

FOR LEGISLATIVE REVIEW

DEPARTMENT OF DEVELOPMENTAL SERVICES

2021-22 GOVERNOR'S BUDGET



STATE OF CALIFORNIA

JANUARY 2021

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DEPARTMENT OF DEVELOPMENTAL SERVICES 2021 GOVERNOR'S BUDGET HIGHLIGHTS

The Department of Developmental Services is responsible for administering the Lanterman Developmental Disabilities Services Act (Lanterman Act). The Lanterman Act provides for the coordination and provision of services and supports to enable people with developmental disabilities to lead more independent, productive, and integrated lives. Additionally, the Early Start Program provides for the delivery of services to infants and toddlers at risk of having a developmental disability. The Department carries out its responsibilities through contracts with 21 community-based, non-profit corporations known as regional centers, as well as through state-operated homes and facilities.

The number of individuals served by regional centers (consumers) is expected to be 357,819 in the current year and increase to 386,431 in Fiscal Year (FY) 2021-22. These figures include an estimated 322 individuals served in state-operated facilities as of July 1, 2021. The current year estimate reflects a reduction of 8,534 consumers when compared to the Enacted Budget, which is primarily due to a reduction in new consumer referrals which coincided with the beginning of the novel coronavirus (COVID-19) pandemic.

The Governor's Budget supports the additional needs of consumers throughout the public health crisis and reflects the need for additional supports for individuals where they live due to COVID-19 stay-at-home guidelines.

2021 GOVERNOR'S BUDGET SUMMARY

The Governor's Budget updates the Department's FY 2020-21 budget to include \$9.8 billion total funds (\$5.9 billion General Fund [GF]) and includes \$10.5 billion (\$6.5 billion GF) for FY 2021-22; a net increase of \$665.5 million (\$587.7 million GF) over the updated FY 2020-21 budget.

In addition to caseload and utilization, the proposed FY 2021-22 funding supports the following new and updated items:

- Anticipated costs reflecting the ongoing response to COVID-19 (\$265.1 million TF, \$183.2 million GF).
- Extension of the provider supplemental rates and the Uniform Holiday Schedule suspension through December 31, 2022 (\$510.5 million TF, \$297.0 million GF).
- Ongoing resources for regional center coordination with state and local entities supporting foster youth (\$7.4 million TF, \$4.6 million GF).
- Ongoing resources to support emergency planning and preparation coordination by regional centers (\$2 million TF, \$1.4 million GF).
- Additional resources to support community navigators and improve access to generic and regional center services (\$5.3 million TF, \$3.2 million GF).
- Full-year implementation of the expanded diversion program services (\$4.3 million TF, \$2.9 million GF).

DEPARTMENT OF DEVELOPMENTAL SERVICES
2021-2022 Governor's Budget

Program Highlights
(Dollars in Thousands)

	FY 2020-21*	FY 2021-22*	Difference
Community Services Program			
Regional Centers	\$9,368,590	\$10,038,087	\$669,497
Totals, Community Services	\$9,368,590	\$10,038,087	\$669,497
General Fund	\$5,521,629	\$6,108,245	\$586,616
Program Development Fund (PDF)	837	1,876	1,039
Developmental Disabilities Svs Acct	150	150	0
Federal Trust Fund	54,307	54,307	0
Reimbursements	3,790,927	3,872,769	81,842
Mental Health Services Fund	740	740	0
State Operated Facilities Program			
Personal Services	\$233,958	\$259,253	\$25,295
Operating Expense & Equipment	129,745	84,858	(44,887)
Total, State Operated Facilities	\$363,703	\$344,111	(\$19,592)
General Fund	\$315,616	\$308,947	(\$6,669)
Federal Trust Fund	0	0	0
Lottery Education Fund	126	126	0
Reimbursements	47,961	35,037	(12,924)
Headquarters Support			
Personal Services	\$75,244	\$84,452	\$9,208
Operating Expense & Equipment	32,704	39,105	6,401
Total, Headquarters Support	\$107,948	\$123,557	\$15,609
General Fund	\$65,768	\$73,491	\$7,723
Federal Trust Fund	2,715	2,742	27
PDF	412	413	1
Reimbursements	38,553	46,411	7,858
Mental Health Services Fund	500	500	0
Totals, All Programs	\$9,840,241	\$10,505,755	\$665,514
Total Funding			
General Fund	\$5,903,013	\$6,490,683	\$587,670
Federal Trust Fund	57,022	57,049	27
Lottery Education Fund	126	126	0
PDF	1,249	2,289	1,040
Developmental Disabilities Svs Acct	150	150	0
Reimbursements	3,877,441	3,954,217	76,776
Mental Health Services Fund	1,240	1,240	0
Totals, All Funds	\$9,840,241	\$10,505,755	\$665,514
Caseloads			
State Operated Facilities	302	322	20
Regional Centers	357,819	386,431	28,612
Departmental Positions			
State Operated Facilities	1,953.2	1,985.7	32.5
Headquarters**	516.0	517.0	1.0

*Total Expenditures do not reflect the statewide item for Employee Retention Incentives of \$1.5 million and \$15.7 million in 2020-21. The incentives were added by the 2016 Budget Act and displayed as a Carryover/Re-appropriation in the Governor's Budget Galley. Above figures do not include Capital Outlay.

**Departmental positions are from the Salaries and Wages Schedule Reconciliation.

COMMUNITY SERVICES PROGRAM**FY 2020-21****Costs and Fund Sources**

The FY 2020-21 updated Regional Center budget includes \$9.4 billion (\$5.5 billion GF), a net increase of \$56.0 million (\$64.0 million GF) as compared to the Enacted Budget. This includes a projected \$57.4 million increase in Purchase of Services (POS) expenditures. The updated budget also includes a decrease of \$1.5 million in Operations cost.

Costs and Fund Sources <i>(Dollars in Thousands)</i>			
	Enacted Budget	FY 2020-21	Difference
Operations	\$908,763	\$907,268	(\$1,495)
Purchase of Services	8,382,779	8,440,225	57,446
Early Start - Other Agency Costs	19,094	19,094	0
Early Start Family Resource Services	2,003	2,003	0
Total Costs	\$9,312,639	\$9,368,590	\$55,951
General Fund (GF)	\$5,457,660	\$5,521,629	\$63,969
<i>GF Match</i>	3,180,149	2,767,145	(413,004)
<i>GF Other</i>	2,277,511	2,754,484	476,973
Reimbursements	3,797,502	3,790,927	(6,575)
Program Development Fund	2,280	837	(1,443)
Developmental Disabilities Services Account	150	150	0
Mental Health Services Fund	740	740	0
Federal Funds	54,307	54,307	0
Fund Sources	\$9,312,639	\$9,368,590	\$55,951

Population

The updated current year caseload projections reflect a net decrease of 8,534 consumers as compared to the Enacted Budget. The decrease is primarily attributed to a reduction in new consumer referrals and a resulting decrease in caseload beginning with the onset of the COVID-19 pandemic.

	Enacted Budget	FY 2020-21	Difference
CASELOAD			
Active (Age 3 & Older)	316,153	313,354	(2,799)
Total Early Start (Birth through 35 Months)	50,200	44,465	(5,735)
Total Community Caseload	366,353	357,819	(8,534)

Regional Center Operations – Caseload

To support regional centers in addressing changes to the demand for services created by the COVID-19 pandemic, and address the anticipated backlog in new referrals, regional center operations were not adjusted for the lower caseload. The portion of the regional center operations budget driven by changes in caseload reflects a net increase of \$147,000 (\$10.0 million GF). This increase is mostly attributed to the enhanced caseload ratio for a higher number of consumers moving from more restrictive settings.

	Enacted Budget	FY 2020-21	Difference
Operations - Caseload	<i>(Dollars in Thousands)</i>		
Core Staffing	\$694,519	\$694,577	\$58
Federal Compliance	48,127	48,127	0
Projects	30,828	30,915	87
Intermediate Care Facility-Developmentally Disabled (ICF-DD) Administration Fee	1,780	1,782	2
Total Operations - Caseload	\$775,254	\$775,401	\$147

Regional Center Operations - Policy

There is a net decrease of \$1.6 million (\$5.0 million GF) in policy expenditures as compared to the Enacted Budget. This is primarily driven by a decrease of \$1.7 million in the Medicaid Claiming Adjustment item, related to consumers not eligible for federal reimbursements.

Operations Policy			
<i>(Dollars in Thousands)</i>			
Operations	Enacted Budget	FY 2020-21	Difference
Ongoing Operations Policy Items	\$86,866	\$86,866	\$0
DC Closure Ongoing Workload	8,302	8,302	0
Self-Determination Program OPS	4,073	4,073	0
Specialized Caseload Ratios	3,800	3,800	0
Specialized Home Monitoring	6,842	6,930	88
Trauma Informed Services for Foster Youth	1,600	1,600	0
Medicaid Claiming Adjustment OPS	22,026	20,296	(1,730)
Total Operations Policy	\$133,509	\$131,867	(\$1,642)

Purchase of Service (POS) - Caseload

Updated POS expenditures reflect a net increase of \$386.9 million (\$319.6 million GF) as compared to the Enacted Budget. It should be noted that funding for some policy items (e.g. COVID-19 response, SB 3 Minimum Wage 2020) previously displayed as separate policy items in the enacted Budget, are now incorporated in the updated FY 2020-21 figures displayed below. The primary driver is the estimated need for additional supports for individuals where they live due to COVID-19 stay-at-home guidelines. Increases are reflected in the Community Care Facilities, Support Services and In-Home Respite categories in the table below.

Purchase of Services Caseload (Utilization and Growth) <i>(Dollars in Thousands)</i>				
	Enacted Budget	FY 2020-21	Difference	Percent Change
Community Care Facilities	\$1,941,646	\$2,175,401	\$233,755	12.0%
Medical Facilities	19,884	22,744	2,860	14.4%
Day Programs	1,177,419	1,184,415	6,996	0.6%
Habilitation	153,169	140,235	(12,934)	(8.4%)
<i>Work Activity Program</i>	27,190	24,537	(2,653)	(9.8%)
<i>Supported Employment</i>	81,700	77,617	(4,083)	(5.0%)
<i>Program - Group</i>				
<i>Supported Employment</i>	44,279	38,081	(6,198)	(14.0%)
<i>Program - Individual</i>				
Transportation	414,983	393,945	(21,038)	(5.1%)
Support Services	1,790,612	1,849,308	58,696	3.3%
In-Home Respite	691,796	810,063	118,267	17.1%
Out of Home Respite	53,659	50,463	(3,196)	(6.0%)
Health Care	184,043	186,808	2,765	1.5%
Miscellaneous	595,806	596,544	738	0.1%
Quality Assurance Fees	9,612	9,623	11	0.1%
TOTAL	\$7,032,629	\$7,419,549	\$386,920	5.5%

POS - Policy

There is a net decrease of \$329.5 million (\$260.5 million GF) in policy related expenditures as compared to the Enacted Budget. This is primarily driven by the following

- The decrease of \$360.8 million for items displayed in policy in the Enacted Budget, including SB 3 Minimum Wage 2020 and Increased Costs for Covid-19, are now displayed in various POS caseload categories in this estimate.
- Medicaid Claiming Adjustment: Decrease of \$38.9 million (\$75.1 million GF) reflects updated data associated with this adjustment for consumers not eligible for federal reimbursements.
- Provider Supplemental Rate Increases: Increase of \$6.4 million (\$13.4 million GF decrease) based on updated expenditure data.
- SB 3 Minimum Wage Increase – January 2021: Decrease of \$26.7 million (\$12.4 million GF) based on updated expenditure data.
- Increased Costs for COVID-19: Increase of \$87.9 million (\$25.9 million GF) based on updated expenditure data. The total included for the impacts of COVID-19 is \$342 million. Of this total, \$172 million is incorporated in the POS – Caseload figures above; the remaining \$170 million is reflected below.
- Health Facility Rate Increase (New Policy): Increase of \$673,000 GF is due to a rate increase provided by the Department of Health Care Services.
- Youth Returning Out-of-State Foster Care (New Policy): Increase of \$900,000 (\$500,000 GF) to support youth in their transition back to California.

Policy			
<i>(Dollars in Thousands)</i>			
Purchase of Services (POS)	Enacted Budget	FY 2020-21	Difference
Ongoing Purchase of Services Policy Items	\$46,000	\$46,000	\$0
BHT - Consumers with no Autism Spectrum Disorder Diagnosis*	(6,955)	0	6,955
Early Start Co-Pays*	1,000	0	(1,000)
EBSHs with DESP	7,500	7,500	0
Electronic Visit Verification Penalty	5,219	5,219	0
Provider Supplemental Rate Increases POS	430,308	436,669	6,361
SB 3 Minimum Wage Increase: Effective January 1, 2020*	194,754	0	(194,754)
SB 3 Minimum Wage Increase: Effective January 1, 2021	120,323	93,619	(26,704)
Uniform Holiday Schedule	51,511	52,639	1,128
Increased Costs for COVID 19 POS	254,101	170,000	(84,101)
Health Facility Rate Increase	0	673	673
Youth Returning from Out-of-State Foster Care	0	900	900
Medicaid Claiming Adjustments POS	246,389	207,457	(38,932)
Total POS Policy	\$1,350,150	\$1,020,676	(\$329,474)

Reimbursements

The updated current year includes a net decrease of \$6.6 million in reimbursements as compared to the Enacted Budget. Adjustments are reflected in the table below:

Reimbursements (Dollars in Thousands)			
	Enacted Budget	FY 2020-21	Difference
Home and Community-Based Services (HCBS) Waiver	\$2,712,285	\$2,682,158	(\$30,127)
HCBS Waiver Administration	17,489	17,390	(99)
Medicaid Administration	14,553	18,168	3,615
Targeted Case Management (TCM)	255,116	253,302	(1,814)
TCM Administration	8,137	0	(8,137)
Title XX Block Grant	213,421	213,421	0
(1) Social Services	136,264	136,264	0
(2) Temporary Assistance for Needy Families	77,157	77,157	0
ICF-DD	65,648	65,901	253
Quality Assurance Fees (QAF)	10,502	10,514	12
1915(i) SPA	435,422	483,458	48,036
Early Periodic Screening Diagnosis and Treatment	34,601	28,299	(6,302)
Behavioral Health Treatment Fee-for-Service	13,806	13,492	(314)
Self-Determination Program (SDP) Waiver	16,522	4,824	(11,698)
TOTAL	\$3,797,502	\$3,790,927	(\$6,575)

Federal Funds

There are no updates to Federal Funds in the Governor's Budget.

Federal Funds (Dollars in Thousands)			
	Enacted Budget	FY 2020-21	Difference
Early Start/Part C Grant	\$53,106	\$53,106	\$0
Foster Grandparent Program	1,201	1,201	0
TOTAL	\$54,307	\$54,307	\$0

FY 2021-22**Costs and Fund Sources**

The FY 2021-22 proposed Regional Center budget includes \$10.0 billion (\$6.1 billion GF), a net increase of \$669.5 million (\$586.6 million GF) as compared to the updated current year. The increase in GF is primarily driven by the assumed December 31, 2021 suspension of the temporary 6.2 percent enhanced Federal Medical Assistance Percentage (FMAP) authorized by the Families First Coronavirus Response Act.

Costs and Fund Sources (Dollars in Thousands)			
	FY 2020-21	FY 2021-22	Difference
Operations	\$907,268	\$940,594	\$33,326
Purchase of Services	8,440,225	9,076,396	636,171
Early Start - Other Agency Costs	19,094	19,094	0
Early Start Family Resource Services	2,003	2,003	0
Total Costs	\$9,368,590	\$10,038,087	\$669,497
General Fund (GF)	\$5,521,629	\$6,108,245	\$586,616
<i>GF Match</i>	2,767,145	3,205,542	438,397
<i>GF Other</i>	2,754,484	2,902,703	148,219
Reimbursements	3,790,927	3,872,769	81,842
Program Development Fund	837	1,876	1,039
Developmental Disabilities Services Account	150	150	0
Mental Health Services Fund	740	740	0
Federal Funds	54,307	54,307	0
Fund Sources	\$9,368,590	\$10,038,087	\$669,497

Population

The Department is forecasting an increase of 28,612 consumers as compared to the updated current year. The increase assumes a return to typical caseload growth subsequent to the decreases in growth related to the COVID-19 pandemic.

	FY 2020-21	FY 2021-22	Difference
CASELOAD			
Active (Age 3 & Older)	313,354	332,465	19,111
Total Early Start (Birth through 35 Months)	44,465	53,966	9,501
Total Community Caseload	357,819	386,431	28,612

Regional Center Operations - Caseload

The budget year includes \$815.8 million (\$573.7 million GF) for regional center operations, an increase of \$40.4 million (\$31.2 million GF) as compared to the updated current year budget. The increase is mainly attributed to anticipated caseload growth.

	FY 2020-21	FY 2021-22	Difference
Operations - Caseload	<i>(Dollars in Thousands)</i>		
Core Staffing	\$694,577	\$733,525	\$38,948
Federal Compliance	48,127	48,349	222
Projects	30,915	32,106	1,191
Intermediate Care Facility-Developmentally Disabled (ICF-DD) Administration Fee	1,782	1,782	0
Total Operations - Caseload	\$775,401	\$815,762	\$40,361

Regional Center Operations - Policy

The budget year includes \$124.8 million (\$74.6 million GF) for policies impacting regional center operations, a decrease of \$7.0 million (\$1.7 million GF increase) compared to the updated current year.

- Specialized Caseload Ratios: Increase of \$400,000 (\$274,000 GF) reflects an increase in the number of consumers with complex needs.
- Specialized Home Monitoring: Increase of \$470,000 (\$320,000 GF) – Updated for monitoring additional Enhanced Behavioral Support and Community Crisis Homes.
- Systemic, Therapeutic, Assessment, Resources and Treatment Training (New Policy): Increase of \$4.5 million (\$3.2 million GF) to support individuals in their current residential arrangement and prevent disruptions and admissions into more restrictive settings.
- Regional Center Emergency Coordinators (New Policy): Increase of \$2.0 million (\$1.4 million GF) for 21 emergency coordinator positions to coordinate emergency preparedness, response, and recovery activities for community consumers.
- Community Navigators (New Policy): Increase of \$5.3 million (\$3.2 million GF) to implement a statewide navigator model to increase access to and utilization of needed services in diverse communities.
- Medicaid Claiming Adjustments: Decrease of \$20.3 million GF as the needed adjustments were completed in the current year.
- Forensic Diversion: Increase of \$534,000 (\$363,000 GF) is for five forensic specialist positions to support the expanded multifaceted forensic diversion program.

Operations Policy			
<i>(Dollars in Thousands)</i>			
Operations	FY 2020-21	FY 2021-22	Difference
Ongoing Operations Policy Items	\$86,866	\$86,866	\$0
DC Closure Ongoing Workload	8,302	8,302	0
Self-Determination Program OPS	4,073	4,073	0
Specialized Caseload Ratios	3,800	4,200	400
Specialized Home Monitoring	6,930	7,400	470
Trauma Informed Services for Foster Youth	1,600	1,600	0
START Training	0	4,540	4,540
Regional Center Emergency Coordinators	0	2,017	2,017
Community Navigators	0	5,300	5,300
Medicaid Claiming Adjustments OPS	20,296	0	(20,296)
Forensic Diversion	0	534	534
Total Operations Policy	\$131,867	\$124,832	(\$7,035)

Purchase of Services (POS) Caseload

The budget year includes \$8.0 billion (\$5.0 billion GF) for purchase of services, an increase of \$556.6 million (\$446.5 million GF), or a 7.5 percent increase, as compared to the updated current year. The net increase is primarily due to continued caseload and utilization changes in various budget categories. It should be noted that the impacts of the COVID-19 pandemic on POS expenditures had a significant effect on 'Difference' and 'Percent Change' comparisons to the current year displayed below.

Purchase of Services Caseload (Utilization and Growth)				
<i>(Dollars in Thousands)</i>				
	FY 2020-21	FY 2021-22	Difference	Percent Change
Community Care Facilities	\$2,175,401	\$2,229,993	\$54,592	2.6%
Medical Facilities	22,744	22,412	(332)	(1.5%)
Day Programs	1,184,415	1,251,147	66,732	5.6%
Habilitation	140,235	141,241	1,006	0.7%
<i>Work Activity Program</i>	24,537	20,281	(4,256)	(17.3%)
<i>Supported Employment</i>	77,617	74,064	(3,553)	(4.6%)
Program - Group				
<i>Supported Employment</i>	38,081	46,896	8,815	23.1%
Program - Individual				
Transportation	393,945	419,210	25,265	6.4%
Support Services	1,849,308	2,023,618	174,310	9.4%
In-Home Respite	810,063	928,188	118,125	14.6%
Out of Home Respite	50,463	57,437	6,974	13.8%
Health Care	186,808	254,266	67,458	36.1%
Miscellaneous	596,544	639,047	42,503	7.1%
Quality Assurance Fees	9,623	9,623	0	0.0%
TOTAL	\$7,419,549	\$7,976,182	\$556,633	7.5%

POS - Policy

The budget year includes \$1.1 billion (\$449.6 million GF) for policies impacting regional center purchase of services, an increase of \$79.5 million (\$107.3 million GF) as compared to the updated current year.

- Enhanced Behavioral Support Home (EBSH) with Delayed Egress and Secured Perimeters (DESP): Decrease of \$7.5 million GF adjusts for one-time funding in 2020-21.
- Electronic Visit Verification Penalty Payment: Increase of \$603,000 GF based on updated expenditure data.
- Provider Supplemental Rate Increase: Increase of \$18 million (\$14.8 million GF) based on updated expenditure data.
- SB 3 Minimum Wage Increase, January 1, 2021: Increase of \$105.0 million (\$55.1 million GF) represents full year implementation of the policy and updated expenditures.
- Uniform Holiday Schedule: Increase of \$3.3 million (\$2.1 million GF) for based on updated expenditure data.
- COVID-19 Costs: An increase of \$5.0 million (\$1.0 million GF decrease) associated with costs to support consumers diagnosed with, exposed to, or at high risk of COVID-19.
- Health Facility Rate Increase: Decrease of \$673,000 GF reflects the anticipated end of the temporary rate increase provided by the Department of Health Care Services.
- SB 3 Minimum Wage Increase, January 1, 2022 (New Policy): Increase \$159.2 million (\$83.7 million GF) for increase of the minimum wage from \$14.00 to \$15.00, effective January 1, 2022.
- Youth Returning from Out-of-State Foster Care: Increase of \$900,000 (\$500,000 GF) to support youth in their transition back to California.
- Medicaid Claiming Adjustments: Decrease of \$207.5 million GF as the needed adjustments were completed in the current year.
- Forensic Diversion: Increase of \$3.2 million (\$2.0 million GF) is for a contractor to provide wrap-around services to individuals with IDD.

Policy			
<i>(Dollars in Thousands)</i>			
Purchase of Services (POS)	FY 2020-21	FY 2021-22	Difference
Ongoing Purchase of Services Policy Items	\$46,000	\$46,000	\$0
EBSHs with DESP	7,500	0	(7,500)
Electronic Visit Verification Penalty	5,219	5,822	603
Provider Supplemental Rate Increases POS	436,669	454,634	17,965
SB 3 Minimum Wage Increase: Effective January 1, 2021	93,619	198,626	105,007
Uniform Holiday Schedule	52,639	55,895	3,256
Increased Costs for COVID 19 POS	170,000	175,000	5,000
Health Facility Rate Increase	673	0	(673)
SB 3 Minimum Wage Increase: Effective January 1, 2022	0	159,237	159,237
Youth Returning from Out-of-State Foster Care	900	1,800	900
Medicaid Claiming Adjustments POS	207,457	0	(207,457)
Forensic Diversion	0	3,200	3,200
Total POS Policy	\$1,020,676	\$1,100,214	\$79,538

Reimbursements

The budget year includes \$3.9 billion in reimbursements, an increase of \$81.8 million in as compared to the updated current year. Adjustments are reflected in the table below and include the impact of assumed December 31, 2021 suspension of the temporary 6.2 percent enhanced Federal Medical Assistance Percentage (FMAP) authorized by the Families First Coronavirus Response Act.

Reimbursements			
<i>(Dollars in Thousands)</i>			
	FY 2020-21	FY 2021-22	Difference
Home and Community-Based Services (HCBS) Waiver	\$2,682,158	\$2,767,125	\$84,967
HCBS Waiver Administration	17,390	19,903	2,513
Medicaid Administration	18,168	18,168	0
Targeted Case Management (TCM)	253,302	251,204	(2,098)
Title XX Block Grant	213,421	213,421	0
(1) Social Services	136,264	136,264	0
(2) Temporary Assistance for Needy Families	77,157	77,157	0
ICF-DD	65,901	62,266	(3,635)
Quality Assurance Fees (QAF)	10,514	10,514	0
1915(i) SPA	483,458	466,268	(17,190)
Early Periodic Screening Diagnosis and Treatment	28,299	38,117	9,818
Behavioral Health Treatment Fee-for-Service	13,492	13,492	0
Self-Determination Program (SDP) Waiver	4,824	12,291	7,467
TOTAL	\$3,790,927	\$3,872,769	\$81,842

Federal Funds

The budget year includes \$54.3 million in Federal Funds, which is consistent with the updated current year amount.

Federal Funds <i>(Dollars in Thousands)</i>			
	FY 2020-21	FY 2021-22	Difference
Early Start/Part C Grant	\$53,106	\$53,106	\$0
Foster Grandparent Program	1,201	1,201	0
TOTAL	\$54,307	\$54,307	\$0

STATE OPERATED FACILITIES**FY 2020-21**

The FY 2021-22 updated State Operated Facilities budget includes \$363.7 million (\$315.6 million GF), a net decrease of \$19.1 million (\$18.2 million GF) as compared to the Enacted Budget. The decrease reflects various control section adjustments.

Costs and Fund Sources (Dollars in Thousands)			
	Enacted Budget	FY 2020-21	Difference
Personal Services	\$252,659	\$233,958	(\$18,701)
Operating Expenses and Equipment	121,005	121,265	260
Lease Revenue Bond	9,151	8,480	(671)
Total Costs	\$382,814	\$363,703	(\$19,111)
General Fund (GF)	\$333,860	\$315,616	(\$18,244)
<i>GF Match</i>	42,478	35,416	(7,062)
<i>GF Other</i>	291,383	280,200	(11,183)
Reimbursements	48,762	47,961	(801)
Lottery Fund	192	126	(66)
Fund Sources	\$7,735,113	\$363,703	(\$19,111)

Policy

There is a net decrease of \$19.1 million (\$18.2 million GF) in policy expenditures as compared to the Enacted Budget.

- Control Section 3.90 reduces employee salaries by 9.23 percent effective July 1, 2020, resulting in a decrease of \$22.6 million (\$18.8 million GF).
- Control Section 3.60 reduces employee retirement by \$3.4 million (\$3.1 million GF).
- Item 9800 increases employee compensation by \$5.6 million (\$5.0 million GF).
- Enhanced Federal Funding: A decrease of \$3.1 million GF due to the Families First Coronavirus Act (FFCRA) which provides a temporary 6.2 percentage point increase to California's Federal Medical Assistance Percentage (FMAP).
- Youth Returning from Out-of-State Foster Care (New Policy): Increase of \$2.0 million (\$1.3 million GF) to support youth in their transition back to California.

FY 2021-22

The budget year includes \$344.1 million (\$308.9 million GF), a net decrease of \$19.6 million (\$6.7 million GF) as compared to the updated current year.

Costs and Fund Sources <i>(Dollars in Thousands)</i>			
	FY 2020-21	FY 2021-22	Difference
Personal Services	\$233,958	\$259,253	\$25,295
Operating Expenses and Equipment	121,265	75,707	(45,558)
Lease Revenue Bond	8,480	9,151	671
Total Costs	\$363,703	\$344,111	(\$19,592)
General Fund (GF)	\$315,616	\$308,947	(\$6,669)
<i>GF Match</i>	35,416	25,471	(9,945)
<i>GF Other</i>	280,200	283,476	3,276
Reimbursements	47,961	35,037	(12,923)
Lottery Fund	126	126	0
Fund Sources	\$363,703	\$344,111	(\$19,592)

Policy

There is a net decrease of \$19.6 million (\$6.7 million GF) in policy expenditures as compared to the updated current year.

- Control Section 3.90 is a one-year reduction, the proposed budget does not reflect the 9.23 percent reduction for 2021-22.
- COVID-19 Response: A net decrease of \$45.9 million (\$30.0 million GF) associated with projected costs to support consumers diagnosed with, exposed to, or at high risk of COVID-19.
- Retention Stipend Reallocation (New Policy): Increase of \$1.0 million GF to pay the remaining employees at Fairview and Sonoma for the accrued retention stipend earned during the closure process.
- Forensic Diversion: Increase of \$0.3 million GF for two senior psychologist specialists.
- Youth Returning from Out-of-State Foster Care: Increase of \$4.0 million (\$2.5 million GF) to support youth in their transition back to California.

Capital Outlay

The Governor's Budget includes \$221,000 GF for installing fire sprinkler system capital outlay project and Porterville Developmental Center.

Headquarters**FY 2020-21**

The Governor's Budget includes \$107.9 million (\$65.8 million GF), a net decrease of \$6.9 million (\$4.8 million GF). The decrease is comprised of compensation and retirement reductions from the Control Section 3.90 and Control Section 3.60; and compensation and retirement adjustments approved through the collective bargaining process and included Item 9800 – Employee Compensation Adjustments.

FY 2021-22

The Governor's Budget includes \$123.6 million (\$73.5 million GF) for Headquarters, an increase of \$15.6 million (\$7.7 million GF) compared to the updated current year. The net increase reflects employee compensation and retirement adjustments approved through the collective bargaining process, including Control Section 3.60 and Item 9800-Employee Compensation Adjustments, and two Budget Change Proposals.

- Forensic Diversion: Increase of one (1.0) Attorney III position to implement and assist with the forensic diversion program.
- Electronic Visit Verification: Increase of \$11.4 million (\$3.9 million GF) for state and consultant resources for project management, solution development, and project readiness and approval to complete Project Approval Lifecycle (PAL) processes and to start implementing an EVV Phase II solution that complies with federal requirements.

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Comparison of Enacted Budget to Governor's Budget

FY 2020-21

	A Enacted Budget	B FY 2020-21	C Difference (B - A)
I. BUDGET ITEMS:			
A. Operations (OPS)			
Caseload Growth/Utilization			
1. Staffing Expenditures	\$694,519	\$694,577	\$58
2. Federal Compliance	48,127	48,127	0
3. Projects	30,828	30,915	87
4. Intermediate Care Facility-Developmentally Disabled (ICF-DD) State Plan Amendment (SPA) Administration Fee	1,780	1,782	2
5. Total OPS Caseload Growth (Items 1 thru 4)	\$775,254	\$775,401	\$147
Policy			
6. Ongoing Operations Policy Items	\$86,866	\$86,866	\$0
7. DC Closure Ongoing Workload	8,302	8,302	0
8. Self-Determination Program	4,073	4,073	0
9. Specialized Caseload Ratio	3,800	3,800	0
10. Specialized Home Monitoring	6,842	6,930	88
11. Trauma Informed Services for Foster Youth	1,600	1,600	0
12. Medicaid Claiming Adjustment	22,026	20,296	(1,730)
13. Total Policy (Items 6 thru 12)	\$133,509	\$131,867	(\$1,642)
14. Total Operations (Items 5 and 13)	\$908,763	\$907,268	(\$1,495)
B. Purchase of Services (POS)			
Caseload Growth/Utilization			
1. Community Care Facilities	\$1,941,646	\$2,175,401	\$233,755
2. Medical Facilities	19,884	22,744	2,860
3. Day Programs	1,177,419	1,184,415	6,996
4. Habilitation Services	153,169	140,235	(12,934)
a. Work Activity Program	27,190	24,537	(2,653)
b. Supported Employment Program (Group Placement)	81,700	77,617	(4,083)
c. Supported Employment Program (Individual Placement)	44,279	38,081	(6,198)
5. Transportation	414,983	393,945	(21,038)
6. Support Services	1,790,612	1,849,308	58,696
7. In-Home Respite	691,796	810,063	118,267
8. Out-of-Home Respite	53,659	50,463	(3,196)
9. Health Care	184,043	186,808	2,765
10. Miscellaneous Services	595,806	596,544	738
11. Quality Assurance Fees (Transfer from Department of Health Care Services)	9,612	9,623	11
12. Total POS Caseload Growth (Items 1 thru 11)	\$7,032,629	\$7,419,549	\$386,920
Policy			
13. Ongoing Purchase of Services Policy Items	\$46,000	\$46,000	\$0
14. BHT - Consumers with no Autism Spectrum Disorder Diagnosis*	(6,955)	0	6,955
15. Early Start Co-Pays*	1,000	0	(1,000)
16. EBSHs with DESP	7,500	7,500	0
17. Electronic Visit Verification Penalty	5,219	5,219	0
18. Provider Supplemental Rate Increases	430,308	436,669	6,361
19. SB 3 Minimum Wage Increase: Effective January 1, 2020*	194,754	0	(194,754)
20. SB 3 Minimum Wage Increase: Effective January 1, 2021	120,323	93,619	(26,704)
21. Uniform Holiday Schedule	51,511	52,639	1,128
22. Increased Costs for COVID 19	254,101	170,000	(84,101)
23. Health Facility Rate Increase	0	673	673
24. Youth Returning from Out-of-State Foster Care	0	900	900
25. Medicaid Claiming Adjustment	246,389	207,457	(38,932)
26. Total Policy (Items 13 thru 25)	\$1,350,150	\$1,020,676	(\$329,474)
27. Total POS (Items 12 and 26)	\$8,382,779	\$8,440,225	\$57,446
C. Early Start/Part C: Other Agency Costs			
	\$19,094	\$19,094	\$0
D. Early Start Family Resource Services			
	\$2,003	\$2,003	\$0
E. GRAND TOTAL			
	\$9,312,639	\$9,368,590	\$55,951

*These policies are fully incorporated into the caseload and utilization growth.

