,808	\$0	\$2,219	\$0	\$85,027		
-							
		Program Support Expenditures					
	ICF	SNF	Acute	Facility-Wide	Total		
Personal Services	\$38,957	\$0	\$1,044	\$0	\$40,001		
Staff OE&E	2,518	0	67	0	2,586		
Fixed Facility OE&E*	0	0	<u>0</u>	14,913	14,913		
Total	\$41,475	\$0	\$1,112	\$14,913	\$57,500		
ı	Intensive Treatment Residence - Behavioral Staffing Expenditures						
-	ICF	SNF	Acute	Facility-Wide	Total		
Personal Services	\$3,450	\$0	Acute \$0	\$0	\$3,450		
Staff OE&E				·			
Total	<u>231</u> \$3.682	<u>0</u> \$0	<u>0</u> \$0	<u>0</u> \$0	2 <u>31</u> \$3,682		
rotar	Φ3,002	Φυ	ΦΟ	Φυ	\$3,002		
[Intensive Treatmen	nt Residence - Medica	al Staffing Expenditure	ne e		
	ICF	SNF	Acute	Facility-Wide	Total		
Personal Services	\$3,450	\$0	\$0	\$0	\$3,450		
Staff OE&E	231	<u>0</u>	<u>0</u>	<u>0</u>	231		
Total	\$3.682	\$0	\$ <u>0</u>	\$0	\$3.682		
	70,000	7.	7-1	7.1	72,032		
		С	ontrol Section Adjusti	ments			
	ICF	SNF	Acute	Facility-Wide	Total		
Employee Compensation	\$0	\$0	\$0	\$4,418	\$4,418		
-							
			Major Assumption				
	ICF	SNF	Acute	Facility-Wide	Total		
DC Funded Positions to HQ	\$0	\$0	\$0	-\$354	-\$354		
ı		T	T , , , D	E 19			
	ICF	SNF	re Treatment Prograr Acute	Facility-Wide	Total		
Personal Services	\$117,990	\$0	\$3,160	\$0	\$121,150		
OE&E	13,657	0	ψ3,100 171	14,913	28,741		
Staff OE&E	7,577	0	171	0	7,748		
Resident OE&E	6.080	0	0	0	6,080		
Fixed Facility OE&E*	0,000	0	0	14,913	14,913		
Control Section Adjustments	0	0	0	4,418	4,418		
Major Assumptions	0	0	0	-354	-354		
Grand Total	± \$131,647	\$0	\$3,331	\$18,977	\$153,954		
Grand Total	ψ151,047	ΨΟ	ψ5,551	ψ10,311	ψ100,304		
ſ			Fund Sources				
ľ	ICF	SNF	Acute	Facility-Wide	Total		
General Fund	\$131 502	\$0	\$2,230	¢18 510	\$152 350		

General Fund

Grand Total

Reimbursements

Lottery Education Fund

Note: Slight rounding differences may occur between the Executive Summary Table and DC Detail Sheets.

0

\$131,592

<u>55</u> **\$131,647** \$0

0

<u>0</u> **\$0** \$2,239

1,092

\$3,331

\$18,519

457,272

<u>0</u> **\$18,977** \$152,350

\$153,954

1,549

^{*} Includes Lease Revenue Debt Service Payment.

Sonoma Developmental Center

Resident Population and Staffing Detail Budget Year 2018 - 19

Beginning Resident Population					
ICF SNF Acute Total					
59	24	0	83		

Units*				
ICF SNF Acute Total				
1.50	0.50	1.00	3.00	

	Unit Staffing					
	ICF	SNF	Acute	Total Positions		
Clinical	79.3	18.5	14.3	112.1		
Medical	1.9	1.0	0.5	3.4		
Support Services	<u>17.3</u>	<u>3.1</u>	<u>2.1</u>	<u>22.6</u>		
Total	98.5	22.6	16.9	138.0		

