

FOR LEGISLATIVE REVIEW

November 2013
REGIONAL CENTER
LOCAL ASSISTANCE ESTIMATE
for
FISCAL YEAR
2014-15
Governor's Budget



STATE OF CALIFORNIA
DEPARTMENT OF DEVELOPMENTAL SERVICES
JANUARY 10, 2014

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**Comparison of Enacted Budget to Governor's Budget
Fiscal Year 2013-14**

	A	B	C
	Enacted Budget	Governor's Budget	Request (B - A)
I. BUDGET ITEMS:			
A. Operations			
1. Staffing	\$482,937,000	\$484,031,000	\$1,094,000
2. Federal Compliance	47,789,000	48,297,000	508,000
3. Projects	23,105,000	23,245,000	140,000
4. Agnews Ongoing Workload	2,946,000	2,946,000	0
5. Lanterman Development Center Closure	3,537,000	3,537,000	0
6. Operations Subtotal (Items 1 thru 5)	\$560,314,000	\$562,056,000	\$1,742,000
7. ICF-DD SPA Administration Fee	1,745,000	1,745,000	0
8. Total Operations (Items 6 and 7)	\$562,059,000	\$563,801,000	\$1,742,000
B. Purchase of Services (POS)			
1. Community Care Facilities	\$948,820,000	\$945,805,000	-\$3,015,000
2. Medical Facilities	26,896,000	28,399,000	1,503,000
3. Day Programs	858,840,000	867,903,000	9,063,000
4. Habilitation Services	143,061,000	145,684,000	2,623,000
5. Transportation	238,965,000	242,544,000	3,579,000
6. Support Services	808,714,000	823,132,000	14,418,000
7. In-Home Respite	209,483,000	208,759,000	-724,000
8. Out-of-Home Respite	46,302,000	41,978,000	-4,324,000
9. Health Care	94,935,000	84,967,000	-9,968,000
10. Miscellaneous	414,314,000	403,712,000	-10,602,000
11. POS Subtotal (Items 1 thru 10)	\$3,790,330,000	\$3,792,883,000	\$2,553,000
12. Quality Assurance Fees (Transfer from DHCS)	\$9,424,000	\$9,424,000	\$0
13. Total POS (Items 11 thru 12)	\$3,799,754,000	\$3,802,307,000	\$2,553,000
C. Early Start/Part C: Other Agency Costs	\$17,606,000	\$17,829,000	\$223,000
D. Prevention Program	\$2,003,000	\$2,003,000	\$0
E. GRAND TOTAL	\$4,381,422,000	\$4,385,940,000	\$4,518,000

**Comparison of Enacted Budget to Governor's Budget
Fiscal Year 2013-14**

	A	B	C
	Enacted Budget	Governor's Budget	Request (B - A)
II. FUND SOURCES:			
A. General Fund Total	\$2,478,898,000	\$2,472,574,000	-\$6,324,000
1. General Fund Match	1,606,100,000	1,624,145,000	18,045,000
2. General Fund - Other	872,798,000	848,429,000	-24,369,000
B. Reimbursements	\$1,847,046,000	\$1,857,913,000	\$10,867,000
1. Home and Community-Based Services (HCBS) Waiver	1,193,805,000	1,218,386,000	24,581,000
2. HCBS Waiver Administration	6,367,000	6,610,000	243,000
3. Medicaid Administration	11,612,000	8,654,000	-2,958,000
4. Targeted Case Management (TCM)	148,952,000	142,989,000	-5,963,000
5. TCM Administration	3,656,000	3,728,000	72,000
6. Title XX Block Grant	213,191,000	213,191,000	0
a. Social Services	136,034,000	136,034,000	0
b. Temporary Assistance for Needy Families	77,157,000	77,157,000	0
7. ICF-DD SPA	58,193,000	58,193,000	0
8. Quality Assurance Fees	10,297,000	10,297,000	0
9. 1915(i) SPA	167,842,000	167,842,000	0
10. Money Follows the Person	14,867,000	11,215,000	-3,652,000
11. Homeland Security Grant	391,000	391,000	0
12. Race to the Top	286,000	472,000	186,000
13. Early Periodic Screening Diagnosis and Treatment	17,587,000	15,945,000	-1,642,000
C. Program Development Fund / Parental Fees	\$5,970,000	\$5,908,000	-\$62,000
D. Developmental Disabilities Services Account	\$150,000	\$150,000	\$0
E. Mental Health Services Fund	\$740,000	\$740,000	\$0
F. Federal Funds	\$48,618,000	\$48,655,000	\$37,000
1. Early Start/Part C Grant	48,021,000	48,058,000	37,000
2. Foster Grandparent Program	597,000	597,000	0
G. GRAND TOTAL	\$4,381,422,000	\$4,385,940,000	\$4,518,000

**Comparison of Enacted Budget to Governor's Budget
Fiscal Year 2014-15**

	A	B	C
	Enacted Budget	Governor's Budget	Request (B - A)
I. BUDGET ITEMS:			
A. Operations			
1. Staffing	\$482,937,000	\$499,613,000	\$16,676,000
2. Federal Compliance	47,789,000	48,314,000	525,000
3. Projects	23,105,000	23,757,000	652,000
4. Agnews Ongoing Workload	2,946,000	2,946,000	0
5. Lanterman Development Center Closure	3,537,000	2,672,000	-865,000
6. Operations Subtotal (Items 1 thru 5)	\$560,314,000	\$577,302,000	\$16,988,000
7. ICF-DD SPA Administration Fee	1,745,000	1,745,000	0
8. AB 10 Minimum Wage Increase		136,000	136,000
9. Total Operations (Items 6 thru 8)	\$562,059,000	\$579,183,000	\$17,124,000
B. Purchase of Services (POS)			
1. Community Care Facilities	\$948,820,000	\$965,590,000	\$16,770,000
2. Medical Facilities	26,896,000	27,443,000	547,000
3. Day Programs	858,840,000	903,911,000	45,071,000
4. Habilitation Services	143,061,000	146,477,000	3,416,000
5. Transportation	238,965,000	246,581,000	7,616,000
6. Support Services	808,714,000	859,070,000	50,356,000
7. In-Home Respite	209,483,000	216,375,000	6,892,000
8. Out-of-Home Respite	46,302,000	42,928,000	-3,374,000
9. Health Care	94,935,000	88,845,000	-6,090,000
10. Miscellaneous	414,314,000	416,809,000	2,495,000
11. POS Subtotal (Items 1 thru 10)	\$3,790,330,000	\$3,914,029,000	\$123,699,000
12. Quality Assurance Fees (Transfer from DHCS)	\$9,424,000	\$9,424,000	\$0
13. Impacts from Other Departments	0	-3,133,000	-3,133,000
14. AB 10 Minimum Wage Increase	0	110,054,000	110,054,000
15. Federal Labor Regulations	0	7,500,000	7,500,000
16. Total POS (Items 11 thru 14)	\$3,799,754,000	\$4,037,874,000	\$238,120,000
C. Early Start/Part C: Other Agency Costs	\$17,606,000	\$17,698,000	\$92,000
D. Prevention Program	\$2,003,000	\$2,003,000	\$0
E. GRAND TOTAL	\$4,381,422,000	\$4,636,758,000	\$255,336,000

**Comparison of Enacted Budget to Governor's Budget
Fiscal Year 2014-15**

	A	B	C
	Enacted Budget	Governor's Budget	Request (B - A)
II. FUND SOURCES:			
A. General Fund Total	\$2,478,898,000	\$2,634,203,000	\$155,305,000
1. General Fund Match	1,606,100,000	1,713,449,000	107,349,000
2. General Fund - Other	872,798,000	920,754,000	47,956,000
B. Reimbursements	\$1,847,046,000	\$1,947,086,000	\$100,040,000
1. Home and Community-Based Services (HCBS) Waiver	1,193,805,000	1,293,056,000	99,251,000
2. HCBS Waiver Administration	6,367,000	6,648,000	281,000
3. Medicaid Administration	11,612,000	8,654,000	-2,958,000
4. Targeted Case Management (TCM)	148,952,000	143,008,000	-5,944,000
5. TCM Administration	3,656,000	3,728,000	72,000
6. Title XX Block Grant	213,191,000	213,191,000	0
a. Social Services	136,034,000	136,034,000	0
b. Temporary Assistance for Needy Families	77,157,000	77,157,000	0
7. ICF-DD SPA	58,193,000	58,193,000	0
8. Quality Assurance Fees	10,297,000	10,297,000	0
9. 1915(i) SPA	167,842,000	182,261,000	14,419,000
10. Money Follows the Person	14,867,000	11,373,000	-3,494,000
11. Homeland Security Grant	391,000	391,000	0
12. Race to the Top	286,000	341,000	55,000
13. Early Periodic Screening Diagnosis and Treatment	17,587,000	15,945,000	-1,642,000
C. Program Development Fund / Parental Fees	\$5,970,000	\$5,808,000	-\$162,000
D. Developmental Disabilities Services Account	\$150,000	\$150,000	\$0
E. Mental Health Services Fund	\$740,000	\$740,000	\$0
F. Federal Funds	\$48,618,000	\$48,771,000	\$153,000
1. Early Start/Part C Grant	48,021,000	48,058,000	37,000
2. Foster Grandparent Program	597,000	713,000	116,000
G. GRAND TOTAL	\$4,381,422,000	\$4,636,758,000	\$255,336,000

Comparision Fiscal Year 2013-14 to Fiscal Year 2014-15

	A Fiscal Year 2013-14	B Fiscal Year 2014-15	C Incremental Increase (B - A)
I. BUDGET ITEMS:			
A. Operations			
1. Staffing	\$484,031,000	\$499,613,000	\$15,582,000
2. Federal Compliance	48,297,000	48,314,000	17,000
3. Projects	23,245,000	23,757,000	512,000
4. Agnews Ongoing Workload	2,946,000	2,946,000	0
5. Lanterman Developmental Center Closure	3,537,000	2,672,000	-865,000
6. Operations Subtotal (Items 1 thru 5)	\$562,056,000	\$577,302,000	\$15,246,000
7. ICF-DD SPA Admininstration Fee	1,745,000	1,745,000	0
8. AB 10 Minimum Wage Increase	0	136,000	136,000
9. Total Operations (Items 6 and 8)	\$563,801,000	\$579,183,000	\$15,382,000
B. Purchase of Services (POS)			
1. Community Care Facilities	\$945,805,000	\$965,590,000	\$19,785,000
2. Medical Facilities	28,399,000	27,443,000	-956,000
3. Day Programs	867,903,000	903,911,000	36,008,000
4. Habilitation Services	145,684,000	146,477,000	793,000
5. Transportation	242,544,000	246,581,000	4,037,000
6. Support Services	823,132,000	859,070,000	35,938,000
7. In-Home Respite	208,759,000	216,375,000	7,616,000
8. Out-of-Home Respite	41,978,000	42,928,000	950,000
9. Health Care	84,967,000	88,845,000	3,878,000
10. Miscellaneous	403,712,000	416,809,000	13,097,000
11. POS Subtotal (Items 1 thru 10)	\$3,792,883,000	\$3,914,029,000	\$121,146,000
12. Quality Assurance Fees (Transfer from DHCS)	\$9,424,000	\$9,424,000	\$0
13. Impacts from Other Departments	0	-3,133,000	-3,133,000
14. AB 10 Minimum Wage Increase	0	110,054,000	110,054,000
15. Federal Labor Regulations	0	7,500,000	7,500,000
16. Total POS (Items 11 thru 14)	\$3,802,307,000	\$4,037,874,000	\$235,567,000
C. Early Start/Part C: Other Agency Costs	\$17,829,000	\$17,698,000	-\$131,000
D. Prevention Program	\$2,003,000	\$2,003,000	\$0
F. GRAND TOTAL	\$4,385,940,000	\$4,636,758,000	\$250,818,000

Comparision Fiscal Year 2013-14 to Fiscal Year 2014-15

	A	B	C
	Fiscal Year 2013-14	Fiscal Year 2014-15	Incremental Increase (B - A)
II. FUND SOURCES:			
A. General Fund Total	\$2,472,574,000	\$2,634,203,000	\$161,629,000
1. General Fund Match	1,624,145,000	1,713,449,000	89,304,000
2. General Fund - Other	848,429,000	920,754,000	72,325,000
B. Reimbursements	\$1,857,913,000	\$1,947,086,000	\$89,173,000
1. Home & Community-Based Services (HCBS) Waiver	1,218,386,000	1,293,056,000	74,670,000
2. HCBS Waiver Administration	6,610,000	6,648,000	38,000
3. Medicaid Administration	8,654,000	8,654,000	0
4. Targeted Case Management (TCM)	142,989,000	143,008,000	19,000
5. TCM Administration	3,728,000	3,728,000	0
6. Title XX Block Grant	213,191,000	213,191,000	0
a. Social Services	136,034,000	136,034,000	0
b. Temporary Assistance for Needy Families	77,157,000	77,157,000	0
7. ICF-DD SPA	58,193,000	58,193,000	0
8. Quality Assurance Fees	10,297,000	10,297,000	0
9. 1915(i) SPA	167,842,000	182,261,000	14,419,000
10. Money Follows the Person	11,215,000	11,373,000	158,000
11. Homeland Security Grant	391,000	391,000	0
12. Race to the Top	472,000	341,000	-131,000
13. Early Periodic Screening Diagnosis and Treatment	15,945,000	15,945,000	0
C. Program Development Fund / Parental Fees	\$5,908,000	\$5,808,000	-\$100,000
D. Developmental Disabilities Services Account	\$150,000	\$150,000	\$0
E. Mental Health Services Fund	\$740,000	\$740,000	\$0
F. Federal Funds	\$48,655,000	\$48,771,000	\$116,000
1. Early Start/Part C Grant	48,058,000	48,058,000	0
2. Foster Grandparent Program	597,000	713,000	116,000
G. GRAND TOTAL	\$4,385,940,000	\$4,636,758,000	\$250,818,000

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SECTION B: EXECUTIVE HIGHLIGHTS	B-1 to B-10
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Executive Highlights

I. FISCAL YEAR 2013-14 COSTS AND FUND SOURCES

A. Overview

Funding for the regional centers in the current year is estimated to increase by \$4.5 million (-\$6.3 million General Fund (GF)) compared to the Enacted Budget.

Fiscal Year 2013-14 Costs and Fund Sources <i>(in thousands)</i>			
	Enacted Budget	Updated 2013-14	Request
Total Costs	\$4,381,422	\$4,385,940	\$4,518
Operations	562,059	563,801	1,742
Purchase of Services	3,799,754	3,802,307	2,553
Early Start - Other Agency Costs	17,606	17,829	223
Prevention Program	2,003	2,003	0
Fund Sources	\$4,381,422	\$4,385,940	\$4,518
General Fund (GF)	2,478,898	2,472,574	-6,324
<i>GF Match</i>	(1,606,100)	(1,624,145)	(18,045)
<i>GF Other</i>	(872,798)	(848,429)	(24,369)
Reimbursements	1,847,046	1,857,913	10,867
Program Development Fund	5,970	5,908	-62
Developmental Disabilities Services Account	150	150	0
Mental Health Services Fund	740	740	0
Federal Funds	48,618	48,655	37

The increase in costs and fund sources is composed of the following:

- -\$0.4 million decrease (\$7.9 million GF increase) in Operations (OPS) to reflect updated caseload and expenditure data;
- \$2.6 million increase (-\$16.3 million GF decrease) in Purchase of Services (POS) to reflect updated caseload, utilization change and expenditure data;
- \$0.2 million increase in Other Agency Costs to reflect the reallocation of Race to the Top grant funds; and
- \$2.1 million increase in OPS to reflect an adjustment to correct the double counting of savings related to the 2009-10 Early Start Eligibility savings proposal; and
- \$37,000 increase in Other Agency Costs to reflect the transfer of Early Start Part C funding from state operations to local assistance in support of Family Resource Centers.

B. Caseload

The 2013-14 community caseload as of January 31, 2014 is estimated to increase by 612 consumers over the Enacted Budget caseload estimate of 265,097 to the level of 265,709.

	Fiscal Year 2013-14		
	Enacted Budget	Updated 2013-14	Difference
<u>CASELOAD</u>			
Active (Age 3 & Older)	234,702	234,702	0
Early Start (Birth through 2 Years)	30,395	31,007	612
Total Community Caseload	265,097	265,709	612

C. Total Regional Center Costs: \$4.5 Million (-\$6.3 Million GF) Increase

1. Updated Costs for Regional Center OPS: \$1.7 million (\$10.0 million GF) increase to reflect updated caseload and decreased reimbursements as discussed in fund sources on pages B-3 through B-4 as follows:

	Fiscal Year 2013-14		
	Enacted Budget	Updated 2013-14	Request
	(in thousands)		
<u>Operations Total</u>			
Core Staffing	\$482,937	\$484,031	\$1,094
Federal Compliance	47,789	48,297	508
Agnews Ongoing Workload	2,946	2,946	0
Lanterman Developmental Center Closure	3,537	3,537	0
Projects	23,105	23,245	140
Intermediate Care Facility-Developmentally Disabled Administration Fee	1,745	1,745	0
Total Operations	\$562,059	\$563,801	\$1,742

- Core Staffing:
 - -\$1.0 million decrease (\$7.8 million GF increase) to reflect updated caseload, and decreased reimbursements as discussed in fund sources on page B-4; and
 - \$2.1 million GF increase to reflect an adjustment to correct the double counting of savings related to the 2009-10 Early Start Eligibility savings proposal;

- Federal Compliance: \$0.5 million (\$0.2 million GF) increase to reflect additional Client Program Coordinator positions to meet the Home and Community Based (HCBS) Waiver requirement for case management coverage as a result of updated caseload with reduced targeted case management funding, see page B-4;
 - Agnews Ongoing Workload: -\$0.2 million GF, fund shift to reimbursements to reflect an increase in expenditures eligible for Federal Financial Participation (FFP); and
 - Project: \$0.1 million increase (\$0.1 million GF) to reflect updated expenditures.
2. Updated Costs for Regional Center POS: \$2.6 million increase (-\$16.3 million GF decrease) to reflect updated caseload, utilization change and expenditure data.
3. Updated Costs for Other Agency Costs:
- \$0.2 million increase to reflect the reallocation of Race to the Top grant funds; and
 - \$37,000 increase in Other Agency Costs to reflect the transfer of Early Start Part C funding from state operations to local assistance in support of Family Resource Centers.

D. Fund Sources

1. General Fund : -\$6.3 million decrease: This decrease is composed of:
- -\$8.4 million decrease to reflect updated caseload, utilization change, expenditure and HCBS Waiver enrollment data; and
 - \$2.1 million increase to reflect an adjustment to correct the double counting of savings related to the 2009-10 Early Start Eligibility savings proposal.

2. Reimbursements: \$10.9 million increase: This increase reflects the following:

Fiscal Year 2013-14 Reimbursements <i>(in thousands)</i>			
	Enacted Budget	Updated 2013-14	Request
Home and Community-Based Services (HCBS) Waiver	\$1,193,805	\$1,218,386	\$24,581
HCBS Waiver Administration	6,367	6,610	243
Medicaid Administration	11,612	8,654	-2,958
Targeted Case Management (TCM)	148,952	142,989	-5,963
TCM Administration	3,656	3,728	72
Title XX Block Grant	213,191	213,191	0
(1) Social Services	(136,034)	(136,034)	0
(2) Temporary Assistance for Needy Families	(77,157)	(77,157)	0
Intermediate Care Facility - Developmentally Disabled	58,193	58,193	0
Quality Assurance Fees (Transfer from DHCS)	10,297	10,297	0
1915(i) State Plan Amendment (SPA)	167,842	167,842	0
Money Follows the Person	14,867	11,215	-3,652
Homeland Security Grant	391	391	0
Race to the Top	286	472	186
Early Periodic Screening Diagnostic and Treatment	17,587	15,945	-1,642
TOTAL	\$1,847,046	\$1,857,913	\$10,867

- HCBS Waiver (POS): The \$24.7 million increase reflects additional Federal Financial Participation (FFP) from updated enrollments and service costs for consumers under the Waiver;
- HCBS Waiver Administration (OPS): The \$0.2 million increase reflects updated regional center expenditures;
- Medicaid Administration (OPS): The -\$3.0 million decrease reflects updated regional center expenditures;
- Targeted Case Management (TCM) (OPS): The -\$6.0 million decrease reflects updated data on billable units;
- TCM Administration (OPS): The \$0.1 million increase reflects updated regional center expenditures;
- Money Follows the Person (MFP) (OPS and POS): The -\$3.7 million decrease reflects updated expenditures and the addition of costs related to the Quality of Life Surveys;
- Race to the Top (Other Agency Costs): The \$0.2 million increase reflects a reallocation of grant funds; and
- Early Periodic Screening Diagnosis and Treatment (EPSDT) (POS): The -\$1.6 million decrease to reflect updated service costs for consumers.

3. Program Development Fund (PDF): -\$0.1 Million Decrease – This decrease reflects an update of revenues from Parental Fees based on information regarding actual collection amounts in administering the program.
4. Federal Funds: \$37,000 Increase – This increase reflects the transfer of Early Start Part C funding from state operations to local assistance in support of Family Resource Centers

II. FISCAL YEAR 2014-15 COSTS AND FUND SOURCES

A. Overview

Funding for the regional centers in the budget year is estimated to increase by \$255.3 million (\$155.3 million GF) compared to the Enacted Budget.

Fiscal Year 2014-15 Costs and Fund Sources <i>(in thousands)</i>			
	Enacted Budget	2014-15	Request
Total Costs	\$4,381,422	\$4,636,758	\$255,336
Operations	562,059	579,183	17,124
Purchase of Services	3,799,754	4,037,874	238,120
Early Start - Other Agency Costs	17,606	17,698	92
Prevention Program	2,003	2,003	0
Fund Sources	\$4,381,422	\$4,636,758	\$255,336
General Fund (GF)	2,478,898	2,634,203	155,305
<i>GF Match</i>	<i>(1,606,100)</i>	<i>(1,713,449)</i>	<i>(107,349)</i>
<i>GF Other</i>	<i>(872,798)</i>	<i>(920,754)</i>	<i>(47,956)</i>
Reimbursements	1,847,046	1,947,086	100,040
Program Development Fund	5,970	5,808	-162
Developmental Disabilities Services Account	150	150	0
Mental Health Services Fund	740	740	0
Federal Funds	48,618	48,771	153

The increase in costs and fund sources is composed of the following:

- \$14.9 million (\$23.0 million GF) increase in OPS to reflect updated caseload and expenditure data, including additional HCBS Waiver enrollment;
- \$123.6 million (\$59.9 million GF) increase in POS to reflect updated caseload, utilization change, and expenditure data.
- \$0.1 million increase in Other Agency Costs to reflect the reallocation of Race to the Top grant funds;

- \$2.1 million GF increase in OPS to reflect an adjustment to correct the double counting of savings related to the 2009-10 Early Start Eligibility savings proposal;
- -\$3.1 million GF decrease in POS to reflect the Department of Health Care Services (DHCS) restoration of Enteral Nutrition and partial restoration of Adult Dental Services as Medi-Cal optional benefit;
- Assembly Bill (AB) 10, Chapter 351, Statutes of 2013 which increases the minimum wage from \$8.00 to \$9.00 effective July 1, 2014.
 - \$0.1 million (\$0.1 million GF) increase in OPS due to the minimum wage increase will impact positions in Core Staffing that are budgeted at salary levels that are below \$9.00;
 - \$110.1 million (\$69.3 million GF) increase in POS applies to the services which rely on employees that are paid minimum wage;
- \$7.5 million (\$4.0 million GF) increase in POS to reflect the impact of changes in the Fair Labor Standards Act (FLSA) to include overtime compensation for service providers that previously were not required to pay overtime, effective January 1, 2015.

B. Caseload

The 2013-14 community caseload as of January 31, 2015 is estimated to increase by 8,546 consumers over the Enacted Budget caseload estimate of 265,097 to the level of 273,643.

	Fiscal Year 2014-15		
	Enacted Budget	2014-15	Request
<u>CASELOAD</u>			
Active (Age 3 & Older)	234,702	241,748	7,046
Early Start (Birth through 2 Years)	30,395	31,895	1,500
Total Community Caseload	265,097	273,643	8,546

C. Total Regional Center Costs: \$255.3 Million (\$155.3 Million GF) Increase

1. **OPS to Reflect Budget Year Costs:** \$17.1 million (\$25.2 million GF) increase to reflect updated caseload and decreased reimbursements as discussed in fund sources on page B-9; and impact of AB 10 as follows:

	Fiscal Year 2014-15		
	Enacted Budget	2014-15	Request
	(in thousands)		
Operations Total			
Core Staffing	\$482,937	\$499,613	\$16,676
Federal Compliance	47,789	48,314	525
Agnews Ongoing Workload	2,946	2,946	0
Lanterman Developmental Center Closure	3,537	2,672	-865
Projects	23,105	23,757	652
Intermediate Care Facility-Developmentally Disabled Administration Fee	1,745	1,745	0
AB 10 Minimum Wage Increase	0	136	136
Total Operations	\$562,059	\$579,183	\$17,124

- Core Staffing includes the following adjustments:
 - \$14.6 million (\$22.8 million GF) increase to reflect updated caseload and expenditure data, including HCBS Waiver enrollment above budgeted levels and redirection of staffing for Community Placement Plan activity; and
 - \$2.1 million GF increase to reflect an adjustment to correct the double counting of savings related to the 2009-10 Early Start Eligibility savings proposal.
- Federal Compliance: \$0.5 million increase (\$0.2 million GF) to reflect additional Client Program Coordinator positions to meet the HCBS Waiver requirement for case management coverage as a result of updated caseload;
- Agnews Ongoing Workload: -\$0.2 million GF, fund shift to reimbursements to reflect an increase in expenditures eligible for FFP;
- Lanterman Developmental Center Closure: -\$0.9 million (-\$0.2 million GF) decrease to redirect funding to Community Placement Plan, Operations as reflected in the core staffing adjustment above;
- Project: \$0.7 million increase (\$0.4 million GF) to reflect updated caseload and expenditures; and

- AB 10: \$0.1 million (\$0.1 million GF) increase to reflect the impact of the increase in the minimum wage from \$8.00 to \$9.00 effective July 1, 2014. This minimum wage increase will impact positions in Core Staffing that are budgeted at salary levels that are below \$9.00.
2. POS to Reflect Budget Year Costs: \$238.1 million (\$130.1 million GF) increase to reflect the following:
- \$123.6 million (\$59.9 million GF) increase to reflect updated caseload, utilization change and expenditure data;
 - -\$3.1 million GF decrease to reflect the DHCS restoration of Enteral Nutrition and partial restoration of Adult Dental Services as Medi-Cal optional benefit;
 - \$110.1 million (\$69.3 million GF) increase in POS to reflect the impact of AB 10, Chapter 351, Statutes of 2013 which increases the minimum wage from \$8.00 to \$9.00 effective July 1, 2014. This minimum wage increase applies to the services which rely on employees that are paid minimum wage; and
 - \$7.5 million (\$4.0 million GF) increase in POS to reflect the impact of changes in the FLSA to include overtime compensation for service providers that previously were not required to pay overtime.
3. Updated Costs for Other Agency Costs: \$0.1 million increase to reflect the reallocation of Race to the Top grant funds.

D. Fund Sources

1. General Fund: \$155.3 million increase to reflect the following:
- \$82.9 million increase to reflect updated caseload, utilization change and expenditure data, including HCBS waiver enrollment;
 - \$2.1 million increase to reflect an adjustment to correct the double counting of savings related to the 2009-10 Early Start Eligibility savings proposal;
 - -\$3.1 million decrease to reflect the DHCS restoration of Enteral Nutrition and partial restoration of Adult Dental Services as Medi-Cal benefit;
 - AB 10, Chapter 351, Statutes of 2013 which increases the minimum wage from \$8.00 to \$9.00 effective July 1, 2014.
 - \$0.1 million increase in OPS due to the minimum wage increase will impact positions in Core Staffing that are budgeted at salary levels that are below \$9.00; and
 - \$69.3 million increase in POS applies to the services which rely on employees that are paid minimum wage; and

- \$4.0 million increase in POS to reflect the impact of changes in the FLSA to include overtime compensation for service providers that previously were not required to pay overtime.

2. Reimbursements: \$100.0 million increase to reflect the following:

Fiscal Year 2014-15 Reimbursements <i>(in thousands)</i>			
	Enacted Budget	2014-15	Request
Home and Community-Based Services (HCBS) Waiver	\$1,193,805	\$1,293,056	\$99,251
HCBS Waiver Administration	6,367	6,648	281
Medicaid Administration	11,612	8,654	-2,958
Targeted Case Management (TCM)	148,952	143,008	-5,944
TCM Administration	3,656	3,728	72
Title XX Block Grant	213,191	213,191	0
(1) Social Services	(136,034)	(136,034)	0
(2) Temporary Assistance for Needy Families	(77,157)	(77,157)	0
Intermediate Care Facility - Developmentally Disabled	58,193	58,193	0
Quality Assurance Fees (Transfer from DHCS)	10,297	10,297	0
1915(i) State Plan Amendment (SPA)	167,842	182,261	14,419
Money Follows the Person	14,867	11,373	-3,494
Homeland Security Grant	391	391	0
Race to the Top	286	341	55
Early Periodic Screening Diagnostic and Treatment	17,587	15,945	-1,642
TOTAL	\$1,847,046	\$1,947,086	\$100,040

- Caseload: \$55.8 million
 - HCBS Waiver (POS): \$61.9 million increase to reflect additional FFP from updated enrollments and services costs for consumers under the Waiver;
 - HCBS Waiver Administration (OPS): \$0.3 million increase to reflect updated regional center expenditures;
 - Medicaid Administration (OPS): -\$3.0 million decrease to reflect updated regional center expenditures;
 - TCM (OPS): -\$6.0 million decrease due to updated data on billable units;
 - TCM Administration (OPS): \$0.1 million increase to reflect the most current expenditure data;
 - 1915(i) SPA (POS): \$7.5 million increase reflects updated POS expenditures for consumers under the 1915(i);

- Money Follows the Person (OPS and POS): -\$3.5 million decrease reflects updated expenditures and the addition of costs related to the Quality of Life Surveys;
 - Race to the Top (Other Agency Costs): \$0.1 million increase reflects a reallocation of grant funds; and
 - EPSDT (POS): The -\$1.6 million decrease reflects updated POS expenditures for consumers under the EPSDT benefit.
- AB 10: \$40.7 million to reflect the impact of AB 10, Chapter 351, Statutes of 2013 which increases the minimum wage from \$8.00 to \$9.00 effective July 1, 2014.
 - HCBS Waiver (POS): \$34.6 million
 - 1915(i) (POS): \$6.1 million
 - TCM (OPS): \$0.02 million
 - Federal Labor Regulations: \$3.5 million to reflect the impact of changes in the FLSA to include overtime compensation for service providers that previously were not required to pay overtime, effective January 1, 2015.
 - HCBS Waiver (POS): \$2.7 million
 - 1915(i) (POS): \$0.8 million
3. PDF: -\$0.2 Million decrease reflects an update of Parental Fees revenues based on information regarding actual collection amounts in administering the program.
 4. Federal Funds, Foster Grandparent Program: \$0.2 million increase reflects transfer of funding from the Developmental Centers Program to the community.