Comparison of Enacted Budget to Governor's Budget

FY 2020-21

	A Enacted Budget	B FY 2020-21	C Difference (B - A)
II. FUND SOURCES:			
A. General Fund	\$5,457,660	\$5,521,629	\$63,969
1. General Fund Match	3,180,149	2,767,145	(413,004)
2. General Fund Other	2,277,511	2,754,484	476,973
B. Reimbursements	\$3,797,502	\$3,790,927	(\$6,575)
1. Home and Community-Based Services (HCBS) Waiver	2,712,285	2,682,158	(30,127)
2. HCBS Waiver Administration	17,489	17,390	(99)
3. Medicaid Administration	14,553	18,168	3,615
4. Targeted Case Management (TCM)	255,116	253,302	(1,814)
5. TCM Administration	8,137	0	(8,137)
6. Title XX Block Grant	213,421	213,421	0
a. Social Services	136,264	136,264	0
b. Temporary Assistance for Needy Families	77,157	77,157	0
7. Intermediate Care Facility-Developmentally Disabled (ICF-DD)			
State Plan Amendment (SPA)	65,648	65,901	253
8. Quality Assurance Fees (QAF)	10,502	10,514	12
9. 1915 (i) State Plan Amendment (SPA)	435,422	483,458	48,036
10. Early Periodic Screening Diagnosis and Treatment	34,601	28,299	(6,302)
11. Behavioral Health Treatment Fee-for-Service	13,806	13,492	(314)
12. Self-Determination Program (SDP) Waiver	16,522	4,824	(11,698)
C. Program Development Fund / Parental Fees	\$2,280	\$837	(\$1,443)
D. Developmental Disabilities Services Account	\$150	\$150	\$0
E. Mental Health Services Fund	\$740	\$740	\$0
F. Federal Funds	\$54,307	\$54,307	\$0
1. Early Start/Part C Grant	53,106	53,106	0
2. Foster Grandparent Program	1,201	1,201	0
G. GRAND TOTAL	\$9,312,639	\$9,368,590	\$55,951

Comparison of Enacted Budget to Governor's Budget

FY 2021-22

	A Enacted Budget	B FY 2021-22	C Difference (B - A)
I. BUDGET ITEMS:			
A. Operations (OPS)			
Caseload Growth/Utilization			
1. Staffing Expenditures	\$694,519	\$733,525	\$39,006
2. Federal Compliance	48,127	48,349	222
3. Projects	30,828	32,106	1,278
4. ICF-DD SPA Administration Fee	1,780	1,782	2
5. Total OPS Caseload Growth (Items 1 thru 4)	\$775,254	\$815,762	\$40,508
Policy			
6. Ongoing Operations Policy Items	\$86,866	\$86,866	\$0
7. DC Closure Ongoing Workload	8,302	8,302	0
8. Self-Determination Program	4,073	4,073	0
9. Specialized Caseload Ratio	3,800	4,200	400
10. Specialized Home Monitoring	6,842	7,400	558
11. Trauma Informed Services for Foster Youth	1,600	1,600	0
12. START Training	0	4,540	4,540
13. Regional Center Emergency Coordinators	0	2,017	2,017
14. Community Navigators	0	5,300	5,300
15. Medicaid Claiming Adjustment	22,026	0	(22,026)
16. Forensic Diversion	0	534	534
17. Total Policy (Items 6 thru 16)	\$133,509	\$124,832	(\$8,677)
18. Total Operations (Items 5 and 17)	\$908,763	\$940,594	\$31,831
B. Purchase of Services (POS)			
Caseload Growth/Utilization			
1. Community Care Facilities	\$1,941,646	\$2,229,993	\$288,347
2. Medical Facilities	19,884	22,412	2,528
3. Day Programs	1,177,419	1,251,147	73,728
4. Habilitation Services	153,169	141,241	(11,928)
a. Work Activity Program	27,190	20,281	(6,909)
b. Supported Employment Program (Group Placement)	81,700	74,064	(7,636)
c. Supported Employment Program (Individual Placement)	44,279	46,896	2,617
5. Transportation	414,983	419,210	4,227
6. Support Services	1,790,612	2,023,618	233,006
7. In-Home Respite	691,796	928,188	236,392
8. Out-of-Home Respite	53,659	57,437	3,778
9. Health Care	184,043	254,266	70,223
10. Miscellaneous Services	595,806	639,047	43,241
11. QAF (Transfer from DHCS)	9,612	9,623	11
12. POS Subtotal (Items 1 thru 11)	\$7,032,629	\$7,976,182	\$943,553
Policy			
13. Ongoing Purchase of Services Policy Items	\$46,000	\$46,000	\$0
14. BHT - Consumers with no Autism Spectrum Disorder Diagnosis*	(6,955)	0	6,955
15. Early Start Co-Pays*	1,000	0	(1,000)
16. EBSHs with DESP	7,500	0	(7,500)
17. Electronic Visit Verification Penalty	5,219	5,822	603
18. Provider Supplemental Rate Increases	430,308	454,634	24,326
19. SB 3 Minimum Wage Increase: Effective January 1, 2020*	194,754	0	(194,754)
20. SB 3 Minimum Wage Increase: Effective January 1, 2021	120,323	198,626	78,303
21. Uniform Holiday Schedule	51,511	55,895	4,384
22. Increased Costs for COVID 19	254,101	175,000	(79,101)
23. SB 3 Minimum Wage Increase: Effective January 1, 2022	0	159,237	159,237
24. Youth Returning from Out-of-State Foster Care	0	1,800	1,800
25. Medicaid Claiming Adjustment	246,389	0	(246,389)
26. Forensic Diversion	0	3,200	3,200
27. Total Policy (Items 13 thru 26)	\$1,350,150	\$1,100,214	(\$249,936)
28. Total POS (Items 12 and 27)	\$8,382,779	\$9,076,396	\$693,617
C. Early Start/Part C: Other Agency Costs			
	\$19,094	\$19,094	\$0
D. Early Start Family Resource Services			
	\$2,003	\$2,003	\$0
E. GRAND TOTAL			
	\$9,312,639	\$10,038,087	\$725,448

*These policies are fully incorporated into the caseload and utilization growth.

Comparison of Enacted Budget to Governor's Budget

FY 2021-22

	A Enacted Budget	B FY 2021-22	C Difference (B - A)
II. FUND SOURCES:			
A. General Fund	\$5,457,660	\$6,108,245	\$650,585
1. General Fund Match	3,180,149	3,205,542	25,393
2. General Fund Other	2,277,511	2,902,703	625,192
B. Reimbursements	\$3,797,502	\$3,872,769	\$75,267
1. HCBS Waiver	2,712,285	2,767,125	54,840
2. HCBS Waiver Administration	17,489	19,903	2,414
3. Medicaid Administration	14,553	18,168	3,615
4. TCM	255,116	251,204	(3,912)
5. TCM Administration	8,137	0	(8,137)
6. Title XX Block Grant	213,421	213,421	0
a. Social Services	136,264	136,264	0
b. Temporary Assistance for Needy Families	77,157	77,157	0
7. ICF-DD SPA	65,648	62,266	(3,382)
8. QAF	10,502	10,514	12
9. 1915 (i) SPA	435,422	466,268	30,846
10. Early Periodic Screening Diagnosis and Treatment	34,601	38,117	3,516
11. Behavioral Health Treatment Fee-for-Service	13,806	13,492	(314)
12. Self-Determination Program (SDP) Waiver	16,522	12,291	(4,231)
C. Program Development Fund / Parental Fees	\$2,280	\$1,876	(\$404)
D. Developmental Disabilities Services Account	\$150	\$150	\$0
E. Mental Health Services Fund	\$740	\$740	\$0
F. Federal Funds	\$54,307	\$54,307	\$0
1. Early Start/Part C Grant	53,106	53,106	0
2. Foster Grandparent Program	1,201	1,201	0
G. GRAND TOTAL	\$9,312,639	\$10,038,087	\$725,448

Comparison of FY 2020-21 to FY 2021-22

	A	B	C
	FY 2020-21	FY 2021-22	Difference (B - A)
I. BUDGET ITEMS:			
A. Operations (OPS)			
Caseload Growth			
1. Staffing Expenditures	\$694,577	\$733,525	\$38,948
2. Federal Compliance	48,127	48,349	222
3. Projects	30,915	32,106	1,191
4. ICF-DD SPA Administration Fee	1,782	1,782	0
5. Total OPS Caseload Growth (Items 1 thru 4)	\$775,401	\$815,762	\$40,361
Policy			
6. Ongoing Operations Policy Items	\$86,866	\$86,866	\$0
7. DC Closure Ongoing Workload	8,302	8,302	0
8. Self-Determination Program	4,073	4,073	0
9. Specialized Caseload Ratio	3,800	4,200	400
10. Specialized Home Monitoring	6,930	7,400	470
11. Trauma Informed Services for Foster Youth	1,600	1,600	0
12. START Training	0	4,540	4,540
13. Regional Center Emergency Coordinators	0	2,017	2,017
14. Community Navigators	0	5,300	5,300
15. Medicaid Claiming Adjustment	20,296	0	(20,296)
16. Forensic Diversion	0	534	534
17. Total Policy (Items 6 thru 16)	\$131,867	\$124,832	(\$7,035)
18. Total Operations (Items 5 and 17)	\$907,268	\$940,594	\$33,326
B. Purchase of Services (POS)			
Caseload Growth			
1. Community Care Facilities	\$2,175,401	\$2,229,993	\$54,592
2. Medical Facilities	22,744	22,412	(332)
3. Day Programs	1,184,415	1,251,147	66,732
4. Habilitation Services	140,235	141,241	1,006
a. Work Activity Program	24,537	20,281	(4,256)
b. Supported Employment (Group Placement)	77,617	74,064	(3,553)
c. Supported Employment (Individual Placement)	38,081	46,896	8,815
5. Transportation	393,945	419,210	25,265
6. Support Services	1,849,308	2,023,618	174,310
7. In-Home Respite	810,063	928,188	118,125
8. Out-of-Home Respite	50,463	57,437	6,974
9. Health Care	186,808	254,266	67,458
10. Miscellaneous Services	596,544	639,047	42,503
11. QAF (Transfer from DHCS)	9,623	9,623	0
12. Total POS Caseload (Items 1 thru 11)	\$7,419,549	\$7,976,182	\$556,633
Policy			
13. Ongoing Purchase of Services Policy Items	\$46,000	\$46,000	\$0
14. EBSHs with DESP	7,500	0	(7,500)
15. Electronic Visit Verification Penalty	5,219	5,822	603
16. Provider Supplemental Rate Increases	436,669	454,634	17,965
17. SB 3 Minimum Wage Increase: Effective January 1, 2021	93,619	198,626	105,007
18. Uniform Holiday Schedule	52,639	55,895	3,256
19. Increased Costs for COVID 19	170,000	175,000	5,000
20. Health Facility Rate Increase	673	0	(673)
21. SB 3 Minimum Wage Increase: Effective January 1, 2022	0	159,237	159,237
22. Youth Returning from Out-of-State Foster Care	900	1,800	900
23. Medicaid Claiming Adjustment	207,457	0	(207,457)
24. Forensic Diversion	0	3,200	3,200
25. Total Policy (Items 13 thru 24)	\$1,020,676	\$1,100,214	\$79,538
26. Total POS (Items 12 and 25)	\$8,440,225	\$9,076,396	\$636,171
C. Early Start/Part C: Other Agency Costs	\$19,094	\$19,094	\$0
D. Early Start Family Resource Services	\$2,003	\$2,003	\$0
E. GRAND TOTAL	\$9,368,590	\$10,038,087	\$669,497

Comparison of FY 2020-21 to FY 2021-22

	A	B	C
	FY 2020-21	FY 2021-22	Difference (B - A)
II. FUND SOURCES:			
A. General Fund	\$5,521,629	\$6,108,245	\$586,616
1. General Fund Match	2,767,145	3,205,542	438,397
2. General Fund Other	2,754,484	2,902,703	148,219
B. Reimbursements	\$3,790,927	\$3,872,769	\$81,842
1. HCBS Waiver	2,682,158	2,767,125	84,967
2. HCBS Waiver Administration	17,390	19,903	2,513
3. Medicaid Administration	18,168	18,168	0
4. TCM	253,302	251,204	(2,098)
5. Title XX Block Grant	213,421	213,421	0
a. Social Services	136,264	136,264	0
b. Temporary Assistance for Needy Families	77,157	77,157	0
6. ICF-DD SPA	65,901	62,266	(3,635)
7. QAF	10,514	10,514	0
8. 1915 (i) SPA	483,458	466,268	(17,190)
9. Early Periodic Screening Diagnosis and Treatment	28,299	38,117	9,818
10. Behavioral Health Treatment Fee-for-Service	13,492	13,492	0
11. Self-Determination Program (SDP) Waiver	4,824	12,291	7,467
C. Program Development Fund / Parental Fees	\$837	\$1,876	\$1,039
D. Developmental Disabilities Services Account	\$150	\$150	\$0
E. Mental Health Services Fund	\$740	\$740	\$0
F. Federal Funds	\$54,307	\$54,307	\$0
1. Early Start/Part C Grant	53,106	53,106	0
2. Foster Grandparent Program	1,201	1,201	0
G. GRAND TOTAL	\$9,368,590	\$10,038,087	\$669,497

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Population

FY 2020-21

<i>Estimated Population as of January 2021</i>	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>	<u>Percent Change</u>
A. Active Status (Age 3 & Older)	316,153	313,354	(2,799)	(0.89%)
B. Total Early Start (Birth through 35 Months)	50,200	44,465	(5,735)	(11.42%)
C. Total Community Population	366,353	357,819	(8,534)	(2.33%)

FY 2021-22

<i>Estimated Population as of January 2022</i>	<u>Enacted Budget</u>	<u>FY 2021-22</u>	<u>Difference</u>	<u>Percent Change</u>
A. Active Status (Age 3 & Older)	316,153	332,465	16,312	5.16%
B. Total Early Start (Birth through 35 Months)	50,200	53,966	3,766	7.50%
C. Total Community Population	366,353	386,431	20,078	5.48%

Population

FY 2020-21 VS. FY 2021-22

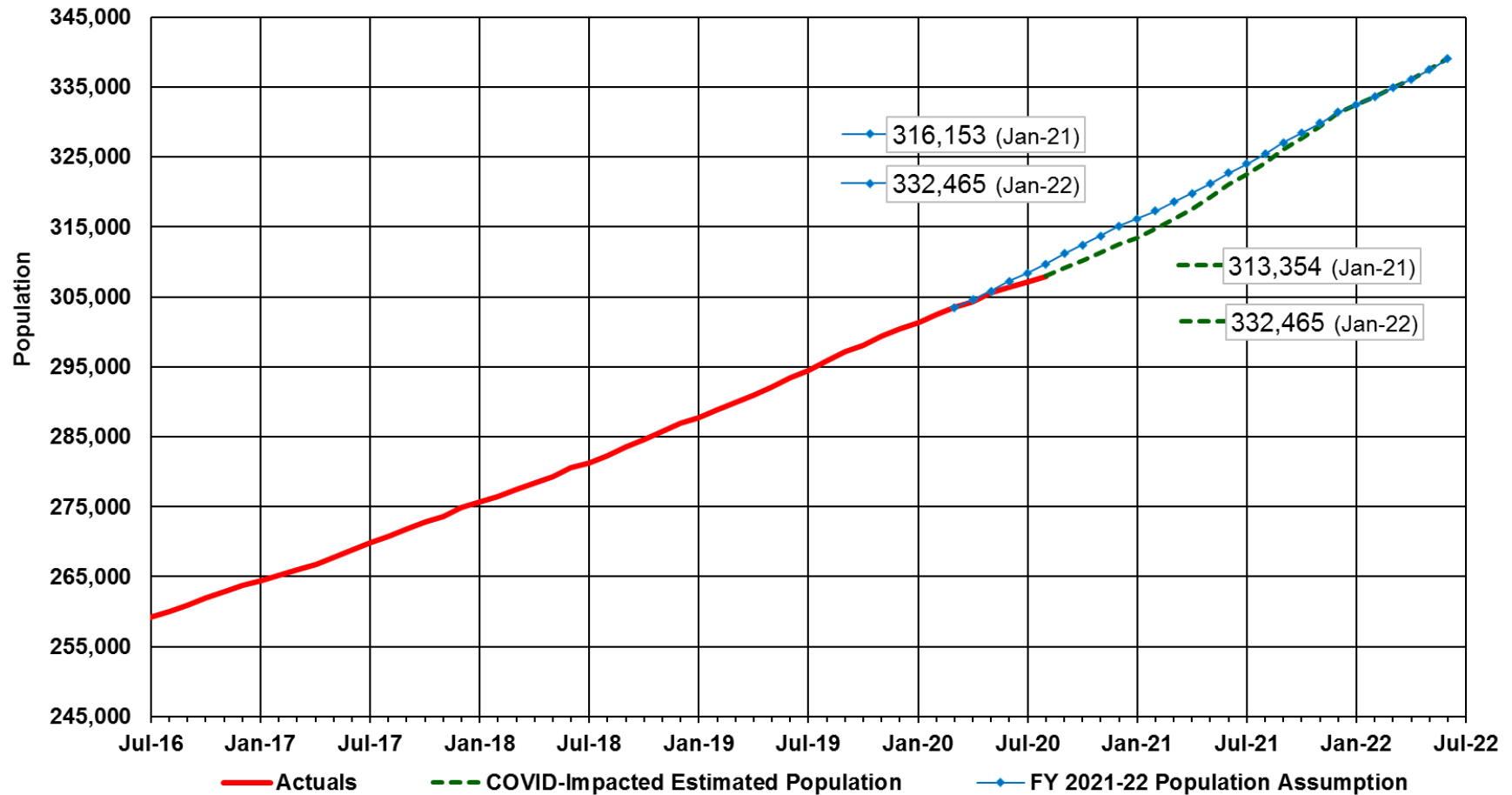
<i>Estimated Population as of January</i>	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>	<u>Percent Change</u>
A. Active Status (Age 3 & Older)	313,354	332,465	19,111	6.10%
B. Total Early Start (Birth through 35 Months)	44,465	53,966	9,501	21.37%
C. Total Community Population	357,819	386,431	28,612	8.00%

Population

ACTIVE STATUS

(Age 3 & Older)

Client Master File Trend Analysis

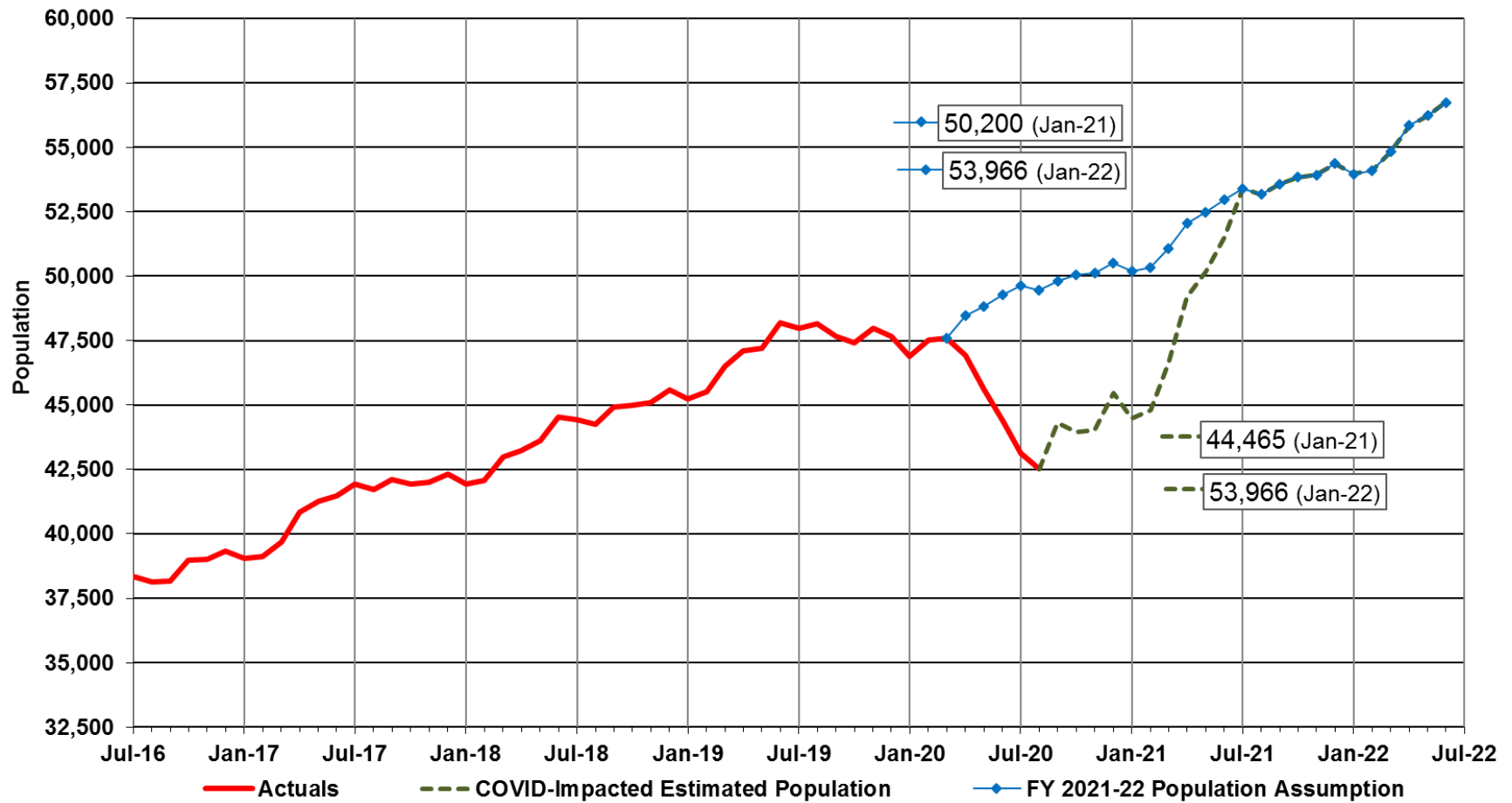


Population

EARLY START

(Birth through 35 Months)

Client Master File Trend Analysis



Population

COMMUNITY POPULATION

(Active Status and Early Start)

Client Master File Trend Analysis

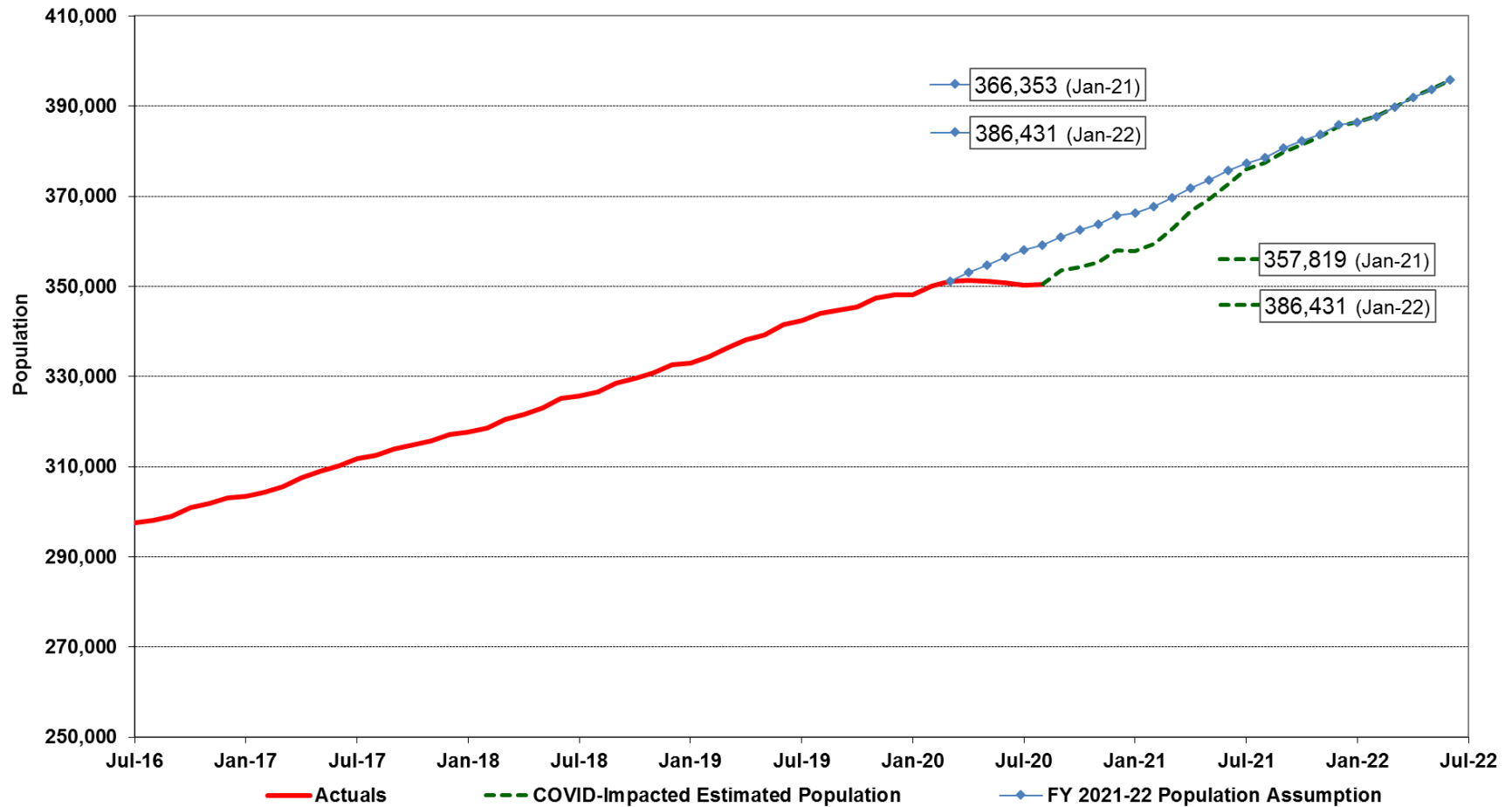


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Comparison of Enacted Budget to Governor's Budget

FY 2020-21

OPERATIONS

	A	B	C
	Enacted Budget	FY 2020-21	Difference (B - A)
I. POPULATION:			
A. Active Status (Age 3 & Older)	316,153	313,354	(2,799)
B. Early Start (Birth through 35 Months)	50,200	44,465	(5,735)
C. Total Population	366,353	357,819	(8,534)
II. BUDGET ITEMS:			
Caseload Growth			
1. Staffing Expenditures			
A. Core Staffing	\$719,169	\$719,169	\$0
1) Personal Services and Operating Expenses	640,641	640,641	0
2) Regional Center Rent	78,528	78,528	0
B. Enhanced Caseload Ratio 1:45 for DC Movers	70	128	58
C. Community Placement Plan	15,265	15,265	0
D. Staffing for Collection of FFP for Contracted Services	1,893	1,893	0
E. Less: Reductions	(41,878)	(41,878)	0
F. Total Staffing Expenditures	\$694,519	\$694,577	\$58
2. Federal Compliance			
A. HCBS Waiver	\$21,135	\$21,135	\$0
B. Compliance with HCBS Waiver Requirements	8,700	8,700	0
C. Case Managers to Meet HCBS Waiver Requirements	12,706	12,706	0
D. Targeted Case Management	4,129	4,129	0
E. Resident Review	473	473	0
F. Federal Medicaid Requirement for RC HCBS Services	984	984	0
G. Total Federal Compliance	\$48,127	\$48,127	\$0
3. Projects			
A. Information Technology Costs	\$4,212	\$4,212	\$0
1) Regional Center Application Support	2,962	2,962	0
2) Data Processing	1,250	1,250	0
B. Clients' Rights Advocacy Contract	7,873	7,873	0
C. Quality Assessment Contract	4,500	4,615	115
D. Direct Support Professional Training	3,600	3,600	0
E. Office of Administrative Hearings Contract	3,700	3,700	0
F. Wellness Projects	100	100	0
G. Foster Grandparent / Senior Companion Programs	4,114	4,086	(28)
H. Special Incident Reporting/Risk Assessment Contract	1,200	1,200	0
I. Increased Access to Mental Health Services	740	740	0
J. Sherry S. Court Case / Los Angeles County Hops	4	4	0
K. Enhancing FFP, Phase II, Proposal C, Consultant	500	500	0
L. Housing Projects	135	135	0
M. Review of SB 1175 Housing Proposals	150	150	0
N. Total Projects	\$30,828	\$30,915	\$87
4. Intermediate Care Facility-Developmentally Disabled (ICF-DD)			
State Plan Amendment (SPA) Administration Fee	\$1,780	\$1,782	\$2
5. Total OPS Caseload Growth (Items 1 thru 4)	\$775,254	\$775,401	\$147
Policy			
6. Ongoing Operations Policy Items	\$86,866	\$86,866	\$0
7. DC Closure Ongoing Workload	8,302	8,302	0
8. Self-Determination Program	4,073	4,073	0
9. Specialized Caseload Ratio	3,800	3,800	0
10. Specialized Home Monitoring	6,842	6,930	88
11. Trauma Informed Services for Foster Youth	1,600	1,600	0
12. Medicaid Claiming Adjustment	22,026	20,296	(1,730)
13. Total Policy (Items 6 thru 12)	\$133,509	\$131,867	(\$1,642)
14. Total Operations (Items 5 and 13)	\$908,763	\$907,268	(\$1,495)

Values in thousands (000's)

Comparison of Enacted Budget to Governor's Budget

FY 2020-21

OPERATIONS

	A	B	C
	Enacted Budget	FY 2020-21	Difference (B - A)
III. FUND SOURCES:			
A. General Fund	\$610,487	\$615,426	\$4,939
1. General Fund Match	259,135	221,751	(37,384)
2. General Fund Other	351,352	393,675	42,323
B. Reimbursements	\$296,185	\$289,751	(\$6,434)
1. Home and Community-Based Services Waiver Administration	17,489	17,390	(99)
2. Medicaid Administration	14,553	18,168	3,615
3. Targeted Case Management (TCM)	255,116	253,302	(1,814)
4. TCM Administration	8,137	0	(8,137)
5. Quality Assurance Fees (QAF)	890	891	1
C. Developmental Disabilities Services Account	\$150	\$150	\$0
D. Mental Health Services Fund	\$740	\$740	\$0
E. Federal Funds	\$1,201	\$1,201	\$0
Foster Grandparent Program	1,201	1,201	0
F. Grand Total	\$908,763	\$907,268	(\$1,495)

Comparison of Enacted Budget to Governor's Budget

FY 2021-22

OPERATIONS

	A	B	C
	Enacted Budget	FY 2021-22	Difference (B - A)
I. POPULATION:			
A. Active Status (Age 3 & Older)	316,153	332,465	16,312
B. Early Start (Birth through 35 Months)	50,200	53,966	3,766
C. Total Population	366,353	386,431	20,078
II. BUDGET ITEMS:			
Caseload Growth			
1. Staffing Expenditures			
A. Core Staffing	\$719,169	\$758,173	\$39,004
1) Personal Services and Operating Expenses	640,641	677,895	37,254
2) Regional Center Rent	78,528	80,278	1,750
B. Enhanced Caseload Ratio 1:45 for DC Movers	70	72	2
C. Community Placement Plan	15,265	15,265	0
D. Staffing for Collection of FFP for Contracted Services	1,893	1,893	0
E. Less: Reductions	(41,878)	(41,878)	0
F. Total Staffing Expenditures	\$694,519	\$733,525	\$39,006
2. Federal Compliance			
A. HCBS Waiver	\$21,135	\$21,135	\$0
B. Compliance with HCBS Waiver Requirements	8,700	8,700	0
C. Case Managers to Meet HCBS Waiver Requirements	12,706	12,928	222
D. Targeted Case Management	4,129	4,129	0
E. Resident Review	473	473	0
F. Federal Medicaid Requirement for RC HCBS Services	984	984	0
G. Total Federal Compliance	\$48,127	\$48,349	\$222
3. Projects			
A. Information Technology Costs	\$4,212	\$4,462	\$250
1) Regional Center Application Support	2,962	3,212	250
2) Data Processing	1,250	1,250	0
B. Clients' Rights Advocacy Contract	7,873	8,304	431
C. Quality Assessment Contract	4,500	4,640	140
D. Direct Support Professional Training	3,600	3,900	300
E. Office of Administrative Hearings Contract	3,700	3,885	185
F. Wellness Projects	100	100	0
G. Foster Grandparent / Senior Companion Programs	4,114	4,086	(28)
H. Special Incident Reporting/Risk Assessment Contract	1,200	1,200	0
I. Increased Access to Mental Health Services	740	740	0
J. Sherry S. Court Case / Los Angeles County Hops	4	4	0
K. Enhancing FFP, Phase II, Proposal C, Consultant	500	500	0
L. Housing Projects	135	135	0
M. Review of SB 1175 Housing Proposals	150	150	0
N. Total Projects	\$30,828	\$32,106	\$1,278
4. ICF-DD SPA Administration Fee	\$1,780	\$1,782	\$2
5. Total OPS Caseload Growth (Items 1 thru 4)	\$775,254	\$815,762	\$40,508
Policy			
6. Ongoing Operations Policy Items	\$86,866	\$86,866	\$0
7. DC Closure Ongoing Workload	8,302	8,302	0
8. Self-Determination Program	4,073	4,073	0
9. Specialized Caseload Ratio	3,800	4,200	400
10. Specialized Home Monitoring	6,842	7,400	558
11. Trauma Informed Services for Foster Youth	1,600	1,600	0
12. START Training	0	4,540	4,540
13. Regional Center Emergency Coordinators	0	2,017	2,017
14. Community Navigators	0	5,300	5,300
15. Medicaid Claiming Adjustment	22,026	0	(22,026)
16. Forensic Diversion	0	534	534
17. Total Policy (Items 6 thru 16)	\$133,509	\$124,832	(\$8,677)
18. Total Operations (Items 5 and 17)	\$908,763	\$940,594	\$31,831

Values in thousands (000's)

Comparison of Enacted Budget to Governor's Budget

FY 2021-22

OPERATIONS

	A	B	C
	Enacted Budget	FY 2021-22	Difference (B - A)
III. FUND SOURCES:			
A. General Fund	\$610,487	\$648,337	\$37,850
1. General Fund Match	259,135	248,725	(10,410)
2. General Fund Other	351,352	399,612	48,260
B. Reimbursements	\$296,185	\$290,166	(\$6,019)
1. HCBS Waiver Administration	17,489	19,903	2,414
2. Medicaid Administration	14,553	18,168	3,615
3. TCM	255,116	251,204	(3,912)
4. TCM Administration	8,137	0	(8,137)
5. QAF	890	891	1
C. Developmental Disabilities Services Account	\$150	\$150	\$0
D. Mental Health Services Fund	\$740	\$740	\$0
E. Federal Funds	\$1,201	\$1,201	\$0
Foster Grandparent Program	1,201	1,201	0
F. Grand Total	\$908,763	\$940,594	\$31,831

Comparison of FY 2020-21 to FY 2021-22
OPERATIONS

	A	B	C
	FY 2020-21	FY 2021-22	Difference (B - A)
I. POPULATION:			
A. Active Status (Age 3 & Older)	313,354	332,465	19,111
B. Early Start (Birth through 35 Months)	44,465	53,966	9,501
C. Total Population	357,819	386,431	28,612
II. BUDGET ITEMS:			
Caseload Growth			
1. Staffing Expenditures			
A. Core Staffing	\$719,169	\$758,173	\$39,004
1) Personal Services and Operating Expenses	640,641	677,895	37,254
2) Regional Center Rent	78,528	80,278	1,750
B. Enhanced Caseload Ratio 1:45 for DC Movers	128	72	(56)
C. Community Placement Plan	15,265	15,265	0
D. Staffing for Collection of FFP for Contracted Services	1,893	1,893	0
E. Less: Reductions	(41,878)	(41,878)	0
F. Total Staffing Expenditures	\$694,577	\$733,525	\$38,948
2. Federal Compliance			
A. HCBS Waiver	\$21,135	\$21,135	\$0
B. Compliance with HCBS Waiver Requirements	8,700	8,700	0
C. Case Managers to Meet HCBS Waiver Requirements	12,706	12,928	222
D. Targeted Case Management	4,129	4,129	0
E. Resident Review	473	473	0
F. Federal Medicaid Requirement for RC HCBS Services	984	984	0
G. Total Federal Compliance	\$48,127	\$48,349	\$222
3. Projects			
A. Information Technology Costs	\$4,212	\$4,462	\$250
1) Regional Center Application Support	2,962	3,212	250
2) Data Processing	1,250	1,250	0
B. Clients' Rights Advocacy Contract	7,873	8,304	431
C. Quality Assessment Contract	4,615	4,640	25
D. Direct Support Professional Training	3,600	3,900	300
E. Office of Administrative Hearings Contract	3,700	3,885	185
F. Wellness Projects	100	100	0
G. Foster Grandparent / Senior Companion Programs	4,086	4,086	0
H. Special Incident Reporting/Risk Assessment Contract	1,200	1,200	0
I. Increased Access to Mental Health Services	740	740	0
J. Sherry S. Court Case / Los Angeles County Hops	4	4	0
K. Enhancing FFP, Phase II, Proposal C, Consultant	500	500	0
L. Housing Projects	135	135	0
M. Review of SB 1175 Housing Proposals	150	150	0
N. Total Projects	\$30,915	\$32,106	\$1,191
4. ICF-DD SPA Administration Fee	\$1,782	\$1,782	\$0
5. Total OPS Caseload Growth (Items 1 thru 4)	\$775,401	\$815,762	\$40,361
Policy			
6. Ongoing Operations Policy Items	\$86,866	\$86,866	\$0
7. DC Closure Ongoing Workload	8,302	8,302	0
8. Self-Determination Program	4,073	4,073	0
9. Specialized Caseload Ratio	3,800	4,200	400
10. Specialized Home Monitoring	6,930	7,400	470
11. Trauma Informed Services for Foster Youth	1,600	1,600	0
12. START Training	0	4,540	4,540
13. Regional Center Emergency Coordinators	0	2,017	2,017
14. Community Navigators	0	5,300	5,300
15. Medicaid Claiming Adjustment	20,296	0	(20,296)
16. Forensic Diversion	0	534	534
17. Total Policy (Items 6 thru 16)	\$131,867	\$124,832	(\$7,035)
18. Total Operations (Items 5 and 17)	\$907,268	\$940,594	\$33,326

Values in thousands (000's)

Comparison of FY 2020-21 to FY 2021-22
OPERATIONS

	A	B	C
	FY 2020-21	FY 2021-22	Difference (B - A)
III. FUND SOURCES:			
A. General Fund	\$615,426	\$648,337	\$32,911
1. General Fund Match	221,751	248,725	26,974
2. General Fund Other	393,675	399,612	5,937
B. Reimbursements	\$289,751	\$290,166	\$415
1. HCBS Waiver Administration	17,390	19,903	2,513
2. Medicaid Administration	18,168	18,168	0
3. TCM	253,302	251,204	(2,098)
4. QAF	891	891	0
C. Developmental Disabilities Services Account	\$150	\$150	\$0
D. Mental Health Services Fund	\$740	\$740	\$0
E. Federal Funds	\$1,201	\$1,201	\$0
Foster Grandparent Program	1,201	1,201	0
F. Grand Total	\$907,268	\$940,594	\$33,326

Staffing Expenditures

BACKGROUND:

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

To address increased needs created by the pandemic and to mitigate an anticipated backlog in new referrals, regional center operations were not adjusted for the lower caseload.

