

**Summary of August 15 Performance Standard Adjustments (FY 05-06)**

<u>Agenda #</u>	<u>OPB Log Agenda #</u>	<u>Department/ Schedule #</u>	<u>Agency</u>	<u>Program</u>	<u>Performance Indicator Name</u>	<u>Justification for Adjustment</u>	<u>LFO Recommendation</u>
1	18-A	Executive 01-100	Executive Office	Indigent Defense Assistance Board	Number of youth served (Youth Post-Dispositional Advocacy)	The Louisiana Indigent Defense Assistance Board (LIDAB) has contracted with the Juvenile Justice Project of Louisiana for the past three years to provide post-dispositional representation to youth in secure care. There has been a significant reduction in the amount of youth in secure care and the Juvenile Justice Project is now focusing on youth advocacy and after care for youth and will no longer be contracting with LIDAB for representation of youth.	Approval
2	18-B	Executive 01-100	Executive Office	Indigent Defense Assistance Board	Percentage of indigents sentenced to death represented by counsel in post-conviction proceedings in state court	The LIDAB is required by law to provide representation for indigents in all capital post-conviction proceedings in state court, therefore the objective should be 100% rather than 48%.	Approval
3	45	Executive 01-129	La. Comm. on Law Enforcement	State Programs	Percentage of school districts presenting DARE Number of classes presented-Core (5th /6th) Number of classes presented-Junior High Number of DARE grants awarded Dollar amount of DARE grants awarded	The amount of funds available to the DARE program was reduced from \$4 million when performance indicators were established but was later reduced to \$3,501,125. DARE grants awarded will be reduced from 94 to 87. Number of junior high classes presented will decrease to 800 from 900 and number of classes presented in 5th and 6th grades will decrease from 2,500 to 2,300.	Approval
4	17-A	Executive 03-132	NE La War Veterans' Home	NE La War Veterans Home	Total days of care-nursing	Typographical error. This indicator should have been 52,925 instead of 55.	Approval
5	17-B	Executive 03-132	NE La War Veterans' Home	NE La War Veterans Home	Average state cost per patient day	The average cost per patient day is adjusted due to the original budgeted amount being used to calculate this figure rather than the appropriated amount.	Approval
6	42-A	Elected Officials 04-139	Secretary of State	Administrative	Percentage of objectives met	This request modifies the value from 60% to 83%. The agency failed to adjust its proposed performance standard after recommended funding was increased as a result of the agency budget appeal during development of the Executive Budget Recommendation.	Approval
7	42-B	Elected Officials 04-139	Secretary of State	Administrative	Percentage of local government entity election expenses invoiced within 75 days of election	This request modifies the value from 60% to 100%. The agency failed to adjust its proposed performance standard after recommended funding was increased as a result of the agency budget appeal during development of the Executive Budget Recommendation.	Approval
8	43	Elected Officials 04-139	Secretary of State	Elections	Percentage of parishes having an election for which test materials were prepared and distributed at least 10 days prior to the election	This request modifies the value from 84% to 100%. The agency failed to adjust its proposed performance standard after recommended funding was increased as a result of the agency budget appeal during development of the Executive Budget Recommendation.	Approval
9	44	Elected Officials 04-139	Secretary of State	Museums	Cost per visitor Numbers of Visitors Total Number of museums (in program)	This request provides for the following modifications: increases the cost per visitor from \$13.34 to \$14.75; increases the number of visitors from 198,000 to 206,250; decreases the number of	Approval

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					Percentage of program museums in operation	programs from 14 to 13; and increases the percentage of programs in operation from 43% to 61%.	
10	10	Elected Officials 04-141	Office of the Attorney General	Medicaid Fraud	Number of training programs for state agency personnel and health care providers provided by Medicaid Fraud Control Unit per year	This request provides for the following modifications: increase the number of training programs from 25 to 50.	Approval
					Number of proactive projects to detect abuse of the infirm and Medicaid fraud initiated during fiscal year	Increase the number of proactive projects to detect abuse of the infirm and Medicaid fraud initiated from 4 to 5.	