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FUTURE FISCAL ISSUES AND MAJOR ASSUMPTIONS

Future Fiscal Issues

Change of Rates for Some ICFs

On February 27, 2013, the Centers for Medicare and Medicaid Services (CMS) approved a state plan amendment submitted by the Department of Health Care Services (DHCS), changing the rate setting methodology for Intermediate Care Facilities (ICFs). Applying this new methodology, DHCS estimates that 36% of ICFs may be subject to a rate reduction of up to 10%, retroactive to August 1, 2012. Stakeholders have expressed concern, both prior to and after CMS' approval that enacting this change would result in some ICFs closing because the providers could not absorb a reduction in rates that have been frozen since 2008. Other residential options (e.g. a different ICF or a regional center funded setting) would be necessary for the individuals residing in any ICFs that decide to no longer offer ICF services. Since ICFs are funded by Medi-Cal, any movement of individuals from an ICF to a regional center funded residential setting will result in increased costs to the Department of Developmental Services (DDS). The number of ICFs that may cease operation and the resulting fiscal impact has not been determined. DDS, in conjunction with DHCS, will continue to monitor the outcome of the application of the new rate setting methodology.

Patient Protection and Affordable Care Act (PPACA) – Employer Mandate

A key reform of the healthcare system included in the PPACA is the requirement that many businesses that do not currently offer insurance to employees make healthcare coverage available or pay a fine to cover the cost of the coverage through the new health exchange. In addition, the health insurance must meet the requirements for a qualified health plan.

Effective January 1, 2015, service providers with 50 or more full time employees will need to provide health insurance that meets the requirements of a qualified healthcare plan or pay a fine. While some service providers already provide health insurance for their employees that meet these requirements, provision of this type of coverage is not a DDS mandated cost. Therefore, for those service providers affected by this requirement that do not provide health insurance for their employees, it is likely DDS will receive requests for rate increases if the new requirements result in an increase in costs. These requests could include a rate adjustment for unanticipated costs (permissible for some cost statement based rates such as day programs) or health and safety requests.

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Community Caseload Bar Chart	D-4

CASELOAD

Fiscal Year 2013-14

<i>Estimated Caseload as of 1/31/14</i>				
	<i>ENACTED BUDGET</i>	<i>GOVERNOR'S BUDGET</i>	<i>Change</i>	<i>Percent Change</i>
A. Active Caseload (Age 3 & Older)	234,702	234,702	0	0.00%
B. Early Start (Birth through 2 Years)	30,395	31,007	612	2.01%
C. Total Community Caseload	265,097	265,709	612	0.23%
D. Developmental Center (DC) Average Population	1,348	1,348	0	0.00%
E. On Leave	-15	-15	0	0.00%
F. Total Avg. In Center DC Population	1,333	1,333	0	0.00%
G. Total Regional Center (RC) Caseload (C + F)	266,430	267,042	612	0.23%

CASELOAD

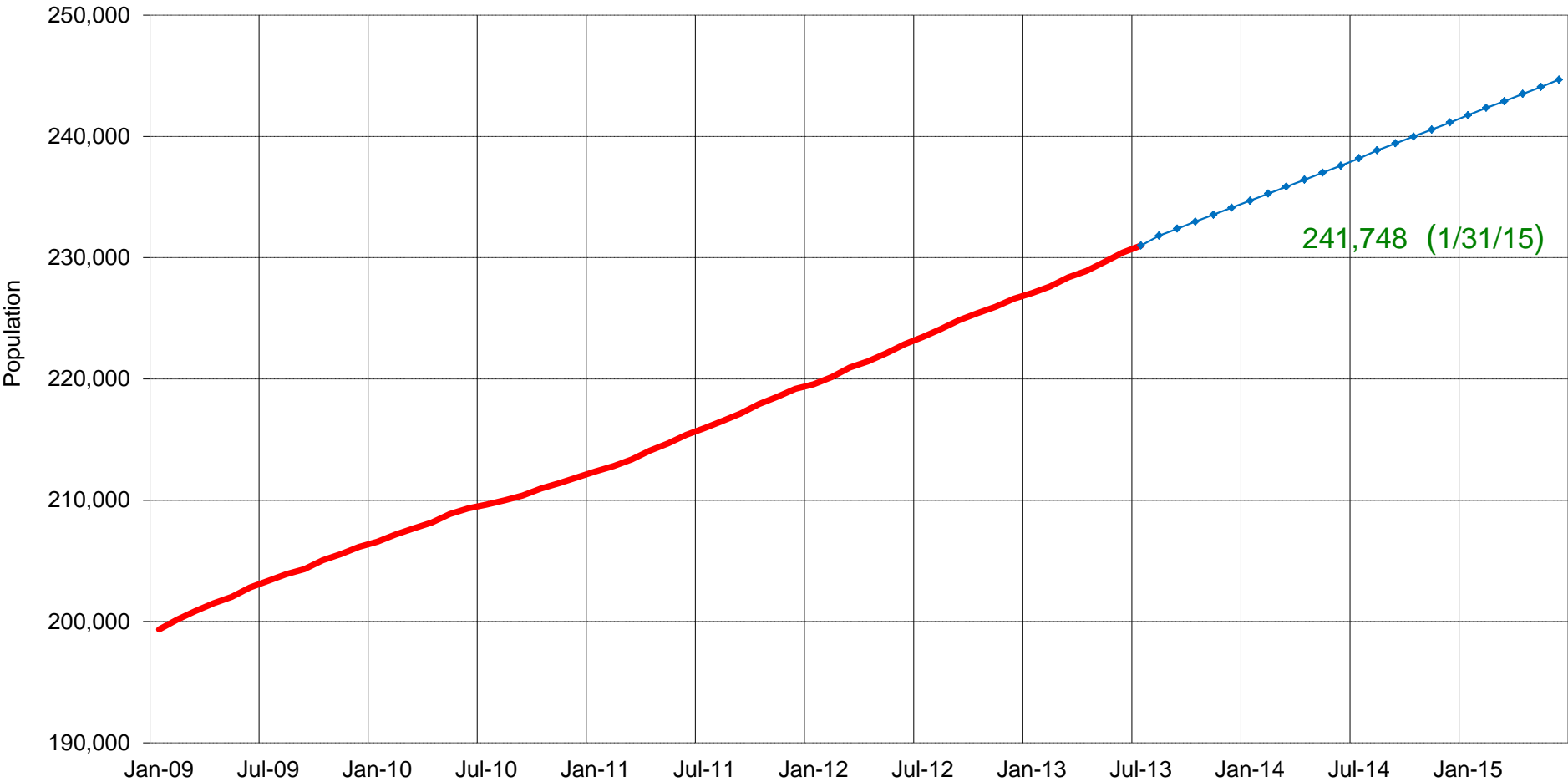
Fiscal Year 2014-15

<i>Estimated Caseload as of 1/31/15</i>				
	<i>ENACTED BUDGET</i>	<i>GOVERNOR'S BUDGET</i>	<i>Change</i>	<i>Percent Change</i>
A. Active Caseload (Age 3 & Older)	234,702	241,748	7,046	3.00%
B. Early Start (Birth through 2 Years)	30,395	31,895	1,500	4.94%
C. Total Community Caseload	265,097	273,643	8,546	3.22%
D. Developmental Center (DC) Average Population	1,348	1,125	-223	-16.54%
E. On Leave	-15	-15	0	0.00%
F. Total Avg. In Center DC Population	1,333	1,110	-223	-16.73%
G. Total Regional Center (RC) Caseload (C + F)	266,430	274,753	8,323	3.1%

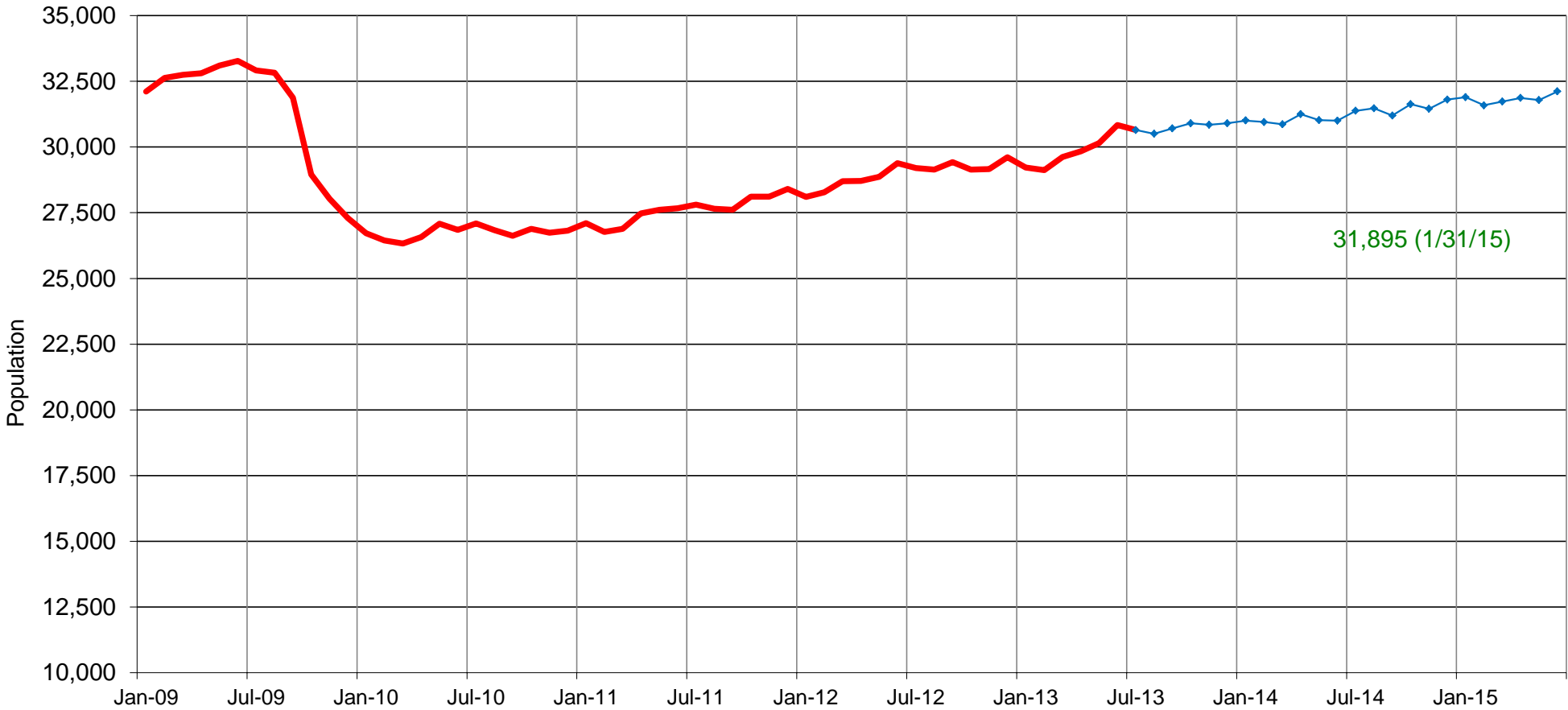
CASELOAD*Fiscal Year 2013-14 vs. Fiscal Year 2014-15*

	Fiscal Year 2013-14	Fiscal Year 2014-15		
	<i>Estimated Caseload as of 1/31/14</i>	<i>Estimated Caseload as of 1/31/15</i>	<i>Annual Change</i>	<i>Percent Annual Change</i>
A. Active Caseload (Age 3 & Older)	234,702	241,748	7,046	3.0%
B. Early Start (Birth through 2 Years)	31,007	31,895	888	2.9%
C. Total Community Caseload	265,709	273,643	7,934	3.0%
D. Developmental Center (DC) Average Population	1,348	1,125	-223	-16.5%
E. On Leave	-15	-15	0	0%
F. Total Avg. In Center DC Population	1,333	1,110	-223	-16.7%
G. Total Regional Center (RC) Caseload (D + G)	267,042	274,753	7,711	2.9%

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



Early Start
Birth through 2 Years
Client Master File Trend Analysis



Community Caseload

(Active Status and Early Start)

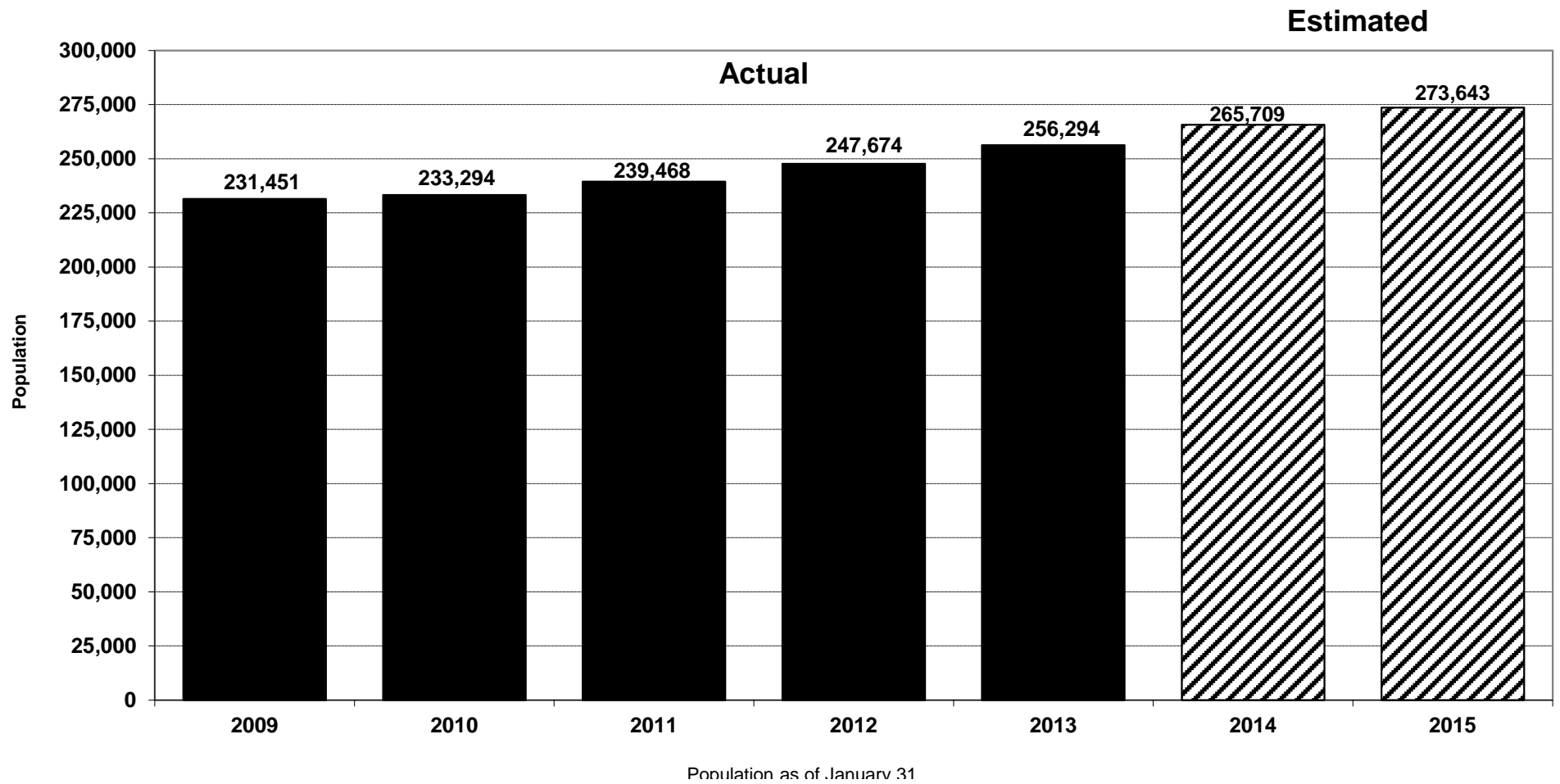


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Operations
POPULATION AND OPERATIONS SUMMARY
Comparison of Enacted Budget to Governor's Budget
Fiscal Year 2013-14

	Enacted Budget	Governor's Budget	Request
POPULATION			
Active (Age 3 & Older)	234,702	234,702	0
Early Start (Birth through 2 Years)	30,395	31,007	612
Total Population	265,097	265,709	612
OPERATIONS			
I. STAFFING			
A. Core Staffing	\$512,260,000	\$511,209,000	-\$1,051,000
B. Community Placement Plan	12,472,000	12,472,000	0
C. Staffing for Collection of FFP for Contracted Services	2,228,000	2,228,000	0
D. Less: Intake and Assessment	-4,465,000	-4,465,000	0
E. Less: Unallocated Reduction (2001-02)	-10,559,000	-10,559,000	0
F. Less: Cost Containment	-5,968,000	-5,968,000	0
G. Less: Savings Target	-14,145,000	-12,000,000	2,145,000
H. Less: Cost Containment (2011-12)	-3,486,000	-3,486,000	0
I. Less: Unallocated Reduction (2011-12)	-5,400,000	-5,400,000	0
J. Total Staffing	\$482,937,000	\$484,031,000	\$1,094,000
II.			
A. Agnews Ongoing Workload	\$2,946,000	\$2,946,000	\$0
B. Lanterman Development Center Closure	3,537,000	3,537,000	0
C. Total Developmental Centers Closure	\$6,483,000	\$6,483,000	\$0
III. FEDERAL COMPLIANCE			
A. HCBS Waiver	\$21,135,000	\$21,135,000	\$0
B. Compliance with HCBS Waiver Requirements	9,200,000	9,200,000	0
C. Case Managers to Meet HCBS Waiver Requirements	11,868,000	12,376,000	508,000
D. Targeted Case Management	4,129,000	4,129,000	0
E. Nursing Home Reform/Pre-Admission Screening and Resident Review	473,000	473,000	0
F. Federal Medicaid Requirement for RC HCBS Services	984,000	984,000	0
G. Total Federal Compliance	\$47,789,000	\$48,297,000	\$508,000
IV. PROJECTS			
A. Information Technology Costs:	\$2,917,000	\$2,917,000	\$0
1. Regional Center Application Support	1,567,000	1,567,000	0
2. Data Processing	1,350,000	1,350,000	0
B. Clients' Rights Advocacy Contract	5,564,000	5,623,000	59,000
C. Quality Assessment Contract	2,992,000	3,058,000	66,000
D. Direct Support Professional Training	2,590,000	2,605,000	15,000
E. Office of Administrative Hearings Contract	2,910,000	2,910,000	0
F. Wellness Projects	100,000	100,000	0
G. Foster Grandparent / Senior Companion Programs	1,739,000	1,739,000	0
H. Special Incident Reporting/Risk Assessment Contract	807,000	807,000	0
I. Increased Access to Mental Health Services	740,000	740,000	0
J. Sherry S. Court Case / Los Angeles County Hops	301,000	301,000	0
K. Enhancing FFP, Phase II, Proposal C, Consultant	500,000	500,000	0
L. University Enterprises, Inc.	113,000	113,000	0
M. Affordable Housing	94,000	94,000	0
N. Review of SB 1175 Housing Proposals	150,000	150,000	0
O. Denti-Cal Infrastructure for RC Dental Services	1,197,000	1,197,000	0
P. Homeland Security Grant Program	391,000	391,000	0
Q. Total Projects	\$23,105,000	\$23,245,000	\$140,000
V. Intermediate Care Facility-Developmentally Disabled Administrative Fees			
	\$1,745,000	\$1,745,000	\$0
VI. GRAND TOTAL	\$562,059,000	\$563,801,000	\$1,742,000

Operations
POPULATION AND OPERATIONS SUMMARY
Comparison of Enacted Budget to Governor's Budget
Fiscal Year 2014-15

	Enacted Budget	Governor's Budget	Request
POPULATION			
Active (Age 3 & Older)	234,702	241,748	7,046
Early Start (Birth through 2 Years)	30,395	31,895	1,500
Total Population	265,097	273,643	8,546
OPERATIONS			
I. STAFFING			
A. Core Staffing	\$512,260,000	\$525,926,000	\$13,666,000
B. Community Placement Plan	12,472,000	13,337,000	865,000
C. Staffing for Collection of FFP for Contracted Services	2,228,000	2,228,000	0
D. Less: Intake and Assessment	-4,465,000	-4,465,000	0
E. Less: Unallocated Reduction (2001-02)	-10,559,000	-10,559,000	0
F. Less: Cost Containment	-5,968,000	-5,968,000	0
G. Less: Savings Target	-14,145,000	-12,000,000	2,145,000
H. Less: Cost Containment (2011-12)	-3,486,000	-3,486,000	0
I. Less: Unallocated Reduction (2011-12)	-5,400,000	-5,400,000	0
K. Total Staffing	\$482,937,000	\$499,613,000	\$16,676,000
II. A. Agnews Ongoing Workload			
	\$2,946,000	\$2,946,000	\$0
B. Lanterman Development Center Closure			
	3,537,000	2,672,000	-865,000
C. Total Developmental Centers Closure	\$6,483,000	\$5,618,000	-\$865,000
III. FEDERAL COMPLIANCE			
A. HCBS Waiver	\$21,135,000	\$21,135,000	\$0
B. Compliance with HCBS Waiver Requirements	9,200,000	9,200,000	0
C. Case Managers to Meet HCBS Waiver Requirements	11,868,000	12,393,000	525,000
D. Targeted Case Management	4,129,000	4,129,000	0
E. Nursing Home Reform/Pre-Admission Screening and Resident Review	473,000	473,000	0
F. Federal Medicaid Requirement for RC HCBS Services	984,000	984,000	0
G. Total Federal Compliance	\$47,789,000	\$48,314,000	\$525,000
IV. PROJECTS			
A. Information Technology Costs:	\$2,917,000	\$2,917,000	\$0
1. Regional Center Application Support	1,567,000	1,567,000	0
2. Data Processing	1,350,000	1,350,000	0
B. Clients' Rights Advocacy Contract	5,564,000	5,792,000	228,000
C. Quality Assessment Contract	2,992,000	3,058,000	66,000
D. Direct Support Professional Training	2,590,000	2,605,000	15,000
E. Office of Administrative Hearings Contract	2,910,000	2,910,000	0
F. Wellness Projects	100,000	100,000	0
G. Foster Grandparent / Senior Companion Programs	1,739,000	2,082,000	343,000
H. Special Incident Reporting/Risk Assessment Contract	807,000	807,000	0
I. Increased Access to Mental Health Services	740,000	740,000	0
J. Sherry S. Court Case / Los Angeles County Hops	301,000	301,000	0
K. Enhancing FFP, Phase II, Proposal C, Consultant	500,000	500,000	0
L. University Enterprises, Inc.	113,000	113,000	0
M. Affordable Housing	94,000	94,000	0
N. Review of SB 1175 Housing Proposals	150,000	150,000	0
O. Denti-Cal Infrastructure for RC Dental Services	1,197,000	1,197,000	0
P. Homeland Security Grant Program	391,000	391,000	0
Q. Total Projects	\$23,105,000	\$23,757,000	\$652,000
V. Intermediate Care Facility-Developmentally Disabled Administrative Fees			
	\$1,745,000	\$1,745,000	\$0
VI. AB 10 Minimum Wage Increase			
	\$0	\$136,000	\$136,000
VII. GRAND TOTAL	\$562,059,000	\$579,183,000	\$17,124,000

Staffing

DESCRIPTION:

Staffing includes personal services and operating expenses for Core Staffing, Community Placement Plan (CPP) staff.

ASSUMPTIONS:

- Caseload data is from the Client Master File.
- **Caseload Projections:** (See Section D, Population, for detail)

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
• Active Caseload (Age 3 and Over)	234,702	234,702	0	241,748	7,046	7,046
• Early Start (Birth through 2 Years and Active)	30,395	31,007	612	31,895	888	1,500
Subtotal	265,097	265,709	612	273,643	7,934	8,546
• Developmental Center Population	1,333	1,333	0	1,129	-204	-204
Total Caseload	266,430	267,042	612	274,772	7,730	8,342

Informational:

• Community Care Facility Consumers (including Placement Continuation)	25,430	25,297	-133	25,399	102	-31
• Home and Community-Based Services (HCBS) Waiver-Enrolled Consumers	105,823	106,283	460	111,584	5,301	5,761
• Early Start (with Assessment)	34,354	35,225	871	36,197	972	1,843
• Placement Continuation Consumers	220	228	8	158	-70	-62
• Intake cases per month	5,792	5,792	0	6,197	405	405
• Vendors	35,740	43,486	7,746	43,497	11	7,757
• Mediations per year	400	400	0	400	0	0

METHODOLOGY:

CORE STAFFING

PERSONAL SERVICES:

- **Direct Services and Administration:**

Total Estimated Number of Positions:

Enacted Budget: 10,121.73

2013-13: 10,045.29

2014-15: 10,344.41

See Attachment A for Core Staffing Expenditure Detail.

See Attachment B for Core Staffing Formulas.

• Fringe Benefits:	83,212,000	83,054,000	-158,000	85,426,000	2,372,000	2,214,000
Based on 23.7% per position.						

Staffing

METHODOLOGY (continued):

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
<ul style="list-style-type: none"> Salary Savings: 	-14,544,000	-14,443,000	101,000	-14,870,000	-427,000	-326,000
Client Program Coordinators: 1.0% Per Position	-2,076,000	-2,089,000	-13,000	-2,145,000	-56,000	-69,000
All Other Staff: 5.5% Per Position	-12,468,000	-12,354,000	114,000	-12,725,000	-371,000	-257,000
<ul style="list-style-type: none"> Early Start /Part C Administrative and Clinical Support: 	694,000	694,000	0	694,000	0	0
Includes salaries, fringe benefits and salary savings.						
TOTAL PERSONAL SERVICES	\$420,640,000	\$419,744,000	-\$896,000	\$431,697,000	\$11,953,000	11,057,000
OPERATING EXPENSES:						
<ul style="list-style-type: none"> Operating Expenses: 	\$39,600,000	\$39,445,000	-\$155,000	\$40,408,000	\$963,000	808,000
Base amount plus the following adjustments:						
Professional Positions: \$3,400 Per New Position						
Clerical Positions: \$2,400 Per New Position						
<ul style="list-style-type: none"> Rent: 	52,020,000	52,020,000	0	53,821,000	1,801,000	1,801,000
Base amount plus \$8,086 per new position						
TOTAL OPERATING EXPENSES	\$91,620,000	\$91,465,000	-\$155,000	\$94,229,000	\$2,764,000	2,609,000
TOTAL CORE STAFFING	\$512,260,000	\$511,209,000	-\$1,051,000	\$525,926,000	\$14,717,000	13,666,000
CPP:						
<ul style="list-style-type: none"> See CPP for the methodology detail. 	\$12,472,000	\$12,472,000	\$0	\$13,337,000	\$865,000	\$865,000
Increase in budget year represents shift of Money Follows the Person funding from Lanterman Closure to regular CPP (see page E - 2.16)						
STAFFING FOR COLLECTION OF FEDERAL FINANCIAL PARTICIPATION (FFP) FOR CONTRACTED SERVICES						
<ul style="list-style-type: none"> Funding provides one Community Program Specialist I and one Account Clerk II for each RC. This funding will be required until the RC have a billing system that allows the processing of vendor invoices that do not include the individual consumer data required to support HCBS Waiver billing. 	2,228,000	2,228,000	0	2,228,000	0	0

Staffing**METHODOLOGY (continued):**

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
LESS INTAKE AND ASSESSMENT (2003-04)						
• Expenditures reflect savings as a result of extending the amount of time allowable for regional center (RC) to perform intakes and assessments from 60 to 120 days.	-4,465,000	-4,465,000	0	-4,465,000	0	0
LESS UNALLOCATED REDUCTION (2001-02)	-10,559,000	-10,559,000	0	-10,559,000	0	0
LESS COST CONTAINMENT (2004-05)	-5,968,000	-5,968,000	0	-5,968,000	0	0
LESS SAVINGS TARGET (2009-10)	-14,145,000	-12,000,000	2,145,000	-12,000,000	0	2,145,000
LESS COST CONTAINMENT (2011-12)	-3,486,000	-3,486,000	0	-3,486,000	0	0
LESS UNALLOCATED REDUCTION (2011-12)	-5,400,000	-5,400,000	0	-5,400,000	0	0
EXPENDITURES	\$482,937,000	\$484,031,000	\$1,094,000	\$499,613,000	\$15,582,000	\$16,676,000

Staffing**FUNDING:**

The funding for Staffing expenditures is comprised of reimbursements from: Medicaid Administration (MA) (75% Federal Financial Participation (FFP) 25% General Fund (GF) Match), Home and Community-Based Services (HCBS) Waiver Administration (50% FFP/50% GF Match), Targeted Case Management (TCM) (50% FFP/50% GF Match), TCM Administration (50% FFP/50% GF Match), TCM State Plan Amendment (SPA) (50% FFP/50% GF Match), and Money Follows the Person (MFP) (100% FFP). The State GF portion is that which is non-FFP.

REASON FOR YEAR-TO-YEAR CHANGE:

Reflects updated caseload and expenditure data.