METHODOLOGY:

	<u>FY 2020-21</u>	<u>FY 2021-22</u>
• Population Projections: (See Section C, Population, for detail)		
• Active Status (Age 3 and Older)	313,354	332,465
• Early Start (Birth through 35 Months)	44,465	53,966
Subtotal:	357,819	386,431
• State Operated Facilities Population:	<u>322</u>	<u>322</u>
Total Population:	358,141	386,753
• Informational:		
• Community Care Facility Consumers (including Placement Continuation)	25,243	25,243
• Home and Community-Based Services Waiver-Enrolled Consumers	136,337	138,091
• Early Start (with Assessment)	51,088	61,031
• Placement Continuation Consumers	98	55
• Intake cases per month	8,537	9,289
• Vendors	44,158	44,158
• Mediations per year	400	400
CORE STAFFING:		
PERSONAL SERVICES:		
• Direct Services and Administrative Positions:	\$493,319	\$522,721
2021-22 Governor's Budget		
FY 2020-21	13,488	
FY 2021-22	14,185	
<i>See Attachment A for Core Staffing Expenditure Detail.</i>		
<i>See Attachment B for Core Staffing Formulas.</i>		
• Fringe Benefits:	116,916	123,885
<i>Calculated at 23.7 percent per position.</i>		
• Salary Savings:	(20,812)	(22,167)
Client Program Coordinators: 1.0 percent per position	(2,834)	(2,977)
All Other Staff: 5.5 percent per position	(17,979)	(19,190)

Staffing Expenditures

METHODOLOGY (continued):

	<u>FY 2020-21</u>	<u>FY 2021-22</u>
• Early Start Administrative and Clinical Support: <i>Includes salaries, fringe benefits, and salary savings.</i>	\$694	\$694
TOTAL PERSONAL SERVICES:	\$590,117	\$625,133
OPERATING EXPENSES:		
• Operating Expenses: <i>Base amount plus the following adjustments:</i> <i>Professional Positions: \$3,400</i> <i>Clerical Positions: \$2,400</i>	50,524	52,762
• Rent:	78,528	80,278
TOTAL OPERATING EXPENSES:	\$129,052	\$133,040
TOTAL CORE STAFFING:	\$719,169	\$758,173
Enhanced Caseload Ratio 1:45 for DC Movers:	128	72
Community Placement Plan: <i>See Community Placement Plan for details, in Section F.</i>	15,265	15,265
Staffing for Collection of Federal Financial Participation (FFP) for Contracted Services: <i>Funding provides one Community Program Specialist I and one Account Clerk II for each Regional Center.</i>	1,893	1,893
Less Reductions:	(41,878)	(41,878)
TOTAL EXPENDITURES:	\$694,577	\$733,525

REASON FOR CHANGE:

The change in both years is due to continued growth as well as changes in community caseload.

EXPENDITURES:

<u>FY 2020-21</u>	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$694,519	\$694,577	\$58
GF	\$472,097	\$481,858	\$9,761
Reimbursements	\$222,422	\$212,719	(\$9,703)

<u>FY 2021-22</u>	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$694,577	\$733,525	\$38,948
GF	\$481,858	\$512,040	\$30,182
Reimbursements	\$212,719	\$221,485	\$8,766

Attachment A
CORE STAFFING ESTIMATE - FY 2020-21**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	\$14,533,545	183.34	\$79,271	\$14,533,545	\$0
(b) Psychologist	15,309,939	366.67	41,754	15,309,939	0
(c) Nurse	6,814,931	183.34	37,171	6,814,931	0
(d) Nutritionist	5,263,318	183.34	28,708	5,263,318	0

(2) Clinical Support Teams

(a) Physician/Psychiatrist	8,467,128	92.00	92,034	8,467,128	0
(b) Consulting Pharmacist	5,561,400	92.00	60,450	5,561,400	0
(c) Behavioral Psychologist	5,057,424	92.00	54,972	5,057,424	0
(d) Nurse	4,643,976	92.00	50,478	4,643,976	0

(3) SB 1038 Health Reviews

(a) Physician	3,096,024	33.64	92,034	3,096,024	0
(b) Nurse	7,923,027	156.96	50,478	7,923,027	0

b. Intake / Case Management

(1) Supervising Counselor (Intake)					
(1:10 Intake Workers in Item (2) below)	4,638,871	121.96	38,036	4,638,871	0
(2) Intake Worker	38,455,481	1,219.57	31,532	38,455,481	0
(3) Supervising Counselor (Case Management)					
(1:10 CPCs in Items (6), (7) and (8) below)	30,284,672	578.04	52,392	30,284,672	0
(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)	93,022,728	2,733.39	34,032	93,022,728	0
(7) CPC (Waiver, Early Start only), 1:62 Consumers	102,050,397	2,998.66	34,032	102,050,397	0
(8) CPC, Quality Assurance for ARM	1,646,128	48.37	34,032	1,646,128	0
(9) Supervising Counselor, DSS Incidental Medical					
Care Regulations (1:10 CPCs)	80,160	1.53	52,392	80,160	0
(10) CPC, DSS Incidental Medical Care Regs	577,194	15.26	37,824	577,194	0

c. Quality Assurance / Quarterly Monitoring

(1) Supervising Counselor	2,316,774	44.22	52,392	2,316,774	0
(2) CPC	15,049,631	442.22	34,032	15,049,631	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					
(a) Supervising Counselor	1,813,811	34.62	52,392	1,813,811	0
(b) CPC	11,782,899	346.23	34,032	11,782,899	0
(c) Administrative and Clinical Support (see next page)					

e. Community Services

(1) Special Incident Coordinator	1,100,232	21.00	52,392	1,100,232	0
(2) Vendor Fiscal Monitor	1,248,729	24.56	50,844	1,248,729	0
(3) Program Evaluator	898,653	21.00	42,793	898,653	0
(4) Resource Developer	898,653	21.00	42,793	898,653	0
(5) Transportation Coordinator	898,653	21.00	42,793	898,653	0
(6) Administrative Services Analyst (SB 1039					
Consumer Complaints)	449,327	10.50	42,793	449,327	0
(7) Developmental Center Liaison	107,262	2.82	38,036	107,262	0
(8) Diversion	126,584	4.00	31,646	126,584	0
(9) Placement Continuation:					
(a) Supervising Counselor	1,572	0.03	52,392	1,572	0
(b) CPC (Supplement at 1:45 Consumers)	11,231	0.33	34,032	11,231	0

f. Special Incident Reporting (SIR)

(1) Supervising Counselor	494,057	9.43	52,392	494,057	0
(2) QA/CPC	3,208,197	94.27	34,032	3,208,197	0
(3) Nurses	2,379,533	47.14	50,478	2,379,533	0

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

\$397,453,187	10,482.80	\$397,453,187	\$0
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Attachment A
CORE STAFFING ESTIMATE - FY 2020-21

	Enacted Budget	FY 2020-21			Difference
		Positions	Budgeted Salary	Cost	
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)	5,413,464	135.72	39,887	5,413,464	0
(3) Fiscal Manager	963,480	21.00	45,880	963,480	0
(4) Program Tech II (FCPP)	883,255	24.22	36,468	883,255	0
(5) Revenue Clerk	1,663,643	56.72	29,331	1,663,643	0
(6) Account Clerk (Enh. FFP, Phase II)	600,333	21.00	28,587	600,333	0
(7) Account Clerk	13,347,917	458.34	29,122	13,347,917	0
c. Information Systems and Human Resources					
(1) Information Systems Manager	1,397,844	21.00	66,564	1,397,844	0
(2) Information Systems Assistant	1,000,692	21.00	47,652	1,000,692	0
(3) Information Systems Assistant (SIR)	500,346	10.50	47,652	500,346	0
(4) Privacy Officer (HIPAA)	898,653	21.00	42,793	898,653	0
(5) Personal Computer Systems Manager	1,397,844	21.00	66,564	1,397,844	0
(6) Training Officer	1,099,728	21.00	52,368	1,099,728	0
(7) Training Officer (SIR)	549,864	10.50	52,368	549,864	0
(8) Human Resources Manager	1,067,724	21.00	50,844	1,067,724	0
d. Clerical Support					
(1) Office Supervisor	606,409	21.00	28,877	606,409	0
(2) PBX/Mail/File Clerk	1,834,547	63.00	29,120	1,834,547	0
(3) Executive Secretary	1,528,789	52.50	29,120	1,528,789	0
(4) MD/Psychologist Secretary II	485,532	16.82	28,866	485,532	0
(5) MD/Psychologist Secretary I	8,008,234	275.01	29,120	8,008,234	0
(6) Secretary II	5,589,974	193.65	28,866	5,589,974	0
(7) Secretary I	42,334,282	1,428.16	29,643	42,334,282	0
(8) Secretary I (DC Case Management - Capitol People First)	210,834	6.62	31,848	210,834	0
e. SUBTOTAL ADMINISTRATION	\$95,865,355	3,004.76		\$95,865,355	\$0
3. TOTAL POSITIONS AND SALARIES					
(Item A.1.i. + Item A.2.e.)	\$493,318,542	13,487.56		\$493,318,542	\$0
a. CPCs	229,064,087			229,064,087	0
b. All Other Staff	264,254,455			264,254,455	0
4. Fringe Benefits					
a. CPCs 23.7%	54,288,189			54,288,189	0
b. All Other Staff 23.7%	62,628,306			62,628,306	0
c. Total Fringe Benefits	\$116,916,495			\$116,916,495	\$0
5. Salary Savings					
a. CPCs 1.0%	(2,833,523)			(2,833,523)	0
b. All Other Staff 5.5%	(17,978,552)			(17,978,552)	0
c. Total Salary Savings	(\$20,812,075)			(\$20,812,075)	\$0
6. Early Start 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.)	\$590,116,962			\$590,116,962	\$0
ROUNDED	\$590,117,000	13,488.00		\$590,117,000	\$0
B. OPERATING EXPENSES AND RENT					
1. Operating Expenses	50,524,000			50,524,000	0
2. Rent	78,528,000			78,528,000	0
3. Subtotal Operating Expenses and Rent	\$129,052,000			\$129,052,000	\$0
C. TOTAL CORE STAFFING (Items A.7. + B.3.)	\$719,169,000			\$719,169,000	\$0

Attachment A
CORE STAFFING ESTIMATE - FY 2021-22**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	\$14,533,545	193.38	\$79,271	\$15,329,426	\$795,881
(b) Psychologist	15,309,939	386.75	41,754	16,148,360	838,421
(c) Nurse	6,814,931	193.38	37,171	7,188,128	373,197
(d) Nutritionist	5,263,318	193.38	30,403	5,879,402	616,084

(2) Clinical Support Teams

(a) Physician/Psychiatrist	8,467,128	96.00	92,034	8,835,264	368,136
(b) Consulting Pharmacist	5,561,400	96.00	60,450	5,803,200	241,800
(c) Behavioral Psychologist	5,057,424	96.00	54,972	5,277,312	219,888
(d) Nurse	4,643,976	96.00	50,478	4,845,888	201,912

(3) SB 1038 Health Reviews

(a) Physician	3,096,024	34.78	92,034	3,200,943	104,919
(b) Nurse	7,923,027	162.31	50,478	8,193,084	270,057

b. Intake / Case Management

(1) Supervising Counselor (Intake)					
(1:10 Intake Workers in Item (2) below)	4,638,871	132.70	38,036	5,047,377	408,506
(2) Intake Worker	38,455,481	1,327.00	31,532	41,842,964	3,387,483
(3) Supervising Counselor (Case Management)					
(1:10 CPCs in Items (6), (7) and (8) below)	30,284,672	609.07	52,392	31,910,395	1,625,723
(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)	93,022,728	2,944.68	34,032	100,213,350	7,190,622
(7) CPC (Waiver, Early Start only), 1:62 Consumers	102,050,397	3,097.69	34,032	105,420,586	3,370,189
(8) CPC, Quality Assurance for ARM	1,646,128	48.37	34,032	1,646,128	0
(9) Supervising Counselor, DSS Incidental Medical					
Care Regulations (1:10 CPCs)	80,160	1.52	52,392	79,636	(524)
(10) CPC, DSS Incidental Medical Care Regs	577,194	15.15	37,824	573,034	(4,160)

c. Quality Assurance / Quarterly Monitoring

(1) Supervising Counselor	2,316,774	44.31	52,392	2,321,490	4,716
(2) CPC	15,049,631	443.12	34,032	15,080,260	30,629

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

(a) Supervising Counselor	1,813,811	37.19	52,392	1,948,458	134,647
(b) CPC	11,782,899	371.87	34,032	12,655,480	872,581
(c) Administrative and Clinical Support (see next page)					

e. Community Services

(1) Special Incident Coordinator	1,100,232	21.00	52,392	1,100,232	0
(2) Vendor Fiscal Monitor	1,248,729	24.56	50,844	1,248,729	0
(3) Program Evaluator	898,653	21.00	42,793	898,653	0
(4) Resource Developer	898,653	21.00	42,793	898,653	0
(5) Transportation Coordinator	898,653	21.00	42,793	898,653	0
(6) Administrative Services Analyst (SB 1039					
Consumer Complaints)	449,327	10.50	42,793	449,327	0
(7) Developmental Center Liaison	107,262	2.82	38,036	107,262	0
(8) Diversion	126,584	4.00	31,646	126,584	0
(9) Placement Continuation:					
(a) Supervising Counselor	1,572	0.03	52,392	1,572	0
(b) CPC (Supplement at 1:45 Consumers)	11,231	0.25	34,032	8,508	(2,723)

f. Special Incident Reporting (SIR)

(1) Supervising Counselor	494,057	9.83	52,392	515,013	20,956
(2) QA/CPC	3,208,197	98.29	34,032	3,345,005	136,808
(3) Nurses	2,379,533	49.14	50,478	2,480,489	100,956

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

\$397,453,187	11,050.43		\$418,759,891	\$21,306,704
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Attachment A
CORE STAFFING ESTIMATE - FY 2021-22

	Enacted Budget	FY 2021-22			
		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)	5,413,464	138.09	39,887	5,507,996	94,532
(3) Fiscal Manager	963,480	21.00	45,880	963,480	0
(4) Program Tech II (FCPP)	883,255	24.22	36,468	883,255	0
(5) Revenue Clerk	1,663,643	56.72	30,927	1,754,204	90,561
(6) Account Clerk (Enh. FFP, Phase II)	600,333	21.00	30,424	638,895	38,562
(7) Account Clerk	13,347,917	483.44	30,841	14,909,607	1,561,690
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	606,409	21.00	30,738	645,506	39,097
(2) PBX/Mail/File Clerk	1,834,547	63.00	30,840	1,942,895	108,348
(3) Executive Secretary	1,528,789	52.50	30,840	1,619,080	90,291
(4) MD/Psychologist Secretary II	485,532	17.39	30,734	534,467	48,935
(5) MD/Psychologist Secretary I	8,008,234	290.07	30,840	8,945,646	937,412
(6) Secretary II	5,589,974	196.09	30,734	6,026,658	436,684
(7) Secretary I	42,334,282	1,512.83	31,057	46,984,228	4,649,946
(8) Secretary I (DC Case Management - Capitol People First)	210,834	6.62	31,848	210,834	0
e. SUBTOTAL ADMINISTRATION	\$95,865,355	3,134.97		\$103,961,413	\$8,096,058
3. TOTAL POSITIONS AND SALARIES					
(Item A.1.i. + Item A.2.e.)	\$493,318,542	14,185.40		\$522,721,304	\$29,402,762
a. CPCs	229,064,087			240,658,033	11,593,946
b. All Other Staff	264,254,455			282,063,271	17,808,816
4. Fringe Benefits					
a. CPCs 23.7%	54,288,189			57,035,954	2,747,765
b. All Other Staff 23.7%	62,628,306			66,848,995	4,220,689
c. Total Fringe Benefits	\$116,916,495			\$123,884,949	\$6,968,454
5. Salary Savings					
a. CPCs 1.0%	(2,833,523)			(2,976,940)	(143,417)
b. All Other Staff 5.5%	(17,978,552)			(19,190,175)	(1,211,623)
c. Total Salary Savings	(\$20,812,075)			(\$22,167,115)	(\$1,355,040)
6. Early Start 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.)	\$590,116,962			\$625,133,138	\$35,016,176
ROUNDED	\$590,117,000	14,185.00		\$625,133,000	\$35,016,000
B. OPERATING EXPENSES AND RENT					
1. Operating Expenses	50,524,000			52,762,000	2,238,000
2. Rent	78,528,000			80,278,000	1,750,000
3. Subtotal Operating Expenses and Rent	\$129,052,000			\$133,040,000	\$3,988,000
C. TOTAL CORE STAFFING (Items A.7. + B.3.)	\$719,169,000			\$758,173,000	\$39,004,000

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.(6, 7 and 8) below
(4) Supervising Counselor: Capitol People First	1.0 position : 10 CPCs in Items b.(5) below
(5) Client Program Coordinator (CPC) Capitol People First	1.0 position : 66 consumers (Developmental Center residents)
(6) CPC	1.0 position : 66 consumers (all other consumers, excluding Waiver, Early Start, and CPP placements)
(7) CPC	1.0 position : 62 Waiver and Early Start consumers (excluding CPP placements)
(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

Attachment B
CORE STAFFING FORMULAS

CORE STAFFING CLASSIFICATION	STAFFING FORMULA
A. <u>PERSONAL SERVICES (continued)</u>	
1. <u>DIRECT SERVICES (continued)</u>	
c. <u>Quality Assurance/Quarterly Monitoring</u>	
(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. <u>Early Intervention</u>	
(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</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. <u>Community Services</u>	
(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.

Attachment B**CORE STAFFING FORMULAS**

CORE STAFFING CLASSIFICATION	STAFFING FORMULA
A. <u>PERSONAL SERVICES (continued)</u>	
1. <u>DIRECT SERVICES (continued)</u>	
f. <u>Special Incident Reporting (SIR)</u>	
(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. <u>Mediation</u>	
(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. <u>Expansion of Autism Spectrum Disorders (ASD) Initiative</u>	
(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. <u>ADMINISTRATION</u>	
a. <u>Executive Staff</u>	
(1) Director	1.0 position : RC
(2) Administrator	1.0 position : RC
(3) Chief Counselor	1.0 position : RC
b. <u>Fiscal</u>	
(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. <u>Information Systems and Human Resources</u>	
(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

Attachment B
CORE STAFFING FORMULAS

CORE STAFFING CLASSIFICATION	STAFFING FORMULA
A. <u>PERSONAL SERVICES (continued)</u>	
2. <u>ADMINISTRATION (continued)</u>	
d. <u>Clerical Support</u>	
(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), the Department's Incidental Medical Care Regulations 1.c., Quality Assurance/Quarterly Monitoring 1.e.(1), (2) and (9)(a) and (b) Community Services 1.e.(9) b 2., Community Services (see Secty I, line 1.e.(9) b 2.,) 1.f.(1) thru (3), Special Incident Reporting 2.b.(1), Federal Program Coordinators (FFP Phase I) 2.b.(2), Federal Compliance Coordinators (FFP Phase II) 2.c., Information Systems and Human Resources
(7) Secretary I	1.0 position : 6 professionals in Items: 1.a.(1)(c) and (d), Clinical Intake and Assessment 1.b.(1) to (3) and (6) to (8), Intake/Case Mgt. 1.b.(5) and (6) Capitol People First 1.d., Early Intervention 1.e.(3), (4), (6) to (8), Community Services 1.e.(9) b 1., Community Services (see Secty II, line 1.e.(9) b 1.,)
(8) Secretary I (DC Case Management Capitol People First)	1.0 position : 6 CPCs and Supervisors

Federal Compliance

BACKGROUND:

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

METHODOLOGY:

	<u>FY 2020-21</u>	<u>FY 2021-22</u>
<ul style="list-style-type: none"> HCBS Waiver: Operations costs for HCBS Waiver activities in FY 2020-21 and FY 2021-22 are based upon 6.5 percent of FY 1995-96 HCBS Waiver reimbursements of \$325,148,000. This amount is fixed and is not adjusted for growth. 	\$21,135	\$21,135
<ul style="list-style-type: none"> Compliance with HCBS Waiver Requirements: Provides funding for regional center compliance with the HCBS Waiver. Functions include maintaining average service coordinator-to-consumer caseload ratios at not more than 1:62; performing quarterly face-to-face monitoring of consumers residing in out-of-home living arrangements; providing clinical consultations, monitoring and reviewing consumers' health status; and developing and annually reviewing Waiver consumers' individual program plans and Client Developmental Evaluation Reports. 	8,700	8,700

Federal Compliance

METHODOLOGY (continued):

	<u>FY 2020-21</u>	<u>FY 2021-22</u>
<ul style="list-style-type: none"> Case Managers to Meet HCBS Waiver Requirements: In a letter dated April 21, 2006, the Centers for Medicare & Medicaid Services (CMS) indicated that the State must "review and revise, as needed, its policies to assure that the case manager to waiver participant ratio of 1:62 is consistently met." This augmentation by the California Legislature is intended to assist in this. 	\$12,706	\$12,928
<ul style="list-style-type: none"> TCM: Operations costs for TCM activities in FY 2020-21 and FY 2021-22 are based upon 5.8 percent of FY 1995-96 TCM reimbursements of \$71,181,000. This amount is fixed and is not adjusted for growth. 	4,129	4,129
<ul style="list-style-type: none"> NHR/Pre-Admission Screening and Resident Review (PASRR): Operations costs for regional centers to perform activities associated with NHR and to handle the increased workload of processing PASRR Levels I and II screening and evaluation activities. Persons determined to be eligible for services under the Lanterman Act will result in an increase in the number of consumers who require regional center case management and other specialized services. Regional centers, through clinical assessments, will identify individuals who meet the expanded federal definition of developmental disability. 	473	473
<ul style="list-style-type: none"> Federal Medicaid Requirement for Regional Center HCBS Services: Pursuant to federal law and mandated by CMS, regional centers are required to gather and review business ownership, control, and relationship information from current and prospective vendors. Additionally, regional centers are required to determine that all vendors are eligible to participate as Medicaid service providers. Furthermore, on a periodic basis, regional centers are required to verify that vendors continue to meet all applicable vendorization requirements (e.g. professional licensure), in order for the State to comply with federal law and meet the CMS mandated HCBS Waiver assurance that only qualified providers deliver Medicaid funded services. 	984	984
<ul style="list-style-type: none"> TOTAL EXPENDITURES: 	\$48,127	\$48,349

Federal Compliance

REASON FOR CHANGE:

There is no change in FY 2020-21, from the enacted budget.

The change from FY 2020-21 to FY 2021-22, is due to continued growth.

EXPENDITURES:

FY 2020-21	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$48,127	\$48,127	\$0
GF	\$36,232	\$36,232	\$0
Reimbursements	\$11,895	\$11,895	\$0

FY 2021-22	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$48,127	\$48,349	\$222
GF	\$36,232	\$36,343	\$111
Reimbursements	\$11,895	\$12,006	\$111

Projects

BACKGROUND:

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

METHODOLOGY:

	<u>FY 2020-21</u>	<u>FY 2021-22</u>
<ul style="list-style-type: none"> • Information Technology Costs: <ul style="list-style-type: none"> • Regional Center Application Support: • Data Processing: 	\$4,212 2,962 1,250	\$4,462 3,212 1,250
<ul style="list-style-type: none"> • Clients' Rights Advocacy: The Department contracts for clients' rights advocacy services for regional center consumers. Contract amount shown does not reflect administrative costs per Assembly Bill (AB) X2 1. 	7,873	8,304
<ul style="list-style-type: none"> • Quality Assessment Contract: The Quality Assessment Project, as required by the Welfare and Institutions Code, §4571, implements the National Core Indicators (NCI) Survey to assess performance in services and supports provided to people with intellectual/developmental disabilities. In 2016, Senate Bill (SB) 982 expanded the Quality Assessment Project to include a Longitudinal Study of individuals transitioning to community settings from closing developmental centers. The Quality Assessment Project data will be used to monitor and improve services and supports provided, and to identify and remediate gaps in the community services system. 	4,615	4,640
<ul style="list-style-type: none"> • Direct Support Professional Training: Welfare and Institutions Code §4695.2 mandates all direct support service professionals working in licensed community care facilities to complete two 35-hour competency-based training courses or pass challenge tests within the first two years of employment. The Department contracts with the Department of Education, which in turn administers the training through the Regional Occupational Centers and Programs. 	3,600	3,900

Projects

METHODOLOGY (continued):

	<u>FY 2020-21</u>	<u>FY 2021-22</u>
<ul style="list-style-type: none"> Office of Administrative Hearings: Federal law requires the Department to have an adjudication process for disputes involving Medicaid beneficiaries; both the fair hearing and mediation processes satisfy this requirement. The Department contracts with the Office of Administrative Hearings to: (1) conduct fair hearings to resolve conflicts between regional centers and their consumers, and (2) provide mediation services. §4700 et seq. of the Lanterman Act provides mediation as a potential option to consumers whose services are proposed to be terminated, reduced, or suspended. 	\$3,700	\$3,885
<ul style="list-style-type: none"> Wellness Projects: Projects may include those that focus on health professional training programs, developmental, health, and trauma assessments, resource development for persons with a dual diagnosis, and training programs for parents and consumers. 	100	100
<ul style="list-style-type: none"> Foster Grandparent/Senior Companion (FG/SC): Through FG/SC programs, men and women aged 55 years and older devote up to 20 hours a week to help people with developmental disabilities lead more independent and productive lives. Costs reflect the federally mandated \$0.35 increase to the volunteer stipend effective April 2020. 	4,086	4,086
<ul style="list-style-type: none"> Special Incident Reporting/Risk Assessment: The risk management contractor is responsible for providing training and technical support to the Department, regional centers, and vendors; analysis and reporting of mortality and other special incident reports; analysis and reporting on Developmental Center transitions to the Center for Medicare & Medicaid Services; development of risk mitigation outreach and education to the regional center providers and self-advocates; facilitation of risk management committees. Through these activities and evaluation, system improvements are made to prevent risk. 	1,200	1,200

Projects

METHODOLOGY (continued):

	<u>FY 2020-21</u>	<u>FY 2021-22</u>
<ul style="list-style-type: none"> Increased Access to Mental Health Services: Consistent with the requirements of the Mental Health Services Act, the Department, in consultation with the Department of Health Care Services, identifies best-practice models and provides training to enhance the effectiveness of the regional center and county mental health service systems to better identify and provide a competent response for those consumers who are dually diagnosed (i.e. have a developmental disability and a mental illness). 	\$740	\$740
<ul style="list-style-type: none"> Sherry S. Court Case: In 1981, the Supreme Court ruled in the <i>In re Hop</i> legal case 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 <i>Sherry S.</i> case, the court ruled that a conservator or parent of an adult has authority to admit that adult through the Hop process. Amounts included reflect the regional centers' costs of processing Hop actions. 	4	4
<ul style="list-style-type: none"> FY 2003-04 FFP Enhancement, Phase II: These costs are associated with legal support for federal program activities. 	500	500
<ul style="list-style-type: none"> Housing Projects: The amounts budgeted represent funds that DDS pays to the Department of Housing and Community Development (HCD) through an interagency agreement. HCD provides fiscal reviews, on-site monitoring, and technical assistance on issues related to past affordable housing projects developed under the <i>Coffelt Settlement</i> (1994). The amounts also represent funds for various contracts established to facilitate DDS Asset Management functions for housing projects. 	135	135
<ul style="list-style-type: none"> Review of Senate Bill (SB) 1175 Housing Proposals: Pursuant to Chapter 617, Statutes of 2008 (SB 1175), the Developmental Disabilities Account is used as a depository for application fees collected by the Department for reimbursing DDS' costs associated with conducting the review and approval of housing proposals. 	150	150
<ul style="list-style-type: none"> TOTAL EXPENDITURES: 	\$30,915	\$32,106

Projects

REASON FOR CHANGE:

The change in both years is due to continued growth as well as standard contract increases.

EXPENDITURES:

FY 2020-21	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$30,828	\$30,915	\$87
GF	\$23,309	\$23,525	\$216
Reimbursement	\$5,428	\$5,299	(\$129)
Developmental Disabilities Services Account	\$150	\$150	\$0
Mental Health Services Fund	\$740	\$740	\$0
Federal Funds	\$1,201	\$1,201	\$0

FY 2021-22	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$30,915	\$32,106	\$1,191
GF	\$23,525	\$24,453	\$928
Reimbursement	\$5,299	\$5,562	\$263
Developmental Disabilities Services Account	\$150	\$150	\$0
Mental Health Services Fund	\$740	\$740	\$0
Federal Funds	\$1,201	\$1,201	\$0

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

BACKGROUND:

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

METHODOLOGY:

Billing costs are 1.5 percent of the purchase of services cost for Day Program and Transportation.

The Department estimate for FY 2020-21 and FY 2021-22 the total purchase of services costs to be \$118.8 million for Day Program and Transportation, of which 1.5 percent equals \$1.8 million for regional center administration.

REASON FOR CHANGE:

The change in FY 202-21, from the enacted budget, is due to continued growth as well as changes in utilization.

There is no change from FY 2020-21 to FY 2021-22.