	Program Support Staffing					
	ICF	ICF SNF Acute				
Clinical	20.0	12.4	1.6	34.0		
Medical	24.1	15.0	1.9	41.0		
Support Services	<u>193.0</u>	<u>129.2</u>	<u>16.2</u>	<u>338.4</u>		
Total	237.1	156.7	19.7	413.4		

Total Staffing	335.6	179.3	36.5	551.4
•				

Incremental Position Change from 2017 Enacted Budget					
Staffing	2017 - 18 Enacted Budget	Change			
Clinical	444.8	146.1	-298.7		
Medical	63.4	44.4	-19.1		
Support Services	426.6	361.0	-65.6		
Total Positions	934.8	551.4	-383.4		

^{*}The total number of units reflect partial year consolidations as populations decline due to community placements. Note: Slight rounding differences may occur between the Executive Summary Table and DC Detail Sheets.

Sonoma Developmental Center

Expenditure and Funding Detail Budget Year 2018 - 19 (Dollars in thousands)

	Unit Staffing Expenditures						
	ICF	ICF SNF Acute Facility-Wide Total					
Personal Services	\$4,661	\$1,157	\$1,054	\$0	\$6,873		
Staff OE&E	452	103	77	0	631		
Resident OE&E	<u>1,923</u>	<u>782</u>	<u>0</u>	<u>0</u>	<u>2,705</u>		
Total	\$7,037	\$2,042	\$1,131	\$0	\$10,209		

	Program Support Expenditures					
	ICF	SNF	Acute	Facility-Wide	Total	
Personal Services	\$15,815	\$4,592	\$2,544	\$4,189	\$27,141	
Staff OE&E	1,083	315	174	3,060	4,633	
Fixed Facility OE&E	<u>0</u>	<u>0</u>	<u>0</u>	<u>6,029</u>	<u>6,029</u>	
Total	\$16,899	\$4,907	\$2,718	\$13,278	\$37,802	

	Control Section Adjustments				
	ICF	SNF	Acute	Facility-Wide	Total
Employee Compensation	\$0	\$0	\$0	\$5,778	\$5,778

	Major Assumptions				
	ICF	ICF SNF Ad		Facility-Wide	Total
DC Funded Positions to HQ	\$0	\$0	\$0	-\$1,313	-\$1,313
Lump Sum	0	0	0	5,322	5,322
Security Costs	<u>0</u>	<u>0</u>	<u>0</u>	<u>580</u>	<u>580</u>
Total	\$0	\$0	\$0	\$4,589	\$4,589

[Total Facility Expenditures				
	ICF	SNF	Acute	Facility-Wide	Total
Personal Services	\$20,477	\$5,749	\$3,598	\$4,189	\$34,013
OE&E	3,459	1,200	251	9,089	13,998
Staff OE&E	1,536	417	251	3,060	5,264
Resident OE&E	1,923	782	0	0	2,705
Fixed OE&E	0	0	0	6,029	6,029
Control Section Adjustments	0	0	0	5,778	5,778
Major Assumptions	<u>0</u>	<u>0</u>	<u>0</u>	<u>4,589</u>	<u>4,589</u>
Grand Total	\$23,935	\$6,949	\$3,849	\$23,645	\$58,378

	Fund Sources				
	ICF	SNF	Acute	Facility-Wide	Total
General Fund	\$23,879	\$3,520	\$2,566	\$18,957	\$48,922
Reimbursements	0	3,428	1,284	4,688	9,400
Lottery Education Fund	<u>56</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>56</u>
Grand Total	\$23,935	\$6,949	\$3,849	\$23,645	\$58,378

STAR & Mobile Crisis Teams

Resident Population and Staffing Detail Budget Year 2018 - 19

Beginning Resident Population					
ICF SNF Acute Total Population					
20	0	0	20		

Units					
ICF	SNF	Acute	Total Units		
4.00	0.00	0.00	4.00		

Clinical Medical Support Services Total

	STAR Unit Staffing							
	ICF SNF		Acute	Total Positions				
al	79.0	0.0	0.0	79.0				
cal	1.4	0.0	0	1.4				
es	<u>26.0</u>	<u>0.0</u>	<u>0.0</u>	<u>26.0</u>				
tal	106.4	0.0	0.0	106.4				