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
EXPENDITURES:						
TOTAL	\$482,937,000	\$484,031,000	\$1,094,000	\$499,613,000	\$15,582,000	\$16,676,000
GF	\$326,054,000	\$336,011,000	\$9,957,000	\$350,953,000	\$14,942,000	\$24,899,000
<i>GF Match</i>	149,065,000	142,125,000	-6,940,000	142,332,000	207,000	-6,733,000
<i>GF Other</i>	176,989,000	193,886,000	16,897,000	208,621,000	14,735,000	31,632,000
Reimbursements	\$156,883,000	\$148,020,000	-\$8,863,000	\$148,660,000	\$640,000	-\$8,223,000
<i>MA</i>	7,981,000	4,870,000	-3,111,000	4,870,000	0	-3,111,000
<i>HCBS Waiver Administration</i>	1,778,000	1,814,000	36,000	1,814,000	0	36,000
<i>TCM</i>	139,718,000	133,501,000	-6,217,000	133,492,000	-9,000	-6,226,000
<i>TCM Administration</i>	3,656,000	3,728,000	72,000	3,728,000	0	72,000
<i>MFP</i>	3,750,000	4,107,000	357,000	4,756,000	649,000	1,006,000

Attachment A
CORE STAFFING - CY 2013-14
Comparison of the Enacted Budget to the Governor's Budget

I. CORE STAFFING FORMULA**A. PERSONAL SERVICES****1. DIRECT SERVICES****a. Clinical****(1) Intake and Assessment**

Enacted Budget	Positions	Budgeted Salary	Cost	Request
\$10,560,483	133.52	\$79,271	\$10,584,264	\$23,781
11,124,518	267.04	41,754	11,149,988	25,470
4,951,921	133.52	37,171	4,963,072	11,151
3,747,479	133.52	28,130	3,755,918	8,439

(2) Clinical Support Teams

6,350,346	69.00	92,034	6,350,346	0
4,171,050	69.00	60,450	4,171,050	0
3,793,068	69.00	54,972	3,793,068	0
3,482,982	69.00	50,478	3,482,982	0

(3) SB 1038 Health Reviews

2,035,792	23.54	92,034	2,166,480	130,688
5,210,844	109.85	50,478	5,545,008	334,164

b. Intake / Case Management

3,147,099	82.74	38,036	3,147,099	0
26,090,207	827.42	31,532	26,090,207	0
21,984,207	420.64	52,392	22,038,171	53,964
242,592	3.61	67,200	242,592	0
1,698,326	36.12	47,019	1,698,326	0
66,389,285	1,944.09	34,032	66,161,271	-228,014
74,770,346	2,214.35	34,032	75,358,759	588,413
1,642,044	48.00	34,032	1,633,536	-8,508
71,253	1.26	52,392	66,014	-5,239
515,163	12.59	37,824	476,204	-38,959

c. Quality Assurance / Quarterly Monitoring

2,099,871	40.08	52,392	2,099,871	0
13,640,706	400.82	34,032	13,640,706	0

d. Early Intervention**(1) General**

876,792	21.00	41,752	876,792	0
856,905	21.00	40,805	856,905	0
798,714	21.00	38,034	798,714	0

(2) Early Start / Part C

1,096,565	21.46	52,392	1,124,332	27,767
7,123,578	214.63	34,032	7,304,288	180,710

e. Community Services

1,100,232	21.00	52,392	1,100,232	0
1,112,467	24.35	50,844	1,238,051	125,584
898,653	21.00	42,793	898,653	0
898,653	21.00	42,793	898,653	0
898,653	21.00	42,793	898,653	0
449,327	10.50	42,793	449,327	0
126,660	3.33	38,036	126,660	0
126,584	4.00	31,646	126,584	0
6,811	0.14	52,392	7,335	524
45,603	1.39	34,032	47,304	1,701

f. Special Incident Reporting (SIR)

387,701	7.41	52,392	388,225	524
2,519,049	74.14	34,032	2,523,132	4,083
1,868,191	37.07	50,478	1,871,219	3,028

g. Mediation

7,093	0.11	64,484	7,093	0
52,916	1.01	52,392	52,916	0
17,356	0.51	34,032	17,356	0

h. Expansion of Autism Spectrum Disorders (ASD) Initiative

1,371,888	21.00	65,328	1,371,888	0
1,318,464	21.00	62,784	1,318,464	0

i. SUBTOTAL DIRECT SERVICES

\$291,678,437	7,697.76		\$292,917,708	\$1,239,271
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Attachment A**CORE STAFFING, CY 2013-14 (continued)**

	Enacted Budget	Governor's Budget			
		Positions	Budgeted Salary	Cost	Difference
2. ADMINISTRATION					
a. <u>Executive Staff</u>					
(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)	4,220,842	106.28	39,887	4,239,190	18,348
(3) Fiscal Manager	963,480	21.00	45,880	963,480	0
(4) Program Tech II (FCPP)	882,890	24.17	36,468	881,432	-1,458
(5) Revenue Clerk	1,253,926	60.28	20,617	1,242,793	-11,133
(6) Account Clerk (Enh. FFP, Phase II)	584,640	21.00	27,840	584,640	0
(7) Account Clerk	8,169,188	333.80	18,397	6,140,919	-2,028,269
c. <u>Information Systems and Human Resources</u>					
(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. <u>Clerical Support</u>					
(1) Office Supervisor	489,867	21.00	23,327	489,867	0
(2) PBX/Mail/File Clerk	1,378,188	63.00	21,876	1,378,188	0
(3) Executive Secretary	1,148,490	52.50	21,876	1,148,490	0
(4) MD/Psychologist Secretary II	258,671	11.77	23,388	275,277	16,606
(5) MD/Psychologist Secretary I	4,371,481	200.28	21,876	4,381,325	9,844
(6) Secretary II	3,900,417	168.24	23,388	3,934,797	34,380
(7) Secretary I	19,200,415	1,026.59	18,757	19,255,749	55,334
(8) Secretary I (DC Case Management - Capitol People First)	210,834	6.62	31,848	210,834	0
e. SUBTOTAL ADMINISTRATION	\$59,427,991	2,347.53		\$57,521,643	-\$1,906,348
3. TOTAL POSITIONS AND SALARIES					
(Item A.1.i. + Item A.2.e. + A.e.f.)	\$351,278,428	10,045.29		\$350,439,351	-\$839,077
a. <i>CPCs</i>	167,846,293			168,860,882	1,014,589
b. <i>All Other Staff</i>	183,260,135			181,578,469	-1,681,666
4. Fringe Benefits					
a. <i>CPCs</i> 23.7%	\$39,779,571			\$40,020,000	\$240,429
b. <i>All Other Staff</i> 23.7%	43,432,652			43,034,000	-398,652
c. Total Fringe Benefits	\$83,212,223			\$83,054,000	-\$158,223
5. Salary Savings					
a. <i>CPCs</i> 1.0%	-\$2,076,259			-\$2,089,000	-\$12,741
b. <i>All Other Staff</i> 5.5%	-12,468,103			-12,354,000	114,103
c. Total Salary Savings	-\$14,544,362			-\$14,443,000	\$101,362
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.)	\$420,640,289			\$419,744,351	-\$895,938
ROUNDED	\$420,640,000	10,045.00		\$419,744,000	-\$896,000
B. OPERATING EXPENSES AND RENT					
1. Operating Expenses	\$39,600,000			\$39,445,000	-\$155,000
2. Rent	\$52,020,000			\$52,020,000	\$0
3. Subtotal Operating Expenses and Rent	\$91,620,000			\$91,465,000	-\$155,000
C. TOTAL CORE STAFFING (Items A.7. + B.3.)	\$512,260,000			\$511,209,000	-\$1,051,000

Attachment A
CORE STAFFING - BY 2014-15
Comparison of the Enacted Budget to the Governor's Budget

I. CORE STAFFING FORMULA**A. PERSONAL SERVICES****1. DIRECT SERVICES****a. Clinical****(1) Intake and Assessment**

	Enacted Budget	Positions	Budgeted Salary	Cost	Difference
(a) Physician	\$10,560,483	137.39	\$79,271	\$10,891,043	\$330,560
(b) Psychologist	11,124,518	274.77	41,754	11,472,747	348,229
(c) Nurse	4,951,921	137.39	37,171	5,106,924	155,003
(d) Nutritionist	3,747,479	137.39	28,130	3,864,781	117,302

(2) Clinical Support Teams

(a) Physician/Psychiatrist	6,350,346	70.00	92,034	6,442,380	92,034
(b) Consulting Pharmacist	4,171,050	70.00	60,450	4,231,500	60,450
(c) Behavioral Psychologist	3,793,068	70.00	54,972	3,848,040	54,972
(d) Nurse	3,482,982	70.00	50,478	3,533,460	50,478

(3) SB 1038 Health Reviews

(a) Physician	2,035,792	24.45	92,034	2,250,231	214,439
(b) Nurse	5,210,844	114.08	50,478	5,758,530	547,686

b. Intake / Case Management

(1) Supervising Counselor (Intake)					
(1:10 Intake Workers in Item (2) below)	3,147,099	88.53	38,036	3,367,327	220,228
(2) Intake Worker	26,090,207	885.33	31,532	27,916,226	1,826,019
(3) Supervising Counselor (Case Management)					
(1:10 CPCs in Items (6) and (7) below)	21,984,207	433.31	52,392	22,701,978	717,771
(4) Supervising Counselor (Capitol People First)					
(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)	66,389,285	1,970.54	34,032	67,061,417	672,132
(7) CPC (Waiver, Early Start only), 1:62 Consumers	74,770,346	2,314.17	34,032	78,755,833	3,985,487
(8) CPC, Quality Assurance for ARM	1,642,044	48.37	34,032	1,646,128	4,084
(9) Supervising Counselor, DSS Incidental Medical					
Care Regulations (1:10 CPCs)	71,253	1.24	52,392	64,966	-6,287
(10) CPC, DSS Incidental Medical Care Regs	515,163	12.43	37,824	470,152	-45,011

c. Quality Assurance / Quarterly Monitoring

(1) Supervising Counselor	2,099,871	40.08	52,392	2,099,871	0
(2) CPC	13,640,706	400.82	34,032	13,640,706	0

d. Early Intervention**(1) General**

(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	1,096,565	22.06	52,392	1,155,768	59,203
(b) CPC	7,123,578	220.56	34,032	7,506,098	382,520
(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	1,112,467	24.35	50,844	1,238,051	125,584
(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	126,660	2.82	38,036	107,262	-19,398
(8) Diversion	126,584	4.00	31,646	126,584	0
(9) Placement Continuation:					
(a) Supervising Counselor	6,811	0.10	52,392	5,239	-1,572
(b) CPC (Supplement at 1:45 Consumers)	45,603	0.96	34,032	32,671	-12,932

f. Special Incident Reporting (SIR)

(1) Supervising Counselor	387,701	7.57	52,392	396,607	8,906
(2) QA/CPC	2,519,049	75.73	34,032	2,577,243	58,194
(3) Nurses	1,868,191	37.86	50,478	1,911,097	42,906

g. Mediation

(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

\$291,678,437	7,937.16		\$301,667,424	\$9,988,987
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Attachment A
CORE STAFFING, BY (continued)

	Enacted Budget	Governor's Budget			
		Positions	Budgeted Salary	Cost	Difference
2. ADMINISTRATION					
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. Fiscal					
(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)	4,220,842	111.58	39,887	4,450,591	229,749
(3) Fiscal Manager	963,480	21.00	45,880	963,480	0
(4) Program Tech II (FCPP)	882,890	24.22	36,468	883,255	365
(5) Revenue Clerk	1,253,926	60.76	20,617	1,252,689	-1,237
(6) Account Clerk (Enh. FFP, Phase II)	584,640	21.00	27,840	584,640	0
(7) Account Clerk	8,169,188	343.47	18,397	6,318,818	-1,850,370
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	1,378,188	63.00	21,876	1,378,188	0
(3) Executive Secretary	1,148,490	52.50	21,876	1,148,490	0
(4) MD/Psychologist Secretary II	258,671	12.23	23,388	286,035	27,364
(5) MD/Psychologist Secretary I	4,371,481	206.08	21,876	4,508,206	136,725
(6) Secretary II	3,900,417	169.89	23,388	3,973,387	72,970
(7) Secretary I	19,200,415	1,062.90	18,757	19,936,815	736,400
(8) Secretary I (DC Case Management - Capitol People First)	210,834	6.62	31,848	210,834	0
e. SUBTOTAL ADMINISTRATION	\$59,427,991	2,407.25		\$58,779,957	-\$648,034
3. TOTAL POSITIONS AND SALARIES					
(Item A.1.i. + Item A.2.e. + A.2.f.)	\$351,278,428	10,344.41		\$360,447,381	\$9,168,953
a. CPCs	167,846,293			173,405,930	5,559,637
b. All Other Staff	183,260,135			187,041,451	3,781,316
4. Fringe Benefits					
a. CPCs 23.7%	\$39,779,571			\$41,097,205	\$1,317,634
b. All Other Staff 23.7%	43,432,652			44,328,824	896,172
c. Total Fringe Benefits	\$83,212,223			\$85,426,029	\$2,213,806
5. Salary Savings					
a. CPCs 1.0%	-\$2,076,259			-\$2,145,031	-\$68,772
b. All Other Staff 5.5%	-12,468,103			-12,725,365	-257,262
c. Total Salary Savings	-\$14,544,362			-\$14,870,396	-\$326,034
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.)	\$420,640,289			\$431,697,014	\$11,056,725
ROUNDED	\$420,640,000	10,344.00		\$431,697,000	\$11,057,000
B. OPERATING EXPENSES AND RENT					
1. Operating Expenses	\$39,600,000			\$40,408,000	\$808,000
2. Rent	\$52,020,000			\$53,821,000	\$1,801,000
3. Subtotal Operating Expenses and Rent	\$91,620,000			\$94,229,000	\$2,609,000
C. TOTAL CORE STAFFING (Items A.7. + B.3.)	\$512,260,000			\$525,926,000	\$13,666,000

Attachment B
CORE STAFFING FORMULAS

CORE STAFFING CLASSIFICATION	STAFFING FORMULA
A. <u>PERSONAL SERVICES</u>	
1. DIRECT SERVICES	
a. <u>Clinical</u>	
(1) <u>Intake and Assessment</u>	
(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) <u>Clinical Support Teams</u>	
(a) Physician/Psychiatrist	1.0 position : 1,700 consumers in community care 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 " "
(d) Nurse	1.0 position : 1,700 " "
(3) <u>SB 1038 Health Reviews</u>	
(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. <u>Intake/Case Management</u>	
(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: Case Management	1.0 position : 10 CPCs in Items b.(4 and 5) below
(4) Client Program Coordinator (CPC)	1.0 position : 62 Waiver and Early Start consumers (excluding CPP placements)
(5) CPC	1.0 position : 66 consumers (all other consumers, excluding CPP placements)
(6) Supervising Counselor: Capitol People First	1.0 position : 10 CPCs in Items b.(7) below
(7) CPC Capitol People First	1.0 position : 66 consumers (Developmental Center residents)
(8) CPC, Quality Assurance for Alternative Residential Model	1.0 position : 527 CCF consumers
(9) Supervising Counselor: DSS Incidental Medical Care Regulations	1.0 position : 10 CPCs in item b.(10) below
(10) CPC, DSS Incidental Medical Care Regulations	1.0 position : 2.5 hrs x 8 visits per year to CCF consumers who rely on others to perform activities of daily living

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) <u>General</u>		
(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) <u>Early Start/Part C</u>		
(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
(3) Program Evaluator	1.0 position	: RC
(4) Resource Developer	1.0 position	: RC
(5) Transportation Coordinator	1.0 position	: RC
(6) Administrative Services Analyst (SB 1039, Chapter 414, Statutes of 1997) Consumer Complaints	0.5 position	: RC
(7) Developmental Center Liaison	1.0 position	: 400 DC consumers
(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
2. to:	1.0 position	: 45 CPP Placements

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

CORE STAFFING CLASSIFICATION**STAFFING FORMULA****A. PERSONAL SERVICES (continued)****1. DIRECT SERVICES (continued)****f. Special Incident Reporting (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
(effective January 1, 2007) | 1.0 position | : RC |
| (2) ASD Program Coordinator
(effective January 1, 2007) | 1.0 position | : RC |

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
(Enhancing FFP, Phase I) | 1.0 position | : RC |
| (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 (Enhancing FFP,
Phase II) | 1.0 position | : RC |
| (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,
SIR | 0.5 position | : RC |
| (4) Privacy Officer, HIPAA | 1.0 position | : RC |
| (5) Personal Computer Systems
Manager | 1.0 position | : RC |
| (6) Training Officer | 1.0 position | : RC |
| (7) Training Officer, SIR | 0.5 position | : RC |
| (8) Human Resources Manager | 1.0 position | : RC |

CORE STAFFING CLASSIFICATION**STAFFING FORMULA****A. PERSONAL SERVICES (continued)****2. ADMINISTRATION (continued)****d. Clerical Support**

(1) Office Supervisor	1.0 position	:	RC
(2) PBX/Mail/File Clerk	3.0 positions	:	RC
(3) Executive Secretary	2.5 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), DDS Incidental Medical Care Regulations 1.c., Quality Assurance/ Quarterly Monitoring 1.e.(1), (2) and (9)(a) and (b) Community Services 1.e.(9)2., Community Services (see Secty I, line 1.e.(9)1., below) 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 (5) and (8), Intake/Case Mgt. 1.b.(6) and(7) Capitol People First 1.d., Early Intervention 1.e.(3), (4), (6) to (8), Community Services 1.e.(9)1., Community Services (see Secty II, line 1.e.(9)2., above)

Staffing for Collection of FFP for Contracted Services (Operations)

STAFFING:			2013-14	2014-15
PERSONAL SERVICES:	Positions	Salary		
• Positions and Salaries				
Community Program Specialist I	21.00	\$42,948	\$901,908	\$901,908
Account Clerk II	21.00	29,220	613,620	613,620
Total, Positions and Salaries	42.00		\$1,515,528	\$1,515,528
• Fringe Benefits (@ 23.7%):			359,180	359,180
• Salary Savings (@ -5.5%):			-103,109	-103,109
Total Personal Services			\$1,771,599	\$1,771,599
OPERATING EXPENSES:				
• Operating Expenses:				
Professional Positions:	\$3,400	Per Position	\$71,400	\$71,400
Clerical Positions:	2,400	Per Position	50,400	50,400
• Rent Factor:	7,968	Per Position	334,656	334,656
Total Operating Expenses			\$456,456	\$456,456
TOTAL STAFFING			\$2,228,055	\$2,228,055
(Rounded)			\$2,228,000	\$2,228,000

FUNDING:

General Fund (GF) and Home and Community-Based Services (HCBS) Waiver Administration.

EXPENDITURES:

TOTAL	\$2,228,000	\$2,228,000
GF	\$1,783,000	\$1,783,000
GF Match	445,000	445,000
GF Other	1,338,000	1,338,000
Reimbursements	\$445,000	\$445,000
HCBS Waiver Administration	445,000	445,000

Agnews Ongoing Workload (Operations)

A.	Enacted Budget		Updated 2013-14		2013-14 Request		2014-15		2014-15 Over 2013-14		2014-15 Over Enacted Budget	
	Position	Cost	Positions	Cost	Positions	Cost	Positions	Cost	Positions	Cost	Positions	Cost
Community Placement Plan Staffing												
1. Unified Operations Costs												
a. Personal Services												
(1) Quality Assurance/Management	6.50	\$503,488	6.50	\$503,488	0.00	\$0	6.50	\$503,488	0.00	\$0	0.00	\$0
(2) Health Care Community Specialists	4.00	503,000	4.00	503,000	0.00	0	4.00	503,000	0.00	0	0.00	0
(3) Total Personal Services	10.50	\$1,006,488	10.50	\$1,006,488	0.00	\$0	10.50	\$1,006,488	0.00	\$0	0.00	\$0
b. Operating Expenses												
(1) Operating Expenses		\$27,718		\$27,718		\$0		\$27,718		\$0		\$0
(2) Rent		51,800		51,800		0		51,800		0		0
(3) Total Operating Expenses		\$79,518		\$79,518		\$0		\$79,518		\$0		\$0
c. Subtotal Unified Operational Costs		\$1,086,006		\$1,086,006		\$0		\$1,086,006		\$0		\$0
(Rounded)		\$1,086,000		\$1,086,000		\$0		\$1,086,000		\$0		\$0
2. State Employees in the Community												
a. Personal Services	13.40	\$1,193,669	13.40	\$1,193,669	0.00	\$0	13.40	\$1,193,669	0.00	\$0	0.00	\$0
b. Operating Expenses		73,833		73,833		0		73,833		0		0
c. Total State Employees in the Community		\$1,267,502		\$1,267,502		\$0		\$1,267,502		\$0		\$0
(Rounded)		\$1,268,000		\$1,268,000		\$0		\$1,268,000		\$0		\$0
3. Total CPP Staffing	13.40	\$2,354,000	13.40	\$2,354,000	0.00	\$0	13.40	\$2,354,000	0.00	\$0	0.00	\$0
B. Placement Continuation Staffing												
1. Nurse	3.00	\$356,000	3.00	\$356,000	0.00	\$0	3.00	\$356,000	0.00	\$0	0.00	\$0
2. Oral Health Care	3.00	236,000	3.00	236,000	0.00	0	3.00	236,000	0.00	0	0.00	0
3. Subtotal Placement Continuation Staffing	6.00	\$592,000	6.00	\$592,000	0.00	\$0	6.00	\$592,000	0.00	\$0	0.00	\$0
C. Total (A + B)												
(Rounded)	29.90	\$2,946,000	29.90	\$2,946,000	0.00	\$0	29.90	\$2,946,000	0.00	\$0	0.00	\$0

Agnews Ongoing Workload (Operations)

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
EXPENDITURES:						
TOTAL	\$2,946,000	\$2,946,000	\$0	\$2,946,000	\$0	\$0
GF	1,029,000	840,000	-189,000	840,000	0	-189,000
<i>GF Match</i>	795,000	840,000	45,000	840,000	0	45,000
<i>GF Other</i>	234,000	0	-234,000	0	0	-234,000
Reimbursements	1,917,000	2,106,000	189,000	2,106,000	0	189,000
<i>HCBS Waiver Administration</i>	236,000	355,000	119,000	355,000	0	119,000
<i>Medicaid Administration</i>	1,681,000	1,751,000	70,000	1,751,000	0	70,000

Lanterman Developmental Center Closure (Operations)

	Enacted Budget		Updated		2013-14 Request				2014-15 Over 2013-14		2014-15 over Enacted Budget	
	2013-14		2013-14		2013-14		2014-15					
	Positions	Cost	Positions	Cost	Positions	Cost	Positions	Cost	Positions	Cost	Positions	Cost
1. Personal Services												
Resource Developer	5.00	\$425,000	5.00	\$425,000	0.00	\$0	0.00	\$0	-5.00	-\$425,000	-5.00	-\$425,000
Quality Assurance/Management	3.00	255,000	3.00	255,000	0.00	0	3.00	255,000	0.00	0.00	0.00	\$0
Placement	5.50	467,500	5.50	467,500	0.00	0	1.00	85,000	-4.50	-382,500	-4.50	-382,500
Oral Health Care Consultant	8.00	624,000	8.00	624,000	0.00	0	8.00	624,000	0.00	0.00	0.00	\$0
Nurse Consultants	4.50	382,500	4.50	382,500	0.00	0	5.00	425,000	0.50	42,500	0.50	\$42,500
Health Care Community Specialists	8.00	1,006,000	8.00	1,006,000	0.00	0	8.00	1,006,000	0.00	0.00	0.00	\$0
Total Personal Services	34.00	\$3,160,000	34.00	\$3,160,000	0.00	\$0	25.00	\$2,395,000	-9.00	-\$765,000	-9.00	-\$765,000
2. Operating Expenses												
Operating Expenses		\$115,600		\$115,600		\$0		\$85,000		-\$30,600		-\$30,600
Rent		261,630		261,630		0		192,375		-69,255		-69,255
Total Operating Expenses		\$377,230		\$377,230		\$0		\$277,375		-\$99,855		-\$99,855
3. Grand Total (1+ 2)		\$3,537,230		\$3,537,230		\$0		\$2,672,375		-\$864,855		-\$864,855
(Rounded)		\$3,537,000		\$3,537,000		\$0		\$2,672,000		-\$865,000		-\$865,000

EXPENDITURES:

TOTAL	\$3,537,000	\$3,537,000	\$0	\$2,672,000	-\$865,000	-\$865,000
General Fund	\$884,000	\$884,000	\$0	\$668,000	-\$216,000	-\$216,000
General Fund Match	884,000	884,000	0	668,000	-216,000	-216,000
General Fund Other	0	0	0	0	0	0
Reimbursements	\$2,653,000	\$2,653,000	\$0	\$2,004,000	-\$649,000	-\$649,000
Money Follows the Person Grant	2,653,000	2,653,000	0	2,004,000	-649,000	-649,000

Federal Compliance

DESCRIPTION:

With the support of the Department of Health Care Services (the federally-recognized single state agency for Medicaid), the Department of Developmental Services utilizes federal funding combined with state General Fund (GF) expenditures to meet the mandate established by the Lanterman Developmental Disabilities Services Act. Services are provided to persons with developmental disabilities through a system of 21 not-for-profit agencies called regional centers (RC). Federal financial participation (FFP) in state programs is provided through the Home and Community-Based Services (HCBS) Waiver, and the Targeted Case Management (TCM), Nursing Home Reform (NHR), and Medicaid Administration (MA) programs.

There are both fiscal and program requirements placed on the RC that enable the State to receive federal funding. This workload includes ongoing tasks, such as reviewing choice statements, handling complex notice of action issues related to the HCBS Waiver, completing annual HCBS Waiver certification/recertification forms, preparing for program audits, determining billable services, reconciling data, ensuring records are maintained 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, RCs are required to complete ongoing tasks related to the TCM and NHR programs such as ensuring compliance with Medicaid State Plan requirements for case management activities and ensuring those admitted to the nursing facilities receive appropriate screenings.

ASSUMPTIONS/METHODOLOGY:

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15 Over 2013-14	2014-15 Over Enacted Budget
● HCBS Waiver Operations costs for HCBS Waiver activities in 2013-14 and 2014-15 are based upon 6.5% of 1995-96 HCBS Waiver reimbursements of \$325,148,000. (100% GF)	\$21,135,000	\$21,135,000	\$0	\$21,135,000	\$0
● Compliance with HCBS Waiver Requirements Provides funding to ensure the RC system maintains 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; clinical consultation, monitoring, and review of consumers' health status; and developing and annually reviewing Waiver consumers' individual program plans and Client Developmental Evaluation Reports. See the attachment on page E-3.5 for fiscal detail. Funding: \$3,950,000 GF Match, \$3,300,000 TCM, \$1,950,000 MA.	\$9,200,000	\$9,200,000	\$0	\$9,200,000	\$0

Federal Compliance

ASSUMPTIONS/METHODOLOGY (continued):						2014-15
	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	Over Enacted Budget
<ul style="list-style-type: none"> Case Managers to Meet HCBS Waiver Requirements An April 21, 2006 letter from the Centers for Medicare and 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 ensure further compliance. See the attachment on page E-3.6 for fiscal detail. Enacted Budget: 2013-14: \$5,934,000 GF Match, \$5,934,000 TCM. November 2013 Estimate 2013-14: \$6,188,000 GF Match, \$6,188,000 TCM. 2014-15: \$6,196,000 GF Match, \$6,197,000 TCM. Change from Prior Estimate and Reason for Year-to-Year Change: Reflects increase in the number of case manager positions to meet the ratio of 62:1. 	\$11,868,000	\$12,376,000	\$508,000	\$12,393,000	\$17,000	\$525,000
<ul style="list-style-type: none"> TCM Operations costs for TCM activities in 2013-14 and 2014-15 are based upon 5.8% of 1995-96 TCM reimbursements of \$71,181,000. (100% GF) 	\$4,129,000	\$4,129,000	\$0	\$4,129,000	\$0	\$0
<ul style="list-style-type: none"> NHR/Pre-Admission Screening and Resident Review (PASRR) Operations costs for RCs 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 RCs case management and other specialized services. RCs, through clinical assessments, will identify individuals who meet the expanded federal definition of developmental disability. (100% GF) 	\$473,000	\$473,000	\$0	\$473,000	\$0	\$0

Federal Compliance

ASSUMPTIONS/METHODOLOGY (continued):	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted
						Budget
<ul style="list-style-type: none"> Federal Medicaid Requirement for RC HCBS Services <p>Pursuant to federal law and mandated by the Centers for Medicare and Medicaid Services (CMS), RCs are required to gather and review business ownership, control and relationship information from current and prospective vendors. Additionally, RCs are required to determine that all vendors are eligible to participate as Medicaid service providers. Furthermore, on a periodic basis, RCs 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 Home and Community-Based Services Waiver (HCBS Waiver) assurance that only qualified providers deliver Medicaid funded services. (Funding is 50% HCBS Wavier Administration, 50% GF)</p> <p>Funding: \$492,000 GF Match, \$492,000 HCBS Waiver Administration.</p>	\$984,000	\$984,000	\$0	\$984,000	\$0	\$0
<ul style="list-style-type: none"> EXPENDITURES 	\$47,789,000	\$48,297,000	\$508,000	\$48,314,000	\$17,000	\$525,000

Federal Compliance

EXPENDITURES:						2014-15
	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	Over Enacted Budget
TOTAL	\$47,789,000	\$48,297,000	\$508,000	\$48,314,000	\$17,000	\$525,000
GF	\$36,113,000	\$36,284,000	\$171,000	\$36,292,000	\$8,000	\$179,000
GF Match	10,376,000	10,658,000	282,000	10,667,000	9,000	291,000
GF Other	25,737,000	25,626,000	-111,000	25,625,000	-1,000	-112,000
Reimbursements	\$11,676,000	\$12,013,000	\$337,000	\$12,022,000	\$9,000	\$346,000
HCBS Waiver Administration	492,000	492,000	0	492,000	0	0
MA	1,950,000	2,033,000	83,000	2,033,000	0	83,000
TCM	9,234,000	9,488,000	254,000	9,497,000	9,000	263,000

Attachment

Compliance with Home and Community-Based Services Waiver Requirements (Operations)

	<u>Positions</u>	<u>Monthly Salary</u>	<u>Annual Salary</u>	<u>Annual Salary Cost</u>	<u>Benefit %</u>	<u>Annual Benefit Cost</u>	<u>Operating Expenses (OE) Annually PP</u>	<u>Rent Annually PP</u>	<u>Annual OE Total</u>	<u>Total Annual Salaries & OE (rounded)</u>
Service										
Coordinators	103.1	\$3,512	\$42,144	\$4,345,046	32.2%	\$1,399,105	\$4,248	\$4,200	\$870,989	\$6,600,000
Physicians	9.0	9,443	113,316	1,019,844	29.5%	300,854	7,632	5,388	117,180	1,400,000
Psychologists	13.7	4,824	57,888	793,066	28.4%	225,231	5,688	4,416	138,425	1,200,000
Totals	125.8			\$6,157,956		\$1,925,190			\$1,126,594	\$9,200,000

TOTAL EXPENDITURES:**\$9,200,000****FUNDING:**

These positions are eligible for the following reimbursements: Targeted Case Management (TCM) 50% Federal Financial Participation (FFP), Medicaid Administration 75% FFP. The State General Fund (GF) portion is that which is non-FFP.