EXPENDITURES:

FY 2020-21	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$1,780	\$1,782	\$2
GF	\$890	\$891	\$1
Reimbursement	\$890	\$891	\$1

FY 2021-22	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$1,782	\$1,782	\$0
GF	\$891	\$891	\$0
Reimbursement	\$891	\$891	\$0

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Comparison of Enacted Budget to Governor's Budget

FY 2020-21

PURCHASE OF SERVICES

	A	B	C
	Enacted Budget	FY 2020-21	Difference (B - A)
I. BUDGET ITEMS:			
Caseload Growth			
A. Purchase of Services (POS)			
1. Community Care Facilities	\$1,941,646	\$2,175,401	\$233,755
2. Medical Facilities	19,884	22,744	2,860
3. Day Programs	1,177,419	1,184,415	6,996
4. Habilitation Services	153,169	140,235	(12,934)
a. Work Activity Program	27,190	24,537	(2,653)
b. Supported Employment Program (Group Placement)	81,700	77,617	(4,083)
c. Supported Employment Program (Individual Placement)	44,279	38,081	(6,198)
5. Transportation	414,983	393,945	(21,038)
6. Support Services	1,790,612	1,849,308	58,696
7. In-Home Respite	691,796	810,063	118,267
8. Out-of-Home Respite	53,659	50,463	(3,196)
9. Health Care	184,043	186,808	2,765
10. Miscellaneous Services	595,806	596,544	738
11. Quality Assurance Fees (QAF Transfer from DHCS)	9,612	9,623	11
12. Total POS Caseload Growth (Items 1 thru 11)	\$7,032,629	\$7,419,549	\$386,920
Policy			
13. Ongoing Purchase of Services Policy Items	\$46,000	\$46,000	\$0
14. BHT - Consumers with no Autism Spectrum Disorder Diagnosis*	(6,955)	0	6,955
15. Early Start Co-Pays*	1,000	0	(1,000)
16. EBSHs with DESP	7,500	7,500	0
17. Electronic Visit Verification Penalty	5,219	5,219	0
18. Provider Supplemental Rate Increases	430,308	436,669	6,361
19. SB 3 Minimum Wage Increase: Effective January 1, 2020*	194,754	0	(194,754)
20. SB 3 Minimum Wage Increase: Effective January 1, 2021	120,323	93,619	(26,704)
21. Uniform Holiday Schedule	51,511	52,639	1,128
22. Increased Costs for COVID 19	254,101	170,000	(84,101)
23. Health Facility Rate Increase	0	673	673
24. Youth Returning from Out-of-State Foster Care	0	900	900
25. Medicaid Claiming Adjustment	246,389	207,457	(38,932)
26. Total Policy (Items 13 thru 25)	\$1,350,150	\$1,020,676	(\$329,474)
27. Total POS (Items 12 and 26)	\$8,382,779	\$8,440,225	\$57,446
II. FUND SOURCES:			
A. General Fund			
1. General Fund Match	\$4,845,170	\$4,904,200	\$59,030
2. General Fund Other	2,921,014	2,545,394	(375,620)
	1,924,156	2,358,806	434,650
B. Reimbursements			
1. Home and Community-Based Services (HCBS) Waiver	\$3,501,317	\$3,501,176	(\$141)
2. Title XX Block Grant	2,712,285	2,682,158	(30,127)
a. Social Services	213,421	213,421	0
b. Temporary Assistance for Needy Families	136,264	136,264	0
3. ICF-DD SPA	77,157	77,157	0
4. Quality Assurance Fees (QAF)	65,648	65,901	253
5. 1915 (i) State Plan Amendment (SPA)	9,612	9,623	11
6. Early Periodic Screening Diagnosis and Treatment	435,422	483,458	48,036
7. Behavioral Health Treatment Fee-for-Service	34,601	28,299	(6,302)
8. Self-Determination Program (SDP) Waiver	13,806	13,492	(314)
	16,522	4,824	(11,698)
C. Program Development Fund / Parental Fees			
	\$2,280	\$837	(\$1,443)
D. Federal Funds			
Early Start/Part C Grant	\$34,012	\$34,012	\$0
	34,012	34,012	0
E. Grand Total			
	\$8,382,779	\$8,440,225	\$57,446

*These policies are fully incorporated into the caseload and utilization growth.

Comparison of Enacted Budget to Governor's Budget

FY 2021-22

PURCHASE OF SERVICES

	A	B	C
	Enacted Budget	FY 2021-22	Difference (B - A)
I. BUDGET ITEMS:			
Caseload Growth			
A. Purchase of Services (POS)			
1. Community Care Facilities	\$1,941,646	\$2,229,993	\$288,347
2. Medical Facilities	19,884	22,412	2,528
3. Day Programs	1,177,419	1,251,147	73,728
4. Habilitation Services	153,169	141,241	(11,928)
a. Work Activity Program	27,190	20,281	(6,909)
b. Supported Employment Program (Group Placement)	81,700	74,064	(7,636)
c. Supported Employment Program (Individual Placement)	44,279	46,896	2,617
5. Transportation	414,983	419,210	4,227
6. Support Services	1,790,612	2,023,618	233,006
7. In-Home Respite	691,796	928,188	236,392
8. Out-of-Home Respite	53,659	57,437	3,778
9. Health Care	184,043	254,266	70,223
10. Miscellaneous Services	595,806	639,047	43,241
11. QAF (Transfer from DHCS)	9,612	9,623	11
12. Total POS Caseload Growth (Items 1 thru 11)	\$7,032,629	\$7,976,182	\$943,553
Policy			
13. Ongoing Purchase of Services Policy Items	\$46,000	\$46,000	\$0
14. BHT - Consumers with no Autism Spectrum Disorder Diagnosis*	(6,955)	0	6,955
15. Early Start Co-Pays*	1,000	0	(1,000)
16. EBSHs with DESP	7,500	0	(7,500)
17. Electronic Visit Verification Penalty	5,219	5,822	603
18. Provider Supplemental Rate Increases	430,308	454,634	24,326
19. SB 3 Minimum Wage Increase: Effective January 1, 2020*	194,754	0	(194,754)
20. SB 3 Minimum Wage Increase: Effective January 1, 2021	120,323	198,626	78,303
21. Uniform Holiday Schedule	51,511	55,895	4,384
22. Increased Costs for COVID 19	254,101	175,000	(79,101)
23. SB 3 Minimum Wage Increase: Effective January 1, 2022	0	159,237	159,237
24. Youth Returning from Out-of-State Foster Care	0	1,800	1,800
25. Medicaid Claiming Adjustment	246,389	0	(246,389)
26. Forensic Diversion	0	3,200	3,200
27. Total Policy (Items 13 thru 26)	\$1,350,150	\$1,100,214	(\$249,936)
28. Total POS (Items 12 and 27)	\$8,382,779	\$9,076,396	\$693,617
II. FUND SOURCES:			
A. General Fund	\$4,845,170	\$5,457,905	\$612,735
1. General Fund Match	2,921,014	2,956,817	35,803
2. General Fund Other	1,924,156	2,501,088	576,932
B. Reimbursements	\$3,501,317	\$3,582,603	\$81,286
1. HCBS Waiver	2,712,285	2,767,125	54,840
2. Title XX Block Grant	213,421	213,421	0
a. Social Services	136,264	136,264	0
b. Temporary Assistance for Needy Families	77,157	77,157	0
3. ICF-DD SPA	65,648	62,266	(3,382)
4. QAF	9,612	9,623	11
5. 1915 (i) SPA	435,422	466,268	30,846
6. Early Periodic Screening Diagnosis and Treatment	34,601	38,117	3,516
7. Behavioral Health Treatment Fee-for-Service	13,806	13,492	(314)
8. Self-Determination Program (SDP) Waiver	16,522	12,291	(4,231)
C. Program Development Fund / Parental Fees	\$2,280	\$1,876	(\$404)
D. Federal Funds	\$34,012	\$34,012	\$0
Early Start/Part C Grant	34,012	34,012	0
E. Grand Total	\$8,382,779	\$9,076,396	\$693,617

*These policies are fully incorporated into the caseload and utilization growth.

Comparison of FY 2020-21 to FY 2021-22
PURCHASE OF SERVICES

	A	B	C
	FY 2020-21	FY 2021-22	Difference (B - A)
I. BUDGET ITEMS:			
Caseload Growth			
A. Purchase of Services (POS)			
1. Community Care Facilities	\$2,175,401	\$2,229,993	\$54,592
2. Medical Facilities	22,744	22,412	(332)
3. Day Programs	1,184,415	1,251,147	66,732
4. Habilitation Services	140,235	141,241	1,006
a. Work Activity Program	24,537	20,281	(4,256)
b. Supported Employment Program (Group Placement)	77,617	74,064	(3,553)
c. Supported Employment Program (Individual Placement)	38,081	46,896	8,815
5. Transportation	393,945	419,210	25,265
6. Support Services	1,849,308	2,023,618	174,310
7. In-Home Respite	810,063	928,188	118,125
8. Out-of-Home Respite	50,463	57,437	6,974
9. Health Care	186,808	254,266	67,458
10. Miscellaneous Services	596,544	639,047	42,503
11. QAF (Transfer from DHCS)	9,623	9,623	0
12. Total POS Caseload Growth (Items 1 thru 11)	\$7,419,549	\$7,976,182	\$556,633
Policy			
13. Ongoing Purchase of Services Policy Items	\$46,000	\$46,000	\$0
14. EBSHs with DESP	7,500	0	(7,500)
15. Electronic Visit Verification Penalty	5,219	5,822	603
16. Provider Supplemental Rate Increases	436,669	454,634	17,965
17. SB 3 Minimum Wage Increase: Effective January 1, 2021	93,619	198,626	105,007
18. Uniform Holiday Schedule	52,639	55,895	3,256
19. Increased Costs for COVID 19	170,000	175,000	5,000
20. Health Facility Rate Increase	673	0	(673)
21. SB 3 Minimum Wage Increase: Effective January 1, 2022	0	159,237	159,237
22. Youth Returning from Out-of-State Foster Care	900	1,800	900
23. Medicaid Claiming Adjustment	207,457	0	(207,457)
24. Forensic Diversion	0	3,200	3,200
25. Total Policy (Items 13 thru 24)	\$1,020,676	\$1,100,214	\$79,538
26. Total POS (Items 12 and 25)	\$8,440,225	\$9,076,396	\$636,171
II. FUND SOURCES:			
A. General Fund	\$4,904,200	\$5,457,905	\$553,705
1. General Fund Match	2,545,394	2,956,817	411,423
2. General Fund Other	2,358,806	2,501,088	142,282
B. Reimbursements	\$3,501,176	\$3,582,603	\$81,427
1. HCBS Waiver	2,682,158	2,767,125	84,967
2. Title XX Block Grant	213,421	213,421	0
a. Social Services	136,264	136,264	0
b. Temporary Assistance for Needy Families	77,157	77,157	0
3. ICF-DD SPA	65,901	62,266	(3,635)
4. QAF	9,623	9,623	0
5. 1915 (i) SPA	483,458	466,268	(17,190)
6. Early Periodic Screening Diagnosis and Treatment	28,299	38,117	9,818
7. Behavioral Health Treatment Fee-for-Service	13,492	13,492	0
8. Self-Determination Program (SDP) Waiver	4,824	12,291	7,467
C. Program Development Fund / Parental Fees	\$837	\$1,876	\$1,039
D. Federal Funds	\$34,012	\$34,012	\$0
Early Start/Part C Grant	34,012	34,012	0
E. Grand Total	\$8,440,225	\$9,076,396	\$636,171

Community Care Facilities

BACKGROUND:

Community Care Facilities (CCF) are licensed by the Community Care Licensing Division of the Department of Social Services (DSS) to provide 24-hour non-medical residential care to children and adults with developmental disabilities. Regional centers contract with vendored CCF to provide consumers personal services, supervision, and/or assistance essential for self-protection or sustaining the activities of daily living.

METHODOLOGY:

Community Care Facilities expenditures are developed using the September 2020 State Claims Data file, with expenditures through June 30, 2020.

Supplemental Security Income/State Supplementary Program (SSI/SSP) payment is a grant received 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 the Department funds 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.

The base amounts represent a combination of actual and estimated expenditures from the prior year. Utilization and growth amounts are calculated using historical expenditure trends as well as consideration of the impact of COVID-19 on service utilization (see Impacts Due to COVID-19 in Section G).

	<u>FY 2020-21</u>	<u>FY 2021-22</u>
Base:	\$1,895,313	\$2,118,847
Total Utilization Change/Growth:	223,534	67,738
Subtotal Base and Growth:	\$2,118,847	\$2,186,585
Community Placement Plan (CPP): See Community Placement Plan for details, in Section F.	18,598	18,598

Community Care Facilities

	<u>FY 2020-21</u>	<u>FY 2021-22</u>
SSI/SSP Increases Effective January 1, 2021 and January 1, 2022: The SSI/SSP rate, effective January 1, 2021, is estimated to be \$1,079 per month and \$1,097 effective January 1, 2022. An increase in these rates results in a decrease in amounts paid by the Department. The SSI/SSP amount includes Care and Supervision, and Room and Board, excluding Personal and Incidental Needs.	(2,471)	(3,277)
Continuation Costs: Annualized costs reflected as CPP from the prior year.	40,427	28,087
TOTAL EXPENDITURES:	\$2,175,401	\$2,229,993

REASON FOR CHANGE:

The change in both years is due to continued growth as well as changes in utilization related to COVID-19.

EXPENDITURES:

<u>FY 2020-21</u>	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$2,073,878	\$2,175,401	\$101,523
GF	\$1,203,089	\$1,293,559	\$90,470
Reimbursements	\$870,789	\$881,842	\$11,053

<u>FY 2021-22</u>	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$2,175,401	\$2,229,993	\$54,592
GF	\$1,293,559	\$1,334,813	\$41,254
Reimbursements	\$881,842	\$895,180	\$13,338

Medical Facilities

BACKGROUND:

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

METHODOLOGY:

Medical Facilities expenditures are developed using the September 2020 State Claims Data file, with expenditures through June 30, 2020.

The base amounts represent a combination of actual and estimated expenditures from the prior year. Utilization and growth amounts are calculated using historical expenditure trends.

	<u>FY 2020-21</u>	<u>FY 2021-22</u>
Base:	\$17,762	\$19,853
Total Utilization Change/Growth:	2,091	201
Subtotal Base and Growth:	\$19,853	\$20,054
Gap Resource Development (ICF-DD-N & ICF-DD-H):	345	345
Gap is the time period between licensure and certification of small health facilities when Medi-Cal does not cover any person's facility costs.		
Community Placement Plan (CPP): See Community Placement Plan for details, in Section F.	802	802
Continuation Costs: Annualized costs reflected as CPP from the prior year.	1,744	1,211
TOTAL EXPENDITURES:	\$22,744	\$22,412

Medical Facilities

REASON FOR CHANGE:

The change in both years is due to continued growth as well as changes in utilization.

EXPENDITURES:

FY 2020-21	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$19,884	\$22,744	\$2,860
GF	\$19,884	\$22,744	\$2,860

FY 2021-22	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$22,744	\$22,412	(\$332)
GF	\$22,744	\$22,412	(\$332)

Day Programs

BACKGROUND:

Day programs are community-based programs for individuals served by a regional center. 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.
- Behavior management to help improve behaviors.
- Developing social and recreational skills.

METHODOLOGY:

Day Program expenditures are developed using the September 2020 State Claims Data file, with expenditures through June 30, 2020.

The base amounts represent a combination of actual and estimated expenditures from the prior year. Utilization and growth amounts are calculated using historical expenditure trends as well as consideration of the impact of COVID-19 on service utilization (see Impacts Due to COVID-19 in Section G).

	<u>FY 2020-21</u>	<u>FY 2021-22</u>
Base:	\$1,164,135	\$1,183,857
Total Utilization Change/Growth:	19,722	66,848
Subtotal Base and Growth:	\$1,183,857	\$1,250,705
Community Placement Plan (CPP): See Community Placement Plan for details, in Section F.	176	176
Continuation Costs: Annualized costs reflected as CPP from the prior year.	382	266
TOTAL EXPENDITURES:	\$1,184,415	\$1,251,147

REASON FOR CHANGE:

The change in both years is due to continued growth as well as changes in utilization related to COVID-19.

Day Programs

EXPENDITURES:

FY 2020-21	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$1,192,395	\$1,184,415	(\$7,980)
GF	\$654,578	\$695,039	\$40,461
Reimbursements	\$520,205	\$471,764	(\$48,441)
Federal Funds	\$17,612	\$17,612	\$0

FY 2021-22	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$1,184,415	\$1,251,147	\$66,732
GF	\$695,039	\$726,673	\$31,634
Reimbursements	\$471,764	\$506,862	\$35,098
Federal Funds	\$17,612	\$17,612	\$0

Habilitation Work Activity Program

BACKGROUND:

Work Activity Program (WAP) services through the regional centers include paid work, work adjustment and supportive habilitation services typically in a sheltered work shop setting. WAPs provide paid work in accordance with Federal and State Fair Labor Standards. Work adjustment services may include developing good work safety practices, money management skills, and appropriate work habits. Supportive habilitation services may include social skill and community resource training as long as the services are necessary to achieve vocational objectives.

METHODOLOGY:

Work Activity Program expenditures are developed using the September 2020 State Claims Data file, with expenditures through June 30, 2020.

The base amounts represent a combination of actual and estimated expenditures from the prior year. Utilization and growth amounts are calculated using historical expenditure trends.

	<u>FY 2020-21</u>	<u>FY 2021-22</u>
Base:	\$29,215	\$24,537
Total Utilization Change/Growth:	(4,678)	(4,256)
TOTAL EXPENDITURES:	\$24,537	\$20,281

REASON FOR CHANGE:

The change in both years is due to continued growth as well as changes in utilization.

EXPENDITURES:

<u>FY 2020-21</u>	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$27,539	\$24,537	(\$3,002)
GF	\$11,125	\$11,756	\$631
Reimbursements	\$16,414	\$12,781	(\$3,633)

<u>FY 2021-22</u>	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$24,537	\$20,281	(\$4,256)
GF	\$11,756	\$7,521	(\$4,235)
Reimbursements	\$12,781	\$12,760	(\$21)

Habilitation

Supported Employment Program (Group Placement)

BACKGROUND:

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

METHODOLOGY:

Supported Employment Program – Group Placement expenditures are developed using the September 2020 State Claims Data file, with expenditures through June 30, 2020.

The base amounts represent a combination of actual and estimated expenditures from the prior year. Utilization and growth amounts are calculated using historical expenditure trends.

	<u>FY 2020-21</u>	<u>FY 2021-22</u>
Base:	\$81,383	\$77,617
Total Utilization Change/Growth:	(3,766)	(3,553)
TOTAL EXPENDITURES:	\$77,617	\$74,064

REASON FOR CHANGE:

The change in both years is due to continued growth as well as changes in utilization.

EXPENDITURES:

<u>FY 2020-21</u>	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$81,700	\$77,617	(\$4,083)
GF	\$55,878	\$51,414	(\$4,464)
Reimbursements	\$25,822	\$26,203	\$381

<u>FY 2021-22</u>	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$77,617	\$74,064	(\$3,553)
GF	\$51,414	\$47,549	(\$3,865)
Reimbursements	\$26,203	\$26,515	\$312

Habilitation

Supported Employment Program (Individual Placement)

BACKGROUND:

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

METHODOLOGY:

Supported Employment Program – Individual Placement expenditures are developed using the September 2020 State Claims Data file, with expenditures through June 30, 2020.

The base amounts represent a combination of actual and estimated expenditures from the prior year. Utilization and growth amounts are calculated using historical expenditure trends as well as consideration of the impact of COVID-19 on service utilization (see Impacts Due to COVID-19 in Section G).

	<u>FY 2020-21</u>	<u>FY 2021-22</u>
Base:	\$33,873	\$38,081
Total Utilization Change/Growth:	4,208	8,815
TOTAL EXPENDITURES:	\$38,081	\$46,896

REASON FOR CHANGE:

The change in both years is due to continued growth as well as changes in utilization related to COVID-19.

EXPENDITURES:

<u>FY 2020-21</u>	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$44,279	\$38,081	(\$6,198)
GF	\$34,884	\$28,295	(\$6,589)
Reimbursements	\$9,395	\$9,786	\$391

<u>FY 2021-22</u>	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$38,081	\$46,896	\$8,815
GF	\$28,295	\$35,225	\$6,930
Reimbursements	\$9,786	\$11,671	\$1,885

Transportation

BACKGROUND:

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

METHODOLOGY:

Transportation Expenditures are developed using the September 2020 State Claims Data file, with expenditures through June 30, 2020.

The base amounts represent a combination of actual and estimated expenditures from the prior year. Utilization and growth amounts are calculated using historical expenditure trends as well as consideration of the impact of COVID-19 on service utilization (see Impacts Due to COVID-19 in Section G).

	<u>FY 2020-21</u>	<u>FY 2021-22</u>
Base:	\$370,065	\$393,862
Total Utilization Change/Growth:	23,797	25,283
Subtotal Base and Growth:	\$393,862	\$419,145
Community Placement Plan (CPP): See Community Placement Plan for details, in Section F.	26	26
Continuation Costs: Annualized costs reflected as CPP from the prior year.	57	39
TOTAL EXPENDITURES:	\$393,945	\$419,210

REASON FOR CHANGE:

The change in both years is due to continued growth as well as changes in utilization related to COVID-19.

Transportation

EXPENDITURES:

FY 2020-21	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$415,693	\$393,945	(\$21,748)
GF	\$243,292	\$240,961	(\$2,331)
Reimbursements	\$172,401	\$152,984	(\$19,417)

FY 2021-22	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$393,945	\$419,210	\$25,265
GF	\$240,961	\$256,862	\$15,901
Reimbursements	\$152,984	\$162,348	\$9,364

Support Services

BACKGROUND:

Support Services include a broad range of services to assist adults who choose to live in homes they own or lease in the community, including supported living services, community integration training services, and personal assistance services.

METHODOLOGY:

Support Services expenditures are developed using the September 2020 State Claims Data file, with expenditures through June 30, 2020.

The base amounts represent a combination of actual and estimated expenditures from the prior year. Utilization and growth amounts are calculated using historical expenditures trends as well as consideration of the impact of COVID-19 on service utilization (see Impacts Due to COVID-19 in Section G).

	<u>FY 2020-21</u>	<u>FY 2021-22</u>
Base:	\$1,617,165	\$1,847,843
Total Utilization Change/Growth:	230,678	174,650
Subtotal Base and Growth	\$1,847,843	\$2,022,493
Community Placement Plan (CPP): See Community Placement Plan for details, in Section F.	518	518
Continuation Costs: Annualized costs reflected as CPP from the prior year.	1,125	782
Independent Living Supplement: Based on data as of September 2020, there are 16,157 consumers living in SL/IL arrangements who receive the monthly payment to supplement the reduction in their SSP grants. Prior year costs remain in the Base, therefore only the incremental costs are reflected.	(178)	(175)
TOTAL EXPENDITURES	\$1,849,308	\$2,023,618

REASON FOR CHANGE:

The change in both years is due to continued growth as well as changes in utilization related to COVID-19.

Support Services

EXPENDITURES:

FY 2020-21	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$1,813,368	\$1,849,308	\$35,940
GF	\$1,026,763	\$1,059,155	\$32,392
Reimbursements	\$786,402	\$789,950	\$3,548
Federal Fund	\$203	\$203	\$0

FY 2021-22	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$1,849,308	\$2,023,618	\$174,310
GF	\$1,059,155	\$1,207,009	\$147,854
Reimbursements	\$789,950	\$816,406	\$26,456
Federal Fund	\$203	\$203	\$0

In-Home Respite

BACKGROUND:

In-Home Respite Services is defined as intermittent or regularly scheduled temporary non-medical care and/or supervision provided in the person's home. In-Home Respite services are support services which typically include:

- Assisting the family members to enable a person with developmental disabilities to stay at home;
- Providing appropriate care and supervision to protect that person's safety in the absence of a family member(s);
- Relieving family members from the responsibility of providing care;
- Attending to basic self-help needs and other activities that would ordinarily be performed by the family member.

METHODOLOGY:

In-Home Respite expenditures are developed using the September 2020 State Claims Data file, with expenditures through June 30, 2020.

The base amounts represent a combination of actual and estimated expenditures from the prior year. Utilization and growth amounts are calculated using historical expenditure trends as well as consideration of the impact of COVID-19 on service utilization (see Impacts Due to COVID-19 in Section G).

	<u>FY 2020-21</u>	<u>FY 2021-22</u>
Base:	\$606,396	\$809,686
Total Utilization Change/Growth:	203,290	118,204
Subtotal Base and Growth:	\$809,686	\$927,890
Community Placement Plan (CPP): See Community Placement Plan for details, in Section F.	119	119
Continuation Costs: Annualized costs reflected as CPP from the prior year.	258	179
TOTAL EXPENDITURES:	\$810,063	\$928,188

REASON FOR CHANGE:

The change in both years is due to continued growth as well as changes in utilization related to COVID-19.

In-Home Respite

EXPENDITURES:

	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$713,799	\$810,063	\$96,264
GF	\$423,673	\$482,721	\$59,048
Reimbursements	\$290,003	\$327,219	\$37,216
Federal Funds	\$123	\$123	\$0

	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$810,063	\$928,188	\$118,125
GF	\$482,721	\$591,447	\$108,726
Reimbursements	\$327,219	\$336,618	\$9,399
Federal Funds	\$123	\$123	\$0

Out-of-Home Respite

BACKGROUND:

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

METHODOLOGY:

Out-of-Home Respite expenditures are developed using the September 2020 State Claims Data file, with expenditures through June 30, 2020.

The base amounts represent a combination of actual and estimated expenditures from the prior year. Utilization and growth amounts are calculated using historical expenditure trends as well as consideration of the impact of COVID-19 on service utilization (see Impacts Due to COVID-19 in Section G).

	<u>FY 2020-21</u>	<u>FY 2021-22</u>
Base:	\$48,703	\$50,438
Total Utilization Change/Growth:	1,735	6,979
Subtotal Base and Growth:	\$50,438	\$57,417
Community Placement Plan (CPP): See Community Placement Plan for details, in Section F.	8	8
Continuation Costs: Annualized costs reflected as CPP from the prior year.	17	12
TOTAL EXPENDITURES:	\$50,463	\$57,437

REASON FOR CHANGE:

The change in both years is due to continued growth as well as changes in utilization related to COVID-19.

Out-of-Home Respite

EXPENDITURES:

FY 2020-21	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$53,664	\$50,463	(\$3,201)
GF	\$27,767	\$29,106	\$1,339
Reimbursements	\$25,837	\$21,297	(\$4,540)
Federal Funds	\$60	\$60	\$0

FY 2021-22	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$50,463	\$57,437	\$6,974
GF	\$29,106	\$33,339	\$4,233
Reimbursements	\$21,297	\$24,038	\$2,741
Federal Funds	\$60	\$60	\$0

Health Care

BACKGROUND:

Health Care services include medical and/or health care-related services, providing appropriate, high-quality care and services to children and adults who have developmental disabilities in order to optimize the health and welfare of each individual.

METHODOLOGY:

Health Care expenditures are developed using the September 2020 State Claims Data file, with expenditures through June 30, 2020.

The base amounts represent a combination of actual and estimated expenditures from the prior year. Utilization and growth amounts are calculated using historical expenditure trends as well as consideration of the impact of COVID-19 on service utilization (see Impacts Due to COVID-19 in Section G).

	<u>FY 2020-21</u>	<u>FY 2021-22</u>
Base:	\$154,060	\$180,432
Total Utilization Change/Growth:	26,372	68,791
Subtotal Base and Growth:	\$180,432	\$249,223
Community Placement Plan (CPP): See Community Placement Plan for details, in Section F.	2,009	2,009
Continuation Costs: Annualized costs reflected as CPP from the prior year.	4,367	3,034
TOTAL EXPENDITURES:	\$186,808	\$254,266

REASON FOR CHANGE:

The change in both years is due to continued growth as well as changes in utilization related to COVID-19.

Health Care

EXPENDITURES:

FY 2020-21	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$184,043	\$186,808	\$2,765
GF	\$162,125	\$170,189	\$8,064
Reimbursements	\$20,064	\$14,765	(\$5,299)
Federal Funds	\$1,854	\$1,854	\$0

FY 2021-22	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$186,808	\$254,266	\$67,458
GF	\$170,189	\$229,360	\$59,171
Reimbursements	\$14,765	\$23,052	\$8,287
Federal Funds	\$1,854	\$1,854	\$0

Miscellaneous Services

BACKGROUND:

The Miscellaneous Services category includes a wide variety of services that cannot be classified in the other Purchase of Services budget categories. Services in this category include, but are not limited to, behavior interventions, early intervention programs, interdisciplinary assessments, translators, and tutors.

METHODOLOGY:

Miscellaneous Services expenditures are developed using the September State Claims Data file, with expenditures through June 30, 2020.

The base amounts represent a combination of actual and estimated expenditures from the prior year. Utilization and growth amounts are calculated using historical expenditure trends as well as consideration of the impact of COVID-19 on service utilization (see Impacts Due to COVID-19 in Section G).

	<u>FY 2020-21</u>	<u>FY 2021-22</u>
Base:	\$497,477	\$565,411
Total Utilization Change/Growth:	67,934	42,747
Subtotal Base and Growth:	\$565,411	\$608,158
Community Placement Plan (CPP): See Community Placement Plan for details, in Section F.	30,333	30,333
Continuation Costs: Annualized costs reflected as CPP from the prior year.	800	556
TOTAL EXPENDITURES:	\$596,544	\$639,047

Miscellaneous Services

REASON FOR CHANGE:

The change in both years is due to continued growth as well as changes in utilization related to COVID-19.

EXPENDITURES:

FY 2020-21	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$597,529	\$596,544	(\$985)
GF	\$479,611	\$476,960	(\$2,651)
Reimbursements	\$101,478	\$104,587	\$3,109
Federal Funds	\$14,160	\$14,160	\$0
Program Development Fund	\$2,280	\$837	(\$1,443)

FY 2021-22	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$596,544	\$639,047	\$42,503
GF	\$476,960	\$516,143	\$39,183
Reimbursements	\$104,587	\$106,868	\$2,281
Federal Funds	\$14,160	\$14,160	\$0
Program Development Fund	\$837	\$1,876	\$1,039

Quality Assurance Fees

Intermediate Care Facility-Developmentally Disabled Costs Purchase of Services

BACKGROUND:

To realize the federal financial participation (FFP) associated with the Intermediate Care Facility Developmentally Disabled (ICF-DD) State Plan Amendment, there are administrative costs for the ICF-DD and Quality Assurance Fees (QAF).

METHODOLOGY:

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

The Department estimates the total purchase of services costs to be \$118.8 million for Day Program and Transportation. ICF-DD administration costs are 1.5 percent of the total or \$1.8 million and the QAF are \$7.8 million. Total administration and QAF is \$9.6 million.

REASON FOR CHANGE:

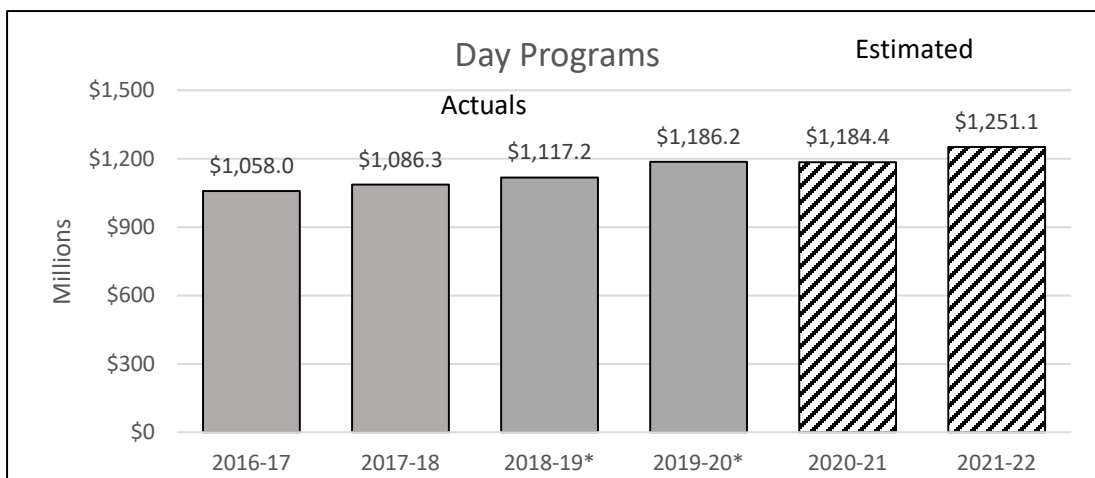
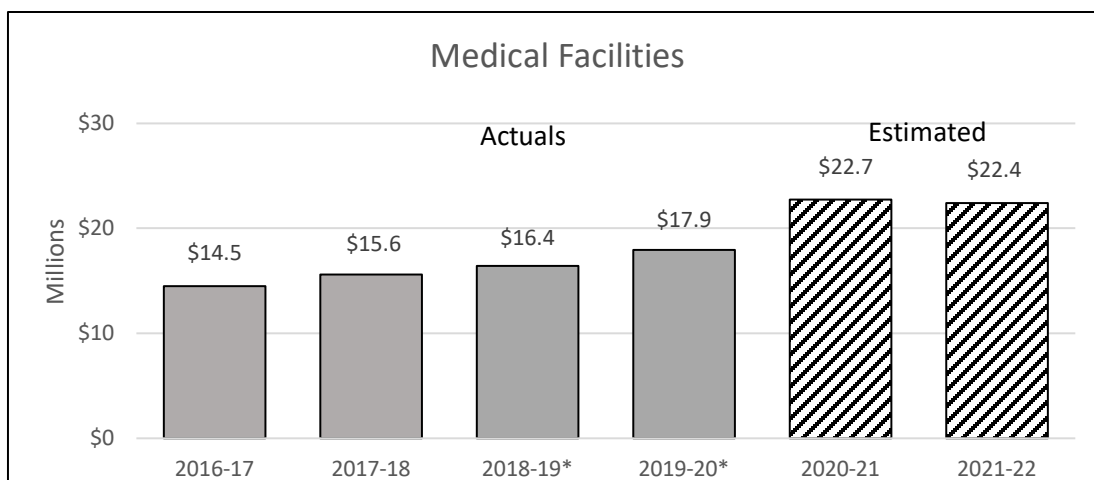
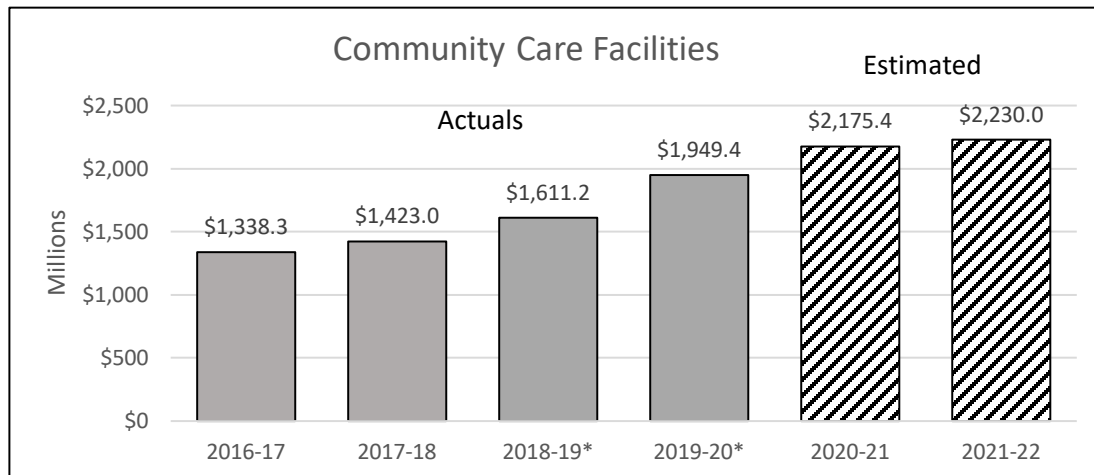
The change in both years is due to updated actuals.

