

Home and Community-Based Services (HCBS) Rules DEPARTMENT FUNDING GUIDANCE

The Home and Community-Based Services (HCBS) rules ensure that people with disabilities have full access to, and enjoy the benefits of, community living through long-term services and supports in the most integrated settings of their choosing. In order to assist in determining eligibility for compliance funding, providers must complete this evaluation. Both “Yes” and “No” answers require an explanation. A “No” response *could* mean a service setting is out of compliance with the HCBS rules and is potentially eligible for funding to make necessary adjustments. Once this evaluation is completed, it should act as a guide for filling out the provider compliance funding concept, which is required for any provider to be eligible for compliance funding. **Completion of this evaluation is for the sole purpose of applying for compliance funding and does not take the place of future provider assessments that the Department may require to determine provider compliance with the HCBS settings rules. Only providers requesting compliance funding need to complete this evaluation.**

Federal Requirements #1-5 apply to providers of all services, including residential and non-residential settings. Federal Requirements #6-10 are additional requirements that apply only to provider-owned or controlled residential settings.

The column labeled “Guidance” contains a series of questions intended to help identify compliance or non-compliance with each requirement as it relates to the HCBS rules. While responses to these questions can help in the determination of whether or not a particular requirement is met, these responses may not be the sole factor in this determination.

More information on the HCBS rules and this form can be found at <https://www.dds.ca.gov/initiatives/cms-hcbs-regulations/>.

Questions may be directed to HCBSregs@dds.ca.gov.

Date(s) of Evaluation: 2/11/2021	Completed by: Cheryl Capozzi
Vendor Name, Address, Contact: CC Consulting LLC, Capozzi Residential-Filbert 3059 N Filbert Ave, Fresno, CA 93727; Capozzi Residential-Browning 5253 W Browning Ave, Fresno, Ca 93722	
Vendor Number: HC1398 /HC1264	
Service Type and Code: Adult Residential Facility, 915	

**Home and Community-Based Services (HCBS) Rules
DEPARTMENT FUNDING GUIDANCE**

<p><u>Federal Requirement #1:</u> <i>The setting is integrated in, and supports full access of individuals receiving Medicaid HCBS to the greater community, including opportunities to seek employment and work in competitive integrated settings, engage in community life, control personal resources, and receive services in the community, to the same degree of access as individuals not receiving Medicaid HCBS.</i></p>	<p><u>Guidance:</u></p> <ul style="list-style-type: none"> • Do individuals receive services in the community based on their needs, preferences and abilities? • Does the individual participate in outings and activities in the community as part of his or her plan for services? • If an individual wants to seek paid employment, does the home staff refer the individual to the appropriate community agency/resource? • Do individuals have the option to control their personal resources, as appropriate?
<p>Does the service and/or program meet this requirement? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Please explain: The ladies receive services in the community based on their needs and preferences. The ladies are provided with options in the community for that week and they are given the opportunity to discuss and choose the activities they would like to participate in. Each individual has their own desires and enjoyment . Providing transportation to eight ladies to eight separate locations at one time is difficult to accommodate. Due to inadequate staffing ratios in some instances individuals are unable to access specific activities of interest. This is also due to inadequate transportation services. Utilizing public transportation does not meet the needs of the individuals in the home and takes away from the ability of the individual to have a spontaneous outing or trip they deserve.</p>	
<p><u>Federal Requirement #2:</u> <i>The setting is selected by the individual from among setting options, including non-disability-specific settings and an option for a private unit in a residential setting. The setting options are identified and documented in the person-centered service plan and are based on the individual's needs, preferences, and, for residential settings, resources available for room and board.</i></p>	<p><u>Guidance:</u></p> <ul style="list-style-type: none"> • Does the provider have a current regional center Individual Program Plan (IPP) on file for all individuals? • Does each individual's IPP document the different setting options that were considered prior to selecting this setting?
<p>Does the service and/or program meet this requirement? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Please explain: IPPs on file for each individual. However, the individual's options for different settings resources are scarce and are not always meaningful or desires of the ladies in the home. Hiring a resource specialist focusing on Person Centered Planning will assist in meeting this requirement.</p>	