EXPENDITURES:

	<u>2013-14</u>	<u>2014-15</u>
TOTAL	\$9,200,000	\$9,200,000
General Fund	\$3,950,000	\$3,950,000
<i>GF Match</i>	<i>3,950,000</i>	<i>3,950,000</i>
<i>GF Other</i>	<i>0</i>	<i>0</i>
Reimbursements	\$5,250,000	\$5,250,000
<i>Medicaid Administration</i>	<i>1,950,000</i>	<i>1,950,000</i>
<i>TCM</i>	<i>3,300,000</i>	<i>3,300,000</i>

Increase in Case Managers to Meet Federal Audit Requirements

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 over Enacted Budget
A. Total Number of Budgeted HCBS Waiver-related Client Program Coordinator (CPC) Positions	2,094.92	2,184.54	89.62	2,187.52	2.98	92.60
B. Case Management Coverage Factor (e.g., immediate coverage for CPC vacancies) ^{a/}	7.4%	7.4%	0.0%	7.4%	0.0%	0.0%
C. Number of CPC Vacancies Related to HCBS Waiver Consumers (Item A x Item B) ^{b/}	155.02	161.66	6.63	161.88	0.22	6.85
D. CPC Salary	\$39,606	\$39,606	\$0.00	\$39,606	\$0	\$0.00
E. Total CPC Salary Expenditures (Item C x Item D)	\$6,139,884	\$6,402,546	\$262,662	\$6,411,280	\$8,734	\$271,396
F. Supervising Counselors (at 1:10 CPCs)						
Enacted Budget 155.02 x 1/10 = 15.50						
2013-14 161.66 x 1/10 = 16.17						
2014-15 161.88 x 1/10 = 16.19						
	15.50	16.17	0.67	16.19	0.02	0.69
G. Supervising Counselor Salary	\$62,784	\$62,784	\$0	\$62,784	\$0	\$0.00
H. Total Supervising Counselor Salary Expenditures (Item F x Item G)	\$973,152	\$1,015,217	\$42,065	\$1,016,473	\$0	\$43,321
I. Secretary II (at 1:6 CPCs and Supervising Counselors)						
Enacted Budget 155.02 + 15.50 = 170.52						
170.52 x 1/6 = 28.42						
2013-14 161.66 + 16.17 = 177.83						
177.83 x 1/6 = 29.64						
2014-15 161.88 + 16.19 = 178.07						
178.07 x 1/6 = 29.68						
	28.42	29.64	1.22	29.68	0.04	1.26
J. Secretary II Salary	\$28,736	\$28,736	\$0	\$28,736	\$0	\$0
Total Secretary II Salary Expenditures (Item I x Item J)	\$816,677	\$851,735	\$35,058	\$852,884	\$0	\$0

Increase in Case Managers to Meet Federal Audit Requirements

		Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 over Enacted Budget
K. Fringe Benefits							
CPC's and All Other Staff	23.7%	<u>\$1,879,342</u>	<u>\$1,959,871</u>	<u>\$80,529</u>	<u>\$1,962,511</u>	<u>\$2,640</u>	<u>\$83,169</u>
		\$1,879,342	\$1,959,871	\$80,529	\$1,962,511	\$2,640	\$83,169
L. Salary Savings							
CPCs	1.0%	-\$75,950	-\$79,199	-3,249	-\$79,308	-\$108	-3,358
All Other Staff	5.5%	<u>-121,771</u>	<u>-127,018</u>	<u>-5,247</u>	<u>-127,182</u>	<u>-164</u>	<u>-5,411</u>
		-197,721	-206,218	-8,497	-206,489	-272	-8,768
M. Total Personal Services (Item E + Item H + Item J + Item K + Item L)		<u>\$9,611,334</u>	<u>\$10,023,151</u>	<u>\$411,818</u>	<u>\$10,036,659</u>	<u>\$11,102</u>	<u>\$425,325</u>
N. Operating Expenses							
Professional Positions	\$3,400	\$579,782	\$604,608	\$24,826	\$605,426	\$818	\$25,644
Clerical Positions	\$2,400	68,088	71,136	3,048	71,232	96	3,144
Rent	\$8,086	<u>1,608,662</u>	<u>1,677,570</u>	<u>68,908</u>	<u>1,679,838</u>	<u>2,268</u>	<u>71,176</u>
Total Operating Expenses		<u>\$2,256,532</u>	<u>\$2,353,314</u>	<u>\$96,782</u>	<u>\$2,356,496</u>	<u>\$3,182</u>	<u>\$99,964</u>
O. Total Costs (Item M + Item N)		\$11,867,866	\$12,376,465	508,600	\$12,393,155	\$16,689	525,289
Rounded		<u>\$11,868,000</u>	<u>\$12,376,000</u>	<u>\$508,000</u>	<u>\$12,393,000</u>	<u>\$17,000</u>	<u>\$525,000</u>
	TOTAL	\$11,868,000	\$12,376,000	\$508,000	\$12,393,000	\$17,000	\$525,000
	General Fund (GF)	\$5,934,000	\$6,188,000	\$254,000	\$6,196,000	\$8,000	\$262,000
	<i>GF Match</i>	<i>5,934,000</i>	<i>6,188,000</i>	<i>254,000</i>	<i>6,196,000</i>	<i>8,000</i>	<i>262,000</i>
	<i>GF Other</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>0</i>
	Reimbursements	\$5,934,000	\$6,188,000	\$254,000	\$6,197,000	\$9,000	263,000
	<i>Targeted Case Management</i>	<i>\$5,934,000</i>	<i>6,188,000</i>	<i>254,000</i>	<i>\$6,197,000</i>	<i>9,000</i>	<i>263,000</i>

a/ Assume the vacancy percentage related to all CPCs applies to HCBS Waiver-related CPCs.

b/ Need to cover these vacancies to meet the CMS compliance audit recommendation.

Projects

DESCRIPTION:

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

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
ASSUMPTIONS/METHODOLOGY:						
• Information Technology Costs	\$2,917,000	\$2,917,000	\$0	\$2,917,000	\$0	\$0
• RC Application Support	1,567,000	1,567,000	0	1,567,000	0	0
• Data Processing	1,350,000	1,350,000	0	1,350,000	0	0
100% General Fund (GF)						
• Clients' Rights Advocacy	\$5,564,000	\$5,623,000	\$59,000	\$5,792,000	\$169,000	\$228,000
The Department of Developmental Services (DDS) contracts with Disability Rights California for clients' rights advocacy services for RC consumers. 45% of costs are eligible for Home and Community-Based Services (HCBS) Waiver Administration: 50% GF Match/50% federal financial participation (FFP).						
• Quality Assessment Contract	\$2,992,000	\$3,058,000	\$66,000	\$3,058,000	\$0	\$66,000
Assembly Bill (AB) X4 9, Welfare and Institutions Code (WIC) Section 4571 consolidated the Life Quality Assessment and the Movers Study into one improved quality assurance survey to measure consumer and family satisfaction, provision of services and personal outcomes. 45% costs are eligible for HCBS Waiver Administration: 50% GF Match/50% FFP.						

Projects

	Enacted	Updated	2013-14		2014-15	2014-15
	Budget	2013-14	Request	2014-15	Over	Over
METHODOLOGY (continued):					2013-14	Enacted
						Budget
<ul style="list-style-type: none"> Direct Support Professional Training WIC Section 4695.2, Statutes of 1998, mandates all direct support 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. DDS contracts with the Department of Education which in turn administers the training through the Regional Occupational Centers and Programs. 89% costs are eligible for HCBS Waiver Administration: 50% GF Match/50% FFP. 	\$2,590,000	\$2,605,000	\$15,000	\$2,605,000	\$0	\$15,000
<ul style="list-style-type: none"> Office of Administrative Hearings Federal law requires DDS to have a process to adjudicate disputes involving Medicaid beneficiaries; both the fair hearing and mediation processes satisfy this requirement. DDS contracts with the Office of Administrative Hearings to: (1) conduct fair hearings to resolve conflicts between RCs and their consumers. Section 4700 et seq. of the Lanterman Act provides mediation as a potential option to consumers whose services are proposed to be denied, terminated, reduced, or suspended, and (2) provide mediation services. 45% costs are eligible for HCBS Waiver Administration: 50% GF Match/50% FFP. 	\$2,910,000	\$2,910,000	\$0	\$2,910,000	\$0	\$0

Projects

METHODOLOGY (continued):	Projects					2014-15 Over Enacted Budget
	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
<ul style="list-style-type: none"> Wellness Projects WIC 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, RC representatives and the Community Services and Supports Division within DDS. The types of projects generally fall into the following categories: health professional training programs, medication reviews, health assessments, specialty clinics, telemedicine, resource development, training programs for parents and consumers, and dental health programs and services. (100% GF) 	\$100,000	\$100,000	\$0	\$100,000	\$0	\$0
<ul style="list-style-type: none"> Foster Grandparent/Senior Companion (FG/SC) Through these programs, men and women, 60 years of age and older, devote up to 20 hours a week to help people with developmental disabilities lead more independent and productive lives. CY 2013-14: \$597,000 FG/SC, \$1,142,000 GF BY 2014-15: \$713,000 FG/SC, \$1,369,000 GF 	\$1,739,000	\$1,739,000	\$0	\$2,082,000	\$343,000	\$343,000
<ul style="list-style-type: none"> Special Incident Reporting/Risk Assessment DDS contracts for the services of an independent specialized risk-assessment and mitigation contractor, possessing a multidisciplinary capacity, 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% costs are eligible for HCBS Waiver Administration: 50% GF Match/50% FFP. \$437,000 GF Other, \$185,000 GF Match, \$185,000 HCBS Waiver Administration 	\$807,000	\$807,000	\$0	\$807,000	\$0	\$0

Projects

METHODOLOGY (continued):	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over	2014-15 Over
					2013-14	Enacted Budget
<ul style="list-style-type: none"> Increased Access to Mental Health Services <ul style="list-style-type: none"> Regional Best Practice Training RC Technical Assistance and Liaison Support <p>100% Mental Health Services Fund (MHSF)</p>	\$740,000	\$740,000	\$0	\$740,000	\$0	\$0
	675,000	675,000	0	675,000	0	0
	65,000	65,000	0	65,000	0	0
<ul style="list-style-type: none"> Sherry S. Court Case <p>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 RC costs of processing Hop actions for RC consumers. (100% GF)</p>	\$301,000	\$301,000	\$0	\$301,000	\$0	\$0
<ul style="list-style-type: none"> 2003-04 FFP Enhancement, Phase II <p>These costs are associated with legal support for federal program activities. (100% GF)</p>	\$500,000	\$500,000	\$0	\$500,000	\$0	\$0
<ul style="list-style-type: none"> University Enterprises, Inc. <p>DDS contracts with University Enterprises, Inc. for statistical forecasting assistance in estimating RC costs. (100% GF)</p>	\$113,000	\$113,000	\$0	\$113,000	\$0	\$0

Projects

METHODOLOGY (continued):	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted
						Budget
<ul style="list-style-type: none"> Affordable Housing 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 RC. 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) 	\$94,000	\$94,000	\$0	\$94,000	\$0	\$0
<ul style="list-style-type: none"> Review of Senate Bill (SB) 1175 Housing Proposals Chapter 617, Statutes of 2008, (SB 1175) permits DDS to approve RC housing proposals for consumers with special health care needs. This legislation requires a nonrefundable fee to be paid by housing developers to reimburse DDS' costs for review and approval of the proposals. Developmental Disabilities Services Account (DDSA) 100%. 	\$150,000	\$150,000	\$0	\$150,000	\$0	\$0
<ul style="list-style-type: none"> Extension of Denti-Cal Infrastructure for RC Funded Dental This project allows the RC to use the expertise and 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). 	\$1,197,000	\$1,197,000	\$0	\$1,197,000	\$0	\$0

Projects

METHODOLOGY (continued):						2014-15	2014-15
	Enacted Budget	Updated 2013-14	2013-14 Request	Updated 2014-15	2014-15 Over 2013-14	Over Enacted Budget	Enacted Budget
<ul style="list-style-type: none"> Homeland Security Grant Program (HSGP) The RC portion of the HSGP award will fund projects at specific RCs that will include such things as equipment, training, and exercise needs to prevent, protect against, respond to, and recover from acts of terrorism and other catastrophic events. (100% Homeland Security Grant) 	\$391,000	\$391,000	\$0	\$391,000	\$0		\$0
<ul style="list-style-type: none"> EXPENDITURES 	\$23,105,000	\$23,245,000	\$140,000	\$23,757,000	\$512,000		\$652,000

CHANGE FROM PRIOR ESTIMATE:

This estimate reflects updated estimate of Regional Center Project cost.

REASON FOR YEAR-TO-YEAR CHANGE:

This estimate reflects updated estimate of Regional Center Project cost and Foster Grandparent Federal Grant funding.

Projects

EXPENDITURES:	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15 2014-15	2014-15	
					Over 2013-14	Over Enacted Budget
TOTAL	\$23,105,000	\$23,245,000	\$140,000	\$23,757,000	\$512,000	\$652,000
GF	\$17,366,000	\$17,418,000	\$52,000	\$17,776,000	\$358,000	\$410,000
<i>GF Match</i>	3,860,000	3,948,000	88,000	3,986,000	38,000	126,000
<i>GF Other</i>	13,506,000	13,470,000	-36,000	13,790,000	320,000	284,000
Reimbursements	\$4,252,000	\$4,340,000	\$88,000	\$4,378,000	\$38,000	\$126,000
<i>HCBS Waiver Administration</i>	3,861,000	3,949,000	88,000	3,987,000	38,000	126,000
<i>HSGP</i>	391,000	391,000	0	391,000	0	\$0
Developmental Disabilities Services Account	\$150,000	\$150,000	\$0	\$150,000	\$0	\$0
Mental Health Services Fund	\$740,000	\$740,000	\$0	\$740,000	\$0	\$0
Federal Funds	\$597,000	\$597,000	\$0	\$713,000	\$116,000	\$116,000
<i>Foster Grandparent Program</i>	597,000	597,000	0	713,000	116,000	\$116,000

Intermediate Care Facility-Developmentally Disabled Administrative Fees

DESCRIPTION:

To realize the federal financial participation (FFP) associated with the Intermediate Care Facility-Developmentally Disabled (ICF-DD), there are administrative costs for Regional Centers (RC) billing on behalf of the ICF-DD.

ASSUMPTIONS/METHODOLOGY:

RC Administration costs are 1.5% of the day treatment and transportation expenditures for residents of ICF-DD facilities.

2013-14: Total billing costs are \$1.7 million for RC administration .

- POS costs for day treatment and transportation for 2013-14 totals \$116.4 million. RC administration costs are 1.5% of the total or \$1.7 million.

2014-15: Total billing costs are \$1.7 million for RC administration.

- POS costs for day treatment and transportation for 2014-15 totals \$116.4 million. RC administration costs are 1.5% of the total or \$1.7 million.

FUNDING:

The Federal Medical Assistance Percentages establishes the Federal Financial Participation (FFP) for expenditures associated with Operations, which is 50 percent for 2013-14 and 2014-15.

CHANGE FROM PRIOR ESTIMATE:

No changes.

EXPENDITURES:	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
TOTAL	\$1,745,000	\$1,745,000	\$0	\$1,745,000	\$0	\$0
General Fund	872,000	872,000	0	872,000	0	0
General Fund Match	872,000	872,000	0	872,000	0	0
Reimbursements	873,000	873,000	0	873,000	0	0
FFP (Quality Assurance Fees)	873,000	873,000	0	873,000	0	0

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SECTION E: ESTIMATE METHODOLOGIES (continued)

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Community Care Facilities

DESCRIPTION:

Pursuant to Health and Safety Code Section 1502 (a)(1), (4), (5), or (6) and Section 1569.2(k), Regional Centers (RCs) contract with vendors of Community Care Facilities (CCFs). CCFs are licensed by the Department of Social Services (DSS) to provide 24-hour non-medical 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:

- CCF Consumers and Expenditure Data Source: Purchase of Services (POS) Claims Data file, dated September 1, 2013. Data were adjusted for lag based on historical data.
- 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 percent of persons in CCFs), the RCs 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:	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over	2014-15 Over
					2013-14	Enacted Budget
<ul style="list-style-type: none"> Base: Actual Fiscal Year 2012-13 expenditures were used to develop the 2013-14 base. For 2014-15 the prior-year estimate, with the following adjustments, was used as the base: 	\$905,533,000	\$906,080,000	\$547,000	\$929,740,000	\$23,660,000	\$24,207,000
<ul style="list-style-type: none"> <i>Updated Costs without CPP/Prior Year Estimate</i> 	<i>905,533,000</i>	<i>906,080,000</i>	<i>547,000</i>	<i>929,740,000</i>	<i>23,660,000</i>	<i>24,207,000</i>

Community Care Facilities

METHODOLOGY (continued):	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15
						Over Enacted Budget
<ul style="list-style-type: none"> Utilization Change/Growth: 						
Total Utilization Change/Growth for 2013-14	\$27,123,000	\$23,660,000	-\$3,463,000	In Base	In Base	
Total Utilization Change/Growth for 2014-15				\$24,426,000	\$766,000	-\$2,697,000
<ul style="list-style-type: none"> Caseload Growth 						
Estimate for 2013-14	7,379,000	7,413,000	34,000			
Estimate for 2014-15				7,691,000	278,000	312,000
<p>The 2013-14 and 2014-15 utilization change/growth were estimated based upon updated expenditure trends. The estimate reflects interventions for anomalies in the expenditure trends related to the payment reduction, and implementation of cost containment measures.</p>						
<p>Estimated Caseload Growth:</p> <p>Enacted Budget 2,431 Person Months</p> <p>Est. for 2013-14: 2,440 Person Months</p> <p>Est. for 2014-15: 2,457 Person Months</p>						
<ul style="list-style-type: none"> Average Cost Increase: 						
Estimate for 2013-14	19,744,000	16,247,000	-3,497,000			
Estimate for 2014-15				16,735,000	488,000	-3,009,000
<p>Reflects the costs of consumers needing higher levels of CCF care than in the past.</p>						

Community Care Facilities

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
METHODOLOGY (continued):						
• Subtotal Base and Growth	\$932,656,000	\$929,740,000	-\$2,916,000	\$954,166,000	\$24,426,000	\$21,510,000
• CPP: See CPP methodology for detail.	\$19,515,000	\$19,515,000	\$0	\$14,884,000	-\$4,631,000	-\$4,631,000
• SSI/SSP Increases Effective January 1, 2014 The SSI/SSP rate is estimated to increase from \$986 to \$1,001 January 2014	-\$3,351,000	-\$3,450,000	-\$99,000	-\$3,460,000	-\$10,000	-\$109,000
• TOTAL EXPENDITURES	\$948,820,000	\$945,805,000	-\$3,015,000	\$965,590,000	\$19,785,000	\$16,770,000

FUNDING:

CCF expenditures are funded by the General Fund (GF), Home and Community-Based Services (HCBS) Waiver, 1915 (i) State Plan Amendment (SPA), the Title XX Block Grant, which includes Temporary Assistance to Needy Families (TANF), and Money Follows the Person. Based on actual 2012-13 billing data, approximately 80 percent of CCF expenditures are eligible for HCBS Waiver reimbursement. Of the HCBS Waiver and 1915 (i) SPA amounts 50 percent is federal financial participation (FFP). Of the Money Follows the Person funding represents an additional 25 percent in FFP. The State GF portion is that which is non-FFP.

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 over Enacted Budget
EXPENDITURES:						
TOTAL	\$948,820,000	\$945,805,000	-\$3,015,000	\$965,590,000	\$19,785,000	\$16,770,000
GF	\$511,227,000	\$513,667,000	\$2,440,000	\$519,975,000	\$6,308,000	\$8,748,000
GF Match	421,976,000	425,183,000	3,207,000	438,660,000	13,477,000	16,684,000
GF Other	89,251,000	88,484,000	-767,000	81,315,000	-7,169,000	-7,936,000
Reimbursements	\$437,593,000	\$432,138,000	-\$5,455,000	\$445,615,000	\$13,477,000	\$8,022,000
HCBS Waiver	393,001,000	390,800,000	-2,201,000	402,772,000	11,972,000	9,771,000
1915 (i) SPA	26,153,000	29,927,000	3,774,000	31,274,000	1,347,000	5,121,000
Title XX TANF	9,975,000	6,956,000	-3,019,000	6,956,000	0	-3,019,000
Money Follows the Person	8,464,000	4,455,000	-4,009,000	4,613,000	158,000	-3,851,000

Medical Facilities

DESCRIPTION:

Pursuant to the Health and Safety Code, Sections 1250, 1255.6, and 1255.7, among others, the regional centers (RCs) vendor Intermediate Care Facilities (ICFs) and Developmentally Disabled Continuous Nursing Care (DD/CNC) for consumers not eligible for Medi-Cal. ICFs are health facilities licensed by the Licensing and Certification Division of the State Department of Public Health (CDPH) to provide 24-hour-per-day services and certified for Medi-Cal reimbursement for services by the State Department of Health Care Services (DHCS). The types of ICFs providing services for Californians with developmental disabilities are: ICF/DD (Developmentally Disabled), ICF/DD-H (Habilitative), ICF/DD-N (Nursing), and DD/CNC (Continuous Nursing Care).

ASSUMPTIONS:

- Assumptions regarding caseload and facility growth for 2013-14 and 2014-15 are based on the 2013 Regional Center Spring Survey with updated assumptions.
- The daily rates for 4 to 6 bed ICFs for 2013-14 and 2014-15 are provided by the DHCS and are effective August 1, 2012, as follows: \$187.62 for DD-Hs, \$213.95 for DD-Ns, \$425.92 for ventilator Dependent DD/CNC.
- Estimated New Consumers:

	Enacted Budget	2013-14	2014-15
DD-H	80	80	80
DD-N	70	70	70
DD/CNC	0	0	0

- For 2013-14 and 2014-15 it is assumed that 2.0 percent of the consumers in Medical Facilities will not be funded by Medi-Cal; therefore, Department of Developmental Services (DDS) will pay their Medical Facility costs.

METHODOLOGY:

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
<ul style="list-style-type: none"> Base: Actual Fiscal Year 2012-13 expenditures were used to develop the 2013-14 base. For 2014-15 the prior-year estimate, with the following adjustments, was used as the base: <ul style="list-style-type: none"> <i>Updated Costs without CPP/Prior Year Estimate</i> <i>Redesign Services for Individuals with Challenging Service Needs</i> 	\$26,205,000	\$27,680,000	\$1,475,000	\$26,724,000	-\$956,000	\$519,000
	34,278,000	30,031,000	-4,247,000	27,899,000	-2,132,000	-6,379,000
	-8,073,000	-2,351,000	5,722,000	-1,175,000	1,176,000	6,898,000

Medical Facilities

METHODOLOGY (continued):						2014-15
	Enacted Budget	Updated 2013-14	2013-14 Request	Updated 2014-15	2014-15 Over 2013-14	Over Enacted Budget
<ul style="list-style-type: none"> Utilization Change/Growth: 						
Total Utilization Change/Growth for 2013-14	\$190,000	\$219,000	\$29,000	<i>In Base</i>	<i>In Base</i>	<i>In Base</i>
Total Utilization Change/Growth for 2014-15				\$219,000	\$0	\$29,000
It is assumed that in 2013-14 and 2014-15, 2.0 percent of the persons in medical facilities will not be funded by Medi-Cal; therefore, RCs will pay their Medical Facility costs.						
<ul style="list-style-type: none"> Subtotal Base and Growth 	\$26,395,000	\$27,899,000	\$1,504,000	\$26,943,000	-\$956,000	\$548,000
<ul style="list-style-type: none"> Gap Resource Development (New Facilities) 	\$337,000	\$336,000	-\$1,000	\$336,000	\$0	-\$1,000
Gap is the time period between licensure and certification of health facilities when Medi-Cal does not cover any person's facility costs.						
In 2013-14 and 2014-15 it is assumed that 3 DD-H facilities will need gap funding for 2 consumers each for not more than 60 days, and 7 DD-N facilities will need gap funding for 2 consumers each for not more than 60 days.						
<ul style="list-style-type: none"> CPP 	\$164,000	\$164,000	\$0	\$164,000	\$0	\$0
<ul style="list-style-type: none"> TOTAL EXPENDITURES 	\$26,896,000	\$28,399,000	\$1,503,000	\$27,443,000	-\$956,000	\$547,000
FUNDING:						
Medical Facility expenditures are funded by the General Fund (GF).						
EXPENDITURES:						
TOTAL	\$26,896,000	\$28,399,000	\$1,503,000	\$27,443,000	-\$956,000	\$547,000
GF Other	26,896,000	28,399,000	1,503,000	27,443,000	-956,000	547,000

Day Programs

DESCRIPTION:

Pursuant to Welfare and Institutions Code (WIC) Section 4648 regional centers contract with vendors to provide services and supports to all qualified RC consumers. Day Program services may be at a fixed location or out in the community.

Types of services available through a Day Program include:

- Developing and maintaining self-help and self-care skills.
- Developing the ability to interact with others, making one's needs known and responding to instructions.
- Developing self-advocacy and employment skills.
- Developing community integration skills such as accessing community services.
- Improving behaviors through behavior management.
- Developing social and recreational skills.

ASSUMPTIONS:

- Day Program Consumer and Expenditure Data Source: Purchase of Services (POS) Claims Data file, dated September 1, 2013. Data were adjusted for lag based on historical data.

METHODOLOGY:	Enacted	Updated	2013-14		2014-15	2014-15
	Budget	2013-14	Request	2014-15	Over 2013-14	Over Enacted Budget
<ul style="list-style-type: none"> • Base: Actual Fiscal Year 2012-13 expenditures were used to develop the 2013-14 base. For 2014-15 the prior-year estimate, with the following adjustments, was used as the base: 	\$820,737,000	\$830,181,000	\$9,444,000	\$863,951,000	\$33,770,000	\$43,214,000
<ul style="list-style-type: none"> • <i>Updated Costs without CPP/Prior Year Estimate</i> 	<i>820,737,000</i>	<i>830,181,000</i>	<i>9,444,000</i>	<i>863,951,000</i>	<i>33,770,000</i>	<i>43,214,000</i>

Day Programs

METHODOLOGY (continued):	Enacted	Updated	2013-14		2014-15	2014-15
	Budget	2013-14	Request	2014-15	Over 2013-14	Over Enacted Budget
• Utilization Change/Growth:						
• Total Utilization Change/Growth for 2013-14	\$34,151,000	\$33,770,000	-\$381,000		<i>In Base</i>	<i>In Base</i>
• Total Utilization Change/Growth for 2013-14				\$36,008,000	\$2,238,000	\$1,857,000
• Caseload Growth						
<i>Estimate for 2013-14</i>	32,551,000	32,102,000	-449,000			
<i>Estimate for 2014-15</i>				34,280,000	2,178,000	1,729,000
The 2013-14 and 2014-15 utilization change and growth were estimated based upon updated expenditure trends. The estimate reflects interventions for anomalies in the expenditure trends related to the payment reduction, and implementation of cost containment measures.						
Estimated Caseload Growth:						
Enacted Budget:	29,502	Person Months				
Est. for 2013-14 :	32,005	Person Months				
Est. for 2014-15 :	33,806	Person Months				
• Average Cost Increase:						
<i>Estimate for 2013-14</i>	1,600,000	1,668,000	68,000			
<i>Estimate for 2014-15</i>				1,728,000	60,000	128,000
Reflects the cost of new community-based day programs						

Day Programs

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
METHODOLOGY (continued):						
• Subtotal Base and Growth	\$854,888,000	\$863,951,000	\$9,063,000	\$899,959,000	\$36,008,000	\$45,071,000
• CPP: See CPP methodology for detail.	\$3,952,000	\$3,952,000	\$0	\$3,952,000	\$0	\$0
• TOTAL EXPENDITURES:	\$858,840,000	\$867,903,000	\$9,063,000	\$903,911,000	\$36,008,000	\$45,071,000

FUNDING:

Day Program expenditures are funded by the General Fund (GF), Intermediate Care Facility-Developmentally Disabled (ICF-DD) State Plan Amendment (SPA), Early Periodic Screening Diagnosis and Treatment (EPSDT), Home and Community-Based Services (HCBS) Waiver, 1915(i) SPA, the Title XX Block Grant, which includes Social Services and Temporary Assistance to Needy Families (TANF), and the Early Start Grant. Based on actual 2012-13 billing data, approximately 54 percent of Day Program expenditures are eligible for HCBS Waiver reimbursement. Of the ICF-DD SPA, HCBS Waiver, EPSDT and 1915(i) SPA amounts 50 percent is federal financial participation (FFP). The State GF portion is that which is non-FFP.

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
EXPENDITURES:						
TOTAL	\$858,840,000	\$867,903,000	\$9,063,000	\$903,911,000	\$36,008,000	\$45,071,000
GF	\$452,933,000	\$461,169,000	\$8,236,000	\$487,926,000	\$26,757,000	\$34,993,000
GF Match	340,084,000	342,695,000	2,611,000	351,945,000	9,250,000	11,861,000
GF Other	112,849,000	118,474,000	5,625,000	135,981,000	17,507,000	23,132,000
Reimbursements	\$388,483,000	\$389,139,000	\$656,000	\$398,390,000	\$9,251,000	\$9,907,000
HCBS Waiver	240,313,000	242,044,000	1,731,000	249,459,000	7,415,000	9,146,000
1915 (i) SPA	41,122,000	40,801,000	-321,000	42,637,000	1,836,000	1,515,000
Title XX Social Services	46,880,000	46,389,000	-491,000	46,389,000	0	-491,000
Title XX TANF	1,518,000	55,000	-1,463,000	55,000	0	-1,463,000
ICF-DD SPA	43,905,000	43,905,000	0	43,905,000	0	0
EPSDT	14,745,000	15,945,000	1,200,000	15,945,000	0	1,200,000
Federal Funds	\$17,424,000	\$17,595,000	\$171,000	\$17,595,000	\$0	\$171,000
Early Start Grant	17,424,000	17,595,000	171,000	17,595,000	0	171,000

Habilitation

DESCRIPTION:

Pursuant to Welfare and Institution Code (WIC) Section 2, Chapter 13 (commencing with Section 4850) of Division 4.5 , these services currently are provided chiefly by the regional center under the authorization of the Lanterman Act (WIC 19350[b]).

Types of Services available through Habilitation include:

Work Activity Program (WAP):

WAP is provided, for the most part, in a sheltered setting. Services can include work experiences in integrated group settings within the community.

Supported Employment Program (SEP):

SEP provides opportunities for persons with developmental disabilities to work, through integrated settings (individual or group) and with support services provided by community rehabilitation programs. These services enable consumers to learn necessary job skills and maintain employment.

ASSUMPTIONS:

- Habilitation Expenditure Data Source: Purchase of Services (POS) Claims Data file, dated September 1, 2013. Data were adjusted for lag based on historical data.

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
METHODOLOGY:						
<ul style="list-style-type: none"> Base: Actual 2012-13 expenditures were used to develop the 2013-14 base. For the 2014-15, the prior year estimate, with the following adjustments, was used as the base: <ul style="list-style-type: none"> <i>Updated Costs without CPP/Prior Year Estimate</i> 	\$140,292,000	\$144,727,000	\$4,435,000	\$145,508,000	\$781,000	\$5,216,000
	140,292,000	144,727,000	4,435,000	145,508,000	781,000	5,216,000
<ul style="list-style-type: none"> Utilization Change/Growth: <ul style="list-style-type: none"> Total Utilization Change/Growth for 2013-14 Total Utilization Change/Growth for 2014-15 <p>The 2013-14 and 2014-15 utilization change/growth were estimated based upon updated expenditure trends. The estimate reflects interventions for anomalies in the expenditure trends related to the payment reduction, and implementation of cost containment measures.</p>	\$2,593,000	\$781,000	-\$1,812,000		In Base	In Base
				\$793,000	\$12,000	-\$1,800,000
<ul style="list-style-type: none"> Subtotal Base and Growth 	\$142,885,000	\$145,508,000	\$2,623,000	\$146,301,000	\$793,000	\$3,416,000
<ul style="list-style-type: none"> CPP: See CPP methodology for detail. 	\$176,000	\$176,000	\$0	\$176,000	\$0	\$0
<ul style="list-style-type: none"> TOTAL EXPENDITURES 	\$143,061,000	\$145,684,000	\$2,623,000	\$146,477,000	\$793,000	\$3,416,000

Habilitation**FUNDING:**

Habilitation Services expenditures are funded by the General Fund (GF), Home and Community-Based Services (HCBS) Waiver, and the 1915(i) State Plan Amendment (SPA). Based on actual 2012-13 billing data, approximately 60 percent, 38 percent, and 23 percent of WAP, SEP Group, and SEP Individual Placement expenditures, respectively, are eligible for the HCBS Waiver reimbursement. Of the HCBS Waiver and 1915(i) eligible amounts 50 percent is federal financial participation (FFP). The State GF portion is that which is non-FFP.

EXPENDITURES:		Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over	2014-15 Over
						2013-14	Enacted Budget
	TOTAL	\$143,061,000	\$145,684,000	\$2,623,000	\$146,477,000	\$793,000	\$3,416,000
	GF	\$83,562,000	\$88,119,000	\$4,557,000	\$86,823,000	-\$1,296,000	\$3,261,000
	<i>GF Match</i>	59,497,000	57,564,000	-1,933,000	59,654,000	2,090,000	157,000
	<i>GF Other</i>	24,065,000	30,555,000	6,490,000	27,169,000	-3,386,000	3,104,000
	Reimbursements	\$59,499,000	\$57,565,000	-\$1,934,000	\$59,654,000	\$2,089,000	\$155,000
	<i>HCBS Waiver</i>	36,530,000	34,870,000	-1,660,000	35,938,000	1,068,000	-592,000
	<i>1915 (i) SPA</i>	22,967,000	22,695,000	-272,000	23,716,000	1,021,000	749,000
	<i>Title XX TANF</i>	2,000	0	-2,000	0	0	-2,000

Transportation

DESCRIPTION:

Pursuant to Welfare and Institutions Code (WIC), Sections 4501, 4502, 4512, and 4646, (Lanterman Act), regional centers (RC) contract with vendors to provide services and supports to all qualifying regional center consumers. 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 and other providers: specialized transportation companies; day programs and/or residential vendors; and family members, friends, and others. Transportation services may include help in boarding and exiting a vehicle as well as assistance and monitoring while being transported.