	Mobile Crisis Team Staffing					
	ICF	SNF	Acute	Total Positions		
Clinical	14.5	0.0	0.0	14.5		
Medical	0.0	0.0	0.0	0.0		
Support Services	<u>0.0</u>	<u>0.0</u>	<u>0.0</u>	<u>0.0</u>		
Total	14.5	0.0	0.0	14.5		

Total Staffing 120.9 0.0 0.0 120.	Total Staffing
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Incremental Position Change from 2017 Enacted Budget						
	2017 - 18	2018 - 19				
Staffing	Enacted	Governor's	Change			
	Budget	Budget				
Clinical	54.0	93.5	39.5			
Medical	0.7	1.4	0.7			
Support Services	13.0	26.0	13.0			
Total Positions	67.7	120.9	53.2			

STAR & Mobile Crisis Teams

Expenditure and Funding Detail Budget Year 2018 - 19 (Dollars in thousands)

	STAR Unit Expenditures					
	ICF SNF Acute Facility-Wide Tota					
Personal Services	\$10,010	\$0	\$0	\$0	\$10,010	
Staff OE&E	541	0	0	0	541	
Resident OE&E	<u>656</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>656</u>	
Total	\$11,207	\$0	\$0	\$0	\$11,207	

	Mobile Crisis Team Expenditures					
	ICF	SNF	Acute	Facility-Wide	Total	
Personal Services	\$0	\$0	\$0	\$1,588	\$1,588	
Staff OE&E	0	0	0	284	284	
Fixed Facility OE&E	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	
Total	\$0	\$0	\$0	\$1,871	\$1,871	

	Control Section Adjustments							
	ICF SNF Acute Facility-Wide Total							
Employee Compensation	\$0	\$0	\$0	\$132	\$132			

	Total STAR & Mobile Crisis Team Expenditures						
	ICF	SNF	Acute	Facility-Wide	Total		
Personal Services	\$10,010	\$0	\$0	\$1,588	\$11,598		
OE&E	1,197	0	0	284	1,481		
Staff OE&E	541	0	0	284	824		
Resident OE&E	656	0	0	0	656		
Control Section Adjustments	<u>0</u>	<u>0</u>	<u>0</u>	<u>132</u>	<u>132</u>		
Grand Total	\$11.207	\$0	\$0	\$2.003	\$13,210		

	Fund Sources						
	ICF	SNF	Acute	Facility-Wide	Total		
General Fund	\$11,207	\$0	\$0	\$2,003	\$13,210		
Reimbursements	0	0	0	0	0		
Lottery Education Fund	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>		
Grand Total	\$11,207	\$0	\$0	\$2,003	\$13,210		

CONTROL SECTION ADJUSTMENTS

Employee Compensation Adjustments

The State Operated Residential and Community Facilities Program budget includes an increase of \$17.2 million (\$11.1 million GF) in 2017-18, and \$17.8 million (\$11.5 million GF) in 2018-19 for the following Employee Compensation adjustments:

- Control Section 3.60 Retirement Adjustments
 Pursuant to Section 3.60 of the Budget Act, departmental appropriations are
 adjusted annually to accurately reflect the State's share of retirement costs through
 the Executive Order process. Based on an analysis of positions, employee
 retirement categories, and retirement contribution amounts, the Department
 requests \$3.5 million (\$2.4 million GF) in both 2017-18 and 2018-19 for retirement
 adjustments.
- Item 9800 Employee Compensation Adjustments Employee Compensation adjustments approved through the collective bargaining process, and for employees excluded from collective bargaining as approved by the California Department of Human Resources, are referred to as Item 9800 adjustments. Item 9800 contains general salary increases, shift differentials, retention incentives, and various changes to the employers' share of staff benefits. The Department requests \$13.8 million (\$8.7 million GF) in 2017-18 and \$14.4 million (\$9.1 million GF) in 2018-19 for Item 9800 employee compensation adjustments.