EXPENDITURES:

FY 2020-21	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
Total	\$9,612	\$9,623	\$11
QAF Admin Fees	4,806	4,812	6
Transfer from DHCS	4,806	4,812	5

FY 2021-22	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
Total	\$9,623	\$9,623	\$0
QAF Admin Fees	4,812	4,812	0
Transfer from DHCS	4,812	4,812	0

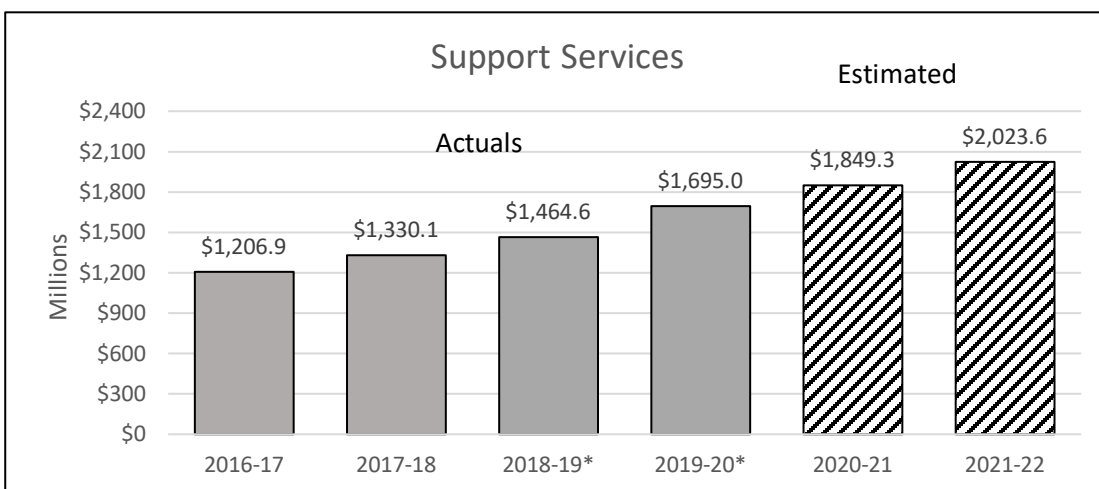
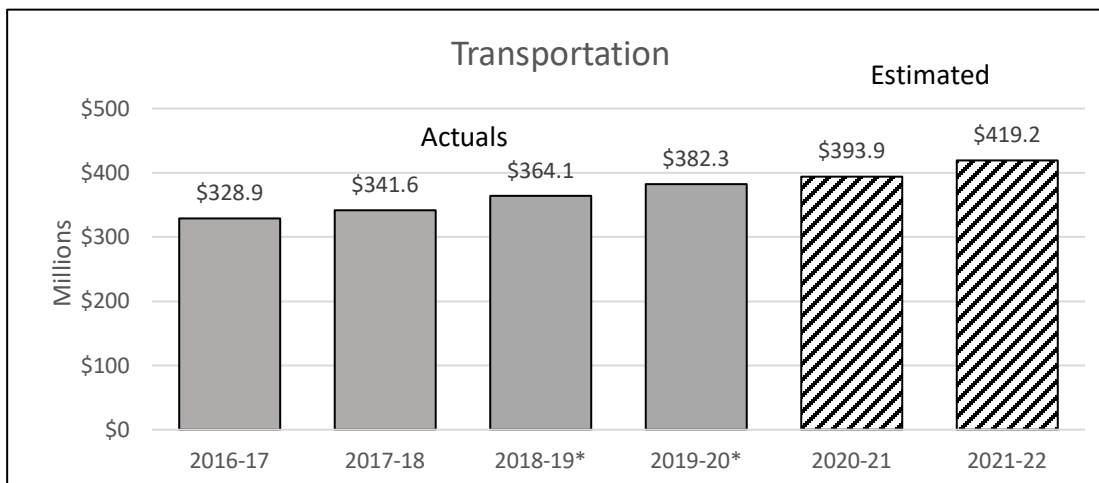
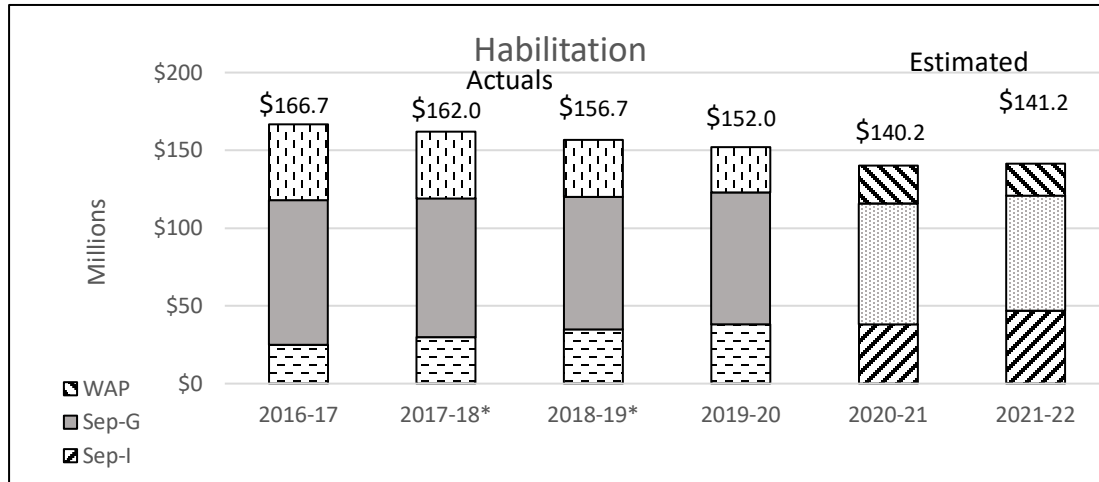
Purchase of Services
Total Expenditures
by Budget Category



* Claims for these years are still open and eligible for payment and reflect actuals through September 2020.

** Totals for all years exclude Quality Assurance Fees

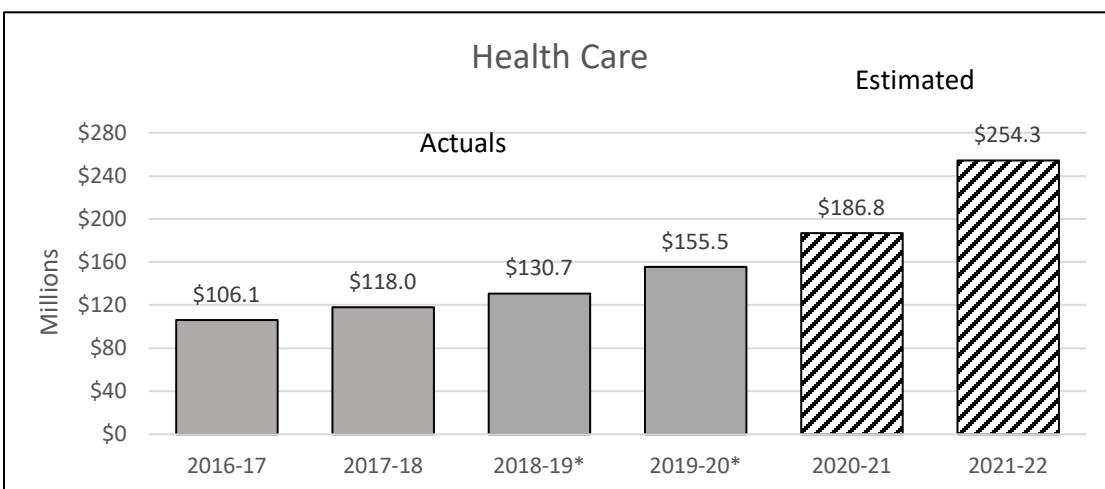
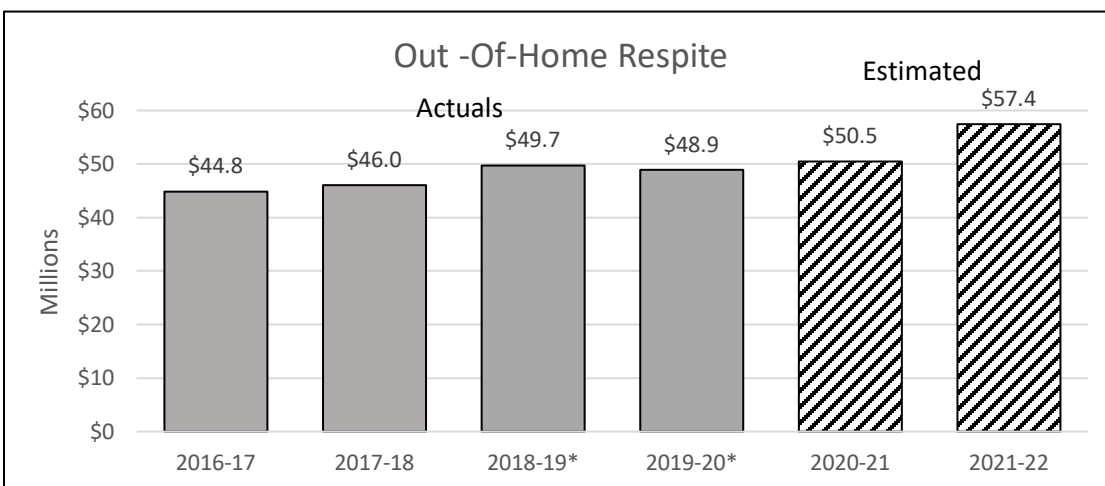
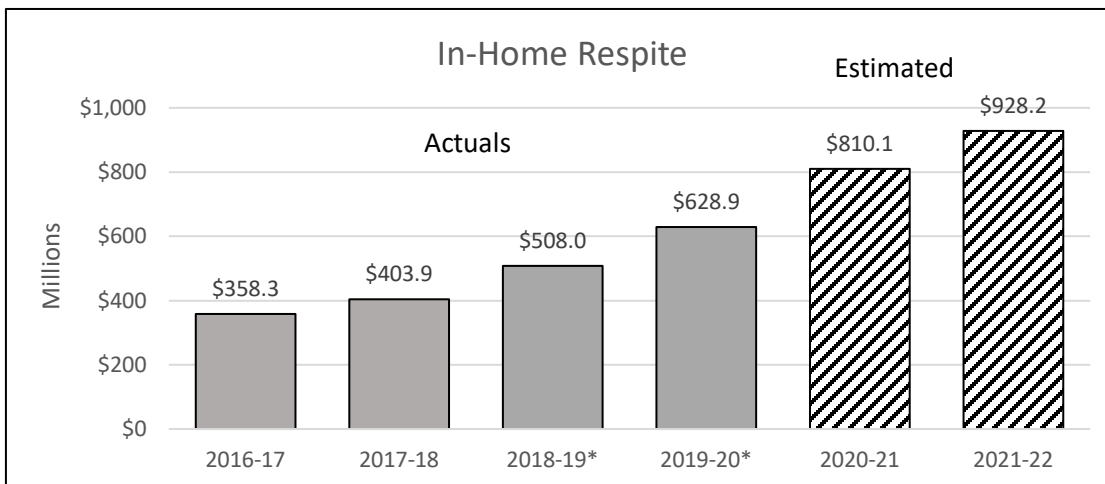
Purchase of Services
Total Expenditures
by Budget Category



* Claims for these years are still open and eligible for payment and reflect actuals through September 2020.

** Totals for all years exclude Quality Assurance Fees

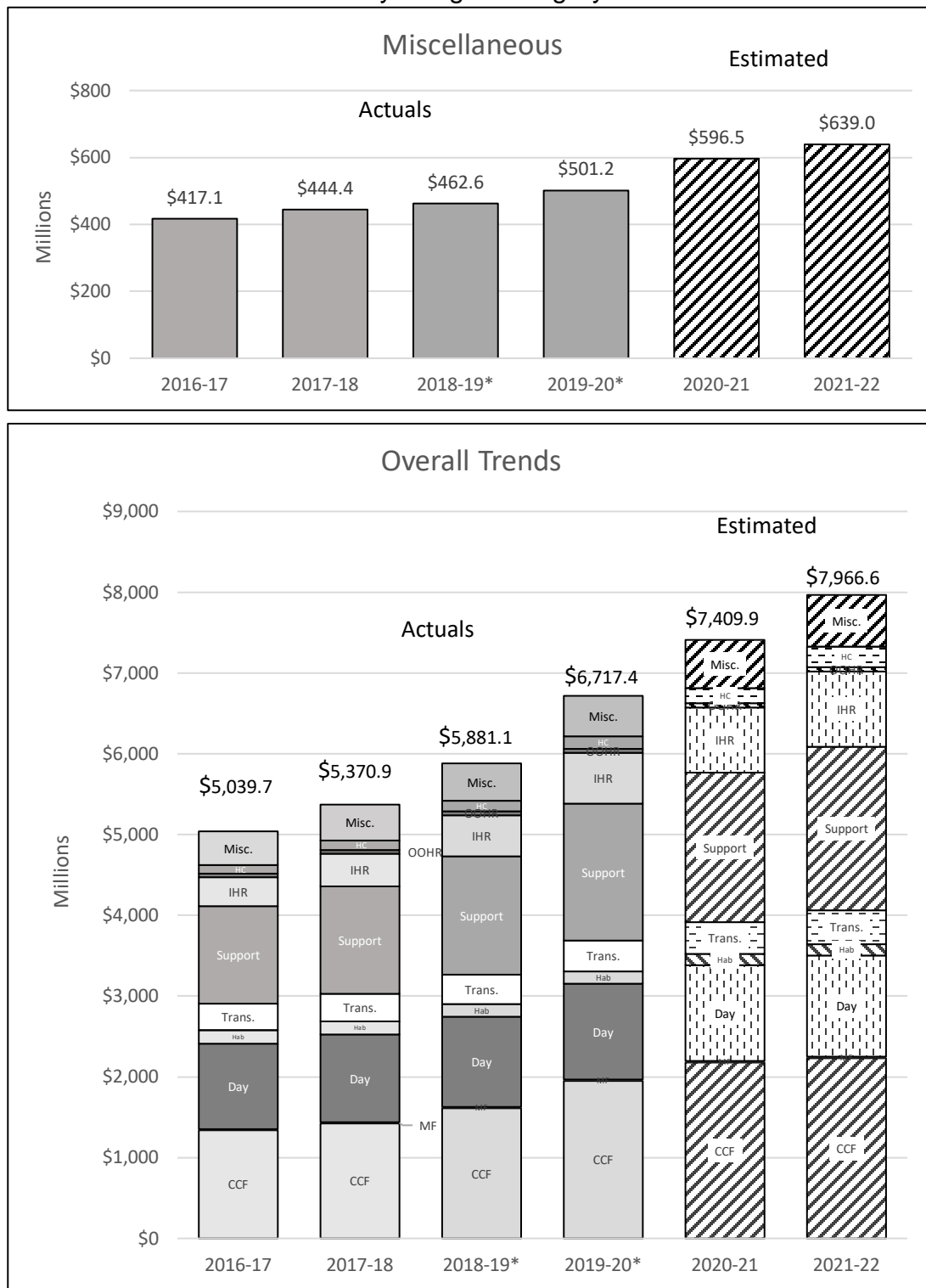
Purchase of Services
Total Expenditures
by Budget Category



* Claims for these years are still open and eligible for payment and reflect actuals through September 2020.

** Totals for all years exclude Quality Assurance Fees

Purchase of Services
Total Expenditures
by Budget Category



* Claims for these years are still open and eligible for payment and reflect actuals through September 2020.

** Totals for all years exclude Quality Assurance Fees

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SECTION F: COMMUNITY PLACEMENT PLAN

Community Placement Plan	F-1
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Community Placement Plan

BACKGROUND:

The purpose of Community Placement Plan (CPP) funding is to enhance the capacity of the community service delivery system and to reduce reliance on developmental centers, Institutions for Mental Disease (IMD) that are ineligible for federal financial participation (FFP), and out-of-state placements. In addition to CPP, the Community Resource Development Plan (CRDP) allows for development in the community to support the expansion of resources for those already residing in the community.

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

- Facilitate transitions to the community from a developmental center, IMD, or out-of-state.
- Assess needs of the individuals, through comprehensive assessments.
- Establish resources in the community for individuals transitioning from another environment.
- Work with the regional centers, regional projects and other team members in transitional activities.
- Stabilize current community living arrangements.

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

Operations

- **Positions:** Positions and costs for employees at the regional centers who focus on CPP and CRDP, to pursue resource development, complete assessments, lead the transition of consumers into community settings, provide quality assurance, and provide clinical expertise.
- **Operating Expenses:** Costs for operating expenses and equipment.

Purchase of Services

- **Start-Up:** Start-Up funding for the development of residential and non-residential services in the community for individuals.
- **Assessment:** Assessment funds cover comprehensive assessments for individuals who are living in developmental centers and IMDs to plan for services when individuals move into the community.
- **Placement:** Placement funds cover costs of consumers moving into community settings from a more restrictive setting.

Community Placement Plan

EXPENDITURES:

	<u>FY 2020-21</u>	<u>FY 2021-22</u>
Operations:		
Regular CPP	\$15,265	\$15,265
Total Regional Center Operations		
Purchase of Services:		
Community Care Facilities	18,602	18,602
Medical Facilities	805	805
Day Programs	170	170
Work Activity Program	0	0
Transportation	26	26
Support Services	519	519
In-Home Respite	119	119
Out-of-Home Respite	8	8
Health Care	2,016	2,016
Miscellaneous Services	30,524	30,524
Total Regular Regional Center POS	52,589	52,589
TOTAL	\$67,854	\$67,854
GF	\$61,562	\$61,562
Reimbursements	\$6,292	\$6,292

REASON FOR CHANGE:

There is no change in both years.

Community Placement Plan

OPERATIONS AND PURCHASE OF SERVICES

FY 2020-21

Regular CPP

	Enacted Budget	FY 2020-21	Difference
I. OPERATIONS	\$15,265	\$15,265	\$0
II. PURCHASE OF SERVICES (POS)			
A. Start-Up	\$27,265	\$27,265	\$0
B. Assessment	\$2,700	\$2,700	\$0
C. Placement	\$22,624	\$22,624	\$0
SUBTOTAL POS	\$52,589	\$52,589	\$0
III. TOTAL CPP	\$67,854	\$67,854	\$0
IV. FUND SOURCES			
A. TOTAL CPP	\$67,854	\$67,854	\$0
B. GF	\$61,562	\$61,562	\$0
C. Reimbursements	\$6,292	\$6,292	\$0

Community Placement Plan

OPERATIONS AND PURCHASE OF SERVICES

FY 2021-22

Regular CPP

	FY 2020-21	FY 2021-22	Difference
I. OPERATIONS	\$15,265	\$15,265	\$0
II. PURCHASE OF SERVICES (POS)			
D. Start-Up	\$27,265	\$27,265	\$0
E. Assessment	\$2,700	\$2,700	\$0
F. Placement	\$22,624	\$22,624	\$0
SUBTOTAL POS	\$52,589	\$52,589	\$0
III. TOTAL CPP	\$67,854	\$67,854	\$0
IV. FUND SOURCES			
D. TOTAL CPP	\$67,854	\$67,854	\$0
E. GF	\$61,562	\$61,562	\$0
F. Reimbursements	\$6,292	\$6,292	\$0

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Ongoing Operations Items

This category of regional center operating expenses includes various previously approved items as described below:

BACKGROUND:

	<u>FY 2020-21</u>	<u>FY 2021-22</u>
Improve Service Coordinator Caseload Ratios:	\$17,000	\$17,000
Approved in the 2016 Budget Act, funds are provided to enable regional centers to hire additional Service Coordinators to improve caseload ratios.		
Compliance with Home and Community-Based Services (HCBS) Operations:	1,422	1,422
Approved in the 2016 Budget Act, funds are provided for regional centers to hire program evaluators to perform initial and ongoing efforts and activities necessary for compliance with HCBS settings requirements.		
Assembly Bill (AB) X2 1 Regional Center Operations Increases:	56,600	56,600
Appropriated by Chapter 3, Statutes of 2016 (AB 1, 2nd Extraordinary Session - Thurmond [ABX2 1]), \$31.1 million General Fund (GF) plus matching funds are available for regional centers' staffing, benefits, and administrative expenses, as well as \$11.0 million GF to fund regional center and community - based organizations' proposals to promote equity in the purchase of services for individuals with developmental disabilities.		
Resources to Implement AB X2 1 Operations:	4,164	4,164
Chapter 3, Statutes of 2016 (AB 1, 2nd Extraordinary Session - Thurmond [ABX2 1] amended the Welfare and Institute (W&I) Code to require regional centers to implement the recommendations and plans to reduce disparities in the provision of services to underserved populations, as well as requirements to establish and report on a provider-administered competitive integrated employment program. Funds are provided for regional centers to hire cultural specialists and employment specialists to implement AB X2 1.		

Ongoing Operations Items

BACKGROUND (continued):

	<u>FY 2020-21</u>	<u>FY 2021-22</u>
Psychological Evaluations for Behavioral Health Treatment (BHT) Fee-for-Service Consumers:	\$1,611	\$1,611
Approved in the 2017 Budget Act, funds are provided to enable regional centers to hire or contract with psychologists to assess consumers with or without an Autism Spectrum Disorder diagnosis and provide referrals for Behavioral Health Treatment Services.		
Oversight and Accountability:	4,450	4,450
Senate Bill 81 (Chapter 28, Statutes of 2019) provided the Department of Developmental Services with funds to regional center operations for oversight and accountability.		
Family Home Agency (FHA) Oversight:	1,619	1,619
Approved in the 2019 Budget Act, funds are provided to enable regional centers to hire additional Service Coordinators to monitor and provide oversight of all FHA homes.		
TOTAL EXPENDITURES	\$86,866	\$86,866

REASON FOR CHANGE:

There is no change in both years.

Ongoing Operations Items

EXPENDITURES:

FY 2020-21	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$86,866	\$86,866	\$0
GF	\$63,475	\$63,475	\$0
Reimbursements	\$23,391	\$23,391	\$0

FY 2021-22	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$86,866	\$86,866	\$0
GF	\$63,475	\$63,475	\$0
Reimbursements	\$23,391	\$23,391	\$0

Developmental Center Closure/Ongoing Workload

BACKGROUND:

With closure of the developmental centers and the transition of individuals to community living arrangements, regional centers continue to provide support and monitoring for these individuals. This includes, but is not limited to, coordination of clinical health/dental services, and quality assurance and management reviews.

METHODOLOGY:

Funding includes salaries, benefits, and operating expenses and equipment for the regional center positions associated with this workload. These positions include quality assurance management, healthcare community specialists, nurse and oral health consultants, service coordinators, clinical support teams and administrative assistants.

REASON FOR CHANGE:

There is no change in both years.

EXPENDITURES:

FY 2020-21	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$8,302	\$8,302	\$0
GF	\$5,830	\$5,830	\$0
Reimbursement	\$2,472	\$2,472	\$0

FY 2021-22	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$8,302	\$8,302	\$0
GF	\$5,830	\$5,830	\$0
Reimbursement	\$2,472	\$2,472	\$0

Self Determination Program

BACKGROUND:

The Centers for Medicare & Medicaid Services approved the federal funding for the Self Determination Program (SDP) on June 7, 2018. The SDP allows for regional center consumers and their families more freedom, control, and responsibility in choosing services, supports, and providers to help meet the objectives in their individual program plans.

The Department consistent with Welfare & Institutions Code §4685.8(g) and in conjunction with stakeholders, has determined that this allocation is for regional center operations/salary and participant support.

METHODOLOGY:

Fiscal year (FY) 2020-21 and FY 2021-22, \$2.0 million is for regional center operation costs and \$2.0 million is for regional centers, in collaboration with the local volunteer advisory committees, to assist selected participants in their transition into the SDP.

REASON FOR CHANGE:

There is no change in both years.

EXPENDITURES:

FY 2020-21	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$4,073	\$4,073	\$0
GF	\$2,851	\$2,851	\$0
Reimbursement	\$1,222	\$1,222	\$0

FY 2021-22	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$4,073	\$4,073	\$0
GF	\$2,851	\$2,851	\$0
Reimbursement	\$1,222	\$1,222	\$0

Specialized Caseload Ratio

BACKGROUND:

A 1:25 service coordinator-to-consumer caseload ratio is in place for consumers with complex needs, as defined in Welfare and Institutions Code (WIC), §4640.6(c)(4). Examples of consumers with complex needs may include individuals who reside or are at risk of residing in Institutions for Mental Diseases, Community Crisis Homes, state-operated acute crisis homes, out-of-state placements or have been admitted to a psychiatric hospital several times within the preceding six months. Due to the complexity and uniqueness of each consumer, intensive case management and service coordination is necessary for stabilization in the least restrictive setting.

The 1:25 ratio is to provide service coordinators to assist in identifying and/or stabilizing services to support individuals with developmental disabilities, for a limited time, who have the most complex needs. Once stabilized the individuals may then transfer back to a higher caseload ratio as appropriate.

METHODOLOGY:

To achieve a 1:25 caseload ratio, in fiscal year (FY) 2020-21 the Department funds 49 services coordinators to provide case management to 1,231 consumers considered high-risk. In FY 2021-22 the Department funds 54 services coordinators to provide case management to 1,354 consumers considered high-risk.

	<u>FY 2020-21</u>	<u>FY 2021-22</u>
Service Coordinator Salary	\$55,000	\$55,000
Fringe Benefits – 34%	18,700	18,700
Operating Expense & Equipment	3,400	3,400
Annual Cost Per Position	\$77,100	\$77,100
Total Positions	49.24	54.16
Total Annual Cost (Rounded)	\$3,800,000	\$4,200,000

(Whole dollars)

Specialized Caseload Ratio

REASON FOR CHANGE:

There is no change in FY 2020-21, from the enacted budget.

The change from FY 2020-21 to FY 2021-22, is due to an increase in the number of consumers with complex needs.

EXPENDITURES:

FY 2020-21	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$3,800	\$3,800	\$0
GF	\$2,600	\$2,600	\$0
Reimbursement	\$1,200	\$1,200	\$0

FY 2021-22	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$3,800	\$4,200	\$400
GF	\$2,600	\$2,874	\$274
Reimbursement	\$1,200	\$1,326	\$126

Specialized Home Monitoring

BACKGROUND:

Pursuant to Welfare and Institutions Code (WIC), §4684.70 and §4684.84(b) regional centers must perform monthly monitoring of individuals residing in Adult Residential Facilities for Persons with Special Healthcare Needs (ARFPHSN) and Enhanced Behavioral Supports Homes (EBSH). A local regional center licensed registered nurse and a qualified behavior modification professional must each visit, with or without prior notice, each consumer, in person, at least monthly in the ARFPHSN and EBSHs, or more frequently if specified in the consumer's individual program plan.

Similarly, WIC §4698(e) specifies that the local regional center and each consumer's regional center shall have joint responsibility for monitoring and evaluating the provision of services in Community Crisis Homes (CCHs). This proposal provides funds to incorporate monitoring resources into regional center operating budgets. Monitoring shall include at least monthly face-to-face onsite case management visits with each consumer by his or her regional center, and at least quarterly quality assurance visits by the vendoring regional center. In addition, on a semi-annual basis, the Department must monitor and ensure compliance by the regional centers with their monitoring responsibilities.

METHODOLOGY:

Regional centers employ and utilize registered nurses to monitor the ARFPHSNs, and licensed behavior specialists to monitor EBSHs and CCHs. Each registered nurse and licensed behavioral specialist is able to complete required monitoring of homes at a nurse/specialist-to-home ratio of 1:4. In fiscal year (FY) 2020-21, the Department funds staff to monitor 93 ARFPHSNs, and 124 EBSHs and CCHs combined. In FY 2021-22, the Department funds staff to monitor 93 ARFPHSNs, and 140 EBSHs and CCHs combined.

Specialized Home Monitoring

	FY 2020-21	FY 2020-21	FY 2021-22	FY 2021-22
	Registered Nurse	Behavioral Specialist	Registered Nurse	Behavioral Specialist
Annual Salary	\$103,200	\$85,000	\$103,200	\$85,000
Fringe Benefits – 34%	35,088	28,900	35,088	28,900
Operating Expense & Equipment	3,400	3,400	3,400	3,400
Annual Cost Per Position	\$141,688	\$117,300	\$141,688	\$117,300
Total Positions	23.25	31.00	23.25	35.00
Annual Cost	\$3,294,000	\$3,636,000	\$3,294,000	\$4,106,000
Total Annual Cost for All Positions		\$6,930,000		\$7,400,000
<i>(whole dollars)</i>				

REASON FOR CHANGE:

The change in both years is due to updating the number of specialized homes requiring monitoring.

EXPENDITURES:

FY 2020-21	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$6,842	\$6,930	\$88
GF	\$4,653	\$4,712	\$59
Reimbursement	\$2,189	\$2,218	\$29

FY 2021-22	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$6,930	\$7,400	\$470
GF	\$4,712	\$5,032	\$320
Reimbursement	\$2,218	\$2,368	\$150

Trauma Informed Services for Foster Youth

BACKGROUND:

Assembly Bill (AB) 2083 (Chapter 815, Statutes of 2018) requires that regional centers participate in development of Memorandum of Understanding (MOUs) in each county served and participate on interagency leadership teams and committees in each county to ensure services are provided in recognition of trauma that may have occurred in the lives of the individuals in foster care. Most of the state's 21 regional centers serve multiple counties. Funding provides for ongoing implementation of AB 2083 workload which includes multiple MOUs, participation on multiple interagency leadership teams and placement committees, data collection and analysis, resource development, identifying and coordinating available placement and service options and providing expertise and guidance to regional center staff on service coordination for children and youth in foster care who have experienced severe trauma.

METHODOLOGY:

The Department estimates regional centers need 15 senior/supervising coordinators statewide at an annual cost of \$1.6 million (\$1.1 million GF).

	Annual Salary
Senior/Supervising Coordinator Salary	\$77,100
Fringe Benefits – 34%	26,210
Operating Expense & Equipment	3,400
Annual Cost Per Position	\$106,710
Total Positions	15
Total Annual Cost (Rounded)	\$1,600,000
<i>(whole dollars)</i>	

Trauma Informed Services for Foster Youth

REASON FOR CHANGE:

There is no change in both years.

EXPENDITURES:

FY 2020-21	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$1,600	\$1,600	\$0
GF	\$1,100	\$1,100	\$0
Reimbursement	\$500	\$500	\$0

FY 2021-22	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$1,600	\$1,600	\$0
GF	\$1,100	\$1,100	\$0
Reimbursement	\$500	\$500	\$0

Systemic, Therapeutic, Assessment, Resources and Treatment Training

BACKGROUND:

The Systemic, Therapeutic, Assessment, Resources and Treatment (START) Training model is a comprehensive approach to crisis prevention and intervention for people with developmental disabilities and co-occurring mental health conditions. This model provides wraparound services that support individuals at-risk for acute crisis or loss of residential placement, and individuals who are currently experiencing crisis. The START model has demonstrated positive outcomes in other states with published scientific papers reporting reductions in psychiatric hospitalizations and emergency room visits, improved mental health symptoms, reductions in challenging behavior, and maintaining residential placements in the community. The University of New Hampshire Center for START Services provides training and certification in the START model to community providers who make up the local START teams. Each local START team consists of a program director, clinical and medical directors, START coordinators, therapeutic in-home coaches, coordinator and coaching team leads, and administrative support.

START services will help maintain individuals in their current residential arrangement and prevent admissions into more restrictive settings, such as CCHs, IMDs, and out-of-state placements. START services provide 24-hour crisis services; and planning and training to families, direct support staff, and local partners (e.g., police, hospital staff, teachers) on person-centered, trauma-informed, and evidence-based support services for individuals with co-occurring developmental disabilities and mental health needs. One-time START resources were authorized by the Budget Act of 2020, with implementation beginning in fiscal year (FY) 2021-22. Funding for start-up operating costs will cover three months of costs associated with the local provider team: hiring and training staff, renting office space, acquiring materials and equipment, etc. before the team is prepared to accept consumers and begin providing services.

First, second, and third year training costs cover all aspects of the START model training provided by the University of New Hampshire Center for START services to the local START team. This includes personnel costs, travel, printed materials, online training platform, data management, and technical support, as well as quarterly evaluations of the local START teams using collected data, and an annual independent, comprehensive evaluation of California's system of care.

Systemic, Therapeutic, Assessment, Resources and Treatment Training

METHODOLOGY:

Costs are provided by the contractor, University of New Hampshire Center for START training services.

	Cost per team
Start-up Operating Cost	\$300,000
First-year Training Cost	280,060
Second-year Training Cost	320,864
Third-year Training Cost	234,096
Annual Cost per team	\$1,135,020
Total Annual Cost for 4 Teams (Rounded)	\$4,540,000
<i>(whole dollars)</i>	

REASON FOR CHANGE:

This is a new policy effective July 1, 2021.

EXPENDITURES:

FY 2021-22	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$0	\$4,540	\$4,540
GF	\$0	\$3,178	\$3,178
Reimbursement	0	\$1,362	\$1,362

Regional Center Emergency Coordinators

BACKGROUND:

The Department requests \$2.0 million (\$1.4 million General Fund [GF]) for 21 positions, one at each regional center, to coordinate emergency preparedness, response, and recovery activities.

During an emergency, the 21 regional center Emergency Response Coordinators are required to provide immediate notifications and updates to those impacted, identify closures and loss of services, identify and address shelter needs, secure emergency supplies; and coordinate between the Department, other regional centers, and local agencies to maintain consumer safety and supports. Aside from the immediate emergency response, Emergency Response Coordinators also would support ongoing efforts in educating counties on regional center roles and developing emergency plans with counties and neighboring regional centers that can meet the unique behavioral and medical needs of regional center consumers.

METHODOLOGY:

The annual costs to fund 21 Emergency Response Coordinators is \$2.0 million.

	Annual Salary
Emergency Response Salary	\$69,143
Fringe Benefits – 34% Operating	23,509
Expense & Equipment Annual	3,400
Cost Per Position	\$96,051
Total Positions	21
Total Annual Cost (Rounded)	\$2,017,000
<i>(whole dollars)</i>	

REASON FOR CHANGE:

This is a new policy effective July 1, 2021.

EXPENDITURES:

FY 2021-22	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$0	\$2,017	\$2,017
GF	\$0	\$1,372	\$1,372
Reimbursements	\$0	\$645	\$645

Community Navigators

BACKGROUND:

The Department requests resources to contract with Family Resource Centers to administer community navigator programs. The model utilizes parents of children in the regional center system, community leaders, and self-advocates to provide information and guidance to consumers and their families who could benefit from added support to navigate connection to generic and regional center resources.