ASSUMPTIONS:

- Transportation Expenditure Data Source: Purchase of Services (POS) Claims Data file, dated September 1, 2013. Data were adjusted for lag based on historical data.

METHODOLOGY:

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
METHODOLOGY:						
<ul style="list-style-type: none"> Base: Actual 2012-13 expenditures were used to develop the 2013-14 base. For the 2014-15, the prior year estimate, with the following adjustments, was used as the base: <ul style="list-style-type: none"> <i>Updated Costs without CPP/Prior Year Estimate</i> 	\$231,721,000	\$237,528,000	\$5,807,000	\$241,799,000	\$4,271,000	\$10,078,000
<ul style="list-style-type: none"> Utilization Change/Growth: <ul style="list-style-type: none"> Total Utilization Change/Growth for 2013-14 Total Utilization Change/Growth for 2014-15 <p>The 2013-13 and 2014-15 utilization change/growth were estimated based upon updated expenditure trends. The estimate reflects interventions for anomalies in the expenditure trends related to the 4.25% payment reduction, and implementation of cost containment measures.</p>	\$5,685,000	\$4,271,000	-\$1,414,000	\$4,037,000	<i>In Base</i> -\$234,000	<i>In Base</i> -\$1,648,000
<ul style="list-style-type: none"> Subtotal Base and Growth 	\$237,406,000	\$241,799,000	\$4,393,000	\$245,836,000	\$4,037,000	\$8,430,000
<ul style="list-style-type: none"> CPP: See CPP methodology for detail. 	\$745,000	\$745,000	\$0	\$745,000	\$0	\$0
<ul style="list-style-type: none"> Financial Management Services for Participant-Directed Services 	\$814,000	\$0	-\$814,000	\$0	\$0	-\$814,000
<ul style="list-style-type: none"> TOTAL EXPENDITURES 	\$238,965,000	\$242,544,000	\$3,579,000	\$246,581,000	\$4,037,000	\$7,616,000

Transportation

FUNDING:

Transportation expenditures are funded by the General Fund (GF), 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, Intermediate Care Facility - Developmentally Disabled (ICF-DD) State Plan Amendment (SPA). Based on actual 2012-13 billing data, approximately 62 percent of Transportation expenditures are eligible for HCBS Waiver reimbursement. Of the HCBS Waiver, 1915 (i), and ICF-DD SPA amounts 50 percent is federal financial participation (FFP). The State GF portion is that which is non FFP.

		Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
EXPENDITURES:							
	TOTAL	\$238,965,000	\$242,544,000	\$3,579,000	\$246,581,000	\$4,037,000	\$7,616,000
	GF	\$130,998,000	\$131,044,000	\$46,000	\$132,158,000	\$1,114,000	\$1,160,000
	<i>GF Match</i>	101,657,000	104,043,000	2,386,000	106,967,000	2,924,000	5,310,000
	<i>GF Other</i>	29,341,000	27,001,000	-2,340,000	25,191,000	-1,810,000	-4,150,000
	Reimbursements	\$107,967,000	\$111,500,000	\$3,533,000	\$114,423,000	\$2,923,000	\$6,456,000
	<i>HCBS Waiver</i>	75,210,000	77,680,000	2,470,000	80,060,000	2,380,000	4,850,000
	<i>1915 (i) SPA</i>	12,160,000	12,077,000	-83,000	12,620,000	543,000	460,000
	<i>Title XX Social Services</i>	5,641,000	6,314,000	673,000	6,314,000	0	673,000
	<i>Title XX TANF</i>	668,000	1,141,000	473,000	1,141,000	0	473,000
	<i>ICF-DD SPA</i>	14,288,000	14,288,000	0	14,288,000	0	0

Support Services

DESCRIPTION:

Pursuant to Welfare and Institution Code (WIC) Section 4648 regional centers (RCs) contract with vendors to provide services and supports to all qualifying RC consumers. Support Services include a broad range of services for consumers to assist them while in crisis or to augment support to allow them to successfully live in the community. Support Services may be provided in a wide variety of community settings.

ASSUMPTIONS:

Support Services Expenditure Data Source: Purchase of Services (POS) Claims Data file, dated September 1, 2013. Data were adjusted for lag based on historical data.

METHODOLOGY:	Enacted	Updated	2013-14		2014-15	2014-15
	Budget	2013-14	Request	2014-15	Over 2013-14	Over Enacted Budget
<ul style="list-style-type: none"> Base: Actual Fiscal Year 2012-13 expenditures were used to develop the 2013-14 base. For 2014-15 the prior-year estimate, with the following adjustments, was used as the base: <ul style="list-style-type: none"> <i>Updated Costs without CPP/Prior Year Estimate</i> 	\$769,250,000	\$785,162,000	\$15,912,000	\$819,198,000	\$34,036,000	\$49,948,000
	769,250,000	785,162,000	15,912,000	819,198,000	34,036,000	49,948,000

Support Services

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
METHODOLOGY (continued):						
• Utilization Change/Growth:						
• Total Utilization Change/Growth for 2013-14	\$34,516,000	\$34,036,000	-480,000			In Base
• Total Utilization Change/Growth for 2014-15				\$35,499,000	\$1,463,000	\$983,000
The 2013-14 and 2014-15 utilization change/growth were estimated based upon updated expenditure trends. The estimate reflects interventions for anomalies in the expenditure trends related to the payment reduction, and implementation of cost containment measures.						
• Subtotal Base and Growth	\$803,766,000	\$819,198,000	\$15,432,000	\$854,697,000	\$35,499,000	\$50,931,000
• CPP: See CPP methodology for detail.	\$4,450,000	\$4,450,000	\$0	\$3,992,000	-\$458,000	-\$458,000
• Independent Living Supplement	\$498,000	-\$516,000	-\$1,014,000	\$381,000	\$897,000	-\$117,000
Based on Client Master File data as of February 1, 2013, it is estimated the following consumers will live in SL/IL arrangements. Of these totals, based on the 2013 May Revision RC Survey (March 2013), estimated persons who are part of a couple, who will receive their monthly supplemental payment of \$53.14, as well as the remainder who will receive their monthly payments of \$41.60 as individuals, are also displayed. 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 added.						
Total SL/IL Consumers	24,270	23,520				
Part of a Couple	- 1,301	- 1,253				
Individuals	22,969	22,267				
• TOTAL EXPENDITURES	\$808,714,000	\$823,132,000	\$14,418,000	\$859,070,000	\$35,938,000	\$50,356,000

Support Services

FUNDING:

Support Services expenditures are funded by the General Fund (GF), Home and Community-Based Services (HCBS) Waiver, the Title XX Block Grant, which includes Social Services and Temporary Assistance to Needy Families (TANF), 1915(i) State Plan Amendment (SPA) and the Early Start Grant. Based on actual 2012-13 billing data, approximately 72 percent of Support Services expenditures are eligible for HCBS Waiver reimbursement. Of the HCBS Waiver and 1915 (i) amounts 50 percent is federal financial participation (FFP). The State GF portion is that which is non-FFP.

		Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
EXPENDITURES:							
	TOTAL	\$808,714,000	\$823,132,000	\$14,593,000	\$859,070,000	\$35,938,000	\$50,356,000
	GF	\$408,381,000	\$408,570,000	\$189,000	\$433,518,000	\$24,948,000	\$24,962,000
	<i>GF Match</i>	331,422,000	341,999,000	10,577,000	352,989,000	10,990,000	21,567,000
	<i>GF Other</i>	77,134,000	66,571,000	-10,563,000	80,529,000	13,958,000	3,395,000
	Reimbursements	\$399,666,000	\$414,065,000	\$14,399,000	\$425,055,000	\$10,990,000	\$25,389,000
	<i>HCBS Waiver</i>	294,870,000	306,283,000	11,413,000	315,666,000	9,383,000	20,796,000
	<i>1915 (i) SPA</i>	36,553,000	35,714,000	-839,000	37,321,000	1,607,000	768,000
	<i>Title XX Social Services</i>	54,153,000	58,615,000	4,462,000	58,615,000	0	4,462,000
	<i>Title XX TANF</i>	14,090,000	13,453,000	-637,000	13,453,000	0	-637,000
	Federal Funds	\$492,000	\$497,000	\$5,000	\$497,000	\$0	\$5,000
	<i>Early Start Grant</i>	492,000	497,000	5,000	497,000	0	5,000

In Home Respite

DESCRIPTION:

Pursuant to Welfare and Institutions Code (WIC) Section 4648 regional centers (RCs) contract with vendors to provide services and supports to all qualifying RC consumers. In-Home Respite includes those services that are 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: Purchase of Services (POS) Claims Data file dated September 1, 2013. Data were adjusted for lag based on historical data.

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
METHODOLOGY:						
<ul style="list-style-type: none"> Base: Actual Fiscal Year 2012-13 expenditures were used to develop the 2013-14 base. For 2014-15 the prior-year estimate, with the following adjustments, was used as the base: 	\$198,609,000	\$201,391,000	\$2,782,000	\$208,735,000	\$7,344,000	\$10,126,000
<ul style="list-style-type: none"> <i>Updated Costs without CPP/Prior Year Estimate</i> 	<i>198,609,000</i>	<i>201,391,000</i>	<i>2,782,000</i>	<i>208,735,000</i>	<i>7,344,000</i>	<i>10,126,000</i>
<ul style="list-style-type: none"> Utilization Change/Growth: 						
<ul style="list-style-type: none"> <ul style="list-style-type: none"> Total Utilization Change/Growth for 2013-14 	\$4,638,000	\$7,344,000	\$2,706,000		<i>In Base</i>	<i>In Base</i>
<ul style="list-style-type: none"> <ul style="list-style-type: none"> Total Utilization Change/Growth for 2014-15 				\$7,616,000	\$272,000	\$2,978,000
<ul style="list-style-type: none"> Subtotal Base and Growth 	\$203,247,000	\$208,735,000	\$5,488,000	\$216,351,000	\$7,616,000	\$13,104,000
<ul style="list-style-type: none"> CPP: See CPP methodology for detail. 	\$24,000	\$24,000	\$0	\$24,000	\$0	\$0
<ul style="list-style-type: none"> Financial Management Services for Participant-Directed Services 	\$6,212,000	\$0	-\$6,212,000	\$0	\$0	-\$6,212,000
<ul style="list-style-type: none"> TOTAL EXPENDITURES: 	\$209,483,000	\$208,759,000	-\$724,000	\$216,375,000	\$7,616,000	\$6,892,000

In Home Respite

FUNDING:

In Home Respite expenditures are funded by the General Fund (GF), Home and Community-Based Services (HCBS) Waiver, the Title XX Block Grant, which includes Social Services and Temporary Assistance for Needy Families (TANF), and 1915(i) State Plan Amendment (SPA). Based on actual 2012-13 billing data, approximately 71 percent percent In-Home Respite expenditures are eligible for HCBS Waiver reimbursement. Of the HCBS Waiver and 1915 (i) SPA amounts 50 percent is federal financial participation (FFP). The State General Fund portion is that which is non-FFP.

EXPENDITURES:	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
TOTAL	\$209,483,000	\$208,759,000	-\$724,000	\$216,375,000	\$7,616,000	\$6,892,000
GF	\$101,685,000	\$94,748,000	-\$6,982,000	\$99,769,000	\$5,021,000	-\$1,961,000
GF Match	75,396,000	80,882,000	5,486,000	83,477,000	2,595,000	8,081,000
GF Other	26,334,000	13,866,000	-12,468,000	16,292,000	2,426,000	-10,042,000
Reimbursements	\$107,753,000	\$114,011,000	\$6,258,000	\$116,606,000	\$2,595,000	\$8,853,000
HCBS Waiver	66,972,000	72,730,000	5,758,000	74,958,000	2,228,000	7,986,000
1915 (i) SPA	8,423,000	8,152,000	-271,000	8,519,000	367,000	96,000
Title XX Social Services	18,488,000	18,371,000	-117,000	18,371,000	0	-117,000
Title XX TANF	13,870,000	14,758,000	888,000	14,758,000	0	888,000

DESCRIPTION:

ASSUMPTIONS:

- | | Enacted
Budget | Updated
2013-14 | 2013-14
Request | 2014-15 | 2014-15
Over
2013-14 | 2014-15
Over
Enacted
Budget |
|---|-------------------|--------------------|--------------------|--------------|-----------------------------|--------------------------------------|
| METHODOLOGY: | | | | | | |
| <ul style="list-style-type: none"> Base: Actual Fiscal Year 2012-13 expenditures were used to develop the 2013-14 base. For 2014-15 the prior-year estimate, with the following adjustments, was used as the base: <ul style="list-style-type: none"> <i>Updated Costs without CPP/Prior Year Estimate</i> | \$43,595,000 | \$41,113,000 | -\$2,482,000 | \$41,902,000 | \$789,000 | -\$1,693,000 |
| <ul style="list-style-type: none"> Utilization Change/Growth: <ul style="list-style-type: none"> Total Utilization Change/Growth for 2013-14 Total Utilization Change/Growth for 2014-15 <p>The 2012-13 and 2013-14 utilization change and growth were estimated based upon updated expenditure trends. The estimate reflects interventions for anomalies in the expenditure trends related to the 4.25% payment reduction, and implementation of cost containment measures.</p> | -\$931,000 | \$789,000 | \$1,720,000 | \$950,000 | <i>In Base</i>
\$161,000 | <i>In Base</i>
\$1,881,000 |
| <ul style="list-style-type: none"> Subtotal Base and Growth | \$42,664,000 | \$41,902,000 | -\$762,000 | \$42,852,000 | \$950,000 | \$188,000 |
| <ul style="list-style-type: none"> CPP: See CPP methodology for detail. | \$76,000 | \$76,000 | \$0 | \$76,000 | \$0 | \$0 |
| <ul style="list-style-type: none"> Financial Management Services for Participant-Directed Services | \$3,562,000 | \$0 | -\$3,562,000 | \$0 | \$0 | -\$3,562,000 |
| <ul style="list-style-type: none"> TOTAL EXPENDITURES: | \$46,302,000 | \$41,978,000 | -\$4,324,000 | \$42,928,000 | \$950,000 | -\$3,374,000 |

Out of Home Respite

FUNDING:

Out-of-Home Respite expenditures are funded by the General Fund (GF), Home and Community-Based Services (HCBS) Waiver, the Title XX Block Grant, which includes Social Services and Temporary Assistance for Needy Families (TANF), and 1915(i) State Plan Amendment (SPA). Based on actual 2012-13 billing data, approximately 62 percent Out-of-Home Respite expenditures are eligible for HCBS Waiver reimbursement. Of the HCBS Waiver, and 1915 (i) SPA amounts 50 percent is federal financial participation (FFP). The State General Fund portion is that which is non-FFP.

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
EXPENDITURES:						
TOTAL	\$46,302,000	\$41,978,000	-\$4,324,000	\$42,928,000	\$950,000	-\$3,374,000
GF	\$23,169,000	\$21,364,000	-\$1,805,000	\$21,866,000	\$502,000	-\$1,303,000
<i>GF Match</i>	15,749,000	14,182,000	-1,567,000	14,629,000	447,000	-1,120,000
<i>GF Other</i>	7,420,000	7,182,000	-238,000	7,237,000	55,000	-183,000
Reimbursements	\$23,133,000	\$20,614,000	-\$2,519,000	\$21,062,000	\$448,000	-\$2,071,000
<i>HCBS Waiver</i>	14,087,000	13,305,000	-782,000	13,713,000	408,000	-374,000
<i>1915 (i) SPA</i>	1,661,000	877,000	-784,000	917,000	40,000	-744,000
<i>Title XX Social Services</i>	3,977,000	1,746,000	-2,231,000	1,746,000	0	-2,231,000
<i>Title XX TANF</i>	3,408,000	4,686,000	1,278,000	4,686,000	0	1,278,000

Health Care

DESCRIPTION:

Pursuant to Welfare and Institutions Code (WIC) Sections 4646 and 4648 regional centers (RCs) contract with vendors to provide services and supports to all qualifying RC consumers. Health Care services include those that are medical/health care-related.

ASSUMPTIONS:

Health Care Expenditure Data Source: Purchase of Services (POS) Claims Data file dated September 1, 2013. Data were adjusted for lag based on historical data.

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
METHODOLOGY:						
<ul style="list-style-type: none"> Base: Actual Fiscal Year 2012-13 expenditures were used to develop the 2013-14 base. For 2014-15 the prior-year estimate, with the following adjustments, was used as the base: <ul style="list-style-type: none"> Updated Costs without CPP/Prior Year Estimate Utilization Change/Growth: <ul style="list-style-type: none"> Total Utilization Change/Growth for 2013-14 Total Utilization Change/Growth for 2014-15 <p>The 2013-14 and 2014-15 utilization change and growth were estimated based upon updated expenditure trends. The estimate reflects interventions for anomalies in the expenditure trends related to the 4.25% payment reduction, and implementation of cost containment measures.</p> 	\$90,247,000	\$80,418,000	-\$9,829,000	\$84,296,000	\$3,878,000	-\$5,951,000
	90,247,000	80,418,000	-9,829,000	84,296,000	3,878,000	-5,951,000
	\$3,878,000	\$3,878,000	\$0		<i>In Base</i>	<i>In Base</i>
				\$3,878,000	\$0	\$0
<ul style="list-style-type: none"> Subtotal Base and Growth 	\$94,125,000	\$84,296,000	-\$9,829,000	\$88,174,000	\$3,878,000	-\$5,951,000
<ul style="list-style-type: none"> CPP: See CPP methodology for detail. 	\$671,000	\$671,000	\$0	\$671,000	\$0	\$0
<ul style="list-style-type: none"> Financial Management Services for Participant-Directed Services 	\$139,000	\$0	-\$139,000	\$0	\$0	-\$139,000
<ul style="list-style-type: none"> TOTAL EXPENDITURES 	\$94,935,000	\$84,967,000	-\$9,968,000	\$88,845,000	\$3,878,000	-\$6,090,000

Health Care**FUNDING:**

Health Care expenditures are funded by the General Fund (GF), Home and Community-Based Services (HCBS) Waiver, the Title XX Block Grant, which includes Temporary Assistance for Needy Families (TANF), 1915(i) State Plan Amendment (SPA), and the Early Start Grant. Based on actual 2012-13 billing data, approximately 21 percent of Health Care expenditures are eligible for HCBS Waiver reimbursement. Of the HCBS Waiver and 1915(i) SPA amounts 50 percent is federal financial participation (FFP). The State GF portion is that which is non-FFP.

		Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
EXPENDITURES:							
	TOTAL	\$94,935,000	\$84,967,000	-\$9,968,000	\$88,845,000	\$3,878,000	-\$6,090,000
	GF	\$82,186,000	\$68,875,000	-\$13,332,000	\$72,328,000	\$3,453,000	-\$9,879,000
	<i>GF Match</i>	9,075,000	12,142,000	3,067,000	12,568,000	426,000	3,493,000
	<i>GF Other</i>	73,132,000	56,733,000	-16,399,000	59,760,000	3,027,000	-13,372,000
	Reimbursements	\$10,028,000	\$13,366,000	\$3,338,000	\$13,791,000	\$425,000	\$3,763,000
	<i>HCBS Waiver</i>	5,253,000	8,399,000	3,146,000	8,656,000	257,000	3,403,000
	<i>1915 (i) SPA</i>	3,823,000	3,745,000	-78,000	3,913,000	168,000	90,000
	<i>Title XX TANF</i>	952,000	1,222,000	270,000	1,222,000	0	270,000
	Federal Funds	\$2,700,000	\$2,726,000	\$26,000	\$2,726,000	\$0	\$26,000
	<i>Early Start Grant</i>	2,700,000	2,726,000	26,000	2,726,000	0	26,000

Miscellaneous Services

DESCRIPTION:

Pursuant to Welfare and Institutions Code (WIC) Section 4648 regional centers (RCs) contract with vendors to provide services and supports to all qualifying RC consumers. Miscellaneous Services comprise those services which cannot be otherwise classified in the other Purchase of Services (POS) budget categories. They include, among others: tutors, special education teachers aides, recreational therapists, speech pathologists, mobility training specialists, and counseling.

ASSUMPTIONS:

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 over 2013-14	2014-15 Over Enacted Budget
METHODOLOGY:						
<ul style="list-style-type: none"> Base: Actual Fiscal Year 2011-12 expenditures were used to develop the 2012-13 base. For 2013-14 the prior-year estimate, with the following adjustments, was used as the base: <ul style="list-style-type: none"> <i>Updated Costs without CPP/Prior Year Estimate</i> 	\$381,142,000	\$370,540,000	-\$10,602,000	\$378,548,000	\$8,008,000	-\$2,594,000
	381,142,000	370,540,000	-10,602,000	378,548,000	8,008,000	-2,594,000
<ul style="list-style-type: none"> Utilization Change/Growth: <ul style="list-style-type: none"> Total Utilization Change/Growth for 2013-14 Total Utilization Change/Growth for 2014-15 <p>The 2013-14 and 2014-15 utilization change/growth were estimated based upon updated expenditure trends. The estimate reflects interventions for anomalies in the expenditure trends related to the 4.25% payment reduction, and implementation of cost containment measures.</p>	\$8,008,000	\$8,008,000	\$0		<i>In Base</i>	<i>In Base</i>
				\$8,008,000	\$0	\$0
<ul style="list-style-type: none"> Subtotal Base and Growth 	\$389,150,000	\$378,548,000	-\$10,602,000	\$386,556,000	\$8,008,000	-\$2,594,000
<ul style="list-style-type: none"> CPP: See CPP methodology for detail. 	\$25,164,000	\$25,164,000	\$0	\$30,253,000	\$5,089,000	\$5,089,000
<ul style="list-style-type: none"> TOTAL EXPENDITURES 	\$414,314,000	\$403,712,000	-\$10,602,000	\$416,809,000	\$13,097,000	\$2,495,000

Miscellaneous Services**FUNDING:**

Miscellaneous Services expenditures are funded by the General Fund (GF), Home and Community-Based Services (HCBS) Waiver, the Title XX Block Grant, which includes Social Services and Temporary Assistance to Needy Families (TANF), 1915(i) State Plan Amendment (SPA), the Early Periodic Screening Diagnosis and Treatment (EPSDT), and Program Development Funds. Based on actual 2012-13 billing data, approximately 34 percent of Miscellaneous Services expenditures are eligible for HCBS Waiver reimbursement. Of the HCBS Waiver, 1915 (i), and EPSDT amounts, 50 percent is federal financial participation (FFP). The GF portion is that which is non-FFP.

	Enacted Budget	Updated 2013-14	2013-14 Request	Updated 2014-15	2014-15 over 2013-14	2014-15 Over Enacted Budget
EXPENDITURES:						
TOTAL	\$414,314,000	\$403,712,000	-\$10,602,000	\$416,809,000	\$13,097,000	\$2,495,000
GF	\$273,540,000	\$262,307,000	-\$11,323,000	\$272,666,000	\$10,359,000	-\$964,000
<i>GF Match</i>	85,360,000	86,128,000	768,000	88,966,000	2,838,000	3,606,000
<i>GF Other</i>	188,270,000	176,179,000	-12,091,000	183,700,000	7,521,000	-4,570,000
Reimbursements	\$124,927,000	\$125,614,000	\$687,000	\$128,452,000	\$2,838,000	\$3,525,000
<i>HCBS Waiver</i>	67,569,000	72,275,000	4,706,000	74,489,000	2,214,000	6,920,000
<i>1915 (i) SPA</i>	14,980,000	13,854,000	-1,126,000	14,478,000	624,000	-502,000
<i>Title XX Social Services</i>	6,895,000	4,599,000	-2,296,000	4,599,000	0	-2,296,000
<i>Title XX TANF</i>	32,674,000	34,886,000	2,212,000	34,886,000	0	2,212,000
<i>EPSDT</i>	2,809,000	0	-2,809,000	0	0	-2,809,000
Federal Funds	\$9,787,000	\$9,883,000	\$96,000	\$9,883,000	\$0	\$96,000
<i>Early Start Grant</i>	9,787,000	9,883,000	96,000	9,883,000	0	96,000
Program Development Fund	\$5,970,000	\$5,908,000	-\$62,000	\$5,808,000	-\$100,000	-\$162,000

Quality Assurance Fees (Intermediate Care Facility-Developmentally Disabled Costs)

DESCRIPTION:

To realize the federal financial participation (FFP) associated with the Intermediate Care Facility-Developmentally Disabled (ICF-DD) State Plan Amendment (SPA), 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:

- Regional Centers (RC) Administration costs are 1.5% of the day treatment and transportation expenditures for residents of ICF-DD facilities.
- Source of Data: POS costs for day treatment and transportation for residents of ICF-DD facilities.
- ICF-DD Administration costs are 1.5% of the RC administrative cost of day treatment and transportation for residents of ICF-DD facilities. The QAF is set by DHCS. It is currently at 6%.

2013-14: Total billing costs: \$1.7 million for RC administration (Operations), \$1.8 million for ICF-DD administration and \$7.6 million for QAF.

- POS costs for day treatment and transportation including Regional Center Administration Costs for 2013-14 totals \$116.4 million. RC administrative fee is 1.5% of the ICF/DD residents day treatment and transportation, and ICF-DD administration costs are each 1.5% of the RC administrative fee. The QAF is set by DHCS.

2014-15: Total billing costs: \$1.7 million for RC administration (Operations), \$1.8 million for ICF-DD administration and \$7.6 million for QAF.

- POS costs for day treatment and transportation for 2014-15 totals \$116.4 million. RC administrative fee is 1.5% of the ICF-DD residents day treatment and transportation costs and ICF-DD administration costs are each 1.5% of the RC administrative fee. The QAF is set by DHCS.

FUNDING:

100 percent reimbursement to the Department of Developmental Services transferred from DHCS.

CHANGE FROM PRIOR ESTIMATE:

The estimate reflects updated Purchase of Services (POS) for day treatment and transportation services for residents of ICF-DD's.

EXPENDITURES:	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
TOTAL	\$9,424,000	\$9,424,000	\$0	\$9,424,000	\$0	\$0
Reimbursements	9,424,000	9,424,000	0	9,424,000	0	0
QAF Admin Fees	4,712,000	4,712,000	0	4,712,000	0	0
Transfer from DHCS	4,712,000	4,712,000	0	4,712,000	0	0

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SECTION E: ESTIMATE METHODOLOGIES (continued)

<i>PREVENTION PROGRAM</i>	E-16
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Prevention Program

DESCRIPTION:

Effective July 1, 2011, regional centers no longer add cases to the Prevention Program and instead refer eligible children to Family Resource Centers (FRCs) for Prevention Resource and Referral Services (PRRS.) Eligible children for PRRS are ages birth through 35 months, who are at substantially greater risk for a developmental disability but who are otherwise ineligible for services through the Early Start Program. Services available through FRCs include information, resources, referrals, and targeted outreach.

ASSUMPTIONS:

The estimate assumes FRCs will provide PRRS for eligible children.

CHANGE FROM PRIOR ESTIMATE:

No change.

REASON FOR YEAR-TO-YEAR CHANGE:

No change.

EXPENDITURES:	Enacted	Updated	2013-14		2014-15	2014-15
	Budget	2013-14	Request	2014-15	Over 2013-14	Over Enacted Budget
General Fund	\$2,003,000	\$2,003,000	\$0	\$2,003,000	\$0	\$0
Prevention Program	2,003,000	2,003,000	0	2,003,000	0	0

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SECTION E: ESTIMATE METHODOLOGIES (continued)

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SECTION E: ESTIMATE METHODOLOGIES (continued)

<i>COMMUNITY PLACEMENT PLAN</i>	E-18.1 to E-18.11
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Community Placement Plan

DESCRIPTION:

Community Placement Plan (CPP) efforts have been refocused in 2013-14 and 2014-15 to achieve a safe and successful transition of individuals with developmental disabilities from Lanterman Developmental Center (DC) to other appropriate living arrangements as determined through the individualized planning process. A summary of the CPP funds associated with Lanterman DC closure is available on page E - 18.11. This estimate is based on projected costs and historical experience derived from individualized assessments of community services and supports needs, and reflects what is actually needed for an individual to successfully transition from a DC into the community and to deflect individuals who have been referred to a DC for potential admission. CPPs are developed through negotiations with each regional center (RC) and are based on individualized planning efforts. This estimate also reflects anticipated Assessments and Startup Purchase of Services (POS) increases due to recently enacted statutory requirements to assess and develop community resources for consumers potentially moving from DCs, Mental Health Rehabilitation Centers (MHRC) and Institutions for Mental Disease (IMD) ineligible for Federal Financial Participation (FFP), and out of state placements.

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

- Work with the DCs and families in identifying individuals for movement.
- Facilitate transitions from a DC, MHRC and IMDs ineligible for FFP, and out of state services.
- Deflect the admission of individuals to a DC, MHRCs and IMDs ineligible for FFP, and out of state services.
- Stabilize current community living arrangements.

Regular CPP funding covers these Operations and POS categories:

OPERATIONS:

Personal Services:

- **Resource Development:** Positions needed to develop community living arrangements for consumers moving from DCs, MHRCs and IMDs ineligible for FFP, and out of state services. These positions are critical to developing living arrangements that will safely meet the challenges of people moving into the community.
- **Assessment:** Positions needed to identify DC residents, individuals residing in a MHRCs and IMDs ineligible for FFP, and in out of state services ready for placement in community living arrangements. Proper comprehensive assessment is critical to safe and successful community placement and should minimize re-admission to a DC and/or unstable and cost-inefficient community placement.
- **Placement:** Positions for placement activities. Individuals who reside in the DCs, in MHRCs or IMDs, or in out of state services, have, on average, more complex "unique" placement needs that will be addressed by these staff.
- **Crisis Service Teams:** Positions for crisis services which include a behavioral team, a clinical team, an emergency response team, health care coordinators, nursing and oral health care coordinators.

Operating Expenses:

Costs for office space, furniture, computers, travel, training and rent are included.

Community Placement Plan

DESCRIPTION (continued):

PURCHASE OF SERVICES:

- **Start-Up:** These costs are related to development of new facilities/programs and program expansion.
- **Assessment:** Individualized and comprehensive identification of consumer supports and services needed for stabilized community living.
- **Placement:** Funds cost of consumers' move into community settings based on consumer-specific information.
- **Deflection:** Placement POS for residential costs of facilities developed with CPP start-up to deflect admission from a DC. These facilities are developed based on a comprehensive analysis of DC admission data, current trends in needed services specific to the RC, and other local issues.

ASSUMPTIONS:

- Based on projected increase in resource development to meet new statutory requirements; delayed egress, secured perimeter, out-of-state, IMDs/MHRCs ineligible for FFP. Estimate reflects resources necessary to provide services to consumers with challenging service needs.
- Based on initial and updated assessments.