11	11	Elected Officials 04-158	Public Service Commission	Support Services	Direct savings to ratepayers (millions)	The agency submitted the projected level at \$564 million. However, the level was entered into the Executive and Supporting Documents at \$594 million. This drafting error was not corrected during the legislative process and the incorrect value is contained in Act 16. This PAR modifies the performance standard to reflect the correct level of \$564 million.	Approval
12	29	Corrections 08-401	C. Paul Phelps Correctional Center	Rehabilitation	Number of participating in pre-release programs	Technical adjustment that reflects average monthly participation in pre-release programs rather than a cumulative total. Performance standard for FY 05-06 was 333 and will now be 502. The new standard reflects average monthly enrollment for two years.	Approval
13	30	Corrections 08-402	Louisiana State Penitentiary	Rehabilitation	Number of participating in pre-release programs	Technical adjustment that reflects average monthly participation in pre-release programs rather than a cumulative total. Performance standard for FY 05-06 was 76 and will now be 128. The new standard reflects average monthly enrollment for two years.	Approval
14	31	Corrections 08-405	Avoyelles Correctional Center	Rehabilitation	Number of participating in pre-release programs	Technical adjustment that reflects average monthly participation in pre-release programs rather than a cumulative total. Performance standard for FY 05-06 was 1,507 and will now be 400. The new standard reflects average monthly enrollment for two years.	Approval
15	32	Corrections 08-406	Louisiana Correctional Institute for Women	Rehabilitation	Number of participating in pre-release programs	Technical adjustment that reflects average monthly participation in pre-release programs rather than a cumulative total. Performance standard for FY 05-06 was 2,784 and will now be 935. The new standard reflects average monthly enrollment for two years.	Approval
16	33	Corrections 08-407	Winn Correctional Center	Purchase of Correctional Services	Number of participating in pre-release programs	Technical adjustment that reflects average monthly participation in pre-release programs rather than a cumulative total. Performance standard for FY 05-06 was 775 and will now be 242. The new standard reflects average monthly enrollment for two years.	Approval
17	34	Corrections	Allen	Purchase of	Number of participating in pre-release programs	Technical adjustment that reflects average monthly participation in	Approval

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		08-408	Correctional Center	Correctional Services		pre-release programs rather than a cumulative total. Performance standard for FY 05-06 was 1,328 and will now be 165. The new standard reflects average monthly enrollment for two years.	
18	35	Corrections 08-409	Dixon Correctional Institute	Rehabilitation	Number of participating in pre-release programs	Technical adjustment that reflects average monthly participation in pre-release programs rather than a cumulative total. Performance standard for FY 05-06 was 846 and will now be 737. The new standard reflects average monthly enrollment for two years.	Approval
19	36	Corrections 08-412	J. Levy Dabadie Correctional Center	Health Services	Number of participating in pre-release programs	Technical adjustment that reflects average monthly participation in pre-release programs rather than a cumulative total. Performance standard for FY 05-06 was 162 and will now be 89. The new standard reflects average monthly enrollment for two years.	Approval
20	37	Corrections 08-413	Elayn Hunt Correctional Center	Rehabilitation	Number of participating in pre-release programs	Technical adjustment that reflects average monthly participation in pre-release programs rather than a cumulative total. Performance standard for FY 05-06 was 2,574 and will now be 586. The new standard reflects average monthly enrollment for two years.	Approval
21	38	Corrections 08-414	Forcht Wade Correctional Center	Forcht Wade	Number of participating in pre-release programs	Technical adjustment that reflects average monthly participation in pre-release programs rather than a cumulative total. Performance standard for FY 05-06 was 500 and will now be 244. The new standard reflects average monthly enrollment for two years.	Approval
22	39	Corrections 08-414	Steve Hoyle Rehabilitation Center	Steve Hoyle	Number of participating in pre-release programs	Technical adjustment that reflects average monthly participation in pre-release programs rather than a cumulative total. Performance standard for FY 05-06 was 150 and will now be 92. The new standard reflects average monthly enrollment for two years.	Approval
23	40	Corrections 08-414	David Wade Correctional Center	Rehabilitation	Number of participating in pre-release programs	Technical adjustment that reflects average monthly participation in pre-release programs rather than a cumulative total. Performance standard for FY 05-06 was 1,968 and will now be 372. The new standard reflects average monthly enrollment for two years.	Approval
24	41	Corrections 08-416	Washington Correctional Institute	Rehabilitation	Number of participating in pre-release programs	Technical adjustment that reflects average monthly participation in pre-release programs rather than a cumulative total. Performance standard for FY 05-06 was 1,463 and will now be 690. The new standard reflects average monthly enrollment for two years.	Approval
25	47-A	Public Safety 08-419	State Police	Gaming Enforcement	Number of casino gaming compliance inspections conducted  Number of casino gaming violations issued	The initial performance indicators were based on a reduction of 22 positions and virtually all overtime in the Gaming Enforcement division. This resulted in a reduction of casino (28%) and video poker (70%) inspections. Violations were decreased as a result of	Approval

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					Number of video gaming compliance inspections conducted	reduced inspections. Current budget figures indicate only a reduction of 18 positions and overtime dollars were placed back in the budget. This change will result in a recalculation of the casino (10%) and video poker (20%) inspections.	