**Home and Community-Based Services (HCBS) Rules
DEPARTMENT FUNDING GUIDANCE**

<p><u>Federal Requirement #3:</u> <i>Ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.</i></p>	<p><u>Guidance:</u></p> <ul style="list-style-type: none"> • Does the provider inform individuals, in a manner they can understand, of their rights to privacy, dignity, respect, and freedom from coercion and restraint? • Does the provider communicate, both verbally and in writing, in a manner that ensures privacy and confidentiality? • Do staff communicate with individuals based on their needs and preferences, including alternative methods of communication where needed (e.g., assistive technology, Braille, large font print, sign language, participants' language, etc.)?
<p>Does the service and/or program meet this requirement? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Please explain: The staff communicates with the ladies and their relatives in a confidential manner both verbally and in writing regarding their medical appointments, issues, or any concerns they may have. The staff also utilizes pictures, gestures, and role playing to communicate, explain, and get feedback from the ladies and their families. The staff informs the ladies of their rights upon admission and periodically throughout the year using communication that meets their individual needs.</p>	
<p><u>Federal Requirement #4:</u> <i>Optimizes but does not regiment individual initiative, autonomy, and independence in making life choices, including, but not limited to, daily activities, physical environment, and with whom to interact.</i></p>	<p><u>Guidance:</u></p> <ul style="list-style-type: none"> • Does the provider offer daily activities that are based on the individual's needs and preferences? • Does the provider structure their support so that the individual is able to interact with individuals they choose to interact with, both at home and in community settings? • Does the provider structure their support so that the individual is able to participate in activities that interest them and correspond with their IPP goals?
<p>Does the service and/or program meet this requirement? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Please explain: The ladies in the home are offered the opportunity on a daily basis to participate in activities of their choice however due to limited transportation they are not able to receive full access to activities that integrate in their individual interests. Community outings for our ladies depends on the availability of transportation which all</p>	

Home and Community-Based Services (HCBS) Rules DEPARTMENT FUNDING GUIDANCE

four ladies in each home share. Transportation and staffing to assist them to these places has always been a challenge due to the fact that each individual has different interest of enjoyment. As a result, some of our ladies with behavioral challenges appear to get agitated when they are confined within the home. Such agitation may escalate to explosive/aggressive behavior. Our current practice of a group outing once a week does not appear to be sufficient. It is believed that if the individual has more opportunities such as a daily basis there is a possibility of minimizing or eliminating the aggressive behaviors. The ladies have expressed during meetings that they would love to attend more special conventions, fairs, sports events, travel outside of Fresno and have dates with their friends and/or boyfriend. Having additional transportation will assist in meeting this requirement.

Federal Requirement #5:

Facilitates individual choice regarding services and supports, and who provides them.

Guidance:

- Does the provider support individuals in choosing which staff provide their care to the extent that alternative staff are available?
- Do individuals have opportunities to modify their services and/or voice their concerns outside of the scheduled review of services?

Does the service and/or program meet this requirement? Yes No

Please explain: Funding is a barrier in adding more staff and providing individual attention preferred by the individual. Having a 1:1 ratio is very difficult for our individuals to have their own choice of staff. Having additional staff to provide that 1 on 1 support would assist in meeting this requirement. In addition, adding another vehicle will allow us to transport those individuals who want to go out of town or on an outing when the other ladies do not have a desire to do so. Hiring a staff specifically for this will meet the requirement as well as fulfill the dreams and desires of the ladies to travel out of town.

Home and Community-Based Services (HCBS) Rules DEPARTMENT FUNDING GUIDANCE

Only providers of services in **provider-owned or controlled residential settings** need to complete the remainder of this evaluation. In **provider-owned or controlled residential settings**, in addition to the above requirements, the following requirements must also be met:

<p><u>Federal Requirement #6:</u> <i>The unit or dwelling is a specific physical place that can be owned, rented or occupied under a legally enforceable agreement by the individual receiving services, and the individual has, at a minimum, the same responsibilities and protections from eviction that tenants have under the landlord/tenant law of the State, county, city or other designated entity. For settings in which landlord/tenant laws do not apply, the State must ensure that a lease, residency agreement or other form of written agreement will be in place for each participant and that the document provides protections that address eviction processes and appeals comparable to those provided under the jurisdiction's landlord/tenant law.</i></p>	<p><u>Guidance:</u></p> <ul style="list-style-type: none"> • As applicable, does each individual have a lease, residency agreement, admission agreement, or other form of written residency agreement? • Are individuals informed about how to relocate and request new housing?
<p>Does the service and/or program meet this requirement? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Please explain: Our individuals do have an admissions agreement. In the event that a individual wishes to move to a new place, the home will inform the service coordinator. In most cases, the provider assists in finding a new place appropriate for the individual and continues to help until the relocation process is completed.</p>	
<p><u>Federal Requirement #7:</u> <i>Each individual has privacy in his/her sleeping or living unit: Units have entrance doors lockable by the individual, with only appropriate staff having keys to doors as needed. Individuals sharing units have a choice of roommates in that setting. Individuals have the freedom to furnish and decorate their sleeping or living units within the lease or other agreement.</i></p>	<p><u>Guidance:</u></p> <ul style="list-style-type: none"> • Do individuals have a choice regarding roommates or private accommodations? • Do individuals have the option of furnishing and decorating their sleeping or living units with their own personal items, in a manner that is based on their preferences? • Do individuals have the ability to lock their bedroom doors when they choose?
<p>Does the service and/or program meet this requirement? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	