METHODOLOGY:	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over	2014-15 Over
					2013-14	Enacted Budget
• OPERATIONS TOTAL	\$12,472,000	\$12,472,000	\$0	\$13,337,000	\$865,000	\$865,000
• PURCHASE OF SERVICES TOTAL	\$54,937,000	\$54,937,000	\$0	\$54,937,000	\$0	\$0
• TOTAL EXPENDITURES	\$67,409,000	\$67,409,000	\$0	\$68,274,000	\$865,000	\$865,000

See Pages E-18.4 to E-18.10

FUNDING:

CPP expenditures are funded by the General Fund (GF), Home and Community-Based Services (HCBS) Waiver and Money Follows the Person (MFP) Grant. Of the HCBS Waiver eligible amount, 50 percent is (FFP). For the MFP Grant 75 percent is FFP. The State General Fund portion is that which is non-FFP.

Community Placement Plan

EXPENDITURES:	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
TOTAL	\$67,409,000	\$67,409,000	\$0	\$68,274,000	\$865,000	\$865,000
RC Operations	\$12,472,000	\$12,472,000	\$0	\$13,337,000	\$865,000	\$865,000
RC Purchase of Services	\$54,937,000	\$54,937,000	\$0	\$54,937,000	\$0	\$0
Community Care Facilities	19,515,000	19,515,000	0	14,884,000	-4,631,000	-4,631,000
Medical Facilities	164,000	164,000	0	164,000	0	0
Day Programs	3,952,000	3,952,000	0	3,952,000	0	0
Work Activity Program	0	0	0	0	0	0
Supported Employment Program: Group Placement	176,000	176,000	0	176,000	0	0
Supported Employment Program: Individual Placement	0	0	0	0	0	0
Transportation	745,000	745,000	0	745,000	0	0
Support Services	4,450,000	4,450,000	0	3,992,000	-458,000	-458,000
In-Home Respite	24,000	24,000	0	24,000	0	0
Out-of-Home Respite	76,000	76,000	0	76,000	0	0
Health Care	671,000	671,000	0	671,000	0	0
Miscellaneous Services	25,164,000	25,164,000	0	30,253,000	5,089,000	5,089,000
FUND SOURCES:						
TOTAL	\$67,409,000	\$67,409,000	\$0	\$68,274,000	\$865,000	\$865,000
GF	\$44,725,000	\$52,842,000	\$8,117,000	\$55,256,000	\$2,414,000	\$10,531,000
GF Match	16,851,000	11,846,000	-5,005,000	9,840,000	-2,006,000	-7,011,000
GF Other	27,874,000	40,996,000	13,122,000	45,416,000	4,420,000	17,542,000
Reimbursements	\$22,684,000	\$14,567,000	-\$8,117,000	\$13,018,000	-\$1,549,000	-\$9,666,000
HCBS Waiver	13,934,000	7,506,000	-6,428,000	5,166,000	-2,340,000	-8,768,000
MFP Grant	8,750,000	7,061,000	-1,689,000	7,852,000	791,000	-898,000

COMMUNITY PLACEMENT PLAN OPERATIONS AND PURCHASE OF SERVICES 2013-14 and 2014-15

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
I. OPERATIONS	\$12,472,000	\$12,472,000	\$0	\$13,337,000	\$865,000	\$865,000
II. PURCHASE OF SERVICES						
A. Start-Up a/	\$22,075,000	\$22,075,000	\$0	\$25,856,000	\$3,781,000	\$3,781,000
B. Assessment b/	\$2,292,000	\$2,292,000	\$0	\$3,600,000	\$1,308,000	\$1,308,000
	718	718	0	1,289	571	571
	consumers	consumers	consumers	consumers	consumers	consumers
C. Placement	\$24,168,000	\$24,168,000	\$0	\$24,168,000	\$0	\$0
	228	228	0	158	-70	-70
	^{1/} consumers	^{1/} consumers	consumers	^{2/} consumers	consumers	consumers
D. Deflection	\$6,402,000	\$6,402,000	\$0	\$1,313,000	-\$5,089,000	-\$5,089,000
	72	72	0	66	-6	-6
	consumers	consumers	consumers	consumers	consumers	consumers
E. SUBTOTAL POS	\$54,937,000	\$54,937,000	\$0	\$54,937,000	\$0	\$0
III. TOTAL CPP	\$67,409,000	\$67,409,000	\$0	\$68,274,000	\$865,000	\$865,000

1/ For the Enacted Budget and Updated 2013-14, of the 228 consumers in placement, 120 are from LDC and 108 are from other DCs (20 placements from out-of-state and 24 from MHRCs/IMDs are not included since costs are reflected in the base).

2/ For 2014-15, of the 158 consumers in placement, 22 are from LDC and 136 are from other DCs.

a/ Based on projected increase in resource development to meet new statutory requirements; delayed egress, secured perimeter, out-of-state, IMDs/MHRCs ineligible for FFP. Estimate reflects resources necessary to provide services to consumers with challenging service needs.

b/ Based on initial and updated assessments.

COMMUNITY PLACEMENT PLAN**Operations
2013-14****A. STAFFING****1. PERSONAL SERVICES**

- a. Resource Development
Quality Assurance/
- b. Management
- c. Assessment
- d. Placement
- e. Crisis Services Teams

f. Total Personal Services

2. OPERATING EXPENSES

- a. Operating Expenses
- b. Rent
- c. Training, Travel, Consultants

d. Total Operating Expenses

3. SUBTOTAL STAFFING**(Rounded)****B. Budget Balancing Reduction 2009-10****Reduce CPP Operations****C. Total (A+B)**

Enacted Budget		Updated 2013-14		2013-14 Request	
Positions	Cost	Positions	Cost	Positions	Cost
50.83	\$4,391,000	50.83	\$4,391,000	0.00	\$0
12.51	1,213,000	12.51	1,213,000	0.00	0
13.88	1,494,000	13.88	1,494,000	0.00	0
55.46	4,442,000	55.46	4,442,000	0.00	0
6.13	1,137,999	6.13	1,137,999	0.00	0
138.81	\$12,677,999	138.81	\$12,677,999	0.00	\$0
	\$467,000		\$467,000		\$0
	1,074,000		1,074,000		\$0
	155,000		155,000		\$0
	\$1,696,000		\$1,696,000		\$0
	\$14,373,999		\$14,373,999	0.00	\$0
	\$14,374,000		\$14,374,000	0.00	\$0
	-\$1,902,000		-\$1,902,000	0.00	\$0
	\$12,472,000		\$12,472,000	0.00	\$0

COMMUNITY PLACEMENT PLAN**Operations
2014-15****A. STAFFING****1. PERSONAL SERVICES**

- a. Resource Development
Quality Assurance/
- b. Management
- c. Assessment
- d. Placement
- e. Crisis Services Teams

f. Total Personal Services

2. OPERATING EXPENSES

- a. Operating Expenses
- b. Rent
- c. Training, Travel, Consultants

d. Total Operating Expenses

**3. SUBTOTAL STAFFING
(Rounded)****B. Budget Balancing Reduction 2009-10
Reduce CPP Operations****C. Total (A+B)**

Enacted Budget		2014-15		2014-15 Request	
Positions	Cost	Positions	Cost	Positions	Cost
50.83	\$4,391,000	55.83	\$4,773,500	5.00	\$382,500
12.51	1,213,000	12.51	1,213,000	0.00	0
13.88	1,494,000	13.88	1,494,000	0.00	0
55.46	4,442,000	59.96	4,824,500	4.50	382,500
6.13	1,137,999	6.13	1,137,999	0.00	0
138.81	\$12,677,999	148.31	\$13,442,999	9.50	\$765,000
	\$467,000		\$497,600		\$30,600
	1,074,000		1,143,255		\$69,255
	155,000		155,000		\$0
	\$1,696,000		\$1,795,855		\$99,855
138.81	\$14,373,999	148.31	\$15,238,854	9.50	\$864,855
	\$14,374,000		\$15,239,000		\$865,000
	-\$1,902,000		-\$1,902,000		\$0
138.81	\$12,472,000	148.31	\$13,337,000	9.50	\$865,000

Community Placement Plan
Purchase of Services
Summary of Costs by POS Category
2013-14

CPP Activity	# of Consumers	Living Arrangement				Day Programs	Work Activity Program	Supported Employment Program		Transportation	Support Services	In-Home Respite	Out-of-Home Respite	Health Care	Misc.	Total
		Community Care Facilities	Adult Family Home Agencies	Intermediate Care Facilities	Supported Living			Group	Individual							
A. Start-Up a/		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$22,075,000	\$22,075,000
B. Assessment	718	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$2,292,000	\$2,292,000
C. Placement	228	\$13,689,000	\$0	\$164,000	\$2,546,000	\$3,952,000	\$0	\$176,000	\$0	\$745,000	\$1,328,000	\$24,000	\$76,000	\$671,000	\$797,000	\$24,168,000
D. Deflection b/	72	\$5,826,000	\$0	\$0	\$576,000	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$6,402,000
E. November 2013 Estimate 2013-14 TOTAL		\$19,515,000	\$0	\$164,000	\$3,122,000	\$3,952,000	\$0	\$176,000	\$0	\$745,000	\$1,328,000	\$24,000	\$76,000	\$671,000	\$25,164,000	\$54,937,000
F. Enacted Budget Total		\$19,515,000	\$0	\$164,000	\$3,122,000	\$3,952,000	\$0	\$176,000	\$0	\$745,000	\$1,328,000	\$24,000	\$76,000	\$671,000	\$25,164,000	\$54,937,000
G. DIFFERENCE		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0

a/ Start-Up Cost: This is related to start-up funds needed for new facilities/programs, program expansion, and program continuations.

b/ A "deflection" is defined as a person who is in a community setting and who is deflected away from placement in a developmental center.

Community Placement Plan
Purchase of Services
Summary of Costs by POS Category
2014-15

CPP Activity	# of Consumers	Living Arrangement				Day Programs	Work Activity Program	Supported Employment Program		Transportation	Support Services	In-Home Respite	Out-of-Home Respite	Health Care	Misc.	Total
		Community Care Facilities	Adult Family Home Agencies	Intermediate Care Facilities	Supported Living			Group	Individual							
A. Start-Up a/		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$25,856,000	\$25,856,000
B. Assessment	1,289	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$3,600,000	\$3,600,000
C. Placement	158	\$13,689,000	\$0	\$164,000	\$2,546,000	\$3,952,000	\$0	\$176,000	\$0	\$745,000	\$1,328,000	\$24,000	\$76,000	\$671,000	\$797,000	\$24,168,000
D. Deflection b/	66	\$1,195,000	\$0	\$0	\$118,000	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$1,313,000
E. November 2013 Estimate 2014-15 TOTAL		\$14,884,000	\$0	\$164,000	\$2,664,000	\$3,952,000	\$0	\$176,000	\$0	\$745,000	\$1,328,000	\$24,000	\$76,000	\$671,000	\$30,253,000	\$54,937,000
F. Enacted Budget Total		\$19,515,000	\$0	\$164,000	\$3,122,000	\$3,952,000	\$0	\$176,000	\$0	\$745,000	\$1,328,000	\$24,000	\$76,000	\$671,000	\$25,164,000	\$54,937,000
G. DIFFERENCE		-\$4,631,000	\$0	\$0	-\$458,000	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$5,089,000	\$0

a/ Start-Up Cost: This is related to start-up funds needed for new facilities/programs, program expansion, and program continuations.

b/ A "deflection" is defined as a person who is in a community setting and who is deflected away from placement in a developmental center.

Community Placement Plan
Purchase of Services
Cost and Service Utilization Assumptions for Placements
2013-14

For the November 2013 Estimate, Regular CPP costs are assumed to be the following.

Living Arrangement	# of Consumers	% of Total	Consumer Months	Living Arrangement			Day Programs	Work Activity Program	Supported Employment Program		Transportation	Support Services	In-Home Respite	Out-of-Home Respite	Health Care	Misc.	Total
				CCF	Intermediate Care Facilities	Supported Living			Group	Individual							
Regular CPP																	
● Community Care Facilities (CCF) ● Residential Facilities	32	14%	267	\$1,874,000	\$0	\$0	\$701,000	\$0	\$0	\$0	\$94,000	\$316,000	\$0	\$6,000	\$24,000	\$159,000	\$3,174,000
● Specialized Residential Facilities (SRF)	150	66%	1,182	\$11,476,000	\$0	\$0	\$2,666,000	\$0	\$176,000	\$0	\$521,000	\$894,000	\$0	\$33,000	\$580,000	\$395,000	\$16,741,000
● Intermediate Care Facilities (ICF)	14	6%	69	\$0	\$164,000	\$0	\$158,000	\$0	\$0	\$0	\$20,000	\$73,000	\$0	\$9,000	\$15,000	\$87,000	\$526,000
● Supported Living	27	12%	178	\$0	\$0	\$2,546,000	\$378,000	\$0	\$0	\$0	\$94,000	\$44,000	\$0	\$4,000	\$51,000	\$156,000	\$3,273,000
Avg Cost/Consumer Mo						\$14,285	\$2,121	\$0	\$0	\$0	\$527	\$247		\$22	\$286	\$875	\$18,363
● Other (Own Home, etc.)	5	2%	28	\$339,000	\$0	\$0	\$49,000	\$0	\$0	\$0	\$16,000	\$1,000	\$24,000	\$24,000	\$1,000	\$0	\$454,000
TOTAL	228	100%	1,724	\$13,689,000	\$164,000	\$2,546,000	\$3,952,000	\$0	\$176,000	\$0	\$745,000	\$1,328,000	\$24,000	\$76,000	\$671,000	\$797,000	\$24,168,000

Community Placement Plan
Purchase of Services
Cost and Service Utilization Assumptions for Placements
2014-15

For the November 2013 Estimate, Regular CPP costs are assumed to be the following.

Living Arrangement	# of Consumers	% of Total	Consumer Months	Living Arrangement				Day Programs	Work Activity Program	Supported Employment Program		Transportation	Support Services	In-Home Respite	Out-of-Home Respite	Health Care	Misc.	Total
				CCF	Family Home Agencies	Intermediate Care Facilities	Supported Living			Group	Individual							
Regular CPP																		
• Community Care Facilities (CCF)																		
• Residential Facilities	22	14%	185	\$1,874,000	\$0	\$0	\$0	\$701,000	\$0	\$0	\$0	\$94,000	\$316,000	\$0	\$6,000	\$24,000	\$159,000	\$3,174,000
• Specialized Residential Facilities (SRF)	104	66%	819	\$11,476,000	\$0	\$0	\$0	\$2,666,000	\$0	\$176,000	\$0	\$521,000	\$894,000	\$0	\$33,000	\$580,000	\$395,000	\$16,741,000
• Intermediate Care Facilities (ICF)	10	6%	48	\$0	\$0	\$164,000	\$0	\$158,000	\$0	\$0	\$0	\$20,000	\$73,000	\$0	\$9,000	\$15,000	\$87,000	\$526,000
• Supported Living	19	12%	124	\$0	\$0	\$0	\$2,546,000	\$378,000	\$0	\$0	\$0	\$94,000	\$44,000	\$0	\$4,000	\$51,000	\$156,000	\$3,273,000
Avg Cost/Consumer Mo							\$20,613	\$3,060				\$761	\$356		\$32	\$413	\$1,263	\$26,498
• Other (Own Home, etc.)	3	2%	19	\$339,000	\$0	\$0	\$0	\$49,000	\$0	\$0	\$0	\$16,000	\$1,000	\$24,000	\$24,000	\$1,000	\$0	\$454,000
TOTAL	158	100%	1,195	\$13,689,000	\$0	\$164,000	\$2,546,000	\$3,952,000	\$0	\$176,000	\$0	\$745,000	\$1,328,000	\$24,000	\$76,000	\$671,000	\$797,000	\$24,168,000

COMMUNITY PLACEMENT PLAN

Lanterman Developmental Center Closure Share of Funds

DESCRIPTION:

CPP efforts have been refocused in 2013-14 and 2014-15 to achieve a safe and successful transition of individuals with developmental disabilities from (LDC) to the community. This chart reflects the CPP costs dedicated to the LDC closure.

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 over 2013-14	2014-15 over Enacted Budget
I. OPERATIONS*	\$11,192,000	\$11,192,000	\$0	\$11,192,000	\$0	\$0
II. PURCHASE OF SERVICES						
A. Start-Up	\$7,598,000	\$1,000,000	-\$6,598,000	\$0	-\$1,000,000	-\$7,598,000
B. Assessment	\$0	\$0	\$0	\$0	\$0	\$0
C. Placement	\$16,088,000	\$16,088,000	\$0	\$3,036,000	-\$13,052,000	-\$13,052,000
D. Deflection	\$0	\$0	\$0	\$0	\$0	\$0
E. SUBTOTAL POS(A + B + C + D)	\$23,686,000	\$17,088,000	-\$6,598,000	\$3,036,000	-\$14,052,000	-\$20,650,000
III. TOTAL CPP (I + II)	\$34,878,000	\$28,280,000	-\$6,598,000	\$14,228,000	-\$14,052,000	-\$20,650,000

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General Fund

DESCRIPTION:

The General Fund (GF) is the main operating fund of the State.

ASSUMPTIONS/METHODOLOGY:

● GF Match:

This portion of GF is required to use as a match to reimbursements received from the Department of Health Care Services (DHCS). These reimbursements are originally funded by the federal government and passed through DHCS (the federally-recognized single state agency for Medicaid). The federal financial participation (FFP) costs are established by utilizing the Federal Medical Assistance Program (FMAP) percentages. They are as follows:

FMAP % of GF Match

1	Home and Community-Based Services (HCBS) Waiver	50.00%	1,193,805,000	1,218,385,000	24,580,000	1,293,056,000	74,671,000	99,251,000
2	HCBS Waiver Administration	50.00%	6,367,000	6,609,000	242,000	6,647,000	38,000	280,000
3	Medicaid Administration	25.00%	3,871,000	2,885,000	-986,000	2,885,000	0	-986,000
4	Targeted Case Management (TCM)	50.00%	148,952,000	142,989,000	-5,963,000	143,007,000	18,000	-5,945,000
5	TCM Administration	50.00%	3,656,000	3,728,000	72,000	3,728,000	0	72,000
6	Intermediate Care Facility/Developmentally Disabled (ICF-DD) State Plan Amendment (SPA)	50.00%	58,192,000	58,192,000	0	58,192,000	0	0
7	Quality Assurance Fees (QAF) * (Operations only, no match for POS)	50.00%	872,000	872,000	0	872,000	0	0
8	1915(i) SPA	50.00%	167,842,000	167,842,000	0	182,261,000	14,419,000	14,419,000
9	Money Follows the Person Grant (MFP)	25.00%	4,956,000	6,699,000	1,743,000	6,857,000	158,000	1,901,000
10	Early Periodic Screening Diagnosis and Treatment (EPSDT)	50.00%	17,587,000	15,944,000	-1,643,000	15,944,000	0	-1,643,000
● GF Other:			\$872,798,000	\$848,429,000	-\$24,369,000	\$920,754,000	\$72,325,000	\$47,956,000

These costs consist of the remainder of total regional center expenditures not included in the GF Match, Reimbursements, Program Development Fund, Developmental Disabilities Services Account, Mental Health Services Fund or Federal Funds.

General Fund**FUNDING:**

These GF are reflected in the Operations and Purchase of Services sections of the estimate.

CHANGE FROM PRIOR ESTIMATE AND YEAR-TO-YEAR CHANGE:

The expenditures have been updated and reflect the most current available expenditure and reimbursement data.

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
• TOTAL EXPENDITURES:	\$2,478,898,000	\$2,472,574,000	-\$6,324,000	\$2,634,203,000	\$161,629,000	\$155,305,000
Total General Fund	\$2,478,898,000	\$2,472,574,000	-\$6,324,000	\$2,634,203,000	\$161,629,000	\$155,305,000
<i>GF Match</i>	<i>1,606,100,000</i>	<i>1,624,145,000</i>	<i>18,045,000</i>	<i>1,713,449,000</i>	<i>89,304,000</i>	<i>107,349,000</i>
<i>GF Other</i>	<i>872,798,000</i>	<i>848,429,000</i>	<i>-24,369,000</i>	<i>920,754,000</i>	<i>72,325,000</i>	<i>47,956,000</i>

Reimbursements
Summary of Reimbursements and General Fund (GF) Match
Fiscal Year 2013-14

REIMBURSEMENTS a/	Enacted Budget	Governor's Budget	Difference
A. HCBS Waiver	\$2,387,610,000	\$2,436,771,000	\$49,161,000
1. Reimbursement (from DHCS) = 50%	1,193,805,000	1,218,386,000	24,581,000
2. DDS GF Match = 50% (Purchase of Services)	1,193,805,000	1,218,385,000	24,580,000
B. HCBS Waiver Administration	\$12,734,000	\$13,219,000	\$485,000
1. Reimbursement (from DHCS) = 50%	6,367,000	6,610,000	243,000
2. DDS GF Match = 50% (Operations)	6,367,000	6,609,000	242,000
C. Medicaid Administration	\$15,483,000	\$11,539,000	-\$3,944,000
1. Reimbursement (from DHCS) = 75%	11,612,000	8,654,000	-2,958,000
2. DDS GF Match = 25% (Operations)	3,871,000	2,885,000	-986,000
D. TCM	\$297,904,000	\$285,978,000	-\$11,926,000
1. Reimbursement (from DHCS) = 50%	148,952,000	142,989,000	-5,963,000
2. DDS GF Match = 50% (Operations)	148,952,000	142,989,000	-5,963,000
E. TCM Administration	\$7,312,000	\$7,456,000	\$144,000
1. Reimbursement (from DHCS) = 50%	3,656,000	3,728,000	72,000
2. DDS GF Match = 50% (Operations)	3,656,000	3,728,000	72,000
F. Title XX Block Grant	\$213,191,000	\$213,191,000	\$0
1a. Social Services (from DSS) = 100%	136,034,000	136,034,000	0
1b. Temporary Assistance for Needy Families (TANF) (from DSS) = 100%	77,157,000	77,157,000	0
2. DDS GF Match (Purchase of Services)	0	0	0
G. ICF-DD SPA	\$116,385,000	\$116,385,000	\$0
1. Reimbursement (from DHCS) = 50%	58,193,000	58,193,000	0
2. DDS GF Match = 50% (Purchase of Services)	58,192,000	58,192,000	0
H. Quality Assurance Admin Fees (Transfer from DHCS)	\$11,169,000	\$11,169,000	\$0
1. Reimbursement (from DHCS) = 100% for POS and 50% for OPS	10,297,000	10,297,000	0
2. DDS GF Match = 50% for OPS only (Purchase of Services & Operations)	872,000	872,000	0
I. 1915(i) SPA	\$335,684,000	\$335,684,000	\$0
1. Reimbursement (from DHCS) = 50%	167,842,000	167,842,000	0
2. DDS GF Match = 50% (Purchase of Services)	167,842,000	167,842,000	0
J. MFP Grant	\$19,823,000	\$17,914,000	-\$1,909,000
1. Reimbursement (from DHCS) = 75% for OPS and 25% for POS	14,867,000	11,215,000	-3,652,000
2. DDS GF Match = 25% (Operations / POS)	4,956,000	6,699,000	1,743,000
K. Homeland Security Grant	\$391,000	\$391,000	\$0
1. Reimbursement (from CEMA) = 100%	391,000	391,000	0
2. DDS GF Match (Operations)	0	0	0
L. Race to the Top	\$286,000	\$472,000	\$186,000
1. Reimbursement (from DOE) = 100%	286,000	472,000	186,000
2. DDS GF Match (Other Agency Costs)	0	0	0
M. EPSDT	\$35,174,000	\$31,889,000	-\$3,285,000
1. Reimbursement (from DHCS) = 50%	17,587,000	15,945,000	-1,642,000
2. DDS GF Match = 50% (Purchase of Services)	17,587,000	15,944,000	-1,643,000
N. TOTAL	\$3,453,146,000	\$3,482,058,000	\$28,912,000
1. Reimbursements	\$1,847,046,000	\$1,857,913,000	\$10,867,000
2. Total GF Match	\$1,606,100,000	\$1,624,145,000	\$18,045,000

a/ Reimbursements are funds received via other state agencies.

DHCS = Department of Health Care Services

DSS = Department of Social Services

DOE = Department of Education

CEMA = California Emergency Management Agency

Reimbursements
Summary of Reimbursements and General Fund (GF) Match
Fiscal Year 2014-15

REIMBURSEMENTS a/	Enacted Budget	Governor's Budget	Difference
A. HCBS Waiver	\$2,387,610,000	\$2,586,112,000	\$198,502,000
1. Reimbursement (from DHCS) = 50%	1,193,805,000	1,293,056,000	99,251,000
2. DDS GF Match = 50% (Purchase of Services)	1,193,805,000	1,293,056,000	99,251,000
B. HCBS Waiver Administration	\$12,734,000	\$13,295,000	\$561,000
1. Reimbursement (from DHCS) = 50%	6,367,000	6,648,000	281,000
2. DDS GF Match = 50% (Operations)	6,367,000	6,647,000	280,000
C. Medicaid Administration	\$15,483,000	\$11,539,000	-\$3,944,000
1. Reimbursement (from DHCS) = 75%	11,612,000	8,654,000	-2,958,000
2. DDS GF Match = 25% (Operations)	3,871,000	2,885,000	-986,000
D. TCM	\$297,904,000	\$286,015,000	-\$11,889,000
1. Reimbursement (from DHCS) = 50%	148,952,000	143,008,000	-5,944,000
2. DDS GF Match = 50% (Operations)	148,952,000	143,007,000	-5,945,000
E. TCM Administration	\$7,312,000	\$7,456,000	\$144,000
1. Reimbursement (from DHCS) = 50%	3,656,000	3,728,000	72,000
2. DDS GF Match = 50% (Operations)	3,656,000	3,728,000	72,000
F. Title XX Block Grant	\$213,191,000	\$213,191,000	\$0
1a. Social Services (from DSS) = 100%	136,034,000	136,034,000	0
1b. Temporary Assistance for Needy Families (TANF) (from DSS) = 100%	77,157,000	77,157,000	0
2. DDS GF Match (Purchase of Services)	0	0	0
G. ICF-DD SPA	\$116,385,000	\$116,385,000	\$0
1. Reimbursement (from DHCS) = 50%	58,193,000	58,193,000	0
2. DDS GF Match = 50% (Purchase of Services)	58,192,000	58,192,000	0
H. Quality Assurance Admin Fees (Transfer from DHCS)	\$11,169,000	\$11,169,000	\$0
1. Reimbursement (from DHCS) = 100% for POS and 50% for OPS	10,297,000	10,297,000	0
2. DDS GF Match = 50% for OPS only (Purchase of Services & Operations)	872,000	872,000	0
I. 1915(i) SPA	\$335,684,000	\$364,522,000	\$28,838,000
1. Reimbursement (from DHCS) = 50%	167,842,000	182,261,000	14,419,000
2. DDS GF Match = 50% (Purchase of Services)	167,842,000	182,261,000	14,419,000
J. MFP Grant	\$19,823,000	\$18,230,000	-\$1,593,000
1. Reimbursement (from DHCS) = 75% for OPS and 25% for POS	14,867,000	11,373,000	-3,494,000
2. DDS GF Match = 25% (Operations / POS)	4,956,000	6,857,000	1,901,000
K. Homeland Security Grant	\$391,000	\$391,000	\$0
1. Reimbursement (from CEMA) = 100%	391,000	391,000	0
2. DDS GF Match (Operations)	0	0	0
L. Race to the Top	\$286,000	\$341,000	\$55,000
1. Reimbursement (from DOE) = 100%	286,000	341,000	55,000
2. DDS GF Match (Other Agency Costs)	0	0	0
M. EPSDT	\$35,174,000	\$31,889,000	-\$3,285,000
1. Reimbursement (from DHCS) = 50%	17,587,000	15,945,000	-1,642,000
2. DDS GF Match = 50% (Purchase of Services)	17,587,000	15,944,000	-1,643,000
N. TOTAL	\$3,453,146,000	\$3,660,535,000	\$207,389,000
1. Reimbursements	\$1,847,046,000	\$1,947,086,000	\$100,040,000
2. Total GF Match	\$1,606,100,000	\$1,713,449,000	\$107,349,000

a/ Reimbursements are funds received via other state agencies.

DHCS = Department of Health Care Services

DSS = Department of Social Services

DOE = Department of Education

CEMA = California Emergency Management Agency

Home and Community-Based Services Waiver**DESCRIPTION:**

The Home and Community-Based Services (HCBS) Waiver program enables the Department of Developmental Services (DDS) to provide a broad array of HCBS to eligible individuals who, without these services, would require the level of care provided in an intermediate care facility for the developmentally disabled.

KEY DATA/ASSUMPTIONS:

Data Source: Medicaid Waiver Total Billed Dollar Amounts and Client Counts report, dated September 3, 2013 for the period of July 2012 through June 2013.

METHODOLOGY:

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
• Base:	\$2,275,841,000	\$2,333,550,000	\$57,709,000	\$2,411,715,000	\$78,165,000	\$135,874,000
• 2013-14	2,321,933,000	2,333,550,000				
Total estimated expenditures based on 2012-13 billing data for the period of July 2012 - June 2013						
• 2014-15				2,436,771,000		
Total Estimated prior-year estimated HCBS Waiver Expenditures						
Less 2013-14 Community Placement Plan (CPP) Placements, Deflections, Assessments and Continuation	-48,972,000			-27,816,000		
Social Security Income/State Supplementary Payment (SSI/SSP) Increase/Regional Center (RC) Savings	2,880,000			2,760,000		
• Annual Growth, New RC Consumers	\$39,409,000	\$53,543,000	\$14,134,000	\$52,049,000	-\$1,494,000	\$12,640,000
• 2013-14						
• 2013-14 Annual Growth	25,334,000	22,681,000	-2,653,000			
Add annual growth costs in 2013-14 for 2,817 consumers who will be new to the Regional Center (RC) system and added to the HCBS Waiver (2,817 x \$17,000 (annual cost/consumer) x .47362 (phase-in factor) = \$22,681,000).						
• 2012-13 Annual Growth, Continuation for RC Consumers Added in 2012-13	14,075,000	30,862,000	16,787,000			
• 2014-15						
• 2014-15 Annual Growth				27,405,000		
Add annual growth costs in 2014-15 for 3,010 consumers who will be new to the RC system and added to the HCBS Waiver in 2014-15 (3,010 x \$17,000 (annual cost/consumer) x .53557 (phase-in factor) = \$27,405,000).						
• 2013-14 Annual Growth, Continuation for RC Consumers Added in 2013-14				24,644,000		

Home and Community-Based Services Waiver

METHODOLOGY (continued):

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
<ul style="list-style-type: none"> • Increase of Waiver Base Growth, Existing RC Consumers <ul style="list-style-type: none"> • 2013-14 Waiver Base Growth • 2012-13 Waiver Base Growth Continuation • 2014-15 Increase of Waiver Base Growth • Increase of Waiver Base Growth Continuation • CPP <p>The 2013-14 estimated cost for the total number of HCBS Waiver-eligible CPP placements</p> <ul style="list-style-type: none"> • 2013-14 and 2014-15 <p>Total HCBS Waiver-billable costs for 194 consumers in 2013-14 and 134 consumers in 2014-15 Waiver-eligible consumers</p> • CPP Placement Continuation: <p>The estimated CPP Placement Continuation costs for the total number of HCBS Waiver-eligible placements</p> <p>2013-14 and 2014-15</p> <p>Total HCBS Waiver-billable costs for 179 Waiver-eligible consumers in 2013-14 and 194 in 2014-15.</p> • SSI/SSP Increase/RC Savings • AB 10 Minimum Wage Increase • Federal Labor Regulations • TOTAL EXPENDITURES • Federal Medical Assistance Percentage (FMAP) • Total Federal Financial Participation (FFP) • General Fund (GF) Match 	\$27,075,000 16,016,000 11,059,000 \$27,868,000 27,868,000 \$20,297,000 20,297,000 -\$2,880,000 \$0 \$0 \$2,387,610,000 50.00% \$1,193,805,000 \$1,193,805,000	\$24,622,000 12,826,000 11,796,000 \$15,012,000 15,012,000 \$12,804,000 12,804,000 -\$2,760,000 \$0 \$0 \$2,436,771,000 50.00% \$1,218,386,000 \$1,218,385,000	-\$2,453,000 -\$12,856,000 -\$7,493,000 \$120,000 \$0 \$0 \$49,161,000 \$24,581,000 \$24,580,000	\$27,170,000 \$10,332,000 13,424,000 13,746,000 \$10,332,000 10,332,000 \$12,924,000 12,924,000 -\$2,768,000 \$69,290,000 \$5,400,000 \$2,586,112,000 50.00% \$1,293,056,000 \$1,293,056,000	\$2,548,000 -\$4,680,000 \$120,000 -\$8,000 \$69,290,000 \$5,400,000 \$149,341,000 \$74,670,000 \$74,671,000	\$95,000 -\$17,536,000 -\$7,373,000 \$112,000 \$69,290,000 \$5,400,000 \$198,502,000 \$99,251,000 \$99,251,000

Home and Community-Based Services Waiver

METHODOLOGY (continued):

FUNDING:

HCBS Waiver reimbursements fund a broad array of Purchase of Services (POS) costs for eligible individuals. The expenditure of HCBS Waiver reimbursements are in all of the POS budget categories, except Medical Facilities.