Control Section 4.30 Lease Revenue Adjustments

Pursuant to Control Section 4.30 of the Budget Act, the Director of Finance may adjust amounts in appropriation items for rental payments on lease-revenue bond-funded projects. In 2017-18, the lease revenue bond payment at the Porterville Developmental Center will decrease by \$2.8 million GF as compared to the enacted budget, for a total of \$6.3 million GF. In 2018-19, the lease revenue bond payment will total \$9.2 million GF, which is a \$2.8 million GF increase over the revised current year budget.

MAJOR ASSUMPTION

Centralize Ongoing Statewide Functions and Programs

The Department requests approval to shift \$2.1 million (\$1.6 million GF) in funding, and 15.5 positions, from the State Operated Residential and Community Facilities Program to Headquarters, for statewide oversight duties and activities that will continue beyond closure of the developmental centers.

Assigning the positions and funding within Headquarters is consistent with the current functions of the positions and provides continuity of services and expertise within the Department for ongoing, statewide responsibilities and programs as it moves to a community-based services system. This realignment will keep each state operated facility's estimate as consistent as possible with their specific program operations. The reassignment of staff will also enable the Department to retain existing, qualified staff who might otherwise seek employment elsewhere because of the uncertainty of their employment status while layoffs occur at the centers facing closure. Additionally, this proposal is consistent with staffing needs that will continue in the future beyond closures.

Historically, the developmental center facilities operated in a decentralized manner, with oversight provided by the Developmental Centers Division within Headquarters located in Sacramento. A reduction in the number of administrative and oversight positions originally located in the facilities occurred over time, with functions centralized or managed from Headquarters. The 2016 enacted budget included the transfer of 9.0 positions and \$1.0 million in funds from the State Operated Residential and Community Facilities Program budget to the Headquarters budget for ongoing, statewide activities driven by the developmental center closures. Other similar statewide positions have remained in the Program Support budgets of various facilities, while the majority of staff filling these positions are located at Headquarters.

As part of the Governor's Budget for 2018, the Department submitted a Budget Change Proposal (BCP) to reflect the technical changes in positions and funding.

MAJOR ASSUMPTION

Lump Sum Payouts

The Department requests \$7.1 million (\$4.7 million GF) in 2017-18, and \$9.3 million (\$5.5 million GF) in 2018-19 to fund lump sum leave payouts to employees who will separate from the closing developmental centers.

Due to the planned developmental center closures and continued resident transitions to community living arrangements, the number of employees required to care for residents is declining. For those employees who will separate from State service, the Department must cash out all unused leave balances, excluding sick leave. For those employees who transfer to another State department, the Department must cash out accrued compensable time off only. Although the Department typically pays out lump sum balances each year, the magnitude of payouts resulting from the concurrent closures of Fairview, Sonoma, and the Porterville GTA will be significant.

To estimate funds required to cash out leave balances, the Department analyzed employee separations during the Agnews and Lanterman Developmental Center closures, and determined that approximately forty percent transferred to other departments, and sixty percent separated from State services. The Department then applied these percentages to current, cashable leave balances and the number of employees impacted by the closures in 2017-18 and 2018-19.

MAJOR ASSUMPTION

Security Costs at Sonoma and Fairview

The Department requests \$0.6 million (\$0.5 million GF) in 2018-19 to purchase and install gates, fencing, and cameras to assist security personnel deter theft and vandalism at Sonoma and Fairview in preparation for and during warm shutdown.

During the Lanterman closure, the Department did not have 24-hour security after the last consumer transitioned to community living, and a number of incidents of theft and vandalism occurred at the center. This included the loss of heavy equipment, vehicles, tools, items containing copper (such as wiring and pipes), golf carts, bicycles, computers, TV's, and concrete fountains. Almost all the crime occurred during overnight hours or when the facility did not have active security. For the Sonoma and Fairview closures, DDS plans to utilize a combination of Office of Protective Services (OPS) officers, physical barriers, and security cameras to protect and monitor the property and buildings as detailed below:

Sonoma

During warm shutdown, Sonoma will retain one OPS Commander and eight OPS Officers to provide 24-hour security for the facility and property. The Department's budget currently includes funding for these positions, which will continue during warm shut down. In addition to personnel, the Department will install gates and fencing, and utilize security cameras to allow on-duty officers to respond to unauthorized activity occurring on grounds.