**Home and Community-Based Services (HCBS) Rules
DEPARTMENT FUNDING GUIDANCE**

Please explain: Capozzi Residential is a home-like environment in which the ladies are encouraged to decorate their home and bedrooms to their liking. They are also encouraged to bring family pictures of their preference to ensure the consumers feel connected with their families. The individual rooms have locks that have private codes set by the individuals.

Federal Requirement #8:

Individuals have the freedom and support to control their own schedules and activities, and have access to food at any time.

Guidance:

- Do individuals have access to food at any time?
- Does the home allow individuals to set their own daily schedules?
- Do individuals have full access to typical facilities in a home such as a kitchen, dining area, laundry, and comfortable seating in shared areas?

Does the service and/or program meet this requirement? Yes No

Please explain: Scheduled meal plans are in place. The individuals have full access to the common areas of the home and can utilize them at any time. Meals are on a schedule and individuals have access to fruit and vegetables at all times. Individuals have ability to control their schedules.

Federal Requirement #9:

Individuals are able to have visitors of their choosing at any time.

Guidance:

- Are visitors welcome to visit the home at any time?
- Can individuals go with visitors outside the home; such as for a meal or shopping, or for a longer visit outside the home, such as for holidays or weekends?

Does the service and/or program meet this requirement? Yes No

Please explain: The ladies have the choice to have visitors of their preference. The home welcomes all relatives and friends to visit at any time as mentioned in the House Rules. The ladies are able to go out with their visitors for shopping, spend weekends or longer visits with their families and friends. The consumers have the right to refuse to see any visitor as well.

Federal Requirement #10:

The setting is physically accessible to the individual.

Guidance:

- Do individuals have the freedom to move about inside and outside the home or are they primarily restricted to one room or area?
- Are grab bars, seats in bathrooms, ramps for wheelchairs, etc., available

**Home and Community-Based Services (HCBS) Rules
DEPARTMENT FUNDING GUIDANCE**

	<p>so that individuals who need those supports can move about the setting as they choose?</p> <ul style="list-style-type: none"> • Are appliances and furniture accessible to every individual?
<p>Does the service and/or program meet this requirement? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Please explain: Our individuals have access to freely move inside and outside the home. They are not restricted to one room or area. The homes are not equipped with grab rails, seats in bathrooms, or wheelchair ramps. The appliances in the home are not accessible to our individual's needs.</p>	

CONTACT INFORMATION

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Contact Phone Number: 559-273-9192

Email Address: capozziresidential@gmail.com

ACKNOWLEDGEMENT

By checking the box below, I acknowledge that completion of this evaluation is for the sole purpose of applying for compliance funding and does not take the place of future provider assessments that the Department may require to determine provider compliance with the HCBS settings rules.

I AGREE

Home and Community-Based Services (HCBS) Rules DEPARTMENT FUNDING GUIDANCE

Regional center vendors may receive funding to make changes to service settings and/or programs to help them come into compliance with the HCBS rules. To be considered for funding, vendors must complete and submit this form and the provider compliance evaluation form as one packet to the regional center with which it has primary vendorization.