METHODOLOGY:

Fiscal Year (FY) 2021-22 includes funding of \$500,000 for a one-time evaluation focused on improving the effectiveness of existing disparity projects and \$4.8 million for community navigator programs. Following FY 2021-22, \$5.3 million ongoing is provided for community navigator programs.

REASON FOR CHANGE:

This is a new policy effective July 1, 2021.

EXPENDITURES:

FY 2021-22	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$0	\$5,300	\$5,300
GF	\$0	\$3,200	\$3,200
Reimbursement	\$0	\$2,100	\$2,100

Ongoing Purchase of Service Items

This category of purchase of services expenses includes various previously approved items as described below:

BACKGROUND:

	<u>FY 2020-21</u>	<u>FY 2021-22</u>
Best Buddies:	\$2,000	\$2,000

The Budget Act of 2019 includes ongoing funding of \$2.0 million General Fund (GF) provided to Best Buddies International. The funding will support Best Buddies' delivery of peer-to-peer mentoring and supported employment services throughout the state.

Competitive, Integrated Employment Incentives:	29,000	29,000
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Welfare and Institutions Code (WIC) was amended to add §4870(d-g) to increase sustained Competitive Integrated Employment (CIE) placements by regional center service providers. CIE is full or part-time work for which an individual is paid minimum wage or greater in a setting with others who do not have disabilities. WIC §4870(d) authorizes \$29 million ongoing funding to the Department for incentive payments to providers for placement and retention of regional center consumers, consistent with a consumers Individual Program Plan.

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

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

Ongoing Purchase of Service Items

	<u>FY 2020-21</u>	<u>FY 2021-22</u>
Compliance with Home and Community-Based Services (HCBS) POS:	\$15,000	\$15,000

In January 2014, the Center for Medicare & Medicaid Services (CMS) published final regulations defining what constitutes a home and community-based setting for Medicaid reimbursement purposes under §1915(c) Home and Community-Based (HCBS) Waivers, and §1915(i) HCBS State Plan programs. States were allowed up to a five-year transition period to make any modifications necessary to comply with the regulations. Subsequently, CMS requires compliance by March 17, 2023. To operate in full compliance with the CMS final regulations, HCBS settings must be integrated in and support full access to the greater community for individuals receiving Medicaid HCBS. To assist with compliance, funding is available for providers to make modifications to the way services are provided.

TOTAL EXPENDITURES	\$46,000	\$46,000
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REASON FOR CHANGE:

There is no change in both years.

EXPENDITURES:

<u>FY 2020-21</u>	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$46,000	\$46,000	\$0
GF	\$33,000	\$33,000	\$0
Reimbursements	\$13,000	\$13,000	\$0

<u>FY 2021-22</u>	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$46,000	\$46,000	\$0
GF	\$33,000	\$33,000	\$0
Reimbursements	\$13,000	\$13,000	\$0

Enhanced Behavioral Supports Home with Delayed Egress and Secured Perimeters

BACKGROUND:

Enhanced Behavioral Supports Homes (EBSH) are a specialized licensed residential model for individuals with intensive behavioral support needs. The homes are certified by the Department and licensed by the Department of Social Services. Homes equipped with delayed egress and secured perimeters (DESP) provide an added layer of protection for individuals and the community who exhibit elopement and other high-risk behavioral and safety concerns and need the security these adaptations provide to remain safe residing in community settings. Individuals who would not otherwise be able to live successfully in the community are able to do so with the services provided in EBSHs with DESP.

To support the Department's commitment to reduce reliance on, and timely transitioning of individuals from restrictive settings, this funding supports the acquisition, renovation, and provider start-up to develop five additional EBSHs with DESP.

METHODOLOGY:

The cost to develop five EBSH with DESP (20 beds) was based on allocations to regional centers of similar homes, at an estimated cost of \$7.5 million GF, or \$1.5 million per home for acquisition, renovation, and service provider start-up.

REASON FOR CHANGE

There is no change in FY 2020-21 from the enacted budget providing one-time funding.

EXPENDITURES:

FY 2020-21		<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
	TOTAL	\$7,500	\$7,500	\$0
	GF	\$7,500	\$7,500	\$0

FY 2021-22		<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
	TOTAL	\$7,500	\$0	(\$7,500)
	GF	\$7,500	\$0	(\$7,500)

Electronic Visit Verification Penalty

BACKGROUND:

Electronic Visit Verification (EVV) is a telephone and computer-based system that electronically verifies in-home service visits. EVV systems must verify the type of service performed; the individual receiving the service; date of the service; location of service delivery; the individual providing the service; and the time the service begins and ends. Pursuant to subsection I of section 1903 of the Social Security Act (42 U.S.C. 1396b), all states must implement EVV for Medicaid-funded Personal Care Services by January 1, 2020 and Home Health Care Services by January 1, 2023. The state is subject to incremental Federal Medical Assistance Percentage reductions of up to 1 percent unless the state has both made a "good faith effort" to comply and has encountered "unavoidable delays." California was granted a one-year extension to implement EVV for Medicaid-funded Personal Care Services. Without the extension, the Department would have had a penalty in fiscal year (FY) 2019-20. The penalty is expected to occur in the calendar year of 2021. The Department anticipates the EVV systems will be ready by December 31, 2021.

Funding for backfilling for the EVV penalty is comprised of 100 percent General Fund (GF).

METHODOLOGY:

The penalty for non-compliance is estimated to be \$5.2 million in FY 2020-21 and \$5.8 million in FY 2021-22, based on 0.5% penalty of federally eligible expenditures for affected personal care services, beginning January 1, 2021 thru December 31, 2021. The estimated fiscal reflects a backfill of GF to account for the reduction in federal funding.

REASON FOR CHANGE:

There is no change in FY 2020-21, from the enacted budget.

The change from FY 2020-21 to FY 2021-22 is based on updated eligible expenditures for affected personal care services.

Electronic Visit Verification Penalty

EXPENDITURES:

FY 2020-21	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$5,219	\$5,219	\$0
GF	\$5,219	\$5,219	\$0
Reimbursement	\$0	\$0	\$0

FY 2021-22	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$5,219	\$5,822	\$603
GF	\$5,219	\$5,822	\$603
Reimbursement	0	\$0	\$0

Provider Supplemental Rate Increases

BACKGROUND:

This funding provides a rate increase of up to 8.2 percent, for select services based on the Department's rate study submitted to the Legislature on March 15, 2019. The rate increases were effective January 1, 2020 for most services, with rate increases for three additional services (Independent Living Program, Infant Development Program, and Early Start Specialized Therapeutic Services) effective January 1, 2021, pending federal approval. When originally authorized, statute indicated these rate increases would be suspended effective December 31, 2021, unless specified fiscal conditions were met. The administration is proposing accompanying trailer bill language to extend the rate increases to December 31, 2022.

METHODOLOGY:

The rate increase up to 8.2 percent was calculated using the September 2020 State Claims Data file, with expenditures through June 30, 2020.

REASON FOR CHANGE:

The change in FY 2020-21, from the enacted budget, is due to updated actual expenditures.

The change from FY 2020-21 to FY 2021-22 reflects full year funding for Early Start Specialized Therapeutic Services, Independent Living Program and the Infant Development Program.

EXPENDITURES:

FY 2020-21	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$430,308	\$436,669	\$6,361
GF	\$259,823	\$246,400	(\$13,423)
Reimbursements	\$170,485	\$190,269	\$19,784

FY 2021-22	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$436,669	\$454,634	\$17,965
GF	\$246,400	\$261,218	\$14,818
Reimbursements	\$190,269	\$193,416	\$3,147

Senate Bill (SB) 3, Minimum Wage Increase Effective January 1, 2021

BACKGROUND:

SB 3 (Chapter 4, Statutes of 2016) requires the minimum wage to increase from \$13.00 to \$14.00 per hour on January 1, 2021, for employers with 26 or more employees, with further increases each year until the minimum wage reaches \$15 per hour in 2022. The next increase from \$14.00 to \$15.00 per hour will occur on January 1, 2022.

METHODOLOGY:

Costs are estimated using Purchase of Service expenditures that are based on previous actual rate increases to service providers.

	<u>FY 2020-21</u>	<u>FY 2021-22</u>
Community Care Facilities	\$52,481	\$108,234
Day Programs	6,812	14,367
Habilitation Services	135	223
Transportation	447	950
Support Services	21,073	46,011
In-Home Respite	11,878	27,132
Out-of-Home Respite	8	18
Miscellaneous	785	1,691
TOTAL EXPENDITURES	\$93,619	\$198,626

REASON FOR CHANGE:

The change in FY 2020-21, from the enacted budget, is due to updated actual expenditures.

The change from FY 2020-21 to FY 2021-22, is due to a full year cost of the \$1.0 minimum wage increase.

Senate Bill (SB) 3, Minimum Wage Increase Effective January 1, 2021

EXPENDITURES:

FY 2020-21	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$120,323	\$93,619	(\$26,704)
GF	\$61,695	\$49,266	(\$12,429)
Reimbursements	\$58,628	\$44,353	(\$14,275)

FY 2021-22	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$93,619	\$198,626	\$105,007
GF	\$49,266	\$104,394	\$55,128
Reimbursements	\$44,353	\$94,232	\$49,879

Uniform Holiday Schedule

BACKGROUND:

Welfare and Institutions Code Section 4692, Statutes of 2009, implemented the Uniform Holiday Schedule (UHS) as a General Fund (GF) cost savings measure in September 2009. The intent was to standardize and increase to 14 the number of observed holidays in the regional center system. On these holidays providers are precluded from billing for services provided by work activity programs, activity centers, adult development centers, behavior management programs, social recreation programs, infant development programs, program support group day services, client/parent support behavior intervention training, community integration training programs, community activities support services, and creative arts programs, as well as transportation to these programs. Implementation of the UHS has been suspended since 2018. This suspension is currently scheduled to sunset on December 31, 2021. However, the administration is proposing accompanying trailer bill language to extend suspension of the UHS to December 31, 2022. Funding is provided to allow regional centers to provide services to consumers according to their individual holiday schedule.

METHODOLOGY:

This policy assumes increased funding is needed to provide services according to the varying individual regional center holiday schedules. Specifically, the estimate assumes funding is needed for seven additional days of service in 14 regional centers, and four additional days of service in seven regional centers.

	<u>FY 2020-21</u>	<u>FY 2021-22</u>
Day Programs	\$25,249	\$26,874
Habilitation Services	586	505
Transportation	9,362	9,648
Support Services	14,085	15,563
In-Home Respite	806	874
Miscellaneous	2,551	2,431
TOTAL EXPENDITURES	\$52,639	\$55,895

Uniform Holiday Schedule

REASON FOR CHANGE:

The change in both years is due to actual and estimated expenditures for continued growth and changes in utilizations.

EXPENDITURES:

FY 2020-21	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$51,511	\$52,639	\$1,128
GF	\$31,312	\$33,710	\$2,398
Reimbursements	\$20,199	\$18,929	(\$1,270)

FY 2021-22	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$52,639	\$55,895	\$3,256
GF	\$33,710	\$35,844	\$2,134
Reimbursements	\$18,929	\$20,051	\$1,122

Increased Costs for COVID-19

BACKGROUND:

On March 4, 2020, Governor Gavin Newsom declared a State of Emergency for California in response to the global COVID-19 pandemic. As a result of COVID-19, the Department has experienced increased costs in supporting regional center consumers. These costs include providing additional support for consumers in their homes as well as the development of "surge sites" to serve consumers diagnosed with, exposed to, or at high risk due to COVID-19.

The Governor's Budget supports the Department's safety net program for individuals with developmental disabilities to meet the additional needs of consumers during the public health crisis. These include short-term impacts, as well as long-term challenges that will continue into FY 2021-22. The Department's budget recognizes the need for additional resources in residential settings, including the family home, as well as the impacts of decreased access to other community services as a result of the COVID-19 pandemic.

\$172.0 million of the estimated expenditures for FY 2020-21 are incorporated into the Purchase of Services categories.

METHODOLOGY:

The impact due to COVID-19 was calculated using the September 2020 State Claims Data file, with expenditures through June 30, 2020 with a target review for RC surge using updated November 2020 State Claims Data. In particular, expenditure trends in March through June 2020 were compared to prior year trends for those months. The results of this comparison informed the estimated impact of COVID-19 on expenditures. While it is assumed that expenditures in most categories will return to historical utilization and growth patterns in FY 2021-22, longer-term impacts of COVID-19 are anticipated in Community Care Facilities, Transportation, Support Services, and In-Home Respite.

	<u>FY 2020-21</u>	<u>FY 2021-22</u>
Community Care Facilities	\$104,133	\$8,010
Day Program Services	(28,556)	0
Habilitation Services	(2,567)	0
Transportation	(13,152)	(13,973)
Support Services	49,501	3,176
In-Home Respite	76,950	56,110
Out-of-Home Respite	(4,048)	0
Health Care	(20,300)	0
Miscellaneous	10,029	0
RC Surge	170,000	175,000
TOTAL PURCHASE OF SERVICES	\$341,990	\$228,323

Increased Costs for COVID-19

REASON FOR CHANGE:

The change in FY 2020-21, from the enacted budget, reflects continued growth and changes in utilization related to COVID-19.

The change from FY 2020-21 to FY 2021-22 assumes continued but less impact as a result of the State of Emergency, and caseload and utilization will return to regular trends.

EXPENDITURES:

FY 2020-21	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$254,101	\$341,990	\$87,889
GF	\$170,773	\$196,637	\$25,864
Reimbursements	\$83,328	\$145,353	\$62,025

FY 2021-22	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$341,990	\$228,323	(\$113,667)
GF	\$196,637	\$146,419	(\$50,218)
Reimbursements	\$145,353	\$81,904	(\$63,449)

Health Facility Rate Increase

BACKGROUND:

On March 4, 2020, Governor Gavin Newsom declared a State of Emergency for California, as a result of the global COVID-19 pandemic. In response, the Department of Health Care Services (DHCS) implemented a 10 percent per diem rate increase for Intermediate Care Facilities (ICF-DD) and Skilled Nursing Facilities (SNF) through the duration of the state of emergency. DHCS received federal approval of State Plan Amendment (SPA) 20-0024, effective March 1, 2020. This rate increase applies for those facilities vendored through regional centers.

METHODOLOGY:

The estimate for the 10 percent rate increase was calculated using the September 2020 State Claims Data file, with expenditures through June 30, 2020 and assumes the rate increase will no longer apply beginning July 1, 2021.

REASON FOR CHANGE:

This is a new policy.

EXPENDITURES:

FY 2020-21	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$0	\$673	\$673
GF	\$0	\$673	\$673
Reimbursement	\$0	\$0	\$0

FY 2021-22	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$673	\$0	(\$673)
GF	\$673	\$0	(\$673)
Reimbursement	\$0	\$0	\$0

Senate Bill (SB) 3, Minimum Wage Increase Effective January 1, 2022

BACKGROUND:

SB 3 (Chapter 4, Statutes of 2016) requires the minimum wage to increase from \$14.00 to \$15.00 per hour on January 1, 2022, for employers with 26 or more employees.

METHODOLOGY:

Costs are estimated using Purchase of Service expenditures that are based on previous actual rate increases to service providers.

	<u>FY 2020-21</u>	<u>FY 2021-22</u>
Community Care Facilities	\$0	\$71,592
Day Programs	0	11,067
Habilitation Services	0	146
Transportation	0	947
Support Services	0	54,422
In-Home Respite	0	19,785
Out-of-Home Respite	0	24
Miscellaneous	0	1,254
TOTAL EXPENDITURES	\$0	\$159,237

REASON FOR CHANGE:

This is a new policy effective January 1, 2022.

EXPENDITURES:

<u>FY 2021-22</u>	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$0	\$159,237	\$159,237
GF	\$0	\$83,666	\$83,666
Reimbursements	\$0	\$75,571	\$75,571

Youth Returning from Out-of-State Foster Care

BACKGROUND:

Historically, when youth with complex behavioral, medical, and mental health needs in the foster care system cannot be served by in-state placement, counties may place youth in out-of-state facilities. The Department of Social Services conducted a reassessment of these facilities and found violations of California licensure standards resulting in the decertification of facilities. Approximately 10 youths in the decertified out-of-state facilities are anticipated to be eligible for Lanterman Act services and require therapeutic residential environments to support complex developmental and behavioral needs.

METHODOLOGY:

The expenditures were developed based on five youths receiving supports in Enhanced Behavioral Support Homes.

The Budget includes \$900,000 (\$500,000 GF) in FY 2020-21 and \$1.8 million (\$1.0 million GF) in FY 2021-22 for the Department to support youth in their transition back to California.

REASON FOR CHANGE:

This is a new policy.

EXPENDITURES:

FY 2020-21	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$0	\$900	\$900
GF	0	500	500
Reimbursement	0	400	400

FY 2021-22	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$900	\$1,800	\$900
GF	500	1,000	500
Reimbursement	400	800	400

Medicaid Claiming Adjustments

BACKGROUND:

For the Department's Medicaid eligible programs expenditures, some federally ineligible consumers, may have been claimed for the time period of July 1, 2010 to June 30, 2020.

The Department of Health Care Services (DHCS) has determined that the cost of services for some individuals were included in Medicaid claims inappropriately based on the individuals' immigration status. DHCS identified this issue across multiple programs and departments. As a result, repayment of federal funds is necessary. The Department has implemented a solution to prevent this issue from occurring moving forward.

Repayments of claiming for ineligible consumers are 100% GF.

METHODOLOGY:

The estimates are based on actual expenditures from July 1, 2010 to June 30, 2020 for Medicaid eligible programs, including the Home and Community-Based Services waiver, Targeted Case Management, 1915(i) SPA, Early Periodic Screening Diagnosis and Treatment, Intermediate Care Facility-Developmentally Disabled State Plan Amendment, and Behavioral Health Treatment.

	<u>FY 2020-21</u>
Operations	\$20,296
Purchase of Services	207,457
TOTAL	\$227,753

REASON FOR CHANGE:

The change in FY 2020-21, from the enacted budget, reflects a completed review to identify ineligible consumers expenditures for FY 2010-11 to FY 2019-20.

EXPENDITURES:

<u>FY 2020-21</u>	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$268,415	\$227,753	(\$40,662)
GF	\$307,373	\$227,753	(\$79,620)
Reimbursements	(\$38,958)	\$0	\$38,958

Medicaid Claiming Adjustments

FY 2021-22	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$227,753	\$0	(\$227,753)
GF	\$227,753	\$0	(\$227,753)
Reimbursements	\$0	\$0	\$0

Forensic Diversion

BACKGROUND:

The estimate includes \$3.7 million (\$2.3 million General Fund[GF]) and 5 regional center positions to support forensic diversion program for individuals with Intellectual and Developmental Disabilities (IDD) who have been charged with a felony and are active in the criminal justice system. The diversion program provides outreach and services for individuals who have become involved in criminal activities and provides an opportunity for an individual to remain in a community setting as opposed to a locked, highly restrictive setting when the individual has been determined by the court to not pose a risk of danger to public safety. The intent of this approach is for the individual to receive additional professional supports during court proceedings and have an opportunity to be referred to a habilitation or rehabilitation program with forensic services and supports when deemed appropriate.

The Budget Act of 2020 provided \$1.7 million GF for regional center positions and contracted wrap around services. The 5 Forensic Specialists in regional centers will provide subject matter expertise on the criminal justice/court system. They will be point on all legal issues and work on behalf of other regional centers as needed. The regional center specialists will work with all parties, including DDS legal and regional project staff to find the appropriate community placement. The duties would also include working to develop necessary community resources and building collaborative relationships and working with the courts, district attorneys and public defenders to educate and inform them on the legal requirements for alternatives, where necessary.

In addition to the regional center Forensic Specialists, funding is also included to contract with an organization with clinically proven expertise to provide intensive wraparound services to individuals with IDD who have entered the judicial system. These services are for individuals who, after consideration of reports by the probation department, the regional center and the prosecutor, have been determined by the court not to pose an unreasonable risk of danger to public safety and can be treated in the community. Intensive treatment and wraparound services will be provided by trained clinicians. They will work collaboratively with the individual and their team members in assuring identified wraparound services are in place while the individual is transitioning from the criminal justice system into a community setting.

In addition to existing resources, an additional \$2.0 million (\$572,000 GF) is provided to expand contracted wrap around services and include Federal Financial Participation.

Forensic Diversion

METHODOLOGY:

The Department will fund 5 Forensic Specialists in regional centers at an annual cost of \$534,000 and \$3.2 million for a contractor to provide wraparound services to individuals with IDD.

	Annual Salary
Forensic Specialist Salary	\$77,100
Fringe Benefits – 34%	26,200
Operating Expense & Equipment	3,400
Annual Cost Per Position	\$106,700
Total Positions	5
Total Annual Cost (Rounded)	\$534,000
<i>(whole dollars)</i>	

	<u>FY 2021-22</u>
Operations	\$534,000
Purchase of Services	3,200,000
TOTAL	\$3,734,000

REASON FOR CHANGE:

This is a new policy effective July 1, 2021.

EXPENDITURES:

FY 2021-22	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$0	\$3,734	\$3,734
GF	\$0	\$2,347	\$2,347
Reimbursements	\$0	\$1,387	\$1,387

Enhanced Federal Funding

BACKGROUND:

On March 18, 2020 the President signed the Families First Coronavirus Response Act (FFCRA) into law. The FFCRA provides a temporary 6.2 percentage point increase to California's Federal Medical Assistance Percentage (FMAP) under section 1905(b) of the Social Security Act, effective January 1, 2020. The increase in FMAP applies to costs associated with the Home and Community-Based Services and Self-Determination Program Waivers, 1915 (i) State Plan Amendment, Targeted Case Management, Intermediate Care Facility-Developmentally Disabled SPA, and the Early Periodic Screening Diagnosis and Treatment.

The increase in federal reimbursements is assumed through December 31, 2021.

METHODOLOGY:

The FY 2020-21 enhanced FMAP is estimated based on the additional 6.2 percent federal funds participation for eligible costs. The increased federal funds will result in a corresponding General Funds savings.

	<u>FY 2020-21</u>	<u>FY 2021-22</u>
Operations	\$27,944	\$14,665
Purchase of Services	359,625	194,627
TOTAL	\$387,569	\$209,292

REASON FOR CHANGE:

The change in FY 2020-21, from the enacted budget, is due to updated expenditures eligible for reimbursement.

The change from FY 2020-21 to FY 2021-22, is due to the enhanced FMAP is expected to end on December 31, 2021.

EXPENDITURES:

<u>FY 2020-21</u>	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$0	\$0	\$0
GF	(\$370,789)	(\$387,569)	(\$16,780)
Reimbursements	\$370,789	\$387,569	\$16,780

<u>FY 2021-22</u>	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$0	\$0	\$0
GF	(\$387,569)	(\$209,292)	\$178,277
Reimbursements	\$387,569	\$209,292	(\$178,277)

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General Fund

BACKGROUND:

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

METHODOLOGY:

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

		<u>FY 2020-21</u>	<u>FY 2021-22</u>
• GF Match		\$2,767,145	\$3,205,542
This portion of GF is required to use as a match to reimbursements received from the Department of Health Care Service (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:			
	GF %		
Home and Community-Based Services (HCBS) Waiver	50.00%	2,090,366	2,444,044
HCBS Waiver Administration	50.00%	17,390	19,903
Medicaid Administration	25.00%	6,056	6,056
Targeted Case Management (TCM)	50.00%	197,414	221,875
Intermediate Care Facility/Developmentally Disabled	50.00%	51,362	54,997
Quality Assurance Fees (Operations) Policy only*	50.00%	891	891
1915 (i) State Plan Amendment	50.00%	376,786	411,819
Early Periodic Screening Diagnosis and Treatment	50.00%	22,055	33,667
Self-Determination Program Waiver	50.00%	4,825	12,290

General Fund

- GF Other: \$2,754,145 \$2,902,703
 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.
- **TOTAL EXPENDITURES** **\$5,521,629 \$6,108,245**

EXPENDITURES:

FY 2020-21	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$5,457,660	\$5,521,629	\$63,969
GF Match	3,180,152	2,767,145	(413,007)
GF Other	2,277,508	2,754,484	476,976

FY 2021-22	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$5,521,629	\$6,108,245	\$586,616
GF Match	2,767,145	3,205,542	438,397
GF Other	2,754,484	2,902,703	148,219

**For Quality Assurance Fees, the GF Match for Purchase of Services is in the DHCS Budget*

Reimbursements
Summary of Reimbursements and General Fund (GF) Match

REIMBURSEMENTS	Enacted Budget	FY 2020-21	FY 2021-22
A. Home and Community-Based Services (HCBS) Waiver	\$5,138,014	\$4,772,524	\$5,211,169
1. Reimbursement (from DHCS) = 50%	2,425,729	2,386,262	2,605,583
Enhanced FMAP 6.2%	286,556	295,896	161,542
2. DDS GF Match = 50% (Purchase of Services)	2,425,729	2,090,366	2,444,044
B. HCBS Waiver Administration	\$34,978	\$34,780	\$39,806
1. Reimbursement (from DHCS) = 50%	17,489	17,390	19,903
2. DDS GF Match = 50% (Operations)	17,489	17,390	19,903
C. Medicaid Administration	\$19,404	\$24,224	\$24,224
1. Reimbursement (from DHCS) = 75%	14,553	18,168	18,168
2. DDS GF Match = 25% (Operations)	4,851	6,056	6,056
D. Targeted Case Management (TCM)	\$482,884	\$450,716	\$473,079
1. Reimbursement (from DHCS) = 50%	227,769	225,358	236,539
Enhanced FMAP 6.2%	27,347	27,944	14,665
2. DDS GF Match = 50% (Operations)	227,768	197,414	221,875
E. Targeted Case Management Administration	\$16,274	\$0	\$0
1. Reimbursement (from DHCS) = 50%	8,137	0	0
2. DDS GF Match = 50% (Operations)	8,137	0	0
F. Title XX Block Grant	\$213,421	\$213,421	\$213,421
1a. Social Services (from DSS) = 100%	136,264	136,264	136,264
1b. Temporary Assistance for Needy Families (TANF) (from DSS) = 100% (Purchase of Services)	77,157	77,157	77,157
G. Intermediate Care Facility-Developmentally Disabled (ICF-DD)	\$124,305	\$117,263	\$117,263
1. Reimbursement (from DHCS) = 50%	58,659	58,631	58,631
Enhanced FMAP 6.2%	6,989	7,270	3,635
2. DDS GF Match = 50% (Purchase of Services)	58,657	51,362	54,997
H. Quality Assurance Admin Fees (Transfer from DHCS) a/	\$11,392	\$11,405	\$11,405
1a. Operations:	1,780	1,782	1,782
Reimbursements (from DHCS) = 50%	890	891	891
DDS GF Match = 50%	890	891	891
1b. Purchase of Services:	9,612	9,623	9,623
Reimbursements (from DHCS) = 100%	9,612	9,623	9,623
I. 1915(i) State Plan Amendment	\$824,597	\$860,244	\$878,087
1. Reimbursement (from DHCS) = 50%	389,175	430,122	439,043
Enhanced FMAP 6.2%	46,247	53,336	27,225
2. DDS GF Match = 50% (Purchase of Services)	389,175	376,786	411,819
J. Impacts from Other Departments BHT-FFS	\$13,790	\$13,492	\$13,492
1. Reimbursement (from DHCS) = 100%	13,806	13,492	13,492
2. DDS GF Match - Medicaid Claiming Adjustment POS (Purchase of Services)	-16	0	0
K. Early Periodic Screening Diagnosis and Treatment	\$65,551	\$50,354	\$71,784
1. Reimbursement (from DHCS) = 50%	30,951	25,177	35,892
Enhanced FMAP 6.2%	3,650	3,122	2,225
2. DDS GF Match = 50% (Purchase of Services)	30,950	22,055	33,667
L. Self-Determination Program Waiver	\$33,044	\$9,649	\$24,581
1. Reimbursement (from DHCS) = 50%	16,522	4,824	12,291
2. DDS GF Match = 50% (Purchase of Services)	16,522	4,825	12,290
M. TOTAL	\$6,977,654	\$6,558,072	\$7,078,311
1. Reimbursements	\$3,797,502	\$3,790,927	\$3,872,769
2. Total GF Match	\$3,180,152	\$2,767,145	\$3,205,542

a/ Reimbursements are funds received via other state agencies.

Home and Community-Based Waiver

BACKGROUND:

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

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

METHODOLOGY:

The fiscal is based on FY 2019-20 Medicaid Waiver Total Billed Dollar Amounts and Client Counts report.

	<u>FY 2020-21</u>	<u>FY 2021-22</u>
Base: FY 2020-21	\$4,054,715	\$4,407,303
Total estimated expenditures based on billing data for July 2019 – June 2020	4,054,715	
SB 3 Minimum Wage Increase: January 1, 2020	<i>In Trends</i>	
• Total estimated prior-year HCBS Waiver expenditures		4,496,536
• Less Competitive, Integrated Employment Incentives		(15,840)
• SB 3 Minimum Wage increase January 1, 2021		(68,424)
• Less Compliance with HCBS Regulations		(7,440)
• Plus Supplemental Security Income/State Supplementary Payment (SSI/SSP) regional center savings in Community Care Facility.		2,471
Annual Growth, New regional center consumers:	\$39,167	\$49,318
• FY 2020-21 Annual Growth	21,826	
Add annual growth costs in FY 2020-21 for 2,103 consumers who will be new to the regional center system and added to the HCBS Waiver with \$1,600 monthly cost per consumer, phased-in.		
• FY 2020-21 Annual Growth, Continuation costs for regional center consumers added in FY 2019-20.	17,341	

Home and Community-Based Waiver

METHODOLOGY (continued):	<u>FY 2020-21</u>	<u>FY 2021-22</u>
<ul style="list-style-type: none"> FY 2021-22 Annual Growth <p>Add annual growth costs in FY 2021-22 for 1,827 consumers who will be new to the Regional Center (RC) system and added to the HCBS Waiver with \$1,600 monthly cost per consumer, phased-in.</p> 		25,102
<ul style="list-style-type: none"> FY 2021-22 Annual Growth, Continuation costs for regional center consumers added in FY 2020-21. 		24,216
<ul style="list-style-type: none"> Community Placement Program (CPP): 	\$12,584	\$8,346
<ul style="list-style-type: none"> <ul style="list-style-type: none"> FY 2020-21 <p>Add CPP & HCBS Waiver costs in FY 2020-21 for 78 consumers in the regional center system with \$26,000 monthly cost per consumer, phased-in.</p> 	12,584	
<ul style="list-style-type: none"> <ul style="list-style-type: none"> FY 2021-22 <p>Add CPP & HCBS Waiver costs in FY 2021-22 for 53 consumers in the regional center system with \$26,000 monthly cost per consumer, phased-in.</p> 		8,346
<ul style="list-style-type: none"> Placement Continuation: 	\$17,784	\$11,752
<ul style="list-style-type: none"> <ul style="list-style-type: none"> FY 2020-21 <p>The annual estimated Placement Continuation costs for 138 HCBS Waiver-eligible consumers in each living arrangement with \$26,000 monthly cost per consumer, phased-in.</p> 	17,784	
<ul style="list-style-type: none"> <ul style="list-style-type: none"> FY 2021-22 <p>The annual estimated Placement Continuation costs for 78 HCBS Waiver-eligible consumers in each living arrangement with \$26,000 monthly costs per consumer, phased-in.</p> 		11,752
<ul style="list-style-type: none"> Transitions to Self-Determination Program (SDP) Waiver: 	(\$4,459)	(\$9,019)
<ul style="list-style-type: none"> <ul style="list-style-type: none"> FY 2020-21 <p>Costs reflect monthly decreases in Waiver expenditures as a result of 373 consumers leaving HCBS Waiver and enrolling on SDP Waiver in FY 2020-21.</p> 	(4,459)	

Home and Community-Based Waiver

	<u>FY 2020-21</u>	<u>FY 2021-22</u>
METHODOLOGY (CONTINUED):		
<ul style="list-style-type: none"> FY 2021-22 (9,019) Costs reflect monthly decreases in Waiver expenditures as a result of 636 consumers leaving HCBS Waiver and enrolling on SDP Waiver in FY 2021-22. 		
<ul style="list-style-type: none"> Continuation Costs for Transitions to SDP Waiver: 	\$0	(\$5,782)
<ul style="list-style-type: none"> <ul style="list-style-type: none"> FY 2020-21 0 FY 2019-20 consumers who transitioned to SDP Waiver. Decreases in Waiver expenditures are a result of those individuals no longer being on the Waiver (0 total in FY 2019-20). 		
<ul style="list-style-type: none"> <ul style="list-style-type: none"> FY 2021-22 (5,782) FY 2020-21 consumers who transitioned to SDP Waiver. Decreases in Waiver expenditures are a result of those individuals no longer being on the Waiver (373 total in FY 2020-21). 		
<ul style="list-style-type: none"> SSI/SSP Increase/Regional center savings in Community Care Facilities 	(2,471)	(3,277)
<ul style="list-style-type: none"> ABX2 1 Competitive, Integrated Employment Incentives 	15,840	15,840
<ul style="list-style-type: none"> Uniform Holiday Schedule 	27,904	29,320
<ul style="list-style-type: none"> Provider Supplemental Rate Increases POS 	291,654	294,532
<ul style="list-style-type: none"> Compliance with HCBS Regulations 	7,440	7,440
<ul style="list-style-type: none"> SB3 – Minimum Wage Increase, January 1, 2021 	68,424	145,042
<ul style="list-style-type: none"> SB3 – Minimum Wage Increase, January 1, 2022 	0	115,822
<ul style="list-style-type: none"> Increased Costs for COVID 19 	243,246	140,708
<ul style="list-style-type: none"> Forensic Diversion 	0	2,432
<ul style="list-style-type: none"> Youth returning from Out-of-State Foster Care 	696	1,392
TOTAL EXPENDITURES	\$4,772,524	\$5,211,169

Home and Community-Based Waiver

EXPENDITURES:

FY 2020-21	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$5,138,014	\$4,772,524	(\$365,490)
GF Match	2,425,729	2,090,336	(335,363)
Reimbursement	2,712,285	2,682,158	(30,127)

FY 2021-22	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$4,772,524	\$5,211,169	\$438,645
GF Match	2,090,336	2,444,044	353,678
Reimbursement	2,682,158	2,767,125	84,967

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

EXPENDITURES:

	% of Expenditures by Budget Category	<u>FY 2020-21</u>	<u>FY 2021-22</u>
Total Estimated HCBS Waiver Billable Expenditures		\$4,772,524	\$5,211,169
General Fund (GF) Match		2,090,366	2,444,044
Federal Financial Participation (FFP)		2,682,158	2,767,125
Purchase of Services: Budget Categories			
Community Care Facilities		1,530,416	1,576,621
GF Match	35.22%	765,208	788,309
FFP		765,208	788,312
Day Programs		614,565	665,512
GF Match	14.93%	307,283	332,756
FFP		307,283	332,756
Work Activity Program		17,021	18,432
GF Match	0.41%	8,511	9,216
FFP		8,510	9,216
Supported Employment Placement (SEP) - Group		26,544	28,744
GF Match	0.64%	13,272	14,372
FFP		13,272	14,372
SEP - Individual		6,968	8,129
GF Match	0.18%	3,484	4,065
FFP		3,484	4,064
Transportation		220,260	238,687
GF Match	5.55%	110,130	119,344
FFP		110,130	119,343
Support Services		1,214,823	1,278,717
GF Match	28.63%	607,412	639,359
FFP		607,411	639,358
In-Home Respite		483,361	503,834
GF Match	10.39%	241,680	251,917
FFP		241,681	251,917

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

EXPENDITURES (CONTINUED):

	% of Expenditures by Budget Category	<u>FY 2020-21</u>	<u>FY 2021-22</u>
Out-of-Home Respite		\$28,944	\$34,325
GF Match	0.77%	14,472	17,162
FFP		14,472	17,163
Health Care		16,929	29,764
GF Match	0.67%	8,464	14,882
FFP		8,465	14,882
Miscellaneous		110,603	116,098
GF Match	2.60%	55,301	58,049
FFP		55,302	58,049
Policies			
Provider Supplemental Rate Increases POS		291,654	294,532
GF Match		145,827	147,266
FFP		145,827	147,266
ABX2 1 – CIE Incentives		15,840	15,840
GF Match		7,920	7,920
FFP		7,920	7,920
Compliance with HCBS Regulations		7,440	7,440
GF Match		3,720	3,720
FFP		3,720	3,720
Uniform Holiday Schedule		27,904	29,320
GF Match		13,952	14,662
FFP		13,952	14,658
SB3 Minimum Wage, January 1, 2021		68,424	145,042
GF Match		34,212	72,521
FFP		34,212	72,521
SB3 Minimum Wage, January 1, 2022		0	115,822
GF Match		0	57,911
FFP		0	57,911

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

EXPENDITURES (CONTINUED):

	% of Expenditures by <u>Budget</u> <u>Category</u>	<u>FY 2020-21</u>	<u>FY 2021-22</u>
Enhanced Federal Funding		0	0
GF Match		(295,896)	(161,542)
FFP		295,896	161,542
Forensic Diversion		0	2,432
GF Match		0	1,216
FFP		0	1,216
Youth returning from Out-of-State Foster Care		696	1,392
GF Match		348	696
FFP		348	696
Increased Cost for COVID-19		90,132	100,486
GF Match		45,066	50,243
FFP		45,066	50,243

Home and Community-Based Waiver Administration

BACKGROUND:

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

METHODOLOGY:

Training for Direct Support Professional Staff:

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

	<u>FY 2020-21</u>	<u>FY 2021-22</u>
Training for DSP Staff	\$2,880	\$3,120
<ul style="list-style-type: none"> Total cost for DSP Training is \$3,600 in FY 2020-21 and \$3,900 in FY 2021-22 80% of the consumers residing in CCFs are HCBS Waiver eligible; therefore, it is assumed that 80% of the cost are eligible for federal financial participation (FFP). These costs are reflected under Operations, Projects. 		