Fairview

During warm shut down, Fairview will retain one OPS Commander and eight OPS Officers to provide 24-hour security for the facility and property. The Department's budget currently includes funding for these positions, which will continue during warm shut down. In addition to OPS personnel, the Department proposes to install gates and fencing, and utilize security cameras. Although Fairview could remain open longer than Sonoma, the Department proposes to install these additional security measures in 2018-19 given the facility can be accessed from several vantages, and staff presence will be significantly reduced thus leaving many buildings vacant and at risk for theft and vandalism. Additionally, purchasing the fencing, gates, and cameras for both developmental centers at once may result in quantity discounts.

FUTURE FISCAL ISSUES

Decertification of Fairview and Porterville GTA ICF Units

Both Fairview and Porterville GTA are currently operating under Settlement Agreements reached between the California Department of Public Health (CDPH), the Centers for Medicare and Medicaid Services (CMS), the California Health and Human Services Agency (CHHS), DDS, the Department of Social Services, and the Department of Health Care Services (DHCS). These agreements require the two facilities to comply with Conditions of Participation to receive federal reimbursements for the ICF/DD units. In December 2017, CDPH and CMS notified both Fairview and Porterville GTA that they are in compliance, and extended the agreement termination dates to December 31, 2018.

Although the two facilities are currently in compliance, CMS may terminate the agreements and withdraw federal reimbursements at its sole discretion. If this were to occur, the monthly financial impact in 2017-18 for the Fairview and Porterville GTA ICF/DD units is \$3.3 million and \$1.7 million, respectively. The 2018-19 estimated monthly Federal Financial Participation (FFP) required for the Fairview and Porterville GTA ICF/DD units is \$2.0 million and \$1.2 million, respectively.

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/METHOD	<u>2017-18</u>	2018-19		
• General Fund Match:	2047.40	2040 40	\$127,858	\$83,360
General Fund Match to FMAP	<u>2017-18</u>	<u>2018-19</u>	105.004	00 507
Non-Proposition 98	50.00%	50.00%	125,094	80,597
Proposition 98	50.00%	50.00%	2,459	2,459
HIPAA	50.00%	50.00%	305	305
This portion of General Fund is Reimbursements received from the (DHCS). These Reimbursements government and passed through D state agency for Medicaid). The feestablished by utilizing the feder (FMAP) provided by DHCS.	Department of Healt are originally funded HCS (the federally red deral financial partici	th Care Services If by the federal Recognized single Recognized sare		
General Fund Other			\$238,758	\$208,593
This funding is for services provided eligible for federal or other rein includes \$6.3 million in 2017-18 and Revenue Bonds.	nbursement funding	. Funding also	238,758	208,593
TOTAL GENERAL FUND			\$366,616	\$291,953

Dollars are in thousands

Reimbursements Title XIX Medi-Cal

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. These funds require a General Fund match at the FMAP rate.

ASSUMPTIONS/METHODOL	<u>2017-18</u>	<u>2018-19</u>		
Title XIX/Medi-Cal Title XIX Medi-Cal Reimbursements fur residents in the DCs/CF system via participation costs are established by the DHCS.	federal financial	\$127,858	\$83,360	
FMAP	2017-18	2018-19		
Non-Proposition 98	50.00%	50.00%	127,507	83,009
Proposition 98	50.00%	50.00%	242	242
HIPAA	50.00%	50.00%	109	109
TOTAL REIMBURSEMENTS			\$127,858	\$83,360

Dollars are in thousands

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:

<u>2017-18</u> <u>2018-19</u>

Lottery Education Fund:

\$323 \$323

 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 the state-operated community facility. Funds received are based on average daily attendance.