					Number of video gaming violations issued		
26	47-B	Public Safety 08-419	State Police	Gaming Enforcement	Average number of days to complete a new casino gaming background	The initial performance indicators were based on a reduction of 22 positions and virtually all overtime in the Gaming Enforcement division. This resulted in an increase in the average number of days to complete casino backgrounds (22%) and video gaming type 1 & 2 applications (23%). Current budget figures indicate a reduction of only 18 positions and overtime dollars were placed back in the budget. This change will result in a recalculation. Processing time should be increased 8% for casino backgrounds and 13% for video gaming applications.	Approval
					Average number of days to complete a new video gaming Type 1 and 2 application		
27	19A	Health & Hospitals 09-305	Administration	Administration	Percentage of applications processed timely Number of applications processed timely	The adjustment increases the percentage of applications processed timely from 85% to 96.5% and the number of applications processed timely from 382,353 to 446,371. Partial restoration of proposed Executive Budget cuts (23 of 45 eligibility staff positions) will allow MVA to increase productivity relative to processing Medicaid applications.	Approval
28	19B	Health & Hospitals 09-305	Administration	Administration	Potential eligibles below 200% Number of children potentially eligible for coverage under Medicaid or LaCHIP # of children enrolled as Title XXI Eligibles # of children enrolled as Title XIX Eligibles Total number of children enrolled % of potentially eligible children enrolled Number of children remaining uninsured # of potentially eligible children remaining unenrolled	This adjustment deletes "living below 200% of the FPL" in the objective; modifies 9 Pis; and adds 1 new GPI as follows: 1) Replaces "Potential eligibles below 200%" with "Number of children potentially eligible for coverage under Medicaid or LaCHIP"; and increases the estimated number for this group from 697,575 to 764,574 (66,999). Also, the adjustment request requires a technical correction relative to the increase--67,059 is on the request and should be 66,999. 2) Increases the number of children enrolled as Title XXI eligibles (LaCHIP) from 96,896 to 111,560 (14,664). 3) Increases the number of children enrolled as Title XIX eligibles (Medicaid) from 514,234 to 584,154 (69,920). 4) Increases the total number of children enrolled from 611,130 to 695,714 (84,584). 5) Increases percentage of potentially eligible children enrolled from 88% to 91% (3%). Also needs technical correction relative to the increase--5.5% is on the request and should be 3%. 6) Replaces "Number of children remaining uninsured" with "Number of potentially eligible children remaining unenrolled" and increases the number from 86,385 to 68,860 (-68,860). 7) Increases average cost per Title XXI enrolled per year from	Approval
28 continued	19B	Health & Hospitals 09-305	Administration	Administration	Average cost per Title XXI enrolled per year Average cost per Title XIX enrolled per year Percentage of procedural closures at renewal Number of uninsured children		