Instructions:

- The concept form on the next page must be used, may not exceed four pages plus the budget worksheet and any cost backup, and must be kept in Arial 12-point font. Submit the form in Microsoft Word or PDF format. An extra half page is permitted to answer questions about prior funding.
- Using a form from previous years will negatively impact a concept score, so please ensure the current FY 20-21 form is used.
- For providers that operate programs with several vendor numbers involved in one concept, one evaluation and concept form should be submitted and should list all vendor numbers for related/included programs. If multiple programs owned by the same parent company have different compliance evaluations or concepts, additional applications can be submitted but should be attached in the same document as the other owned programs so they can be reviewed together.
- The results of the evaluation should be clearly laid out in the section referring to identification of federal requirements that are currently out of compliance, which the concept will address.
- The concept form includes detailed information that describes the funding requests and supports how the requests will assist the provider to come into compliance.
- There should be a clear link between what is being requested and the federal requirement currently out of compliance.
- Concepts should demonstrate how the requested change in service delivery will impact individuals in offering more choices and opportunities.

Strengths of previously funded concepts:

- Identified the need as well as proposed a plan to provide outreach and information regarding the HCBS rules to individuals served and members of their support teams.
- Discussed the need for additional funds to effectively support individuals served on a more individualized basis in overcoming barriers to community integration and employment, as appropriate.
- Prioritized the preferences of individuals served and utilized their feedback in the development of the concept.
- Implemented a sustainable plan for person-centered planning/thinking and training regarding the HCBS rules.
- Enabled residents to age in place and exercise more choice and independence.

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Home and Community-Based Services (HCBS) Rules DEPARTMENT FUNDING GUIDANCE

Vendor name	CC Consulting LLC (Capozzi Residential)
Vendor number(s)	HC1398/HC 1264
Primary regional center	Central Valley Regional Center
Service type(s)	(2) Adult Residential Facility
Service code(s)	915/915
Number of consumers typically and currently served	8
Typical and current staff-to-consumer ratio	1:3
<p>1. Please provide a brief description of the service/setting. Include what a typical day consists of during regular program as well as how services are currently being provided. This response must include the baseline/current levels for any aspects of the program for which the concept proposes funding.</p>	
<p>Capozzi Residential provides care and services 24 hours a day 7 days a week at Level 4D & 4I. The individuals that reside in the home are women between the ages 18-59 who live with intellectual disabilities, and/or mental impairments. Some of the ladies have behavior challenges and self-care assistance needs. A typical day will usually consist of assisting the ladies with their daily routine in the homes. Staff will ensure that each one of our individuals are able to perform self-care skills as independently as possible. Staff will assist with meal preparation, medication administration, provide transportations and supervision to outings and activities. Prior to the shelter in place order the ladies would attend day or work programs. They would be ready to go around 830am and will normally arrive back to the home between 2pm-4pm. Once they arrive home they do their chores and participate in an activity of their choice. Some of the ladies assist with meal preparation and clean up. They complete showers and hygiene and choose a leisure activity of their own before bedtime. On the weekends the ladies enjoy shopping, going to parks, out of town trips and spending time with friends and family. Currently outings are done as a group due to limited transportation.</p>	
<p>Project Narrative Description: While filling out this section, reflect on how services are typically provided and how that might have changed in the past year. Think about what has been learned in the past year and how that might shape services going forward. Funding awarded through this concept can span the course of up to two years which would allow time to shape services to be more person-centered and align with the HCBS federal requirements.</p>	
<p>2. Please provide a brief summary narrative of the concept for which you are requesting funding, including justification for the funding.</p>	
<p>We have addressed our inability to meet all HCBS requirements due to lack of funding. The funding we are requesting will ensure that we are in compliance before 2023. The funding request is for two vans, vacation travel, additional staffing, person centered training for staff and ADA compliant showers.</p>	

Home and Community-Based Services (HCBS) Rules DEPARTMENT FUNDING GUIDANCE

1. **TWO Vans:** Each home will have an additional van to be utilized to go on outings more frequently and longer distance trips that the individuals have expressed as a dream of theirs. For example, several ladies want to go to the beach or Oregon. It will promote a sense of independence and supporting choices on a broader level. The new van would provide reliable transportation and add opportunity for increasing community integration for residents to match their interests and allow more spontaneity in travel.

2. **Vacation travel:** The ladies have limited funds and have desires to travel outside of Fresno. Capozzi Residential supplements to an extent. With additional funding these ladies can travel to a location of their dreams that will teach them about different areas outside of Fresno, allow them to try new things not readily available in the area, and create life time memories. Most importantly this will allow them to feel more independent and develop a sense of autonomy.

3. **Additional Staffing:** Additional staffing is needed to accommodate the ladies on their outings and traveling. Several of the ladies in the home do not have family available or willing to take them traveling. Having additional staffing will ensure their health and safety while in an unfamiliar area they so desire to explore.