TOTAL LOTTERY EDUCATION FUND

\$323 \$323

Dollars are in thousands

SB 82 Reporting

Pursuant to Chapter 23, Statutes of 2015 (SB 82), the Department provides the following information regarding GF savings associated with the downsizing or closure of the developmental centers (DCs).

Table 1 below displays 2015-16 through 2018-19 funding impacts related to six programs or activities affected by the Sonoma, Fairview, and Porterville General Treatment Area (GTA) closures. (Negative amounts reflect savings; positive amounts reflect increased expenditures.)

Cumulatively, expenditures driven by closure-related activities total \$291.9 million (\$290.1 million GF). While expenditures for overall DC operations are showing substantial decreases in 2017-18 and 2018-19, expenditures to develop community-based resources and to support individuals living in the community exceed savings on the aggregate.

Table 1
DC Closures – Funding Impacts
Dollars in Thousands

	FY 2015-16		FY 2016-17		FY 2017-18		FY 2018-19		Cumulative Total	
Program/Activity	TF	GF	TF	GF	TF	GF	TF	GF	TF	GF
DCs - Operations Adjustments	\$1,500	\$800	-\$8,800	\$22,300	-\$52,200	-\$9,800	-\$122,000	-\$76,000	-\$181,500	-\$62,700
2. DCs - Closure Activities	\$1,700	\$1,100	\$7,100	\$5,300	\$12,800	\$5,600	\$15,700	\$9,600	\$37,300	\$21,600
3. Community Services - Closure Placement	\$46,700	\$43,700	\$78,800	\$73,000	\$25,700	\$21,700	\$28,500	\$25,400	\$179,700	\$163,800
4. Community Services - Continuation Costs	\$48,100	\$30,500	\$45,000	\$28,400	\$57,200	\$35,800	\$84,800	\$53,000	\$235,100	\$147,700
5. HQ - Closure Coordination & Oversight	\$0	\$0	\$2,100	\$1,800	\$2,100	\$1,800	\$2,100	\$1,800	\$6,300	\$5,400
6. Safety Net Resources	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$7,500</u>	<u>\$7,500</u>	\$7,500	<u>\$7,500</u>	\$15,000	\$15,000
Total	\$98,000	\$76,100	\$124,200	\$130,800	\$53,100	\$62,600	\$16,600	\$21,300	\$291,900	\$290,800

Note: The GF amount included on Line 1, DCs – Operations Adjustments, for 2016-17 includes \$32.4 million GF per Provision 8, Item 4300-003-0001 of the 2016 Budget Act. The funds were appropriated for the operation of the Intermediate Care Facility units at Sonoma after federal funding was discontinued.

The amounts in Table 1 do not include other State costs, such as Medi-Cal and In-Home Supportive Services, for individuals who moved out of the DCs into the community. The following information provides details and explanations for each program/activity area.

1. DC – Operations Adjustments

DC Operations includes personnel expenditures to care for residents and to operate and maintain the facilities. It also includes staff, resident, and facility OE&E expenses. The 2018 Governor's Budget proposes decreases in DC Operations expenditures in 2018-19 totaling \$122 million (\$76 million GF decrease) as compared to updated 2017-18 operations expenditures. The decreases results from declining resident populations, which drive staffing and OE&E costs. Expenditures in 2017-18 are estimated to decrease \$52.2 million (\$9.8 million GF decrease) as compared to the prior year.

2. Developmental Centers - Closure Activities

Following the announced DC closures, the Department received funds for closure-related activities such as taking inventory and archiving clinical records, contracting for an independent monitor, moving residents and their belongings to new community homes, assessing facilities and land, paying out employee leave balances, and providing physical security measures. Table 2 details amounts appropriated and proposed in 2018-19 for closure activities.