CHANGE FROM PRIOR ESTIMATE:

Reflects the additional growth in HCBS Waiver eligible consumers and updated expenditures.

REASON FOR YEAR-TO-YEAR CHANGE:

Reflects the additional growth in HCBS Waiver eligible consumers and updated expenditures.

Home and Community-Based Services Waiver

Estimated Distribution in Purchase of Services

EXPENDITURES:

	FYI Only Estimated % of Costs	% of Actual 2012-13 Waiver	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
	Billable to HCBS Waiver	Expenditures by Budget Category						
Total Estimated HCBS Waiver-Billable Expenditures			\$2,387,610,000	\$2,436,771,000	\$49,161,000	\$2,586,112,000	\$149,341,000	\$198,502,000
GF Match			1,193,805,000	1,218,385,000	24,580,000	1,293,056,000	74,671,000	99,251,000
FFP (from DHCS)			1,193,805,000	1,218,386,000	24,581,000	1,293,056,000	74,670,000	99,251,000
FMAP			50.00%	50%		50.00%		
Purchase of Services								
Community Care Facilities	80%	32.08%	786,002,000	781,601,000	-4,401,000	805,545,000	23,944,000	19,543,000
GF Match			393,001,000	390,801,000	-2,200,000	402,773,000	11,972,000	9,772,000
FFP			393,001,000	390,800,000	-2,201,000	402,772,000	11,972,000	9,771,000
Day Programs	54%	19.87%	480,626,000	484,089,000	3,463,000	498,919,000	14,830,000	18,293,000
GF Match			240,313,000	242,045,000	1,732,000	249,460,000	7,415,000	9,147,000
FFP			240,313,000	242,044,000	1,731,000	249,459,000	7,415,000	9,146,000
Work Activity Program	60%	1.50%	38,679,000	36,622,000	-2,057,000	37,744,000	1,122,000	-935,000
GF Match			19,340,000	18,311,000	-1,029,000	18,872,000	561,000	-468,000
FFP			19,339,000	18,311,000	-1,028,000	18,872,000	561,000	-467,000
Supported Employment Placement (SEP) / Group	38%	1.18%	29,606,000	28,867,000	-739,000	29,751,000	884,000	145,000
GF Match			14,803,000	14,433,000	-370,000	14,875,000	442,000	72,000
FFP			14,803,000	14,434,000	-369,000	14,876,000	442,000	73,000
SEP / Individual	23%	0.17%	4,775,000	4,250,000	-525,000	4,380,000	130,000	-395,000
GF Match			2,387,000	2,125,000	-262,000	2,190,000	65,000	-197,000
FFP			2,388,000	2,125,000	-263,000	2,190,000	65,000	-198,000
Transportation	62%	6.38%	150,419,000	155,359,000	4,940,000	160,119,000	4,760,000	9,700,000
GF Match			75,209,000	77,679,000	2,470,000	80,059,000	2,380,000	4,850,000
FFP			75,210,000	77,680,000	2,470,000	80,060,000	2,380,000	4,850,000
Support Services	72%	25.14%	589,740,000	612,567,000	22,827,000	631,333,000	18,766,000	41,593,000
GF Match			294,870,000	306,284,000	11,414,000	315,667,000	9,383,000	20,797,000
FFP			294,870,000	306,283,000	11,413,000	315,666,000	9,383,000	20,796,000

Home and Community-Based Services Waiver

Estimated Distribution in Purchase of Services

EXPENDITURES

	FYI Only Estimated % of Costs Billable to HCBS Waiver	% of Actual 2011-12 Waiver Expenditures by Budget Category	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
In-Home Respite	71%	5.97%	133,945,000	145,460,000	11,515,000	149,916,000	4,456,000	15,971,000
<i>GF Match</i>			66,973,000	72,730,000	5,757,000	74,958,000	2,228,000	7,985,000
<i>FFP</i>			66,972,000	72,730,000	5,758,000	74,958,000	2,228,000	7,986,000
Out-of-Home Respite	62%	1.09%	28,174,000	26,610,000	-1,564,000	27,426,000	816,000	-748,000
<i>GF Match</i>			14,087,000	13,305,000	-782,000	13,713,000	408,000	-374,000
<i>FFP</i>			14,087,000	13,305,000	-782,000	13,713,000	408,000	-374,000
Health Care	21%	0.69%	10,505,000	16,797,000	6,292,000	17,311,000	514,000	6,806,000
<i>GF Match</i>			5,252,000	8,398,000	3,146,000	8,655,000	257,000	3,403,000
<i>FFP</i>			5,253,000	8,399,000	3,146,000	8,656,000	257,000	3,403,000
Miscellaneous	34%	5.93%	135,139,000	144,549,000	9,410,000	148,978,000	4,429,000	13,839,000
<i>GF Match</i>			67,570,000	72,274,000	4,704,000	74,489,000	2,215,000	6,919,000
<i>FFP</i>			67,569,000	72,275,000	4,706,000	74,489,000	2,214,000	6,920,000
AB 10 Minimum Wage Increase			0	0	0	69,290,000	69,290,000	69,290,000
<i>GF Match</i>			0	0	0	34,645,000	34,645,000	34,645,000
<i>FFP (from DHCS)</i>			0	0	0	34,645,000	34,645,000	34,645,000
Federal Labor Regulations			0	0	0	5,400,000	5,400,000	5,400,000
<i>GF Match</i>			0	0	0	2,700,000	2,700,000	2,700,000
<i>FFP (from DHCS)</i>			0	0	0	2,700,000	2,700,000	2,700,000

Home and Community-Based Services Waiver Administration

DESCRIPTION:

The Home and Community-Based Services (HCBS) Waiver enables the Department of Developmental Services (DDS) 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 (DSP) Staff:

Welfare and Institutions Code Section 4695.2, Statutes of 1998, mandates all DSPs working in licensed community care facilities (CCFs) to either pass competency tests or satisfactorily complete each of two consecutive 35-hour training segments within two years of the date of hire. The testing and training program is conducted through an Interagency Agreement (IA) with the Department of Education (DOE). This estimate of Operations costs covers the costs of challenge tests, and training through the IA with DOE.

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
Training for DSP Staff	\$2,305,000	\$2,318,000	\$13,000	\$2,318,000	\$0	\$13,000

- Total Cost for DSP Training is \$2,605,000
- 89% of the consumers residing in CCFs are HCBS Waiver eligible; therefore, it is assumed that 89% of the costs are eligible for federal financial participation (FFP).
 $\$2,605,000 \times .89 = \$2,318,000$
- The FFP portion of the HCBS Waiver Administration-eligible costs is 50%.
 $\$2,318,000 \times .50 = \$1,159,000$
- These costs are reflected in the DSP Training estimate, under Operations, Projects.

Home and Community-Based Services Waiver Administration**ASSUMPTIONS/METHODOLOGY (continued):**Collection (FFP) for Contracted Services

Regional center staff will renegotiate contracts with vendors, liaison with the Department of Developmental Services experts on changes required to expand and enhance existing billing options, train vendors and regional center personnel involved in the billing process to key enter necessary attendance and other required billing data from paper invoices submitted by vendors, and review, adjust and/or correct attendance data after it is uploaded to the Uniform Fiscal System to assure proper payment to vendors. These resources will allow the State to collect HCBS Waiver Administration reimbursements.

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
Staffing for Collection of FFP for Contracted Services	\$891,000	\$891,000	\$0	\$891,000	\$0	\$0

- Total Cost of Staffing for Collection of FFP for Contracted Services is \$2,228,000
- 40% of the total community population is HCBS Waiver eligible; therefore, it is assumed that 40% of the costs are eligible for FFP.
 $\$2,228,000 \times .40 = \$891,000$
- The FFP portion of the HCBS Waiver Administration-eligible costs is 50%.
 $\$891,000 \times .50 = \$445,000$
- These costs are reflected in the Staffing for Collection of FFP for Contracted Services under Operations, Staffing.

Home and Community-Based Services Waiver Administration**ASSUMPTIONS/METHODOLOGY (continued):**Collection of Federal Financial Participation (FFP) for Contracted Services

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

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
FFP Enhancement (related to 2003-04 Enhancing FFP BCP)						
<ul style="list-style-type: none"> Total RC Administrative Costs are \$7,737,000 100% of costs are eligible for FFP. The FFP portion of total HCBS Waiver Administration eligible costs is 50%. $\\$7,737,000 \times .50 = \\$3,869,000$ These costs are reflected under Operations, Core Staffing. 	\$7,510,000	\$7,737,000	\$227,000	\$7,737,000	\$0	\$227,000

2007-08 Legislative Augmentation: Resources for Health Care Community Specialists

Reimbursement related to Agnews Ongoing workload Health Care Community Specialists positions were moved from Medicaid Administration (MA) to HCBS Waiver Administration. 98% of the total personal services and operating expenses for the above positions were eligible for waiver.

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

- Total Cost for Resources for Health Care Community Specialist is \$724,000
- 98% of Agnews Consumers are HCBS Waiver eligible, therefore it is assumed that 98% of these costs are eligible for FFP.
 $\$724,000 \times .98 = \$710,000$
- The FFP portion of the HCBS Waiver Administration costs is 50%.
 $\$710,000 \times .50 = \$355,000$.
These costs are reflected under Operations, Agnews Ongoing Workload.

Home and Community-Based Services Waiver Administration

ASSUMPTIONS/METHODOLOGY (continued):

	Enacted Budget	Updated 2013-14	2013-14 Request	Updated 2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
Federal Medicaid Requirements for RC HCBS Services	\$984,000	\$984,000	\$0	\$984,000	\$0	\$0
<ul style="list-style-type: none"> Total Costs \$984,000 100% of costs are eligible for FFP. The FFP portion of the HCBS Waiver Administration costs is 50%. $\\$984,000 \times .50 = \\$492,000$ These costs are reflected in the Federal Medicaid Requirements for RC HCBS Services estimate under Operations, Federal Compliance. 						
Office of Administrative Hearings	\$1,280,000	\$1,310,000	\$30,000	\$1,310,000	\$0	\$30,000
<ul style="list-style-type: none"> Total Costs: \$2,910,000 45% of costs are eligible for FFP. $\\$2,910,000 \times .45 = \\$1,310,000$ The FFP portion of the HCBS Waiver Administration costs is 50%. $\\$1,310,000 \times .50 = \\$655,000$ These costs are reflected in the Office of Administrative Hearings estimate under Operations, Projects. 						
Clients' Rights Advocacy	\$2,448,000	\$2,530,000	\$82,000	\$2,606,000	\$76,000	\$158,000
<ul style="list-style-type: none"> Total Costs: CY \$5,623,000 BY \$5,792,000 45% of costs are eligible for FFP. CY: $\\$5,623,000 \times .45 = \\$2,530,000$ BY: $\\$5,792,000 \times .45 = \\$2,606,000$ The FFP portion of the HCBS Waiver Administration costs is 50%. CY: $\\$2,530,000 \times .50 = \\$1,265,000$ BY: $\\$2,606,000 \times .50 = \\$1,303,000$ These costs are reflected in the Clients' Rights Advocacy estimate under Operations, Projects. 						

Home and Community-Based Services Waiver Administration

ASSUMPTIONS/METHODOLOGY (continued):

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
Quality Assessment Contract	\$1,316,000	\$1,376,000	\$60,000	\$1,376,000	\$0	\$60,000
<ul style="list-style-type: none"> Total Costs \$3,058,000 45% of costs are eligible for FFP. \$3,058,000 x .45 = \$1,376,000 The FFP portion of the HCBS Waiver Administration costs is 50%. \$1,376,000 x .50 = \$688,000 <p>These costs are reflected in the Quality Assessment Contract estimate under Operations, Projects.</p>						
Special Incident Reporting/Risk Assessment	\$355,000	\$363,000	\$8,000	\$363,000	\$0	\$8,000
<ul style="list-style-type: none"> Total Costs \$807,000 45% of costs are eligible for FFP. \$807,000 x .45 = \$363,000 The FFP portion of the HCBS Waiver Administration costs is 50%. \$363,000 x .50 = \$182,000 <p>These costs are reflected in the Special Incident Reporting/Risk Assessment estimate under Operations, Projects.</p>						
<u>1.25 Percent Payment Reduction (2012-13)/Restoration (2013-14)</u>	\$174,000	\$0	-\$174,000	\$0	\$0	-\$174,000
<u>FY 2012-13 General Fund Savings Proposal</u>	-\$5,000,000	-\$5,000,000	\$0	-\$5,000,000	\$0	\$0

FUNDING:

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

CHANGE FROM PRIOR ESTIMATE:

Reflects updated expenditure data.

REASON FOR YEAR-TO-YEAR CHANGE:

Reflects updated expenditure data.

Home and Community-Based Services Waiver Administration**ASSUMPTIONS/METHODOLOGY (continued):**

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
EXPENDITURES:						
TOTAL	\$12,734,000	\$13,219,000	\$485,000	\$13,295,000	\$76,000	\$561,000
FFP	6,367,000	6,610,000	243,000	6,648,000	38,000	281,000
GF Match	6,367,000	6,609,000	242,000	6,647,000	38,000	280,000

Medicaid Administration

DESCRIPTION:

Clinical Support Teams and Senate Bill (SB) 1038 Health Reviews (Regional Center Operations Core Staffing, attachment A pages)

Clinical support teams ensure the regional centers' (RC) ability to adequately monitor the health care of consumers with severe behavior and/or medical problems; to provide health-related consultation to these consumers, their families, providers and other community health professionals; to ensure careful and complete mortality reviews for these consumers' deaths; and to ensure health care access and advocacy for these consumers.

In addition, clinical support teams complete yearly reviews of medications, health care plans and behavioral 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, Statutes of 1998), RC physicians and nurses (with clerical support) provide medical reviews for the remainder of the community consumers who are not getting medical reviews from the clinical support teams.

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

Compliance with Home and Community-Based Services (HCBS) Waiver Requirements (Regional Center Operations page E-3.5)

RC physicians and psychiatrists perform activities, including clinical consultation, monitoring and review of consumers' medications, to ensure the RC system maintains compliance with the HCBS Waiver.

Agnews Ongoing Workload (AOW) (Regional Center Operations page E-2.14)

RC physicians and psychiatrists perform activities, including clinical consultation, monitoring and review of consumers' medications, to ensure the RC system maintains compliance with the HCBS Waiver.

Consistent with passage of Assembly Bill 1378 (Chapter 538, Statutes of 2005) AOW employees will provide clinical support services to ensure the health and well being of Agnews residents as they transition into the community consistent with the Department of Developmental Services' (DDS) Interagency Agreement for MA with the Department of Health Care Services.

Nurse consultants will monitor consumer health care plans and health care for Agnews residents living in SB 962 homes. One dental coordinator at each of the Bay Area RC (RC of the East Bay, San Andreas RC and Golden Gate RC) will promote and coordinate dental resources for Agnews 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.

Medicaid Administration**METHODOLOGY:**

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
ASSUMPTIONS:						
<ul style="list-style-type: none"> Costs for Clinical Support Teams and SB 1038 Health Reviews are based on 2011-12 data collected from the RC's. 	\$14,892,000	\$9,266,000	-\$5,626,000	\$9,266,000	\$0	-\$5,626,000
<ul style="list-style-type: none"> <ul style="list-style-type: none"> Actual consumers receiving health reviews, 73% are Medicaid eligible; therefore, it is assumed that 73% of costs are eligible for MA reimbursement . 	0.73	0.73		0.73		
Total	\$10,871,160	\$6,764,180	\$0	\$6,764,180	\$0	-\$4,106,980
Rounded	\$10,871,000	\$6,764,000		\$6,764,000	\$0	-\$4,107,000
<ul style="list-style-type: none"> The Federal Financial Participation (FFP) portion of total MA-eligible costs is 75%. 	0.75	0.75		0.75		
Total	\$8,153,250	\$5,073,000	\$0	\$5,073,000	\$0	-\$3,080,250
Rounded	\$8,153,000	\$5,073,000		\$5,073,000	\$0	-\$3,080,000
<ul style="list-style-type: none"> Staffing for Compliance with HCBS Waiver Requirements 						
<ul style="list-style-type: none"> <ul style="list-style-type: none"> Total personal services and operating costs related to MA. 	\$2,641,000	\$2,711,000	\$70,000	\$2,711,000	\$0	\$70,000
<ul style="list-style-type: none"> <ul style="list-style-type: none"> 100% of these costs are eligible for MA because related staff will be working only with HCBS Waiver consumers. 	1.00	1.00		1.00		
Total	\$2,641,000	\$2,711,000	\$70,000	\$2,711,000	\$0	\$70,000
Rounded	\$2,641,000	\$2,711,000		\$2,711,000	\$0	\$70,000
<ul style="list-style-type: none"> The FFP portion of total MA-eligible costs is 75% . 	0.75	0.75		0.75		
Total	\$1,980,750	\$2,033,250	\$52,500	\$2,033,250	\$0	\$52,500
Rounded	\$1,981,000	\$2,033,000		\$2,033,000	\$0	\$53,000
<ul style="list-style-type: none"> Agnews Ongoing Workload 						
<ul style="list-style-type: none"> <ul style="list-style-type: none"> Nurse Consultants 						
<ul style="list-style-type: none"> <ul style="list-style-type: none"> <ul style="list-style-type: none"> Total personal services and operating costs related to MA. 	\$119,000	\$123,000	\$4,000	\$123,000	\$0	\$4,000
<ul style="list-style-type: none"> <ul style="list-style-type: none"> <ul style="list-style-type: none"> Consistent with the Community Placement Plan (CPP) assumptions, 98% of these cost are eligible for MA 	0.98	0.98		0.98		
Total	\$116,620	\$120,540	\$3,920	\$120,540	\$0	\$3,920
Rounded	\$117,000	\$121,000	\$4,000	\$121,000	\$0	\$4,000
<ul style="list-style-type: none"> <ul style="list-style-type: none"> The FFP portion of total MA-eligible costs is 75% . 	0.75	0.75		0.75		
Total	\$87,750	\$90,750	\$3,000	\$90,750	\$0	\$3,000
Rounded	\$88,000	\$91,000	\$3,000	\$91,000	\$0	\$3,000

Medicaid Administration

METHODOLOGY: (continued)

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15 2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
• State Employees in the Community						
• Total personal services and operating costs related to MA.	\$1,609,000	\$1,678,000	\$69,000	\$1,678,000	\$0	\$69,000
• Consistent with CPP assumptions, 98% of these costs are eligible for MA	0.98	0.98		0.98		
Total	\$1,576,820	\$1,644,440	\$0	\$1,644,440	\$0	\$67,620
Rounded	\$1,577,000	\$1,644,000	\$0	\$1,644,000	\$0	\$68,000
• The FFP portion of total MA-eligible costs is 75% .	0.75	0.75		0.75		
Total	\$1,182,750	\$1,233,000	\$0	\$1,233,000	\$0	\$50,250
Rounded	\$1,183,000	\$1,233,000	\$0	\$1,233,000	\$0	\$50,000
• Dental Coordinators						
• Total personal services and operating costs related to MA.	\$558,000	\$581,000	\$23,000	\$581,000	\$0	\$23,000
• Consistent with the CPP assumptions, 98% of these costs are eligible for MA (\$581,000 x .98 = \$569,000).	0.98	0.98		0.98		
Total	\$546,840	\$569,380	\$22,540	\$569,380	\$0	\$22,540
Rounded	\$547,000	\$569,000	\$23,000	\$569,000	\$0	\$23,000
• The FFP portion of total MA-eligible costs is 75% (\$569,000 x .75 = \$427,000).	0.75	0.75		0.75		
Total	\$410,250	\$426,750	\$16,500	\$426,750	\$0	\$16,500
Rounded	\$410,000	\$427,000	\$17,000	\$427,000	\$0	\$17,000

Medicaid Administration**METHODOLOGY: (continued)**

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
• Target Savings of \$270,000 (2009-10)						
• Total personal services and operating costs related to MA.	-\$270,000	-\$270,000	\$0	-\$270,000	\$0	\$0
• It is assumed that 100% of these costs are eligible for MA.	1.00	1.00		1.00		
Total	-\$270,000	-\$270,000	\$0	-\$270,000	\$0	\$0
Rounded	-\$270,000	-\$270,000	\$0	-\$270,000	\$0	\$0
• The FFP portion of total MA-eligible costs is 75% (-\$270,000 x .75 = -\$203,000).						
	0.75	0.75		0.75		
Total	-\$202,500	-\$202,500	\$0	-\$202,500	\$0	\$0
Rounded	-\$203,000	-\$203,000	\$0	-\$203,000	\$0	\$0

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 estimate, and Agnews Ongoing Workload.

CHANGE FROM PRIOR ESTIMATE:

The reimbursement amounts reflect updated RC personal services expenditures.

REASON FOR YEAR-TO-YEAR CHANGE:

No Change

EXPENDITURES:

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
TOTAL	\$15,483,000	\$11,539,000	-\$3,944,000	\$11,539,000	\$0	-\$3,944,000
FFP	11,612,000	8,654,000	-2,958,000	8,654,000	0	-2,958,000
GF Match	3,871,000	2,885,000	-986,000	2,885,000	0	-986,000

Targeted Case Management

DESCRIPTION:

The Targeted Case Management (TCM) program provides Medicaid federal matching funds for case management services provided by regional centers (RC) for specific client groups. There are approximately 170,000 Medi-Cal eligible persons in the RC system. 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 means that the cost for most of the RC case manager's time spent on Medi-Cal eligible developmentally disabled persons is eligible for federal financial participation (FFP).

KEY DATA/ASSUMPTIONS:

Source data is from the TCM RC Billed Units report dated September 4, 2013 for the period May 2012 - April 2013.

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
METHODOLOGY:						
• Base: TCM expenditures are based on actual TCM billable units for a 12-month period (May 2012 - April 2013) multiplied by the RC TCM rates effective July 2012 for Current Year (CY) and Budget Year (BY).	\$297,904,000	\$285,978,000	-\$11,926,000	\$285,978,000	\$0	-\$11,926,000
• AB 10 Minimum Wage Increase (Operations)	\$0	\$0	\$0	\$37,000	\$37,000	\$37,000
FFP	0	0	0	19,000	19,000	19,000
GF Match	0	0	0	18,000	18,000	18,000

FUNDING:

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

CHANGE FROM PRIOR ESTIMATE:

The reimbursement amounts reflect the most current billable units, TCM rates, and RC personnel costs.

REASON FOR YEAR-TO-YEAR CHANGE:

No Change.

EXPENDITURES:

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
TOTAL	\$297,904,000	\$285,978,000	-\$11,926,000	\$286,015,000	\$37,000	-\$11,889,000
FFP	148,952,000	142,989,000	-5,963,000	143,008,000	19,000	-5,944,000
GF Match	148,952,000	142,989,000	-5,963,000	143,007,000	18,000	-5,945,000

Targeted Case Management Administration

DESCRIPTION:

The Targeted Case Management (TCM) program provides Medicaid federal matching funds for case management services for specific client groups. There are approximately 170,000 Medi-Cal eligible persons in the regional center (RC) system. Federal legislation enacted in 1986 defined case management services as services which "...will assist individuals...in gaining access to needed medical, social, educational, and other services." This means that the cost for most of the RC 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.

ASSUMPTIONS:

- TCM Administration reimbursements will be 50% FFP.
- Source of Monthly Data: Department of Developmental Services' (DDS) Fiscal Systems - California State Accounting and Reporting System.

METHODOLOGY:

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
Utilizing a time survey, DDS gathers records of time spent by DDS headquarters personnel providing administrative case management assistance to the RC. These surveys are used to allocate headquarters salaries, wages and benefits and a portion of DDS' statewide cost allocation related to administrative case management support.	\$7,312,000	\$7,456,000	\$144,000	\$7,456,000	\$0	\$144,000

FUNDING:

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

CHANGE FROM PRIOR ESTIMATE:

Reflects the most current DDS allocation of costs related to administrative case management and support.

Targeted Case Management Administration

METHODOLOGY (continued):

REASON FOR YEAR-TO-YEAR CHANGE:

No Change.

EXPENDITURES:

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
TOTAL	\$7,312,000	\$7,456,000	\$144,000	\$7,456,000	\$0	\$144,000
FFP	3,656,000	3,728,000	72,000	3,728,000	0	72,000
GF Match	3,656,000	3,728,000	72,000	3,728,000	0	72,000

Title XX Block Grant

DESCRIPTION:

Social Services: The State has received federal Title XX Block Grant funds for social services since 1981. Each state has wide discretion in determining the range of services to be provided and how the funds are to be distributed. There is no state match requirement for these funds. In California, the program is administered by the California Department of Social Services (DSS).

Federal statute establishes five service goals:

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

Temporary Assistance for Needy Families (TANF): These Title XX Block Grant funds are available for regional center expenditures for individuals under age 18 whose family income is less than 200 percent of the income official 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 of Developmental Services portion of the Title XX Block Grant is determined by the DSS.

Title XX Block Grant**ASSUMPTIONS/METHODOLOGY (Cont'd):****FUNDING:**

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

CHANGE FROM PRIOR ESTIMATE:

No Change.

REASON FOR YEAR-TO-YEAR CHANGE:

No Change.

EXPENDITURES:	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
TOTAL TITLE XX BLOCK GRANT	\$213,191,000	\$213,191,000	\$0	\$213,191,000	\$0	\$0
SOCIAL SERVICES	\$136,034,000	\$136,034,000	\$0	\$136,034,000	\$0	\$0
ESTIMATED DISTRIBUTION IN RC PURCHASE OF SERVICES						
<i>Day Programs</i>	<i>46,880,000</i>	<i>46,389,000</i>	<i>-491,000</i>	<i>46,389,000</i>	<i>0</i>	<i>-\$491,000</i>
<i>Transportation</i>	<i>5,641,000</i>	<i>6,314,000</i>	<i>673,000</i>	<i>6,314,000</i>	<i>0</i>	<i>\$673,000</i>
<i>Support Services</i>	<i>54,153,000</i>	<i>58,615,000</i>	<i>4,462,000</i>	<i>58,615,000</i>	<i>0</i>	<i>\$4,462,000</i>
<i>In-Home Respite</i>	<i>18,488,000</i>	<i>18,371,000</i>	<i>-117,000</i>	<i>18,371,000</i>	<i>0</i>	<i>-\$117,000</i>
<i>Out-of-Home Respite</i>	<i>3,977,000</i>	<i>1,746,000</i>	<i>-2,231,000</i>	<i>1,746,000</i>	<i>0</i>	<i>-\$2,231,000</i>
<i>Miscellaneous Services</i>	<i>6,895,000</i>	<i>4,599,000</i>	<i>-2,296,000</i>	<i>4,599,000</i>	<i>0</i>	<i>-\$2,296,000</i>

Title XX Block Grant

EXPENDITURES (Cont'd):	Enacted	Updated	2013-14		2014-15	2014-15
	Budget	2013-14	Request	2014-15	Over 2013-14	Over Enacted Budget
TANF	\$77,157,000	\$77,157,000	\$0	\$77,157,000	\$0	\$0
ESTIMATED DISTRIBUTION IN RC PURCHASE OF SERVICES						
Community Care Facilities	9,975,000	6,956,000	-3,019,000	6,956,000	0	-3,019,000
Day Programs	1,518,000	55,000	-1,463,000	55,000	0	-1,463,000
Habilitation Services	2,000	0	-2,000	0	0	-2,000
Transportation	668,000	1,141,000	473,000	1,141,000	0	473,000
Support Services	14,090,000	13,453,000	-637,000	13,453,000	0	-637,000
In-Home Respite	13,870,000	14,758,000	888,000	14,758,000	0	888,000
Out-of-Home Respite	3,408,000	4,686,000	1,278,000	4,686,000	0	1,278,000
Health Care	952,000	1,222,000	270,000	1,222,000	0	270,000
Miscellaneous Services	32,674,000	34,886,000	2,212,000	34,886,000	0	2,212,000

Intermediate Care Facility-Developmentally Disabled State Plan Amendment

DESCRIPTION:

In 2007, the Department of Developmental Services (DDS), in conjunction with the Department of Health Care Services (DHCS), submitted a State Plan Amendment (SPA) seeking federal financial participation (FFP) in the day program and transportation services for residents of Intermediate Care Facility-Developmentally Disabled (ICF-DD) residents. DDS reached agreement with the Centers for Medicare and Medicaid Services (CMS) on the mechanism to achieve the already budgeted FFP for 2007-08 through 2010-11, which was reflected in the 2010-11 Budget Bill Trailer Language. The SPA was approved April 14, 2011 by CMS.

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 an estimate of expenditures using actual expenditures for Fiscal Year (FY) 2011-12.

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
Estimated day and transportation costs for ICF-DD residents	\$116,385,000	\$116,385,000	\$0	\$116,385,000	\$0	\$0

Intermediate Care Facility-Developmentally Disabled State Plan Amendment

FUNDING:

Funding for ICF-DDs is 50 percent Federal Financial Participation (FFP) and 50 percent General Fund (GF) for Day Treatment and Transportation Services for consumers residing in an ICF-DD. It is assumed that 75 percent of this funding is for Day Programs and the remaining 25 percent for Transportation services. This funding is reflected under Purchase of Services for Day Programs and Transportation.