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						<p>\$1,271 to \$1,373 (\$102).            8) Increases average cost per Title XIX enrolled per year from \$1,915 to \$2,070 (\$155).            9) Decreases percentage of procedural closures at renewal from 20% to 4% (-16%).            10) Adds "Number of uninsured children" to the GPIs.            The adjustments are necessary to clarify that eligibility for LaCHIP is not strictly limited to children in families with incomes below 200% of the FPL. Medicaid and LaCHIP eligibility regulations (i.e. definition of household composition not including step-parents or kin caregivers, income disregards and deductions, child care payments, child support, etc.) allow children in households above 200% of the FPL to be enrolled and potentially eligible for one of the programs. Other adjustments in the PI are related to reviewing recent trends in expenditures and eligibles and making more accurate projections for the impact in FY 06.</p>	
29	19C	Health & Hospitals 09-305	Administration	Administration	Number of School Boards Quarterly claims targeted for monitoring	The adjustment increases the number of quarterly claims targeted for monitoring from 55 to 68 (13). This adjustment is requested to reflect the improved ability of participating school boards enrolled in the program to submit Medicaid claims that are compliant with state and federal regulations.	Approval
30	19D	Health & Hospitals 09-305	Administration	Administration	Number of Personal Care Attendant waiver slots Number currently served in the PCA waiver Number of Adult Day Health Care waiver slots Number currently served in the ADHC waiver Number of Elderly & Disabled Adult waiver slots Number currently served in the EDA waiver	The adjustment moves the PI from 09-305 to 09-306. The agency strategic plan for FY 06 was revised to reflect such change as services for these waivers are provided under 09-306.	Approval
31	20A	Health & Hospitals 09-306	Medical Vendor Payments	Private Providers	Amount of cost avoidance (in millions)	The adjustment increases the amount of cost avoidance (in millions) from \$60.3 to \$102 (\$41.7). Passage of HB 369 (Act 177) allows DHH to add atypical antipsychotic and hepatitis-C drugs to the PDL, which should result in additional cost avoidance through increased supplemental rebates and through patients using less expensive drugs. DHH also received approval from CMS in May 2005 to enter into a Multi-State Pooling Supplemental Rebate Agreement (TOP\$), which should allow DHH to increase cost avoidance through combined purchasing power.	Approval
32	20B	Health & Hospitals 09-306	Medical Vendor Payments	Private Providers	Number of recipients receiving PCS-LTC Number of recipients whose cost does not exceed average cost of long term care Percentage of recipients whose cost does not	The adjustment increases the number of recipients receiving PCS-LTC from 1,720 to 7,300 (5,580) and the number of recipients whose cost does not exceed average cost of long-term care from 1,651 to 7,008 (5,357). DHH indicates that	Approval

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					exceed average cost of long term care	approximately 5,100 recipients have been authorized to receive PCS services through 7/31/05, and anticipates additional recipients in FY 06. The adjustment is requested to reflect the increased utilization in the PCS program. Additionally, DHH estimates that expenditures for services provided through the PCS program will increase from \$33.5 million in FY 05 to \$86.1 million in FY 06. The average cost to provide PCS services is approximately \$11,800 per recipient per year, which is approximately 45% of the cost for traditional long-term care services.	