4. **Person Centered Training Consultant:** It is our goal to have an expert in person centered planning to train staff to have a person-centered approach in all aspects of supporting our individuals. Specialized training ongoing is crucial to identifying and highlighting the uniqueness, talents and capabilities of our individuals. A person centered training consultant will help staff make the transition from caregiver to person centered support as a result will help us better support the individuals to achieve their aspirations and dreams.

5. **ADA Compliant shower:** One of our ladies is 55 years old and has unsteady gait. Several of the individuals have unsteady gait and need assistance getting in and out of the shower. They would benefit from having a ADA compliant shower as well as the other individuals who have the ability to age in place and exercise more choice and independence.

3. Identify which HCBS federal requirements this concept addresses that are currently out of compliance. Could be all or a subset of those identified as out of compliance on the evaluation.

1 x 2 x 3 ___ 4 x 5 x 6 ___ 7 ___ 8 ___ 9 ___ 10 x

4. For each HCBS out-of-compliance federal requirement that is being addressed by this concept, describe the barriers to compliance and why this concept is necessary. If this information is in the evaluation section, please copy it here.

Federal Requirement 1,2, 4 & 5 : The ladies are provided with options in the community for that week and they are given the opportunity to discuss and choose the activities they would like to participate in. Each individual have their own desires and enjoyment . Providing transportation to eight ladies to eight separate locations at one time is difficult to accommodate. Due to inadequate staffing ratios in some instances individuals are unable to access specific activities of interest. This is also due to inadequate transportation services. Utilizing public transportation does not meet the needs of the individuals in the home and takes away from the ability of the individual to have a spontaneous outing or trip. Funding is a barrier in adding more staff and

Home and Community-Based Services (HCBS) Rules DEPARTMENT FUNDING GUIDANCE

providing individual attention preferred by the individual. Having a 1:1 ratio is very difficult for our individuals to have their own choice of staff. Having additional staff to provide that 1 on 1 support would assist in meeting this requirement. In addition additional transportation to transport those individuals who want to go out of town when the other ladies do not. Hiring a staff specifically for this will meet the requirement as well as fulfill the dreams and desires of the ladies to travel out of town. **Federal Requirement 10:** The bathrooms in each home are not ADA compliant as our ladies age the potential for ADA compliant shower will be needed. Several of the individuals have unsteady gait and need assistance getting in and out of the shower. Funding is a barrier to remodeling the whole bathroom to meet the needs of the current individuals.

5. For each out-of-compliance federal requirement that is addressed in this concept, please explain how the concept will bring the vendor into compliance by March 2023.

Federal Requirement 1,2, 4 & 5 : Providing additional staffing, training, funds for various travel and transportation to access various locations of their choice, the ladies will be able to integrate and enjoy activities with their peers, neighbors, co-workers to the same extent as other individuals. They will have access to various locations and events at their own pace and choice of individuals they wish to associate with. The staff will be equipped with the knowledge and ability to accommodate to meet the needs of the individuals.

Federal Requirement 10: Adding a ADA compliant bathroom will provide the individuals with ability to be more independent in managing their hygiene. In addition to providing a safe space to complete hygiene.

6. What are the proposed outcomes and objectives of the concept, and what are the methods of achieving and tracking them?

1. Individuals will gain access to places and events that they desire without barriers of transportation and funds. 2. Individuals will have increase in participation in the community on a regular basis. 3. Individuals will have a decrease in behaviors. 4. Staff will have greater skills and knowledge on how to implement person centered planning and approaches. 5. Community outing log and travel log will be kept to track the adequate usage of the requested vehicles. 6. Monthly meetings with the individuals will measure satisfaction of having additional transportation.

7. Please describe how and/or what was done to include input from the individuals served in developing this concept? Discuss not only the development of the concept, but also what steps were taken to identify the interests and desires of the individuals and who was involved in that process.

The Administrator and staff meet with the ladies on a monthly basis to discuss their wants and needs. They express interest in travel, attending events independently and being gainfully employed. On several occasions the individuals have request a shower without a tub and bars to make it easier for them to access. Their input was included in this concept.