Table 2
Closure Activity Costs
Whole Dollars

Whole Dollars						
	2015-16	2016-17	2017-18	2018-19		
Sonoma						
OT for Resident Transfers	\$144,000	\$236,000	\$236,000	\$236,000		
Archive Records	0	500,000	500,000	500,000		
Resident Relocations	808,000	1,300,000	1,300,000	1,330,000		
Site Assessment	0	2,240,000	0	0		
Independent Monitor	707,000	947,000	947,000	947,000		
Dispose/Relocate Assets	0	0	300,000	300,000		
Physical Security Measures*	0	0	0	580,000		
Lump Sum Leave Payouts*	<u>0</u>	<u>0</u>	3,368,000	5,322,000		
Total Sonoma	\$1,659,000	\$5,223,000	\$6,651,000	\$9,215,000		
Fairview						
Independent Monitor	\$0	\$950,000	\$950,000	\$950,000		
Archive Records	0	0	250,000	250,000		
Increased Security*	0	0	0	67,000		
Lump Sum Leave Payouts*	<u>0</u>	<u>0</u>	3,707,000	<u>3,978,000</u>		
Total Fairview	\$0	\$950,000	\$4,907,000	\$5,245,000		
Porterville GTA						
Independent Monitor	\$0	\$950,000	\$950,000	\$950,000		
Archive Records	<u>0</u>	<u>0</u>	<u>250,000</u>	<u>250,000</u>		
Total Porterville GTA	<u>\$0</u>	<u>\$950,000</u>	\$1,200,000	\$1,200,000		
Total Closure Activity Costs	<u>\$1,659,000</u>	<u>\$7,123,000</u>	<u>\$12,758,000</u>	<u>\$15,660,000</u>		
GF	\$1,062,000	\$5,319,000	\$5,575,290	\$9,590,290		

^{*}Proposed in 2018-19 Governor's Budget

3. Community Services - Closure Community Placement Plan (CPP)

The DC closures require increased regional center positions and resources to develop community living arrangements, complete comprehensive assessments, transition individuals into the community, and fund consumers' Purchase of Services (POS) expenditures during their first year in the community. Within the Regional Center Estimate, the Governor's Budget includes \$28.5 million (\$25.4 million GF) in 2018-19 to

fund placement activities, as detailed in Table 3. DC closure-specific CPP expenditures in 2017-18 total \$25.7 million (\$21.7 million GF). These amounts are in addition to \$68 million in ongoing funds identified for regular community placement plan activities and included in regular POS expenditures.

Table 3
Community Placement FY 2018-19
Dollars in Thousands

	Porterville							
	Sonoma	Fairview	GTA	Total				
Operations	\$3,600	\$1,200	\$600	\$5,400				
Purchase of Services	10,300	8,400	4,300	23,000				
Total	\$13,900	\$9,600	\$4,900	\$28,400				
GF	\$12,500	\$8,500	\$4,400	\$25,400				

4. Community Services – Continuation Costs

When individuals transition from DCs into the community, POS costs increase. Although CPP funds the first year of these costs, continuing expenditures are not included in the trends on which the Department estimates future expenses. To budget POS costs for the second year of community living, the Department separately estimates and includes Continuation Costs in its Regional Center Estimate for individuals who moved into the community during the prior year. The Governor's Budget proposes no changes to estimated costs for 2017-18 of \$57.2 million. The Governor's Budget proposes \$84.8 million (\$53.0 million GF) in 2018-19; an increase of \$27.6 million (\$17.2 million GF) over 2017-18 resulting from an increased number of transitioning residents in 2017-18.

5. Headquarters - Closure Coordination and Oversight

The 2016 enacted budget included \$2.1 million (\$1.6 million GF) in 2016-17 for new and redirected vacant headquarters positions for staffing and contract resources needed to support the continued efforts for multiple DC closures. These positions and funds continue to support closure activities.

6. Safety Net Resources

The 2017 enacted budget included an increase of \$7.5 million GF to develop two community-based acute crisis facilities in Northern California, operate two, 24-7 mobile acute crisis teams, and establish intensive transition services for residents leaving secured treatment settings. The 2018-19 Governor's Budget includes \$7.5 million GF to continue funding the mobile acute crisis teams, and to staff and operate the two new community-based crisis homes.