33	20C	Health & Hospitals 09-306	Medical Vendor Payments	Private Providers	Number of Adult Day Health Care waiver slots Number currently served in the ADHC waiver Number of Elderly & Disabled Adult waiver slots Number currently served in the EDA waiver	This adjustment corrects a technical drafting error in a supporting document. In the Executive Budget, the objective and PI were moved from 09-307 to 09-305 in accordance with the Governor's Long-term Health Care Reform Plan. However, in a DHH revision to the strategic plan, the objective was moved to 09-306 to more accurately reflect performance of the waiver services.	Approval
34	52	Health & Hospitals 09-306	Medical Vendor Payments	Public Providers	Number of KIDMED enrolled recipients who received at least one medical screening Percentage of KIDMED enrolled recipient who received at least one medical screening Number of KIDMED enrolled recipients	The initial submission of the performance adjustment request was questioned by OPB and found to be in error. DHH indicates that the adjustment should increase the number of KIDMED enrolled recipients who received at least one medical screening from 310,000 to 312,750 (2,750); decrease the percentage of KIDMED enrolled recipients who received at least one medical screening from 50% to 45% (-5%); and increases the number of KIDMED enrolled recipients from 620,000 to 695,000 (75,000). This adjustment is necessary as DHH anticipates an increase in enrollees due to a partial restoration of 23 positions to eligibility staff that occurred during the appropriation process for FY 06. LaChip outreach activities coupled with the sustained level of application processing will result in the expected increase. DHH indicates that such a large increase in total enrollees will affect the ability of providers to schedule and complete the screenings, which decreases the number of enrollees screened.	Approval
34 continued	52	Health & Hospitals 09-306	Medical Vendor Payments	Public Providers			
35	53	Health & Hospitals 09-306	Medical Vendor Payments	Medicare Buy-ins and Supplements	Buy-In Expenditures (Part B)	The adjustment increases Buy-in expenditures (Part B) from \$149,503,788 to \$152,304,381 (\$2,800,593) to reflect an additional \$2.8 million that was added to the Buy-in allocation during the appropriation process for FY 06 (Senate Committee amendment).	Approval
36	54	Health & Hospitals 09-306	Medical Vendor Payments	Medicare Buy-ins and Supplements	Total DSH funds collected in millions Total federal funds collected in millions Total State Match in millions Public Disproportionate Share (DSH) in millions	The adjustment increases total DSH funds collected from \$734.8 to \$760.8 (\$26.0); total federal funds from \$507.3 to \$525.5 (\$18.2); total state match from \$227.5 to \$235.3 (\$7.8); public DSH from \$672.9 to \$692.3 (\$19.4); amount of federal funds	Approval

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					Amount of federal funds collected in millions State Match in millions	from \$469.6 to \$483.2 (\$13.6); and state match (public only) from \$203.3 to \$209.1 (\$5.8). The adjustment is necessary to align the PI with the appropriation in Act 16 for the Uncompensated Care Program.	
37	21	Health & Hospitals 09-307	Office of the Secretary	Management and Finance	Percentage of investigations completed within established timeframes	The adjustment decreases the percentage of investigations completed within established timelines from 75% to 70% (5%). This adjustment is necessary due to a reduction in funding of \$51,982 and the loss of one position under the provisions of Act 194. DHH indicates that losing 1 of 17 positions results in a possible 5.9% decrease in productivity. Thus the request for a 5% reduction in the PI. For FY 05, the target for this PI was 75%. In 1st quarter, DHH reported that 76.3% of assigned cases were completed (caseload 465). By the 4th quarter it had decreased to 69.8% (caseload 480). This data would appear to justify the request for an adjustment in the PI for FY 06.	Approval
38	22	Health & Hospitals 09-311	New Orleans Home and Rehabilitation	Patient Services	Average daily census Total Clients Served Cost per client day Occupancy rate Staff/client ratio Percentage of targeted clients with maintained or improved functioning levels	These performance standards were taken out of the Executive Budget because the agency was slated for closing. Funding for the agency was restored during the FY 2005-2006 legislative process. This adjustment is necessary to reestablish the performance standards and related objectives to the same level.	Approval
38 continued	22	Health & Hospitals 09-311	New Orleans Home and Rehabilitation	Patient Services	Number of staffed beds Number of clients identified with potential for increased independence Average length of stay		
39	62	Health & Hospitals	New Orleans Home and Rehabilitation	Administration and General Support	Percentage Compliance with CMS Long Term Care standards Number of standards	These performance standards were taken out of the Executive Budget because the agency was slated for closing. Funding for the agency was restored during the 2005 legislative process. This adjustment is necessary to reestablish the performance standards and related objectives to the same level.	Approval
40	23	Health & Hospitals 09-319	Villa Feliciana Medical Complex	Administration and General Support	Percent compliance with CMS license and certification	This adjustment increases the percent compliance with CMS license and certification standard from 90% to 95%. For the past two years, the agency has achieved an actual performance standard of 98%. This adjustment allows the agency to reflect the higher standard. This adjustment should have been made during the Executive Budget Process.	Approval
41	27	Health & Hospitals 09-319	Villa Feliciana Medical	Patient Services	Average daily census Staff to client ratio	This adjustment increases the average daily census standard from 156 to 185; decreases the staff to client ratio standard from 1.82 to	Approval

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			Complex		Average length of stay (in days)	1.62; and decreases the average length of stay (in days) from 1,050 to 900. This adjustment is necessary to reflect the reduction of funding that was originally provided in the Executive Budget for the intended phase out of the New Orleans Home and Rehabilitation Center.	