Collection of FFP for Contracted Services:

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

Staffing for Collection of FFP for Contracted Services	738	738
<ul style="list-style-type: none"> Total cost of Staffing for Collection of FFP for Contracted Services is \$1,893. 39% of the costs are eligible for FFP. These costs are reflected under Operations, Staffing. 		

Home and Community-Based Waiver Administration

METHODOLOGY (continued):

FY 2020-21FY 2021-22

Collection of FFP for Contracted Services:

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

FFP Enhancement (related to 2003-04 Enhancing FFP Budget Change Proposal)

\$9,318

\$9,318

- Total regional center administrative cost for FY 2020-21 and FY 2021-22 is \$9,318.
- 100% of costs are eligible for FFP.

These costs are reflected under Operations, Core Staffing.

Compliance with HCBS Settings Regulations:

In January 2014, CMS published final regulations defining what constitutes a home and community-based setting for Medicaid reimbursement purposes under Section 1915(c) HCBS waivers, and Section 1915(i) HCBS State Plan programs. The effective date of the regulations was March 17, 2014, and states are allowed up to a five-year transition period to make any modifications necessary to comply with the regulations. Subsequently, CMS notified states on May 9, 2017, that compliance is required by March 17, 2023. These expenditures fund additional staffing needed to perform the initial and ongoing efforts and activities necessary to ensure compliance with CMS final regulations.

Compliance with HCBS Settings Regulations:

1,422

1,422

- Total cost of Compliance with HCBS Settings Regulations is \$1,422 in FY 2020-21 and FY 2021-22.
 - 100% of costs are eligible for FFP.
- These costs are reflected under Operations, Operations Policies Items.

Federal Medicaid Requirements for Regional Center HCBS Services

984

984

- Total cost: \$984
 - 100% of costs are eligible for FFP.
- These costs are reflected in the Federal Medicaid Requirements for regional center HCBS Services estimate under Operations, Federal Compliance.

Home and Community-Based Waiver Administration

METHODOLOGY (CONTINUED):	<u>FY 2020-21</u>	<u>FY 2021-22</u>
Office of Administrative Hearings:	1,668	1,709
<ul style="list-style-type: none"> Total cost for Resources for Health Care Community Specialist in FY 2020-21 is \$3,700 and \$3,885 in FY 2021-22. 44% of costs are eligible for FFP. These costs are reflected in the Office of Administrative Hearings estimate under Operations, Projects. 		
Clients Rights Advocacy:	3,543	3,737
<ul style="list-style-type: none"> Total cost for FY 2020-21 is \$7,873 and \$8,304 for FY 2021-22. 45% of costs are eligible for FFP. These costs are reflected in the Client Rights Advocacy estimate under Operations, Projects. 		
Quality Assessment Contract:	2,077	2,088
<ul style="list-style-type: none"> Total cost for FY 2020-21 is \$4,615 and \$4,640 for FY 2021-22. 45% of costs are eligible for FFP. These costs are reflected in the Quality Assessment Contract estimate under Operations, Projects. 		
Special Incident Reporting/Risk Assessment:	468	468
<ul style="list-style-type: none"> Total cost is \$1,200 for FY 2020-21 and FY 2021-22. 39% of costs are eligible for FFP. These costs are reflected in the Special Incident Reporting/Risk Assessment estimate under Operations, Projects. 		
Regional Center Salary Increase:	722	722
<ul style="list-style-type: none"> Total cost for FY 2020-21 and FY 2021-22 is \$56,600. These costs are reflected under Operations, Operations Policies Items. 		

Home and Community-Based Waiver Administration

METHODOLOGY (CONTINUED):

	<u>FY 2020-21</u>	<u>FY 2021-22</u>
Resources to Implement Assembly Bill X2 1	2,664	2,664

- Total cost for FY 2020-21 and FY 2021-22 is \$4,164.
- 64% of costs are eligible for FFP.
These costs are reflected under Operations, Operations Policies Items.

Specialized Home Monitoring:	4,436	4,736
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- Total costs for FY 2020-21 are \$6,930 and FY 2021-22 is \$7,400.
- 64% of costs are eligible for FFP
These costs are reflected under Operations, Operations Policies Items.

Oversight and Accountability	3,900	3,900
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- Total costs for FY 2020-21 and FY 2021-22 are \$4,450.
- These costs are reflected under Operations, Operations Policies Items.

Community Navigators	0	4,200
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- Total costs for FY 2021-22 are \$5,300.
- This cost is reflected under Operations, Operations Policies Items.

• TOTAL EXPENDITURES	\$34,780	\$39,806
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EXPENDITURES:

<u>FY 2020-21</u>	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$34,978	\$34,780	(\$198)
GF Match	17,489	17,390	(99)
Reimbursement	17,489	17,390	(99)

<u>FY 2021-22</u>	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$34,780	\$39,806	\$5,026
GF Match	17,390	19,903	2,513
Reimbursement	17,390	19,903	2,513

Self-Determination Program Waiver

BACKGROUND:

On December 31, 2014, the Department submitted a Home and Community-Based Services (HCBS) Waiver application to Centers for Medicare and Medicaid Services (CMS) seeking federal funding for the Self-Determination Program (SDP). Under the authority of Senate Bill (SB) 468 (Chapter 683, Statutes of 2013) and upon CMS approval, the Department is implementing the SDP, allowing regional center consumers and their families more freedom, control and responsibility in choosing services and supports to help them meet objectives in their individual program plans. Under the provisions of SB 468, participation was limited to 2,500 individuals for the first three years of implementation. The SDP waiver was approved by the CMS on June 7, 2018. The initial 2,500 participants were selected October 1, 2018. After June 7, 2021, the program will be available to all eligible consumers. Participants can only purchase services and supports that are approved by the federal government and listed in the SDP waiver.

METHODOLOGY:

FY 2019-20 actual Self-Determination Pilot Program expenditures and client counts is used in forecasting SDP. Funding was distributed to each budget category based on the percent of HCBS waiver expenditures by budget category. See the HCBS Waiver methodology page in Fund Sources for actual percentages.

	<u>FY 2020-21</u>	<u>FY 2021-22</u>
• <i>Community Care Facilities</i>	\$1,625	\$4,138
• <i>Day Programs</i>	773	1,970
• <i>Work Activity Program</i>	29	75
• <i>Supported Employment Placement (SEP) / Group</i>	37	94
• <i>SEP / Individual</i>	9	24
• <i>Transportation</i>	299	762
• <i>Support Services</i>	1,392	3,547
• <i>In-Home Respite</i>	466	1,187
• <i>Out-of-Home Respite</i>	43	109
• <i>Health Care</i>	30	76
• <i>Miscellaneous</i>	121	309
• TOTAL EXPENDITURES	\$9,649	\$24,581

Self-Determination Program Waiver

EXPENDITURES:

FY 2020-21	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$33,044	\$9,649	(\$23,395)
GF Match	16,522	4,825	(11,697)
Reimbursement	16,522	4,824	(11,698)

FY 2021-22	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$9,649	\$24,581	\$14,932
GF Match	4,825	12,290	7,465
Reimbursement	4,825	12,291	7,467

Medicaid Administration

BACKGROUND:

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

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

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

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

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

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

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

Developmental Center Closure/Ongoing Workload

Funding includes salaries, benefits, and operating expenses and equipment for the regional center positions associated with the closure of the developmental centers and the transition of individuals to community living arrangements. Regional centers will continue to provide support and monitoring of individuals who have moved into the community. This includes, but is not limited to, coordination of clinical health and dental services, and quality assurance and management reviews. These positions include quality assurance management, healthcare community specialists, nurse and oral health consultants, service coordinators, clinical support teams and administrative assistants.

Medicaid Administration

METHODOLOGY:

	<u>FY 2020-21</u>	<u>FY 2021-22</u>
• Costs for Clinical Support Teams and SB 1038 Health Reviews are based on 2019-20 data collected from the regional centers.	\$16,818	\$16,818
• The Federal Financial Participation (FFP) portion of total MA-eligible costs is 75 percent.	12,614	12,614
• Staffing for Compliance with HCBS Waiver Requirements		
• Total personal services and operating costs related to MA. The costs are 100 percent eligible for MA because related staff will be working only with HCBS Waiver consumers.	2,600	2,600
• The FFP portion of total MA-eligible costs is 75 percent.	1,950	1,950
• Regional Center Salary Increase:		
• Increased funding for regional center staff and Operations.	1,510	1,510
• It is assumed that 100 percent of costs are eligible for MA.		
• The FFP portion of total MA-eligible costs is 75 percent.	1,132	1,132
• DC Closure Ongoing Workload:		
• Total personal services, operating and placement continuation costs related to MA.	3,296	3,296
• It is assumed that 100 percent of costs are eligible for MA.		
• The FFP portion of total MA-eligible costs is 75 percent.	2,472	2,472

EXPENDITURES:

<u>FY 2020-21</u>	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$19,404	\$24,224	\$4,820
GF Match	4,851	6,056	1,205
Reimbursement	14,553	18,168	3,615

<u>FY 2021-22</u>	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$24,224	\$24,224	\$0
GF Match	6,056	6,056	0
Reimbursement	18,168	18,168	0

Targeted Case Management

BACKGROUND:

The Targeted Case Management (TCM) program provides matching federal Medicaid funds for case management services provided by a regional center for specific client groups. There are approximately 237,000 Medi-Cal eligible persons in the regional center system as of September 9, 2020. Federal legislation enacted in 1986 defined these case management services as services which "...will assist individuals...in gaining access to needed medical, social, educational, and other services". This program provides federal financial participation (FFP) for most of regional center case managers time spent on Medi-Cal eligible activities.

METHODOLOGY:

The fiscal is developed using the TCM Regional Center Billed Units report dated September 9, 2020 for the period of July 2019 - June 2020.

	<u>FY 2020-21</u>	<u>FY 2021-22</u>
• Base: TCM expenditures are based on actual TCM billable units for a 12-month period (July 2019 – June 2020) multiplied by the regional center TCM rates effective July 1, 2020.	\$409,062	\$426,817
• Improve Service Coordinator Caseload Ratios	8,000	8,000
• Regional Center Salary Increases	26,014	26,014
• Psychological Evaluations for BHT – Fee for Service	758	758
• Specialized Caseload Ratios	2,400	2,652
• Trauma Informed Services for Foster Youth	1,000	1,000
• Family Home Agency Oversight	1,038	1,038
• Self- Determination Program	2,444	2,444
• Forensic Diversion	0	342
• START	0	2,724
• Emergency Response	0	1,290
TOTAL EXPENDITURES	\$450,716	\$473,079

EXPENDITURES:

<u>FY 2020-21</u>	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$482,884	\$450,716	(\$32,168)
GF Match	227,768	197,414	(30,354)
Reimbursement	255,116	253,302	(1,814)

Targeted Case Management

FY 2021-22	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$450,716	\$473,079	\$22,363
GF Match	197,414	221,875	24,461
Reimbursement	253,302	251,204	(2,098)

Targeted Case Management Administration

DESCRIPTION:

The Targeted Case Management (TCM) Administration for Regional Centers is budgeted in the TCM funding page. The TCM Administration page will no longer be displayed in the Local Assistance Estimate.

EXPENDITURES:

	<u>FY 2020-21</u>	<u>FY 2021-22</u>
TOTAL	\$0	\$0
GF Match	0	0
FFP	0	0

Title XX Block Grant

BACKGROUND:

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

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

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

METHODOLOGY:

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

	<u>FY 2020-21</u>	<u>FY 2021-22</u>
Total	\$213,421	\$213,421
Social Services	136,264	136,264
TANF	77,157	77,157

Title XX Block Grant

EXPENDITURES:

	<u>FY 2020-21</u>	<u>FY 2021-22</u>
Total Title XX Block Grant – Social Services	\$213,421	\$213,421
Estimated Distribution in Regional Center Purchases of Services	\$136,264	\$136,264
Day Programs	41,067	41,067
Transportation	7,474	7,474
Support Services	59,982	59,982
In-Home Respite	23,938	23,938
Out-of-Home Respite	538	538
Miscellaneous	3,265	3,265
TANF		
Estimated Distribution in Regional Center Purchases of Services	\$77,157	\$77,157
Community Care Facilities	18,903	18,903
Day Programs	210	210
Habilitation Services	1	1
Transportation	655	655
Support Services	9,476	9,476
In-Home Respite	22,800	22,800
Out-of-Home Respite	4,200	4,200
Health care	4,091	4,091
Miscellaneous	16,821	16,821

<u>FY 2020-21</u>	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$213,421	\$213,421	\$0
Social Services	136,264	136,264	0
TANF	77,157	77,157	0

<u>FY 2021-22</u>	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$213,421	\$213,421	\$0
Social Services	136,264	136,264	0
TANF	77,157	77,157	0

Intermediate Care Facility – Developmentally Disabled State Plan Amendment

BACKGROUND:

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

METHODOLOGY:

The total expenditures for adult day treatment and non-medical transportation services received by regional center consumers residing in an ICF-DD are based on actual expenditures from FY 2019-20. The SPA was approved April 14, 2011, retroactive to July 1, 2007.

EXPENDITURES:

FY 2020-21		<u>Enacted Budget</u>	<u>FY 20-21</u>	<u>Difference</u>
	TOTAL	\$124,305	\$117,263	(\$7,042)
	GF Match	58,657	51,362	(7,295)
	FFP	65,648	65,901	253

FY 2021-22		<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
	TOTAL	\$117,263	\$117,263	\$0
	GF Match	51,362	54,997	3,635
	FFP	65,901	62,226	(3,635)

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

BACKGROUND:

To realize the federal financial participation (FFP) associated with the Intermediate Care Facilities - Developmentally Disabled (ICF-DD) State Plan Amendment, there are administrative costs for regional centers.

METHODOLOGY:

- The fiscal is developed using the State Claims Purchase of Services (POS) Claims data file, dated September 2020, based on FY 2019-20 actuals.
- ICF-DD Administrative Costs and QAF are set by DHCS.
- Regional center administration costs are 1.5 percent of the costs of Day Program and Transportation expenditures.
- ICF-DD administration costs are 1.5 percent of the costs of Day Program and Transportation expenditures for both the regional center and ICF-DD.
- POS costs for Day Program and Transportation total \$118.8 million. QAF is \$9.6 million.
- FY 2020-21 and FY 2021-22: Total billing costs are \$1.8 million for regional center administration, \$1.8 million for ICF-DD administration, and \$7.8 million QAF.

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

EXPENDITURES:

FY 2020-21	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$11,392	\$11,405	\$13
Operations	1,780	1,782	2
GF Match	890	891	1
FFP	890	891	1
Purchase of Services	9,612	9,623	11
QAF Admin Fees	4,806	4,812	6
Transfer from DHCS	4,806	4,811	5

FY 2021-22	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$11,405	\$11,405	\$0
Operations	1,782	1,782	0
GF Match	891	891	0
FFP	891	891	0
Purchase of Services	9,623	9,623	0
QAF Admin Fees	4,812	4,812	0
Transfer from DHCS	4,811	4,811	0

1915 (i) State Plan Amendment

BACKGROUND:

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

ASSUMPTIONS

The fiscal is based on fiscal year (FY) 2019-20 updated Purchase of Services (POS) billed expenditures.

METHODOLOGY:

	<u>FY 2020-21</u>	<u>FY 2021-22</u>
<ul style="list-style-type: none"> • Base: Updated actual 2019 expenditures were used to develop the FY 2019-20 base. For FY 2020-21, the prior year estimate for base and growth, with the following adjustments, was used as the base. Cost without Community Placement Plan. 	\$687,638	\$676,968
<ul style="list-style-type: none"> • ABX2 1 – Competitive Integrated Employment (CIE) Incentives 	2,160	2,160
<ul style="list-style-type: none"> • Uniform Holiday 	8,336	8,826
<ul style="list-style-type: none"> • Compliance with Home and Community-Based Services (HCBS) Regulations 	560	560
<ul style="list-style-type: none"> • Provider Supplemental Rate Increases Purchase of Services (POS) 	86,496	87,524
<ul style="list-style-type: none"> • POS SB3 Minimum Wage, January 1, 2021 	20,282	43,422
<ul style="list-style-type: none"> • POS SB3 Minimum Wage, January 1, 2022 	0	35,319
<ul style="list-style-type: none"> • Increase cost to Covid 19 	54,668	23,100
<ul style="list-style-type: none"> • Youth returning from Out-of-State Foster Care 	104	208
<ul style="list-style-type: none"> • Total Expenditures: 	\$860,244	\$878,087

1915 (i) State Plan Amendment**EXPENDITURES:**

		<u>FY 2020-21</u>	<u>FY 2021-22</u>
TOTAL		\$860,244	\$878,087
GF Match		376,786	411,819
Reimbursement		483,458	466,268
<u>% of Expenditures by Budget Category</u>			
Community Care Facilities	24.47%	192,212	167,654
GF Match		96,106	83,827
FFP		96,106	83,827
Day Programs	18.59%	127,813	125,967
GF Match		63,906	62,983
FFP		63,907	62,984
Habilitation	6.73%	46,248	45,590
GF Match		23,125	22,795
FFP		23,123	22,795
Transportation	5.82%	39,228	38,602
GF Match		19,615	19,301
FFP		19,613	19,301
Support Services	27.59%	203,065	187,774
GF Match		101,532	93,887
FFP		101,533	93,887
In-Home Respite	10.03%	76,667	73,552
GF Match		38,333	36,776
FFP		38,334	36,776
Out-of-Home Respite	0.60%	4,087	4,056
GF Match		2,043	2,028
FFP		2,044	2,028
Health Care	1.18%	4,334	7,981
GF Match		2,167	3,990
FFP		2,167	3,991

1915 (i) State Plan Amendment**EXPENDITURES (CONTINUED):**

		<u>FY 2020-21</u>	<u>FY 2021-22</u>
	% of		
	Expenditures by		
	<u>Budget Category</u>		
Miscellaneous	5.00%	35,184	33,878
GF Match		17,592	16,940
FFP		17,592	16,938
ABX2 1 – CIE Incentives		2,160	2,160
GF Match		1,080	1,080
FFP		1,080	1,080
Uniform Holiday		8,336	8,826
GF Match		4,168	4,413
FFP		4,168	4,413
Compliance with HCBS Regulations		560	560
GF Match		280	280
FFP		280	280
Provider Supplemental Rate Increases POS		86,496	87,524
GF Match		43,248	43,762
FFP		43,248	43,762
SB3 Minimum Wage, January 1, 2021		20,282	43,422
GF Match		10,141	21,711
FFP		10,141	21,711
SB3 Minimum Wage, January 1, 2022		0	35,319
GF Match		0	17,660
FFP		0	17,659
Youth returning from Out-of-State Foster Care		104	208
GF Match		52	104
FFP		52	104
Increase Costs for Covid 19		13,468	15,014
GF Match		6,734	7,507
FFP		6,734	7,507
6.2% Enhanced Federal Funding		0	0
GF Match		(53,336)	(27,225)
FFP		53,336	27,225

1915 (i) State Plan Amendment**EXPENDITURES:**

FY 2020-21	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$824,597	\$860,244	\$35,647
GF Match	389,175	376,786	(12,389)
FFP	435,422	483,458	48,036

FY 2021-22	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$860,244	\$878,087	\$17,843
GF Match	376,786	411,819	35,033
FFP	483,458	466,268	(17,190)

Early Periodic Screening Diagnosis and Treatment

BACKGROUND:

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

METHODOLOGY:

The estimated budget is based on actual billed expenditures from April 2019 to March 2020. EPSDT funding is only in the Day Program budget category.

EXPENDITURES:

FY 2020-21		<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
	TOTAL	\$65,551	\$50,354	(\$15,197)
	GF Match	30,950	22,055	(8,895)
	FFP	34,601	28,299	(6,302)

FY 2021-22		<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
	TOTAL	\$50,354	\$71,784	\$21,430
	GF Match	22,055	33,667	11,612
	FFP	28,299	38,117	9,818

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

BACKGROUND:

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

DHCS obtained approval from the Centers for Medicare & Medicaid Services (CMS) to include BHT services as a Medi-Cal benefit in January 2016. Individuals who were receiving BHT services through the regional centers became eligible to receive these services under the Medi-Cal benefit.

The estimate reflects costs of BHT services for consumers enrolled in Fee-for-Service Medi-Cal. These children receive services through the regional centers, and DHCS reimburses the Department for the related expenditures.

METHODOLOGY:

Full year costs for these consumers were estimated based on actual 2019-20 data.

EXPENDITURES:

FY 2020-21	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$13,806	\$13,492	(\$314)
Reimbursement	13,806	13,492	(314)

FY 2021-22	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$13,492	\$13,492	\$0
Reimbursement	13,492	13,492	0

Program Developmental Fund/Parental Fees

BACKGROUND:

Parents of children under the age of 18 who receive 24-hour out-of-home services provided by the State, and purchased with state funds through a regional center, are required to pay a fee depending on their ability to do so. Similarly, parents of children under the age of 18 who live at home and receive qualifying services from a regional center whose adjusted gross family income is at or above 400 percent of the federal poverty level are required to pay an annual fee. The Department deposits parental fees received into the Program Development Fund. Amounts received are then utilized to provide resources needed to initiate new programs which are consistent with the State Plan (Welfare and Institution Code §4677, §4784, and §4785).

METHODOLOGY:

Deposits into the Program Development Fund are based on historical revenue averages, except for FY 2020-21 which reflects revenue adjustments from COVID-19, Executive Order N-25-20, and resulting waivers.

EXPENDITURES:

FY 2020-21	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$2,280	\$837	(\$1,443)
Parental Fees	962	442	(520)
Annual Family Program Fees	1,318	395	(923)

FY 2021-22	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$837	\$1,876	\$1,039
Parental Fees	442	558	116
Annual Family Program Fees	395	1,318	923

Developmental Disabilities Services Account

BACKGROUND:

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

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

METHODOLOGY:

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

EXPENDITURES:

<u>FY 2020-21</u>	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$150	\$150	\$0

<u>FY 2021-22</u>	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$150	\$150	\$0

Mental Health Services Fund

BACKGROUND:

Proposition 63, also known as the Mental Health Services Act (MHSA), imposes an additional tax on taxable income over \$1.0 million to provide funds to expand services and develop innovative programs. Consistent with the requirements of the MHSA, the Department funds regional centers to implement projects with community partners that focus on prevention, early intervention, and treatment for children and adults who are dually diagnosed (i.e. have a developmental disability and a mental illness).

METHODOLOGY:

Expenditures are set amounts and consistent with prior year.

EXPENDITURES:

FY 2020-21	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$740	\$740	\$0

FY 2021-22	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$740	\$740	\$0

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

BACKGROUND:

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

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

METHODOLOGY:

Annual grant amounts are determined by the federal Offices of Special Education Programs (OSEP). The Department received a grant award letter dated July 1, 2020 for federal funding period July 1, 2020 through September 30, 2021.

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

	<u>FY 2020-21</u>	<u>FY 2021-22</u>
• Other Agencies	\$19,094	\$19,094

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

METHODOLOGY (CONTINUED):

	<u>FY 2020-21</u>	<u>FY 2021-22</u>
<ul style="list-style-type: none"> CDE: Additional federal requirements include shorter time lines for conducting evaluations, assessment and program plan development, provision of year-round services, service coordination and administrative services, and provision of services to children with solely low incidence disabilities in regions where such services to this age group were not provided prior to Part C implementation. 	\$14,600	\$14,600
<i>Local Education Agencies</i>	14,245	14,245
<i>Support</i>	355	355
<ul style="list-style-type: none"> System Requirements: Funding is required for public awareness and a comprehensive system of personal development, mediation, and due process hearings conducted by the State Office of Administrative Hearings. 	1,835	1,835
<ul style="list-style-type: none"> Early Start FRC: Funds pay for services that are provided by 38 contractors. Services provide support for families with infants and toddlers that have developmental delays, disabilities, or conditions that place them at risk of disabilities. Services include, as specified in GC 95024(d)(2), parent-to-parent support, information dissemination, public awareness, and family-professional collaboration activities; and, per GC 95001(a)(4), family-to-family support to strengthen families' ability to participate in service planning. 	4,662	4,662
<i>Family Resources Center: Federal Funds grant amount</i>	2,659	2,659
<i>Family Resources Services: 100 percent General Fund</i>	2,003	2,003
<ul style="list-style-type: none"> Regional Center POS 	34,012	34,012
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 FY 2019-20 by budget category.		
<ul style="list-style-type: none"> <i>Day Programs</i> 	17,612	17,612
<ul style="list-style-type: none"> <i>Support Services</i> 	203	203
<ul style="list-style-type: none"> <i>In-Home Respite</i> 	123	123
<ul style="list-style-type: none"> <i>Out-of-Home Respite</i> 	60	60
<ul style="list-style-type: none"> <i>Health Care</i> 	1,854	1,854
<ul style="list-style-type: none"> <i>Miscellaneous</i> 	14,160	14,160

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

EXPENDITURES:

FY 2020-21	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$55,109	\$55,109	\$0
GF	2,003	2,003	0
Federal Funds	53,106	53,106	0

FY 2021-22	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$55,109	\$55,109	\$0
GF	2,003	2,003	0
Federal Funds	53,106	53,106	0

Foster Grandparent Program

BACKGROUND:

The Foster Grandparent Program (FGP) is a federal grant which provides men and women age 55 and older, the opportunity to serve their community by sharing their time and attention with children under the age of 22 who have developmental disabilities. Foster grandparents volunteer in community schools, Head Start centers, and pre-schools, as detailed in Operations.

METHODOLOGY:

The funding is based on the Federal Grant.

EXPENDITURES:

<u>FY 2020-21</u>	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$1,201	\$1,201	\$0

<u>FY 2021-22</u>	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$1,201	\$1,201	\$0

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SECTION I: FUTURE FISCAL ISSUES

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FUTURE FISCAL ISSUES

Centers for Medicare & Medicaid Services (CMS) Final Regulations for Home and Community-Based Services (HCBS)

The Department administers two 1915(c) Waivers (the HCBS Waiver for Persons with Developmental Disabilities and the HCBS Waiver for the Self-Determination Program) and a 1915(i) State Plan program. These programs enable the State to receive federal funding for services provided to approximately 229,000 consumers.

In early 2014, CMS published final regulations affecting 1915(c) Waiver programs, 1915(i) State Plan programs, and 1915(k) Community First Choice State Plans for HCBS provided through Medicaid. The purpose of the regulations is to provide services to individuals in HCBS settings that are integrated and support full access to the community. Originally, CMS required states to comply with the new federal regulations by March 17, 2019. However, on May 9, 2017, CMS notified states that given the difficult and complex nature of achieving compliance, the compliance date was extended to March 17, 2022. On July 14, 2020, in response to the COVID-19 public health emergency, the compliance deadline was extended again to March 17, 2023.

On February 23, 2018, CMS granted initial approval of California's Statewide Transition Plan (STP). The STP describes at a high level, California's overall commitment to, and plan for, achieving compliance including the potential need for changes in statute and/or regulation to comply with federal regulations. Included in the STP is a description of the process to assess settings where services are provided to determine what changes, if any, are needed for providers to comply with the HCBS regulations. The setting assessment process began in January 2020, and is currently anticipated to continue through December 2021. Efforts to provide training and information for all stakeholders regarding the HCBS regulations and person-centered planning requirements continue; and as with prior years, the budget includes \$15.0 million to assist providers in making changes needed to comply with the HCBS regulations, as detailed in Section G, Policy.

Consumer Services Post COVID-19 Emergency

The Department developed and is currently implementing policies and procedures that allow the provision of alternative nonresidential services (Alternative Services) that meet the needs of individuals with developmental disabilities, help sustain the state's developmental services provider network, and continue receipt of federal reimbursement during the COVID-19 State of Emergency, pursuant to Governor Gavin Newsom's Executive Order N-75-20 issued on August 24, 2020. The order suspends Title 17, California Code of Regulations §54326(a)(11), as applied to payments made in connection with the COVID-19 State of Emergency and directed the Department to develop and implement policies and procedures to allow delivery of nonresidential services to individuals with developmental disabilities during the public health emergency.

The Department is engaging stakeholders through the Developmental Services Task Force, Consumer Advisory Committee, and other workgroups in exploring long-term options for California's developmental disabilities services system amid the current public health emergency and beyond. Stakeholder engagement is expected to explore lessons learned from the use of the Alternative Services model, continued focus on individual choice and community integration, individual health and safety, and payment structures that support a sustainable provider network and are consistent with federal funding requirements.

These stakeholder discussions may identify changes recommended in spring 2021.

Self-Determination Ongoing Implementation

Statutorily, the Self-Determination Program will be available to all regional center consumers at the end of the phase-in period (June 2021). The Department will continue stakeholder engagement to develop a Self-Determination Implementation Plan that identifies the specific steps and strategies to implement self-determination statewide and achieve program goals.

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Early Start Expenditures And Population

BACKGROUND:

Per Legislative request, the Department provides projected caseload and expenditures for the Early Start program. Early Start includes consumers from birth through 35 months.

METHODOLOGY:

The projected Early Start expenditures are developed using the September 2020 State Claims Data file, with expenditures through June 30, 2020.

The projected caseload and expenditures for FY 2020-21 reflect anticipated reductions due to the impacts of COVID-19.

FY 2021-22 Governor's Budget Early Start Estimated Caseload and Expenditures						
Fiscal Year	*Monthly Caseload	POS Expenditures	Per Capita	Federal Funds (POS portion) Early Start	Federal Funds (POS portion) EPSDT	State Funds DDS General Funds
2020-21	44,465	\$457,004,000	\$10,278	\$34,012,000	\$26,160,000	\$396,832,000
2021-22	53,966	\$555,909,000	\$10,301	\$34,012,000	\$34,849,000	\$487,048,000

* Refer to Section C – Population for additional detail on the Early Start population.