8. Please describe how the concept you propose will enable you to provide more person-centered services to your clients.

Community outings will give our individuals the opportunity to interact with other individuals and their peers whom they encounter in the different places they go to. Likewise, the individuals will have more opportunities to choose the times when they wish to shop go on

Home and Community-Based Services (HCBS) Rules DEPARTMENT FUNDING GUIDANCE

community outings and travel to their desired destinations. This will also give them a day of leisure, recreation, and fun potentially reducing behavior outburst. With the additional resources we are able to more flexible and provide significantly more opportunities to to participate in a wide variety of activities and travel.

9. Please address your plan for maintaining the benefits, value, and success of your project at the conclusion of 2020-21 HCBS Funding.

The licensee and administrator will continue to educate themselves and staff on the person centered concepts and adapt to changes as they come. In addition the resource specialist will continuously seek to find activities that will meet the needs of the individuals in the home. In regards to the vehicles, we will maintain the maintenance , insurance and fuel.

10. Write a brief narrative below explaining each major cost category and timeline. Complete the budget template at the end of the concept sheet. An excel version with formulas is available. When applicable, budgets should include personnel/benefits, operating costs such as consultants or training, administrative expenses/indirect costs, and capital costs (assets lasting more than 2 years). If project spans 2 years or occurs in phases, budget should be separated by phase/year. Administrative costs, if any, must comply with DDS' vendor requirements, including a cap of 15% of the sum of personnel/benefits, consulting, and operating costs (must exclude capital costs). This information can be found at this [link](#).

Personnel: \$88,00; Operating expenses:\$7,100; Capital: \$109, 000. Total Requested: \$204,100

11. Please address sustainability of funding sources for all programs or concepts requiring any funding past the timeframe of the requested funding, especially those that involve staff or other long-term costs. Please mark "not applicable" if costs will all be incurred during the program timeframe; up to two years.

Funding for the vehicle maintenance and insurance will be sustained by Capozzi Residential Funds. Training on person centered will be provided during orientation and during the continuing education. Staffing will be included on the second year budget.

12. Have you or the organization you work with been a past recipient of DDS funding? If yes, what fiscal year(s)?	HCBS Funding	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes.	If Yes, FY(s) _____
	Disparity Funding	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes.	If Yes, FY(s) _____
	CPP Funding	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes.	If Yes, FY(s) _____
	CRDP Funding	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes.	If Yes, FY(s) _____
If yes to any question be sure to answer questions 13 and 14.				

For providers who have received prior HCBS, Disparity, CPP or CRDP Funding from DDS

13. If your organization has received prior funding from any of the above sources, please provide an update on the prior funding project. You may copy and paste from progress update(s) previously provided to regional centers or DDS.

14. If your organization received prior funding, please explain how the current funding request is not redundant with any prior funding received and/or builds on the prior funding but was not part of the original funding.

HCBS CONCEPT BUDGET		\$204,100				
Vendor Name		CC Consulting LLC, (Capozzi Residential-Filbert /Capozzi Residential-Browning)				
Vendor Number(s)		HC1398/HC 1264				
	Wage and Benefits	Year 1 Budget		Year 2 Budget		Total
		FTE	Annual Cost	FTE	Annual Cost	Cost
Personnel (wage + benefits)						
Direct Support Professional part time			\$ 30,000		\$ -	\$ 30,000
Resource Specialist			\$ 12,000		\$ -	\$ 12,000
Person Centered Training			\$ 1,000		\$ -	\$ 1,000
Direct Support Professional full time			\$ 45,000		\$ -	\$ 45,000
			\$ -		\$ -	\$ -
			\$ -		\$ -	\$ -
			\$ -		\$ -	\$ -
			\$ -		\$ -	\$ -
			\$ -		\$ -	\$ -
Personnel Subtotal			\$ 88,000		\$ -	\$ 88,000
Operating expenses						
Education and training			\$ 1,100		\$ -	\$ 1,100
					\$ -	\$ -
Travel out of town, hotels, expenses, fuel			\$ 6,000		\$ -	\$ 6,000
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
Operating Subtotal			\$ 7,100		\$ -	\$ 7,100
Administrative Expenses						
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
Administrative Subtotal			\$ -		\$ -	\$ -
Capital expenses						
Two vans (1 for each home)			\$ 68,000		\$ -	\$ 68,000
ADA compliant bathroom x 2.1 for each home			\$ 41,000		\$ -	\$ 41,000
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
Capital Subtotal			\$ 109,000		\$ -	\$ 109,000
Total Concept Cost			\$ 204,100		\$ -	\$ 204,100

See Attachment F for budget details and restrictions