CHANGE FROM PRIOR ESTIMATE:

No Change

REASON FOR YEAR-TO-YEAR CHANGE:

No Change

EXPENDITURES:

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
TOTAL	\$116,385,000	\$116,385,000	\$0	\$116,385,000	\$0	\$0
FFP	58,193,000	58,193,000	0	58,193,000	0	0
GF Match	58,192,000	58,192,000	0	58,192,000	0	0
Day Programs	\$87,809,000	\$87,809,000	\$0	\$87,809,000	\$0	\$0
FFP	43,905,000	43,905,000	0	43,905,000	0	0
GF Match	43,904,000	43,904,000	0	43,904,000	0	0
Transportation	\$28,576,000	\$28,576,000	\$0	\$28,576,000	\$0	\$0
FFP	14,288,000	14,288,000	0	14,288,000	0	0
GF Match	14,288,000	14,288,000	0	14,288,000	0	0

Quality Assurance Fees (Regional Center Costs and ICF-DD Vendor Costs)

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 regional centers (RC) 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:

- RC Administration costs are 1.5% of the day treatment and transportation expenditures for residents of ICF-DD facilities.
- Source of Data: POS costs for day treatment and transportation for residents of ICF-DD facilities.
- ICF-DD Administration costs are 1.5% of the RC administrative cost of day treatment and transportation for residents of ICF-DD facilities. The QAF is set by DHCS. It is currently at 6%.

2013-14: Total billing costs: \$1.7 million for RC administration (Operations), \$1.8 million for ICF-DD administration, and \$7.6 million QAF.

- POS costs for day treatment and transportation for 2013-14 totals \$116.4 million. RC administrative fee is 1.5% of the ICF-DD residents day treatment and transportation, and ICF-DD administration costs are each 1.5% of the RC administrative fee. The QAF is set by DHCS are \$9.4 million.

2014-15: Total billing costs: \$1.7 million for RC administration (Operations), \$1.8 million for ICF-DD administration, and \$7.6 million QAF.

- POS costs for day treatment and transportation for 2014-15 totals \$116.4 million. RC administrative fee is 1.5% of the ICF-DD residents day treatment and transportation costs and ICF-DD administration costs are each 1.5% of the RC administrative fee. The QAF is set by DHCS.

FUNDING:

Funding for RC Administration fees is 50% FFP and 50% GF and are reflected in ICF-DD Administration Fee in Operations, page E-4.8. QAF is 100% FFP with the GF Match in DHCS Budget, and are reflected in POS, page E-15.

CHANGE FROM PRIOR ESTIMATE:

No Change

REASON FOR YEAR-TO-YEAR CHANGE:

No Change

Quality Assurance Fees (Regional Center Costs and ICF-DD Vendor Costs)

EXPENDITURES:

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
TOTAL	\$11,169,000	\$11,169,000	\$0	\$11,169,000	\$0	\$0
Operations	1,745,000	1,745,000	0	1,745,000	0	0
General Fund	872,000	872,000	0	872,000	0	0
<i>General Fund Match</i>	872,000	872,000	0	872,000	0	0
Reimbursements	873,000	873,000	0	873,000	0	0
<i>FFP (Quality Assurance Fees)</i>	873,000	873,000	0	873,000	0	0
Purchase of Services	9,424,000	9,424,000	0	9,424,000	0	0
<i>QAF Admin Fees (FFP)</i>	4,712,000	4,712,000	0	4,712,000	0	0
<i>Transfer from DHCS (FFP)</i>	4,712,000	4,712,000	0	4,712,000	0	0

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
TOTAL	\$11,169,000	\$11,169,000	\$0	\$11,169,000	\$0	\$0
FFP	10,297,000	10,297,000	0	10,297,000	0	0
GF Match	872,000	872,000	0	872,000	0	0

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 (HCBS) 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 of Developmental Services (DDS) in a joint effort with the Department of Health Care Services (DHCS), submitted a 1915(i) State Plan Amendment (SPA) 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 DDS to seek further expansion of the services covered under the 1915(i) SPA. The initial SPA was approved April 25, 2013 with an effective date of October 1, 2009. DDS continues to work with DHCS and the Centers for Medicare and Medicaid Services to finalize the remaining components of the SPA.

ASSUMPTIONS:

Estimated expenditures of \$335.7 million in 2013-14 and \$350.8 million in 2014-15 are based on actual expenditures for Fiscal Year 2012-13.

FUNDING:

1915(i) SPA funds a broad array of purchase of service (POS) costs for eligible individuals. The 1915(i) SPA expenditures are 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 (FMAP) of 50% and 50% General Fund (GF).

CHANGE FROM PRIOR ESTIMATE:

No Change

REASON FOR YEAR-TO-YEAR CHANGE:

Reflects AB 10 minimum wage increase and Federal Labor Regulations in budget year 2014-15.

EXPENDITURES:	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15	2014-15
					Over 2013-14	Over Enacted Budget
TOTAL EXPENDITURES	\$335,684,000	\$335,684,000	\$0	\$364,522,000	\$28,838,000	\$28,838,000
GF Match	\$167,842,000	\$167,842,000	\$0	\$182,261,000	\$14,419,000	\$14,419,000
FFP	\$167,842,000	\$167,842,000	\$0	\$182,261,000	\$14,419,000	\$14,419,000

1915(i) State Plan Amendment**Estimated Distribution in Purchase of Services**

EXPENDITURES:		% of Expenditures by Budget Category	Enacted	Updated	2013-14	2014-15	2014-15	2014-15
			Budget	2013-14	Request	2014-15	2013-14	Over Enacted Budget
TOTAL EXPENDITURES			\$335,684,000	\$335,684,000	\$0	\$364,522,000	\$28,838,000	\$28,838,000
	<i>GF Match</i>		167,842,000	167,842,000	0	182,261,000	14,419,000	14,419,000
	<i>FFP</i>		167,842,000	167,842,000	0	182,261,000	14,419,000	14,419,000
	Community Care Facilities	17.83%	\$52,306,000	\$59,854,000	\$7,548,000	\$62,548,000	\$2,694,000	\$10,242,000
	<i>GF Match</i>		26,153,000	29,927,000	3,774,000	31,274,000	1,347,000	5,121,000
	<i>FFP</i>		26,153,000	29,927,000	3,774,000	31,274,000	1,347,000	5,121,000
	Day Programs	24.31%	\$82,243,000	\$81,603,000	-\$640,000	\$85,274,000	\$3,671,000	\$3,031,000
	<i>GF Match</i>		41,121,000	40,802,000	-319,000	42,637,000	1,835,000	1,516,000
	<i>FFP</i>		41,122,000	40,801,000	-321,000	42,637,000	1,836,000	1,515,000
	Habilitation	13.52%	\$45,934,000	\$45,390,000	-\$544,000	\$47,433,000	\$2,043,000	\$1,499,000
	<i>GF Match</i>		22,967,000	22,695,000	-272,000	23,717,000	1,022,000	750,000
	<i>FFP</i>		22,967,000	22,695,000	-272,000	23,716,000	1,021,000	749,000
	Transportation	7.20%	\$24,320,000	\$24,153,000	-\$167,000	\$25,240,000	\$1,087,000	\$920,000
	<i>GF Match</i>		12,160,000	12,076,000	-84,000	12,620,000	544,000	460,000
	<i>FFP</i>		12,160,000	12,077,000	-83,000	12,620,000	543,000	460,000
	Support Services	21.28%	\$73,105,000	\$71,429,000	-\$1,676,000	\$74,643,000	\$3,214,000	\$1,538,000
	<i>GF Match</i>		36,552,000	35,715,000	-837,000	37,322,000	1,607,000	770,000
	<i>FFP</i>		36,553,000	35,714,000	-839,000	37,321,000	1,607,000	768,000
	In-Home Respite	4.86%	\$16,846,000	\$16,304,000	-\$542,000	\$17,038,000	\$734,000	\$192,000
	<i>GF Match</i>		8,423,000	8,152,000	-271,000	8,519,000	367,000	96,000
	<i>FFP</i>		8,423,000	8,152,000	-271,000	8,519,000	367,000	96,000

1915(i) State Plan Amendment**Estimated Distribution in Purchase of Services**

EXPENDITURES:	% of Expenditures by Budget Category	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over	2014-15 Over
						2013-14	Enacted Budget
Out-of-Home Respite	0.52%	\$3,323,000	\$1,754,000	-\$1,569,000	\$1,833,000	\$79,000	-\$1,490,000
<i>GF Match</i>		1,662,000	877,000	-785,000	916,000	39,000	-746,000
<i>FFP</i>		1,661,000	877,000	-784,000	917,000	40,000	-744,000
Health Care	2.23%	\$7,646,000	\$7,489,000	-\$157,000	\$7,826,000	\$337,000	\$180,000
<i>GF Match</i>		3,823,000	3,744,000	-79,000	3,913,000	169,000	90,000
<i>FFP</i>		3,823,000	3,745,000	-78,000	3,913,000	168,000	90,000
Miscellaneous	8.25%	\$29,961,000	\$27,708,000	-\$2,253,000	\$28,955,000	\$1,247,000	-\$1,006,000
<i>GF Match</i>		14,981,000	13,854,000	-1,127,000	14,477,000	623,000	-504,000
<i>FFP</i>		14,980,000	13,854,000	-1,126,000	14,478,000	624,000	-502,000
AB 10 Minimum Wage Increase		\$0	\$0	\$0	\$12,136,000	\$12,136,000	\$12,136,000
<i>GF Match</i>		0	0	0	\$6,068,000	6,068,000	6,068,000
<i>FFP</i>		0	0	0	\$6,068,000	6,068,000	6,068,000
Federal Labor Regulations		\$0	\$0	\$0	1,596,000	\$1,596,000	\$1,596,000
<i>GF Match</i>		0	0	0	798,000	798,000	798,000
<i>FFP</i>		0	0	0	798,000	798,000	798,000

Money Follows the Person Grant Operations

DESCRIPTION:

The Department of Health Care Services 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.

ASSUMPTIONS:

The MFP Grant will fund regional center transition coordination activities for the following:

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
• Quality of Life (QoL) Surveys	\$0	\$26,000	\$26,000	\$26,000	\$0	\$26,000
It is assumed that each regional center will complete three QoL surveys per consumer who has transitioned from a developmental center into the community and whose POS is funded by MFP.						
<i>Funding:</i>						
<i>FFP</i>	0	26,000	26,000	26,000	0	26,000
<i>GF Match</i>	0	0	0	0	0	0
• Lanterman Developmental Center Closure, see Page E-2.16.	\$3,537,000	\$3,537,000	\$0	\$2,624,000	-\$913,000	-\$913,000
<i>Funding:</i>						
<i>FFP</i>	2,653,000	2,653,000	0	1,968,000	-685,000	-685,000
<i>GF Match</i>	884,000	884,000	0	656,000	-228,000	-228,000
• Community Placement Plan, Resource Development, see Pages E-18.5 and E-18.6.	\$5,000,000	5,441,000	441,000	\$6,354,000	913,000	\$1,354,000
<i>Funding:</i>						
<i>FFP</i>	3,750,000	4,081,000	331,000	4,766,000	685,000	1,016,000
<i>GF Match</i>	1,250,000	1,360,000	110,000	1,588,000	228,000	338,000

FUNDING:

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

CHANGE FROM PRIOR ESTIMATE:

Reflects the addition of costs related to Quality of Life Surveys and updated expenditures for Money Follows the Person Grant.

REASON FOR YEAR-TO-YEAR CHANGE:

No change.

EXPENDITURES:

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2015-15 Over Enacted Budget
TOTAL	\$8,537,000	\$9,004,000	\$467,000	\$9,004,000	\$0	\$467,000
<i>FFP</i>	6,403,000	6,760,000	357,000	6,760,000	0	357,000
<i>GF Match</i>	2,134,000	2,244,000	110,000	2,244,000	0	110,000

Money Follows the Person Grant Purchase of Services

DESCRIPTION:

The Department of Health Care Services 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.

ASSUMPTIONS:

The MFP Grant will fund regional center purchased consumer services as follows:

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
<ul style="list-style-type: none"> Community Placement Plan, Purchase of Services, see Page E-18.3. 	\$6,667,000	\$5,960,000	-\$707,000	\$6,172,000	\$212,000	-\$495,000
<i>Funding:</i>						
<i>FFP</i>	5,000,000	2,980,000	-2,020,000	3,086,000	106,000	-1,914,000
<i>GF Match</i>	1,667,000	2,980,000	1,313,000	3,086,000	106,000	1,419,000
<ul style="list-style-type: none"> Community Care Facilities (transition from Lanterman Developmental Center), see Pages E-5.1 through E-5.3. 	4,619,000	2,950,000	-1,669,000	3,054,000	104,000	-1,565,000
<i>Funding:</i>						
<i>FFP</i>	3,464,000	1,475,000	-1,989,000	1,527,000	52,000	-1,937,000
<i>GF Match</i>	1,155,000	1,475,000	320,000	1,527,000	52,000	372,000

FUNDING:

The MFP Grant allows for an enhanced FMAP of 75% with expenditures for transitioning consumers funded 50% FFP under the HCBS Waiver and only the additional 25% enhanced FMAP reflected under MFP.

CHANGE FROM PRIOR ESTIMATE:

Reflects updated expenditures for the Money Follows the Person Grant

REASON FOR YEAR-TO-YEAR CHANGE:

Reflects updated expenditures for Money Follows the Person Grant.

EXPENDITURES:

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
TOTAL	\$11,286,000	\$8,910,000	-\$2,376,000	\$9,226,000	\$316,000	-\$2,060,000
<i>FFP</i>	8,464,000	4,455,000	-4,009,000	4,613,000	158,000	-3,851,000
<i>GF Match</i>	2,822,000	4,455,000	1,633,000	4,613,000	158,000	1,791,000

**Money Follows the Person Grant
Total****EXPENDITURES:**

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
TOTAL	\$19,823,000	\$17,914,000	-\$1,909,000	\$18,230,000	\$316,000	-\$1,593,000
FFP	14,867,000	11,215,000	-3,652,000	11,373,000	158,000	-3,494,000
GF Match	4,956,000	6,699,000	1,743,000	6,857,000	158,000	1,901,000

Homeland Security Grant Program

DESCRIPTION:

The Homeland Security Grant Program (HSGP), administered by the California Emergency Management Agency, is comprised of five interconnected grants that support the implementation of State Homeland Security Strategies to address the identified planning, organization, equipment, training, and exercise needs to prevent, protect against, respond to, and recover from acts of terrorism and other catastrophic events.

ASSUMPTIONS/METHODOLOGY:

The Department of Development Services' (DDS) portion of the HSGP award is determined by the U.S. Department of Homeland Security Federal Emergency Management Agency and will fund equipment, training, and exercise needs to prevent, protect against, respond to, and recover from acts of terrorism and other catastrophic events at specific regional centers (RC's).

FUNDING:

The HSGP award is 100% reimbursement from the California Emergency Management Agency.

CHANGE FROM PRIOR ESTIMATE:

No change.

REASON FOR YEAR-TO-YEAR CHANGE:

No change.

EXPENDITURES:

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
Grant Amount Allocation:	\$391,000	\$391,000	\$0	\$391,000	\$0	\$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 of Developmental Services has submitted a State Plan Amendment (SPA) that will cover some regional center funded services that are not eligible for federal reimbursement under other Medicaid funded programs.

ASSUMPTIONS:

Estimates based on actual expenditures for the period of July 2012 through June 2013, with an implementation date of October 1, 2012.

FUNDING:

Funding for EPSDT services is 50% Federal Financial Participation (FFP) and 50% General Fund.

CHANGE FROM PRIOR ESTIMATE:

Reflects updated expenditures

REASON FOR YEAR-TO-YEAR CHANGE:

No Change.

EXPENDITURES:		Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over	2014-15 Over
						2013-14	Enacted Budget
	TOTAL EXPENDITURES	\$35,174,000	\$31,889,000	-\$3,285,000	\$31,889,000	\$0	-\$3,285,000
	GF Match	17,587,000	15,944,000	-1,643,000	15,944,000	0	-1,643,000
	FFP	17,587,000	15,945,000	-1,642,000	15,945,000	0	-1,642,000

Early Periodic Screening Diagnosis and Treatment

Estimated Distribution in Purchase of Services

EXPENDITURES:		% of Expend. by Budget Category	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
TOTAL EXPENDITURES			\$35,174,000	\$31,889,000	-\$3,285,000	\$31,889,000	\$0	-\$3,285,000
	GF Match		17,587,000	15,944,000	-1,643,000	15,944,000	0	-1,643,000
	FFP		17,587,000	15,945,000	-1,642,000	15,945,000	0	-1,642,000
	Day Programs	100.00%	\$35,174,000	\$31,889,000	-\$3,285,000	\$31,889,000	\$0	-\$3,285,000
	GF Match		17,587,000	15,944,000	-1,643,000	15,944,000	0	-1,643,000
	FFP		17,587,000	15,945,000	-1,642,000	15,945,000	0	-1,642,000

Race to the Top

DESCRIPTION:

The Race to the Top -- Early Learning Challenge focuses on improving California early learning and development programs and increases access to high-quality programs for high-needs children, birth to five years. As a participating state agency, the Department of Developmental Services (DDS) will facilitate and provide leadership on interagency coordination across childhood initiatives; participate with statewide efforts; and, coordinate best practices in developmental and health screening at the local level.

ASSUMPTIONS:

DDS via interagency agreement with the Department of Education (DOE) will receive a federal grant totaling \$1,000,000 over 3-1/2 years (July 1, 2012 - December 31, 2016). Grant award funds will be allocated as follows:

2012-13:	\$44,000
2013-14:	\$472,000
2014-15:	\$341,000
2015-16:	\$143,000

FUNDING:

Funding for Race to the Top is reflected under Early Start/Part C: Other Agency costs

CHANGE FROM PRIOR ESTIMATE:

Reflects reallocation of grant funds

REASON FOR YEAR-TO-YEAR CHANGE:

Reflects reallocation of grant funds

EXPENDITURES:

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
Grant Allocation	\$286,000	\$472,000	\$186,000	\$341,000	-\$131,000	\$55,000

Program Development Fund/Parental Fees

DESCRIPTION:

Parents of children under the age of 18 years who receive 24-hour out-of-home services provided by the State or purchased with State funds through a regional center are required to pay a fee depending on their ability to pay. Parents of children under the age of 18 years who live at home and receive qualifying services from a regional center whose adjusted gross family income is at or above 400 percent of the federal poverty level are required to pay an annual fee. The purpose of the Program Development Fund (PDF) is to provide resources needed to initiate new programs which are consistent with the State Plan (Welfare and Institutions Code Sections 4677, 4782, and 4785).

ASSUMPTIONS/METHODOLOGY:

PDF amounts are based on current information regarding projected revenues.

FUNDING:

Expenditure of PDF funds is reflected in the Purchase of Services, Miscellaneous Services estimate.

CHANGE FROM PRIOR ESTIMATE:

Reflects an update of revenues for Parental Fee based upon the net effect of a declining number of individuals in the Parental Fee Program and a proposed fee increase based on recently updated United States Department of Agriculture average costs to raise a child.

EXPENDITURES:

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
Parental Fees	\$2,067,000	\$2,005,000	-\$62,000	\$1,905,000	-\$100,000	-\$162,000
Annual Family Program Fees	3,903,000	3,903,000	0	3,903,000	0	0
TOTAL	\$5,970,000	\$5,908,000	-\$62,000	\$5,808,000	-\$100,000	-\$162,000

Developmental Disabilities Services Account**DESCRIPTION:**

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

ASSUMPTIONS:

DDS expects to receive housing proposals totaling \$150,000 in application fees.

FUNDING:

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

CHANGE FROM PRIOR ESTIMATE:

No change.

REASON FOR YEAR-TO-YEAR CHANGE:

No change.

EXPENDITURES:

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
TOTAL	\$150,000	\$150,000	\$0	\$150,000	\$0	\$0

Mental Health Services Fund

DESCRIPTION:

Initiative Statute (Proposition 63) 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 Mental Health Services Act (MHSA - Proposition 63), the Department of Developmental Services, in consultation with the California 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 will be used to implement services and trainings to more effectively address consumers who are dually diagnosed. Specifically, these funds will provide the following ongoing components at the local level:

METHODOLOGY:	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
• Regional Best Practice Training	\$675,000	\$675,000	\$0	\$675,000	\$0	\$0
• Regional Center Technical Assistance and Liaison Support	65,000	65,000	0	65,000	0	0
• TOTAL EXPENDITURES	\$740,000	\$740,000	\$0	\$740,000	\$0	\$0

FUNDING:

These funds are reflected in the Increased Access to Mental Health Services estimate, under Regional Center Operations, Projects.

CHANGE FROM PRIOR ESTIMATE:

No change

REASON FOR YEAR-TO-YEAR CHANGE:

No change

EXPENDITURES:

TOTAL	\$740,000	\$740,000	\$0	\$740,000	\$0	\$0
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Early Start Part C Grant, Federal Funds

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 with developmental delays, disabilities, or conditions, which place them at high risk of disabilities from birth to under age 3 years. The program, known as Early Start in California, is administered according to Title 34 of the Code of Federal Regulations, Sections 303.1 through 303.734. The program is also administered according to the California Early Intervention Services Act and State regulations found in Title 17 of the California Code of Regulations, Sections 52000 through 52175. California has designated the Department of Developmental Services (DDS) to act as its lead agency for preparing the annual grant application and for receiving and administering the federal funds. DDS allocates a significant portion of the federal funding to regional centers (RC) for local program operation. Also, DDS has an interagency agreement with CDE to provide funding for local education agency programs and services, in accordance with the California Early Intervention Services Act, contained in Title 14 of the Government Code (GC), Sections 95000 through 95029.

KEY DATA/ASSUMPTIONS:

Federal Office of Special Education Programs (OSEP) grant award letter Part C Allocation Table dated July 10, 2013.

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 disbursed in this order (1) other agencies, and (2) RC 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.

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
• Other Agencies	\$17,320,000	\$17,357,000	\$37,000	\$17,357,000	\$0	\$37,000
• CDE: Additional federal requirements include shorter time lines for conducting evaluation, 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.	13,898,000	13,898,000	0	13,898,000	0	0

Early Start Part C Grant, Federal Funds

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
METHODOLOGY (continued):						
<ul style="list-style-type: none"> System Requirements: Funding is required for public awareness and a comprehensive system of personnel development, mediation and due process hearings conducted by the State Office of Administrative Hearings, and collaboration with Department of Health Care Services' Children's Medical Services. 	850,000	850,000	0	850,000	0	0
<ul style="list-style-type: none"> Family Resource Centers (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. 	2,572,000	2,609,000	37,000	2,609,000	0	37,000
<ul style="list-style-type: none"> RC 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 2012-13 by budget category. 	\$30,701,000	\$30,701,000	\$0	\$30,701,000	\$0	\$0
Day Programs	17,595,000	17,595,000	0	17,595,000	0	0
Support Services	497,000	497,000	0	497,000	0	0
In-Home Respite	0	0	0	0	0	0
Out-of-Home Respite	0	0	0	0	0	0
Health Care	2,726,000	2,726,000	0	2,726,000	0	0
Miscellaneous Services	9,883,000	9,883,000	0	9,883,000	0	0
<ul style="list-style-type: none"> TOTAL EXPENDITURES 	\$48,021,000	\$48,058,000	\$37,000	\$48,058,000	\$0	\$37,000

Early Start Part C Grant, Federal Funds**CHANGE FROM PRIOR ESTIMATE:**

No change.

REASON FOR YEAR-TO-YEAR CHANGE:

No change.

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.

EXPENDITURES:

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
TOTAL	\$48,021,000	\$48,058,000	\$37,000	\$48,058,000	\$0	\$37,000
Grant	48,021,000	48,058,000	37,000	48,058,000	0	37,000

Foster Grandparent Program

DESCRIPTION:

The Foster Grandparent Program (FGP) is a federal grant that gives men and women, 60 years of age and older, the opportunity to serve their community by sharing their time and attention with children under the age of 22 years who have developmental disabilities. Foster grandparents volunteer in community schools, developmental centers, Head Start centers, foster homes and pre-schools (see Regional Center (RC) Operations, Projects, for more detail on the total RC costs for this program).

ASSUMPTIONS/METHODOLOGY:

The FGP grant is used as a fund source for specified RC operations costs in five RC's: Valley Mountain, Tri-Counties, Kern, Central Valley and San Andreas.

FUNDING:

These federal funds are reflected in the Foster Grandparent/Senior Companion Programs estimate, under RC Operations, Projects.

CHANGE FROM PRIOR ESTIMATE:

Reflects updated information on grant amount.

REASON FOR YEAR-TO-YEAR CHANGE:

Reflects the transfer of funding from the Developmental Centers Program to the community.

EXPENDITURES:

	Enacted Budget	Updated 2013-14	2013-14 Request	2014-15	2014-15 Over 2013-14	2014-15 Over Enacted Budget
Grant Amount Allocation :	\$597,000	\$597,000	\$0	\$713,000	\$116,000	\$116,000

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SECTION F: IMPACT FROM OTHER DEPARTMENTS

<i>IMPACT FROM OTHER DEPARTMENTS</i>	<i>F-1</i>
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Impact from Other Departments

DESCRIPTION:

Prior reductions to the Department of Health Care Services (DHCS) Medi-Cal services for enteral nutrition products and adult dental for adults 21 years of age or older impacted the Department of Developmental Services (DDS). With these funding reductions from DHCS, regional centers became the payer of these services for DDS consumers. Assembly Bill 82, Chapter 23, Statutes of 2013 authorizes DHCS to restore as a covered Medi-Cal benefit the purchase of enteral nutrition products beyond those administered through a feeding tube and to partially restore dental services for adults 21 years of age or older. The restoration of these benefits is effective May 1, 2014.

ASSUMPTIONS:

In Fiscal Year 2012-13 DDS expended an estimated \$3.1 million GF providing dental services for adults 21 years of age and older, and based upon DHCS' estimate, DDS expenditures for dental services can be reduced by 53.35% or \$1.6 million. In addition, DDS received \$1.5 million GF to cover the cost of providing enteral nutrition products to DDS consumers. The restoration of these benefits is effective May 1, 2014, and as a result, DDS will reduce its funding by \$3.1 million GF effective July 1, 2014.

METHODOLOGY:

2014-15

• DHCS Restoration of Enteral Nutrition	-\$1,500,000
• DHCS Adult Dental.	-\$1,633,000
• TOTAL EXPENDITURES:	-\$3,133,000

EXPENDITURES:

TOTAL	-\$3,133,000
GF	-\$3,133,000
<i>GF Other</i>	-3,133,000

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SECTION G: AUXILLARY TABLE

ASSEMBLY BILL (AB) 10 AND FEDERAL OVERTIME REQUIREMENTS

AB 10 Operations	G-1.1
AB 10 Purchase of Services.....	G-2.1
Federal Labor Regulations	G-3.1

Assembly Bill (AB) 10, Minimum Wage Increase *Operations*

DESCRIPTION:

AB 10, Chapter 351, Statutes of 2013 increases the minimum wage, on and after July 1, 2014, from \$8 per hour to \$9 per hour. This bill further increases the minimum wage, on and after January 1, 2016, from \$9 per hour to \$10 per hour. This minimum wage increase will apply to positions in Core Staffing that are budgeted at minimum wage. The positions that requires additional funding are Account Clerks.

ASSUMPTIONS:

Cost were estimated based on the budgeted salary for Account Clerks (see page E-2.8 Attachment A, Operations).

METHODOLOGY:

2014-15

Total Expenditures

\$136,000

FUNDING:

Expenditures for the minimum wage increase are funded by Targeted Case Management (TCM) and General Fund (GF) with 50% Federal Financial Participation (FFP) and 50% GF. The State GF Other portion is that which is non-FFP.

CHANGE FROM PRIOR ESTIMATE:

This is a new major assumption, with estimated full-year costs in budget year 2014-15.

EXPENDITURES:

2014-15

TOTAL	\$136,000
GF	\$117,000
<i>GF Match</i>	<i>18,000</i>
<i>GF Other</i>	<i>99,000</i>
Reimbursements	\$19,000
<i>TCM</i>	<i>19,000</i>

Assembly Bill (AB) 10, Minimum Wage Increase Purchase of Services**DESCRIPTION:**

AB 10, Chapter 351, Statutes of 2013 increases the minimum wage, on and after July 1, 2014, from \$8 per hour to \$9 per hour. This bill further increases the minimum wage, on and after January 1, 2016, from \$9 per hour to \$10 per hour. This minimum wage increase will apply to the services which rely on employees that are paid minimum wage. The services which require additional funding are community care facilities (CCFs), day program services, habilitation services, respite services, supported living services (SLS) and transportation.

ASSUMPTIONS:

Costs to the following programs were estimated based on actual expenditures and include mandated employer costs for Social Security, Medicare, Federal Unemployment, State Unemployment, and Worker's Compensation.

METHODOLOGY:

	2014-15
<i>Community Care Facilities</i>	\$51,446,000
<i>Day Program Services</i>	30,308,000
<i>Habilitation Services</i>	7,200,000
<i>Transportation</i>	3,000,000
<i>Support Services</i>	7,900,000
<i>In-Home Respite</i>	9,026,000
<i>Out-of-Home Respite</i>	1,174,000
Total Expenditures	\$110,054,000

FUNDING:

Expenditures from the minimum wage increases are assumed to be funded by the General Fund (GF), the Home and Community-Based Services (HCBS) Waiver and 1915(i) with 50% Federal Financial Participation (FFP) and 50% GF. The State GF Other portion is that which is non-FFP.

CHANGE FROM PRIOR ESTIMATE:

This is a new major assumption, with estimated full-year costs in budget year 2014-15.

EXPENDITURES:

	2014-15
TOTAL	\$110,054,000
GF	\$69,341,000
<i>GF Match</i>	40,713,000
<i>GF Other</i>	28,628,000
Reimbursements	\$40,713,000
<i>HCBS Waiver</i>	34,645,000
<i>1915 (i)</i>	6,068,000

Federal Labor Regulations

DESCRIPTION:

Effective January 1, 2015, new regulations by the Federal Department of Labor will revise the implementation of the Fair Labor Standards Act (FLSA) to include home care workers, also known as personal care assistants, in overtime compensation. This revision will change and limit the allowable activities that qualify for an exemption to the overtime requirements, and change conditions of work for family employers. Regional centers purchase a variety of services such as respite, supported living, and personal assistance, that have rates determined, in part, by the exemption from overtime pay requirements pursuant to the definition for 'personal attendant' provided by the California Industrial Welfare Commission Wage Order No. 15-2001. The FLSA changes will supersede the State's overtime pay exemption. As a result it is likely that providers of services with rates impacted by new overtime pay requirements may require rate increases in order to stay in compliance with federal regulation. The fiscal impact is estimated to be approximately \$7.5 million for DDS.

ASSUMPTIONS:

Actual expenditures for Personal Assistant, In-Home Respite, and Supported Living Services (SLS) were used for estimating impact of changes to the Federal Labor Regulations. The direct care workers in these services employed by a third party (non-family member) performing "companionship" services currently are exempt from overtime and under the rule change will become eligible for overtime effective January 1, 2015. DDS assumes a 2.25 percent increase in costs for consumers receiving SLS, Respite and Personal Assistant services due to unexpected circumstances that could result in overtime. Provider rate increases will be based on the limited use of unexpected overtime.

METHODOLOGY:

	2014-15
<i>Support Services</i>	\$5,582,000
<i>In-Home Respite</i>	1,918,000
Total	\$7,500,000

FUNDING:

These Federal Labor Regulations expenditures are assumed to be funded by the General Fund (GF), the Home and Community-Based Services (HCBS) Waiver and 1915(i) with 50% Federal Financial Participation (FFP) and 50% GF. The State GF Other portion is that which is non-FFP.

EXPENDITURES:

	2014-15
TOTAL	\$7,500,000
GF	\$4,002,000
<i>GF Match</i>	3,498,000
<i>GF Other</i>	504,000
Reimbursements	\$3,498,000
<i>HCBS Waiver</i>	2,700,000
<i>1915 (i)</i>	798,000