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**2020-21 STATE OPERATED FACILITIES PROGRAM BUDGET
RESIDENTIAL and COMMUNITY SERVICES
EXECUTIVE SUMMARY TABLES**

	A Enacted Budget	B FY 2020-21	C Difference (B - A)
I. OPERATIONS			
A. Canyon Springs Community Facility			
1. Population	56	56	0
2. Units	3.0	3.0	0.0
3. Position	236.0	236.0	0.0
4. Operation Expenditures	\$29,888	\$29,855	(\$33)
B. Fairview Developmental Center			
1. Population	0	0	0
2. Units	0.0	0.0	0.0
3. Position	54.0	54.0	0.0
4. Operation Expenditures	\$11,954	\$11,954	\$0
C. Porterville Developmental Center (STP)			
1. Population	211	211	0
2. Units	15.0	15.0	0.0
3. Position	1,424.3	1,425.7	1.4
4. Operation Expenditures	\$182,030	\$182,082	\$53
5. Lease Revenue Bond	\$9,151	\$8,480	(\$671)
D. STAR & CAST			
1. Population	35	35	0
2. STAR Homes	7.0	7.0	0.0
3. CAST	2.0	2.0	0.0
4. Positions	221.5	221.5	0.0
5. Operations Expenditures	\$28,955	\$28,958	\$3
E. Ongoing Costs			
1. Position	16.0	16.0	0
2. RRDP	2,080	2,080	0
3. Workers' Compensation	28,349	28,349	0
4. Post Closure	1,495	1,495	0
Total Operations Expenditures	\$293,902	\$293,254	(\$648)
II. POLICY			
A. Control Section Adjustments	\$0	(\$20,454)	(\$20,454)
B. Interagency Agreement with DGS	6,284	6,284	0
C. COVID-19 Response	82,628	82,628	0
D. Enhanced Federal Funding	0	0	0
E. Out of State Foster Youth Home	0	1,991	1,991
Total Policy	\$88,912	\$70,449	(\$18,463)
GRAND TOTAL	\$382,814	\$363,703	(\$19,111)

**2020-21 STATE OPERATED FACILITIES PROGRAM BUDGET
RESIDENTIAL and COMMUNITY SERVICES
EXECUTIVE SUMMARY TABLES**

	A Enacted Budget	B FY 2020-21	C Difference (B - A)
FUND SOURCES			
A. General Funds			
1. General Fund Match	\$42,478	\$35,416	(\$7,062)
2. General Fund Other	291,383	280,200	(11,183)
Total General Fund	\$333,860	\$315,616	(\$18,244)
B. Reimbursements			
1. Medi-Cal Reimbursements	\$42,478	\$41,677	(\$801)
2. Reimbursements Other	6,284	6,284	0
Total Reimbursements	\$48,762	\$47,961	(\$801)
C. Lottery Education Funds	\$192	\$126	(\$66)
GRAND TOTAL	\$382,814	\$363,703	(\$19,111)

**2021-22 STATE OPERATED FACILITIES PROGRAM BUDGET
RESIDENTIAL and COMMUNITY SERVICES
EXECUTIVE SUMMARY TABLES**

	A Enacted Budget	B FY 2021-22	C Difference (B - A)
I. OPERATIONS			
A. Canyon Springs Community Facility			
1. Population	56	56	0
2. Units	3.0	3.0	0.0
3. Position	236.0	236.0	0.0
4. Operation Expenditures	\$29,888	\$29,642	(\$246)
B. Fairview Developmental Center			
1. Population	0	0	0
2. Units	0.0	0.0	0.0
3. Position	54.0	52.0	(2.0)
4. Operation Expenditures	\$11,954	\$11,724	(\$230)
C. Porterville Developmental Center (STP)			
1. Population	211	231	20
2. Units	15.0	15.0	0.0
3. Position	1,424.3	1,427.7	3.4
4. Operation Expenditures	\$182,030	\$182,010	(\$19)
5. Lease Revenue Bond	\$9,151	\$9,151	\$0
D. STAR & CAST			
1. Population	35	35	0
2. STAR Homes	7.0	7.0	0.0
3. CAST	2.0	2.0	0.0
4. Positions	221.5	221.5	0.0
5. Operations Expenditures	\$28,955	\$28,958	\$3
E. Ongoing Costs			
1. Position	16.0	18.0	2.0
2. RRDP	2,080	2,310	230
3. Workers' Compensation	28,349	28,349	0
4. Post Closure	1,495	1,495	0
Total Operations Expenditures	\$293,902	\$293,640	(\$262)
II. POLICY			
A. Control Section Adjustments	\$0	\$1,955	\$1,955
B. Interagency Agreement with DGS	6,284	6,449	165
C. COVID-19 Response	82,628	36,746	(45,882)
D. Enhanced Federal Funding	0	0	0
E. Retention Stipend Reallocation	0	1,000	1,000
F. Forensic Diversion	0	341	341
G. Out of State Foster Youth Home	0	3,980	3,980
Total Policy	\$88,912	\$50,471	(\$38,441)
GRAND TOTAL	\$382,814	\$344,111	(\$38,703)

**2021-22 STATE OPERATED FACILITIES PROGRAM BUDGET
RESIDENTIAL and COMMUNITY SERVICES
EXECUTIVE SUMMARY TABLES**

	A Enacted Budget	B FY 2021-22	C Difference (B - A)
FUND SOURCES			
A. General Funds			
1. General Fund Match	\$42,478	\$25,471	(\$17,007)
2. General Fund Other	291,383	283,476	(7,906)
Total General Fund	\$333,860	\$308,947	(\$24,913)
B. Reimbursements			
1. Medi-Cal Reimbursements	\$42,478	\$28,588	(\$13,889)
2. Reimbursements Other	6,284	6,449	165
Total Reimbursements	\$48,762	\$35,037	(\$13,724)
C. Lottery Education Funds	\$192	\$126	(\$66)
GRAND TOTAL	\$382,814	\$344,111	(\$38,703)

FY 2020-21 to 2021-22

	A FY 2020-21	B FY 2021-22	C Difference (B - A)
I. OPERATIONS			
A. Canyon Springs Community Facility			
1. Population	56	56	0
2. Units	3.0	3.0	0.0
3. Position	236.0	236.0	0.0
4. Operation Expenditures	\$29,855	\$29,642	(\$213)
B. Fairview Developmental Center			
1. Population	0	0	0
2. Units	0.0	0.0	0.0
3. Position	54.0	52.0	(2.0)
4. Operation Expenditures	\$11,954	\$11,724	(\$230)
C. Porterville Developmental Center (STP)			
1. Population	211	231	20
2. Units	15.0	15.0	0.0
3. Position	1,425.7	1,427.7	2.0
4. Operation Expenditures	\$182,082	\$182,010	(\$72)
5. Lease Revenue Bond	\$8,480	\$9,151	\$671
D. STAR & CAST			
1. Population	35	35	0
2. STAR Homes	7.0	7.0	0.0
3. CAST	2.0	2.0	0.0
4. Positions	221.5	221.5	0.0
5. Operations Expenditures	\$28,958	\$28,958	\$0
E. Ongoing Costs			
1. Position	16.0	18.0	2.0
2. RRDP	2,080	2,310	230
3. Workers' Compensation	28,349	28,349	0
4. Post Closure	1,495	1,495	0
Total Operations Expenditures	\$293,254	\$293,640	\$386
II. POLICY			
A. Control Section Adjustments	(\$20,454)	\$1,955	\$22,409
B. Interagency Agreement with DGS	6,284	6,449	165
C. COVID-19 Response	82,628	36,746	(45,882)
D. Enhanced Federal Funding	0	0	0
E. Retention Stipend Reallocation	0	1,000	1,000
F. Forensic Diversion	0	341	341
G. Out of State Foster Youth Home	1,991	3,980	1,989
Total Policy	\$70,449	\$50,471	(\$19,978)
GRAND TOTAL	\$363,703	\$344,111	(\$19,592)

FY 2020-21 to 2021-22

	A FY 2020-21	B FY 2021-22	C Difference (B - A)
FUND SOURCES			
A. General Funds			
1. General Fund Match	\$35,416	\$25,471	(\$9,945)
2. General Fund Other	280,200	283,476	3,276
Total General Fund	\$315,616	\$308,947	(\$6,669)
B. Reimbursements			
1. Medi-Cal Reimbursements	\$41,677	\$28,588	(\$13,088)
2. Reimbursements Other	6,284	6,449	165
Total Reimbursements	\$47,961	\$35,037	(\$12,923)
C. Lottery Education Funds	\$126	\$126	\$0
GRAND TOTAL	\$363,703	\$344,111	(\$19,592)

SYSTEMWIDE POPULATION

<i>FY 2020-21</i>					
	Canyon Springs	Fairview	Porterville STP	STAR and CAST	Total
2020-21 Enacted Budget					
Population, July 1, 2020	56	0	211	35	302
Change (+/-)	0	0	20	0	20
Ending Population, June 30, 2021	56	0	231	35	322
Proposed Governor's Budget for FY 2020-21					
Population, July 1, 2020	56	0	211	35	302
Change (+/-)	0	0	20	0	20
Ending Population, June 30, 2021	56	0	231	35	322
Population Change FY 2020-21	0	0	0	0	0

<i>FY 2021-22</i>					
	Canyon Springs	Fairview	Porterville STP	STAR and CAST	Total
2020-21 Enacted Budget					
Population, July 1, 2020	56	0	211	35	302
Change (+/-)	0	0	20	0	20
Ending Population, June 30, 2021	56	0	231	35	322
Proposed Governor's Budget for FY 2021-22					
Population, July 1, 2021	56	0	231	35	322
Change (+/-)	0	0	0	0	0
Ending Population, June 30, 2022	56	0	231	35	322
Population Change FY 2021-22	0	0	0	0	0

Canyon Springs Community Facility

BACKGROUND:

Canyon Springs Community Facility (CSCF) opened in December 2000 and is designed to provide residential services, treatment, and training for up to 56 adults who have developmental and intellectual disabilities. There are three Immediate Care Facilities (ICF) units on campus that provide services to assist these individuals to lead more independent, productive and dignified lives. The facility staff focus on the development of the individuals' ability to manage their lives through various treatment/training opportunities such as behavioral supports and replacement behavior teaching, coping skills, life skills, supportive counselling, vocational skills, adult education, recreational skills, interpersonal relationship development, community integration and encouragement of health life choices that lead to healthy, happy and productive lives. CSCF operation expenditures are funded through General Funds, Reimbursements and Lottery Funds.

METHODOLOGY:

There are two types of staffing needed to operate the facility: Unit and Program Support Staff. Unit Staffing includes Clinical and Medical staff that are qualified health care professionals that provide direct patient care services. These staff include, but are not limited to, Physicians and Surgeons, Psychologists, Pharmacists and Nursing. There are 155 Clinical and Medical staff at the facility.

Program Support Staffing may provide direct and/or indirect support services to the individuals. There are many areas that have support staff and these areas include Administration, Personnel, Maintenance, and Food Service. There are 81 Program Support staff at the facility.

FY 2020-21			
	Enacted Budget	FY 2020-21	Difference
Positions	236.0	236.0	0.0
Personal Services	\$24,869	\$24,869	\$0
OE&E	5,019	4,986	(33)
Total	\$29,888	\$29,855	(\$33)

FY 2021-22			
	FY 2020-21	FY 2021-22	Difference
Positions	236.0	236.0	0.0
Personal Services	\$24,869	\$24,733	(\$136)
OE&E	4,986	4,909	(77)
Total	\$29,855	\$29,642	(\$213)

Canyon Springs Community Facility

REASON FOR CHANGE:

The change in FY 2020-21, from the enacted budget, is due to updates in the lottery funds.

The change from FY 2020-21 to FY 2021-22, reflects current employee salaries.

EXPENDITURES:

FY 2020-21	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$29,888	\$29,855	(\$33)
GF	14,926	14,926	0
Reimbursements	14,867	14,867	0
Lottery Funds	96	63	(33)

FY 2021-22	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$29,855	\$29,642	(\$213)
GF	14,926	14,795	(131)
Reimbursements	14,867	14,785	(82)
Lottery Funds	63	63	0

Fairview Developmental Center

BACKGROUND:

Fairview Developmental Center (FDC) officially opened on January 5, 1959, under the name of Fairview State Hospital, located in Costa Mesa, Orange County, California. FDC is now in warm-shutdown until a site assessment is completed to inform the disposition of the property. The site assessment has been delayed because of campus activities supporting the state's COVID-19 response.

METHODOLOGY:

The warm shut-down expenditures include personal services and operating expenses and equipment (OE&E) for 54 staff. The Department is continuing to operate FDC in warm-shutdown FY 2020-21 and FY 2021-22.

FY 2020-21			
	Enacted Budget	FY 2020-21	Difference
Positions	54.0	54.0	0.0
Personal Services	\$8,386	\$8,386	\$0
OE&E	3,568	3,568	0
Total	\$11,954	\$11,954	\$0
FY 2021-22			
	FY 2020-21	FY 2021-22	Difference
Positions	54.0	52.0	(2.0)
Personal Services	\$8,386	\$8,167	(\$219)
OE&E	3,568	3,557	(11)
Total	\$11,954	\$11,724	(\$230)

REASON FOR CHANGE:

There is no change in FY 2020-21, from the enacted budget.

The change from FY 2020-21 to FY 2021-22, reflects the transfer of two Information Technology (IT) positions to Ongoing Costs to provide on-going support for the Canyon Springs, Regional Resource Development Program, and Southern Stabilization, Training, Assistance, Reintegration (STAR) homes and Crisis Assessment Stabilization Teams (CAST).

Fairview Developmental Center**EXPENDITURES:**

FY 2020-21		<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
	TOTAL	\$11,954	\$11,954	\$0
	GF	11,954	11,954	0

FY 2021-22		<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
	TOTAL	\$11,954	\$11,724	(\$230)
	GF	11,954	11,724	(230)

Porterville Developmental Center

BACKGROUND:

Porterville Developmental Center (PDC) opened in 1953 in Tulare County to provide person-centered support and treatment programs to the individuals served, embracing change and opportunities while continuing partnerships with stakeholders. Currently, through its Secure Treatment Program (STP), the facility provides 24-hour residential services and medical treatment for individuals 18 years or older with developmental disabilities who are incompetent to stand trial. The STP is 100 percent General Fund as these services are not eligible to receive any federal assistance.

METHODOLOGY:

- There are four types of staffing needed to effectively operate PDC: Unit Staffing: consist of 830.8 staff, include but not limited to, Physicians and Surgeons, Psychologists, Pharmacists, Nursing, and various support staff.
- Program Support: consist of 517.3 staff who provide direct and/or indirect support services to the individuals. Areas that support staff work, include but are not limited to, Administration, Personnel, Office of Protective Service, Maintenance and Food Services, etc.
- Intensive Behavioral Treatment Residence (IBTR): consist of 75.5 staff who serves individuals that require a highly structured treatment setting. Services are provided for both male and female individuals whose functional level of intellectual disability ranges from moderate to borderline.
- Forensic Team: consist of two Senior Psychologists who work with individuals that are in the mild to moderate range of intellectual disability, have come in contact with the legal system, and have been determined to be incompetent to stand trial. The Forensic Team is to assess these individuals' ability for trials. These resources were requested in the 2020 May Revision as part of a coordinated response to the *Stiavetti v. Ahlin* (2016) lawsuit, and to lower the number of individuals on the waiting list for admission to Porterville's STP.

FY 2020-21			
	Enacted Budget	FY 2020-21	Difference
Positions	1,424.3	1,425.7	1.4
Personal Services	\$159,199	\$159,276	\$77
OE&E	22,831	22,806	(25)
Lease Revenue Bond	9,151	8,480	(671)
Total	\$191,181	\$190,562	(\$618)

Porterville Developmental Center

FY 2021-22			
	FY 2020-21	FY 2021-22	Difference
Positions	1,425.7	1,427.7	2.0
Personal Services	\$159,276	\$159,272	(\$4)
OE&E	22,806	22,738	(68)
Lease Revenue Bond	8,480	9,151	\$671
Total	\$190,562	\$191,161	\$599

REASON FOR CHANGE:

The change in FY 2020-21, from the enacted budget, is due to the additional 1.4 program support positions, and updates to the Lease Revenue Bond and lottery funds.

The change from FY 2020-21 to FY 2021-22, is due to 2.0 positions for the Forensic Diversion BCP, reflects current employee salaries, and updates to the Lease Revenue Bond.

EXPENDITURES:

FY 2020-21	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$191,181	\$190,562	(\$619)
GF	191,085	190,499	(586)
Lottery Funds	96	63	(33)

FY 2021-22	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$190,562	\$191,161	\$599
GF	190,499	191,098	599
Lottery Funds	63	63	0

Stabilization Training Assistance Reintegration (STAR) and Crisis Assessment Stabilization Teams (CAST)

BACKGROUND:

The State-Operated Stabilization Training Assistance Reintegration (STAR) homes are committed to affording each consumer a safe and nurturing environment where opportunities for growth, realization, self-expression and goal achievement is celebrated. The homes strive to empower individuals to be self-reliant as their skills, strengths, perseverance and abilities allow so they can transition from crisis stabilization services to long-term community living. STAR services are provided based on an individualized Needs and Services Plan (NSP), which is developed through a team approach using a person-centered planning process that supports the consumer's positive control and self-determination of their own lives. Depending on the supports identified in the NSP, services may include health care, education, work training, employment, self-help training, leisure activities, behavior management, and socialization skills development.

State-operated mobile crisis services provided by the Crisis Assessment Stabilization Team (CAST) is designed to provide partnerships, assessments, training and support to individuals continuing to experience crises after regional centers have exhausted all other available crisis services in their catchment areas. CAST also serves individuals who are at risk of having to move from their family home or out of home placement and admitted to a more restrictive setting.

METHODOLOGY:

The staffing needed to operate two programs, STAR and CAST, includes Psychologists, Behavior Specialists and Nursing. There are 199.75 staff at the STAR homes; there are 21.75 CAST staff in the program. CAST staffing may provide direct and/or indirect support services to the individuals who are not able to use other resources.

FY 2020-21			
	Enacted Budget	FY 2020-21	Difference
Positions	221.5	221.5	0.0
Personal Services	\$24,010	\$24,013	\$3
OE&E	4,945	4,945	0
Total	\$28,955	\$28,958	\$3

Stabilization Training Assistance Reintegration (STAR) and Crisis Assessment Stabilization Teams (CAST)

FY 2021-22			
	FY 2020-21	FY 2021-22	Difference
Positions	221.5	221.5	0.0
Personal Services	\$24,013	\$24,013	\$0
OE&E	4,945	4,945	0
Total	\$28,958	\$28,958	\$0

REASON FOR CHANGE:

The change in FY 2020-21 from the enacted budget is due to updated expenditures.

There is no change from FY 2020-21 to FY 2021-22.

EXPENDITURES:

FY 2020-21	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$28,955	\$28,958	\$3
GF	17,454	18,579	1,125
Reimbursements	11,501	10,379	(1,122)

FY 2021-22	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$28,958	\$28,958	\$0
GF	18,579	18,601	22
Reimbursements	10,379	10,357	(22)

Ongoing Costs

BACKGROUND:

Regional Resource Development Project (RRDP)

The Regional Resource Development Project (RRDP) was initially piloted in 1987 and authorized by the [Lanterman Developmental Disabilities Services Act](#) in September 2002. The RRDPs are mainly designed to assist individuals in the transition process from the state operated facilities to community living. This includes:

- Assist consumers and their interdisciplinary planning teams with planning and transition from State Operated Facilities (SOF) to community living alternatives and provide post placement follow up.
- Assess consumers experiencing difficulty in their community environment and identify possible supports to preserve their community living arrangements.
- Arrange for and conduct an assessment of individuals in need of acute crisis services following an initial review and notification by the regional centers.
- Assist in the transition to, or preservation of, community living arrangements by providing focused training on specific needs to consumers, families, service providers and regional center staff.
- Communicate with the regional centers regarding the development of the annual Community Placement Plan.
- There is a total of 16 RRDP staff between the Northern and Southern regions. The North RRDP staff provides continued support to the individuals who transitioned from the Sonoma's Developmental Center into community living, and the individuals that will transition from North Stabilization, Training, Assistance and Reintegration (STAR) homes. The South RRDP provides continued support to the individuals who transitioned from Fairview's Developmental Center, and individuals who will transition from the South STAR homes, Desert STAR and Canyon Springs Community Facility.

Workers' Compensation

The Department continues to pay for Workers' Compensation claims from open and closed facilities. Some of these closed facilities include: (1) Agnews, (2) Sierra Vista, (3) Stockton, (4) Camarillo, (5) Lanterman, (6) Sonoma, and (7) Fairview. The State Compensation Insurance Fund (SCIF) manages claims, bills the Department monthly for both Temporary and Permanent disability benefits, supplemental job displacement benefits, actual medical costs, any Compromise and Release settlement payments, and the SCIF service fee.

Post Closure

Lump sum funding provided in previous budgets was unused by SOF employees who joined the Community State Staff Program (CSSP) instead of separating or transferring.

Ongoing Costs

METHODOLOGY:

RRDP expenditures are developed using the California Department of Human Resources (CalHR) state classifications' salary, staff benefits, and average operating expenses.

Workers' Compensation expenditures are based on the analysis of several complete fiscal years to determine baseline expenditures related to Workers' Compensation costs throughout the SOF program.

Post Closure expenditures are based on an analysis of the lump sum for accrued leave balances for employees over the age of 50, combined with the average number of separations over several fiscal years.

	<u>FY 2020-21</u>	<u>FY 2021-22</u>
Regional Resource Development Project change:	\$2,080	\$2,310
Workers' Compensation change:	28,349	28,349
Post Closure change:	1,495	1,495
TOTAL EXPENDITURES:	\$31,924	\$32,154

REASON FOR CHANGE:

There is no change in FY 2020-21, from the enacted budget.

The change from FY 2020-21 to FY 2021-22, reflects the transfer of two information technology positions from the Fairview Developmental Center to provide on-going support for Canyon Spring, Regional Resource Development Program, and Southern Stabilization, Training, Assistance, Reintegration (STAR) homes and Crisis Assessment Stabilization Teams (CAST).

EXPENDITURES:

<u>FY 2020-21</u>	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$31,924	\$31,924	\$0
GF	31,708	31,708	0
Reimbursements	216	216	0

<u>FY 2021-22</u>	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$31,924	\$32,154	\$230
GF	31,708	31,938	230
Reimbursements	216	216	0

Control Section Adjustments

BACKGROUND:

Departmental appropriations are adjusted annually to reflect the State's costs through the executive order process. Control Section 3.60 adjusts the Department's appropriation to reflect the State's share of retirement costs. Control Section 3.90 adjusts the Department's appropriation to account for the Personal Leave Program (PLP) 2020.

Employee Compensation adjustments approved through the collective bargaining process, and for employees excluded from collective bargaining as approved by the California Department of Human Resources, are referred to as Item 9800 adjustments. Item 9800 contains general salary increases, shift differentials, retention incentives, and various changes to the employers' share of staff benefits.

METHODOLOGY:

- Control Section 3.60 Retirement Adjustments
Based on an analysis of positions, employee retirement categories, and retirement contribution amounts, the Department is reflecting lower expenditures of \$3.4 million (\$3.1 million GF) in FY 2020-21 and a corresponding decrease of \$3.3 million (\$3.0 million GF) in FY 2021-22 for retirement adjustments.
- Control Section 3.90 PLP 2020
The Department is reflecting a savings of \$22.6 million (\$18.8 million GF) in FY 2020-21 for PLP 2020.
- Item 9800 Employee Compensation Adjustments for the Department is reflecting an increase of \$5.6 million (\$5.0 million GF) in FY 2020-21 and \$5.3 million (\$4.7 million GF) in FY 2021-22.

	<u>FY 2020-21</u>	<u>FY 2021-22</u>
Control Section 3.60 Retirement	(\$3,417)	(\$3,305)
Control Section 3.90 PLP 2020	(22,594)	0
Item 9800 Employee Compensation	5,557	5,260
TOTAL CONTROL SECTION ADJUSTMENTS	(\$20,454)	\$1,955

Control Section Adjustments

REASON FOR CHANGE:

The change in both years is to comply with Control Section adjustments.

EXPENDITURES:

FY 2020-21	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$0	(\$20,454)	(\$20,454)
GF	0	(16,924)	(16,924)
Reimbursements	0	(3,530)	(3,530)

FY 2021-22	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	(\$20,454)	\$1,955	\$22,409
GF	(16,924)	1,723	18,647
Reimbursements	(3,530)	232	3,762

Inter-Agency Agreement (IAA) with DGS

BACKGROUND:

In April 2019, the Department of General Services (DGS) proposed an inter-agency agreement (IAA) to reimburse the Department for the costs associated with operations, maintenance, and partial decommissioning at Sonoma Developmental Center beginning July 1, 2019. The staff needed are those who manage the water treatment plant, operations and maintenance. The agreement is a three-year contract starting in FY 2019-20 and ending in FY 2021-22.

METHODOLOGY:

In FY 2020-21, the total expenditures for the facility are \$6.3 million comprised of the following: \$4.4 million in personal services and \$1.9 million for Operating Expenses and Equipment (OE&E).

In FY 2021-22, the total expenditures for the facility are \$6.4 million comprised of the following: \$4.4 million in personal services and \$2.0 million for OE&E.

	<u>FY 2020-21</u>	<u>FY 2021-22</u>
Personal Services	\$4,382	\$4,382
Operating Expenses and Equipment	1,902	2,067
TOTAL	\$6,284	\$6,449

REASON FOR CHANGE:

There is no change in FY 2020-21, from the Enacted Budget.

The change from FY 2020-21 to FY 2021-22, reflects anticipated increases in OE&E expenditures.

EXPENDITURES:

<u>FY 2020-21</u>	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$6,284	\$6,284	\$0
GF	0	0	0
Reimbursements	6,284	6,284	0

<u>FY 2021-22</u>	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$6,284	\$6,449	\$165
GF	0	0	0
Reimbursements	6,284	6,449	165

COVID-19 Response

BACKGROUND:

On March 4, 2020, Governor Gavin Newsom declared a State of Emergency for California in response to the global COVID-19 pandemic. As a result of COVID-19, the Department has experienced increased costs. These costs include the development of "surge sites" to serve consumers diagnosed with, exposed to, or at high risk of COVID-19.

The Budget Act of 2020 included funding to support short-term care for up to 100 beds at Fairview Developmental Center (FDC) and Porterville Developmental Center (PDC) to address the unique needs of individuals who have intellectual/developmental disabilities (I/DD). FY 2021-22 includes funding for 25 beds at each facility for six months.

METHODOLOGY:

The Department will contract with outside vendors to provide services to individuals who have I/DD and those in the community who are COVID-positive. The contract costs will cover personal services along with operating equipment and expenses expenditures.

	<u>FY 2020-21</u>	<u>FY 2021-22</u>
Fairview Developmental Center	\$53,708	\$23,885
Porterville Developmental Center	28,920	12,861
TOTAL EXPENDITURES	\$82,628	\$36,746

REASON FOR CHANGE:

There is no change in FY 2020-21, from the Enacted Budget.

The change from FY 2020-21 to FY 2021-22, is due to a projected decrease in the need for state-operated surge sites.

EXPENDITURES:

<u>FY 2020-21</u>	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$82,628	\$82,628	\$0
GF	66,734	66,734	0
Reimbursements	15,894	15,894	0

<u>FY 2021-22</u>	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$82,628	\$36,746	(\$45,882)
GF	66,734	36,746	(29,988)
Reimbursements	15,894	0	(15,894)

Enhanced Federal Funding

BACKGROUND:

On March 18, 2020 the President signed the Families First Coronavirus Response Act (FFCRA) into law. The FFCRA provides a temporary 6.2 percentage point increase to California's Federal Medical Assistance Percentage (FMAP) under section 1905(b) of the Social Security Act, effective January 1, 2020. The increase in FMAP applies to Canyon Springs Community Facility, Stabilization Training Assistance Reintegration (STAR) homes and Crisis Assessment Stabilization Team (CAST).

The increase in federal reimbursements is assumed through December 31, 2021.

METHODOLOGY:

The FY 2020-21 enhanced FMAP is estimated based on the additional 6.2 percent federal funds participation for eligible costs. The increased federal funds will result in a corresponding General Fund savings.

	<u>FY 2020-21</u>	<u>FY 2021-22</u>
GF	(\$3,130)	(\$1,583)
Reimbursement	3,130	1,583
TOTAL ENHANCED FEDERAL FUNDING	\$0	\$0

REASON FOR CHANGE:

This is a new policy.

Expenditures:

<u>FY 2020-21</u>	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$0	\$0	\$0
GF	0	(3,130)	(3,130)
Reimbursements	0	3,130	3,130

<u>FY 2021-22</u>	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$0	\$0	\$0
GF	(3,130)	(1,583)	1,547
Reimbursements	3,130	1,583	(1,547)

Retention Stipend Reallocation

BACKGROUND:

The 2016 Enacted Budget appropriated \$20.1 million to provide developmental center employees at Sonoma, Fairview, and Porterville General Treatment Area with a retention stipend during the closures in order to provide continuity of habilitation and treatment services and ensure the health and safety of the clients. This funding was provided to the Department with five-year appropriation authority to allow payment upon separation from the closed developmental center facility. Sonoma and Fairview Developmental Centers have closed but are still in warm-shutdown, creating a delay in final separation for the remaining staff.

The Department estimates warm-shutdown staff will continue working through June 30, 2022. The stipend appropriation is reverting on December 31, 2021; therefore, the Department is requesting a one-year re-appropriation and two-year liquidation.

METHODOLOGY:

The fiscal is determined based on the number of remaining staff and the current stipend owed for staying through the warm-shutdown.

REASON FOR CHANGE:

To extend authority given the original appropriation will revert on December 31, 2021, before the remaining employees separate from state service or transfer.

EXPENDITURES:

FY 2020-21	Enacted Budget	FY 2020-21	Difference
Total	\$0	\$0	\$0
General Fund	\$0	\$0	\$0
Reimbursements	\$0	\$0	\$0

FY 2021-22	FY 2020-21	FY 2021-22	Difference
Total	\$0	\$1,000	\$1,000
General Fund	\$0	\$1,000	\$1,000
Reimbursements	\$0	\$0	\$0

Forensic Diversion

BACKGROUND:

The Department proposes \$341,000 General Fund and two Senior Psychologist Specialist positions who will work with the existing forensic team at Porterville Developmental Center (PDC) to implement the expanded forensic diversion approach for individuals with Intellectual and Developmental Disabilities (IDD) who have been charged with a felony and are active in the criminal justice system. The Department currently oversees the coordination and delivery of services to approximately 360,000 individuals with developmental disabilities through a network of 21 regional centers and state-operated facilities. Within this group, there are individuals who have become involved in the criminal justice system or have a high potential for involvement in criminal conduct statewide.

These individuals have been charged with a criminal offense and remain in a jail setting pending their court hearing, placement in a competency program, or sentencing to a correctional facility setting. Alternatively, individuals can be court ordered to a facility such as prison, a juvenile justice facility, or PDC.

While the Department operates PDC and provides competency training and treatment in a safe and responsible manner, individuals meeting specified requirements may be safely served in a community setting when a court determines that the person is not a risk to the safety of the public or themselves.

Further, this will allow the services to move from a criminal justice approach to community clinical programing for a more effective intervention for these individuals.

METHODOLOGY:

Two Senior Psychologist Specialists at a cost of \$341,000 to expand the current forensic team within PDC in FY 2021-22. The forensic team continues to be necessary to fulfill the requirement to effectively, and in a timely order, navigate individual cases of those committed for competency training pursuant to Penal Code §1370.1.

	<u>FY 2020-21</u>	<u>FY 2021-22</u>
Personal Services	\$0	\$329
Operating Expense and Equipment	0	12
TOTAL	\$0	\$341

REASON FOR CHANGE:

This is a new policy effective July 1, 2021.

Forensic Diversion

EXPENDITURES:

FY 2020-21	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$0	\$0	0
GF	0	0	0
Reimbursements	0	0	0

FY 2021-22	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$0	\$341	\$341
GF	0	341	341
Reimbursements	0	0	0

Youth Returning from Out-of-State Foster Care

BACKGROUND:

Historically, when youth with complex behavioral, medical, and mental health needs in the foster care system cannot be served by in-state placement, counties may place youth in out-of-state facilities. The Department of Social Services conducted a reassessment of these facilities and found violations of California licensure standards resulting in the decertification of facilities. Approximately 10 youths in the decertified out-of-state facilities are anticipated to be eligible for Lanterman Act services and require therapeutic residential environments to support complex developmental and behavioral needs.

METHODOLOGY:

The expenditures were developed based on five youths receiving supports in Stabilization, Training, Assistance and Reintegration (STAR) program.

The Budget includes \$2.0 million (\$1.3 million GF) in FY 2020-21 and \$4.0 million (\$2.5 million GF) in FY 2021-22.

REASON FOR CHANGE:

This is a new policy.

EXPENDITURES:

FY 2020-21	<u>Enacted Budget</u>	<u>FY 2020-21</u>	<u>Difference</u>
TOTAL	\$0	\$1,991	\$1,991
GF	0	1,270	1,270
Reimbursements	0	720	720

FY 2021-22	<u>FY 2020-21</u>	<u>FY 2021-22</u>	<u>Difference</u>
TOTAL	\$1,991	\$3,980	\$1,989
GF	1,270	2,540	1,270
Reimbursements	720	1,440	720

General Fund

BACKGROUND:

The General Fund (GF) is used for two purposes: (1) as a match to Title XIX Reimbursement and (2) to pay for non-Medi-Cal eligible resources/services for residents in a state-operated facility (SOF).

METHODOLOGY:

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

		<u>FY 2020-21</u>	<u>FY 2021-22</u>
• General Fund Match		\$35,416	\$25,471
This funding is the matching GF to the Medi-Cal Reimbursements received from the Department of Health Care Services (DHCS). These Reimbursements are originally funded by the federal government and passed through DHCS (the federally recognized single state agency for Medicaid).			
	GF%		
Non-Proposition 98	43.80%	35,416	25,471
• General Fund Other		280,200	283,476
This funding is to pay for services provided to SOF residents who are not eligible for federal or other reimbursement funding.			
Lease Revenue Debt Service Bond		8,480	9,151
Proposition 98		305	305
HIPAA		180	180
Other General Funds		271,235	273,840
TOTAL GENERAL FUND:		\$315,616	\$308,947

Reimbursements

BACKGROUND:

Title XIX Medi-Cal Reimbursements are funds received for services provided to eligible residents in the developmental centers and the state-operated community facility. These funds require a General Fund match at the FMAP rate.

METHODOLOGY:

The Department's appropriation for reimbursements consists of three components: (1) Title XIX/Medi-Cal, (2) federal reimbursements, and (3) other reimbursements. The detail of these three components are as follows:

		<u>FY 2020-21</u>	<u>FY 2021-22</u>
• Title XIX/Medi-Cal		\$31,955	\$16,072
Title XIX Medi-Cal Reimbursement funds received from the Department of Health Care Services for eligible services provided to State Operated Facility residents.			
	Reimbursement%		
Non-Proposition 98	56.20%	31,955	16,072
• Federal Reimbursements		9,722	12,516
The Department received approval for federal reimbursements for the STAR homes and services provided by CAST to individuals in a crisis situation.			
	Reimbursement%		
HCBS Waiver	56.20%	8,290	10,864
1915(i) State Plan Amendment	56.20%	1,432	1,652
• Other Reimbursements		6,284	6,449
TOTAL Reimbursements:		\$47,961	\$35,037

Lottery

BACKGROUND:

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

METHODOLOGY:

The Department's appropriation from the Lottery Education Fund is as follows:

	<u>FY 2020-21</u>	<u>FY 2021-22</u>
<ul style="list-style-type: none">Lottery Education Fund The Lottery Education Fund is used for specified educational costs, such as training programs to establish curriculum as well as to support special needs and equipment costs in a state-operated facility. Funds received are based on average daily attendance.	\$126	\$126
TOTAL Lottery:	\$126	\$126