42	25	Health & Hospitals 09-340	Office of Citizens with Developmental Disabilities	Administrative	Number of allocated NOW waiver slots	This adjustment increases the number of allocated NOW waiver slots standard from 4,642 to 4,742. This adjustment is necessary to reflect the additional funding received for 100 new slots during the 2005 Regular Legislative Session.	Approval
43	55	Health & Hospitals 09-340	Office of Citizens with Developmental Disabilities	Metropolitan Developmental Center	Average cost per client day	This adjustment increases the average cost per client day standard from \$343.22 to \$359.96. This adjustment is necessary to reflect additional funding appropriated in the 2005 Regular Legislative Session.	Approval
				Peltier-Lawless Developmental Center	Average cost per client day	This adjustment reduces the average cost per client day standard from \$347.98 to \$313.56. This adjustment is necessary to reflect additional funding appropriated in the 2005 Reg Legislative Session.	Approval
44	56	Health & Hospitals 09-340	Office of Citizens with Developmental Disabilities	Hammond Developmental Center	Average cost per client day	This adjustment increases the average cost per client day standard from \$380 to \$393. This adjustment is necessary to reflect additional funding appropriated in the 2005 Regular Legislative Session.	Approval
45	57	Health & Hospitals 09-340	Office of Citizens with Developmental Disabilities	Northwest Louisiana Developmental Center	Average cost per client day	This adjustment increases the average cost per client day standard from \$290 to \$294. This adjustment is necessary to reflect additional funding appropriated in the 2005 Regular Legislative Session.	Approval
46	58	Health & Hospitals 09-340	Office of Citizens with Developmental Disabilities	Pinecrest Developmental Center	Average cost per client day	This adjustment increases the average cost per client day standard from \$413 to \$415. This adjustment is necessary to reflect additional funding appropriated in the 2005 Regular Legislative Session.	Approval
47	59	Health & Hospitals 09-340	Office of Citizens with Developmental Disabilities	Ruston Developmental Center	Average cost per client day	This adjustment increases the average cost per client day standard from \$303 to \$313. This adjustment is necessary to reflect additional funding appropriated in the 2005 Regular Legislative Session.	Approval
48	60	Health & Hospitals 09-340	Office of Citizens with Developmental Disabilities	Southwest Development Center	Average cost per client day Average daily census Total number of clients served Occupancy rate	This adjustment decreases the average cost per client day standard from \$400 to \$326; increases the average daily census standard from 66 to 82; increases the total number of clients served standard from 66 to 87; and decreases the occupancy rate from 97% to 96%.	Approval

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						This adjustment is necessary to reflect additional funding and T.O. appropriated in the 2005 Regular Legislative Session.	
49	51	Social Services 10-355	Office of Family Support	Admin. & Support	Percent change of residents living in poverty	This is a technical adjustment to change the performance standard from a positive percentage (.40) to a negative percentage (-.40).	Approval
50	48	Social Services 10-357	Office of the Secretary	Admin. & Support	Current number of other facilities licensed	This adjustment reduces the number of facilities licensed by DSS from 1693 to 308. This adjustment is necessary to reflect changes made per Act 483 of the 2005 Regular Legislative Session which transferred the licensing of certain facilities from DSS to DHH.	Approval
51	50-A	Social Services 10-370	Office of Community Services	Child Welfare Services	Percentage of foster care board available for adoption subsidy	This adjustment reduces the % of foster care board available for adoption care subsidies from 100% to 80%. This adjustment reflects the amount available for the Adoption Subsidy Program. This adjustment should have been made during the Executive Budget Process.	Approval
52	50-B	Social Services 10-370	Office of Community Services	Child Welfare Services	Percentage of children who re-entered foster care within 12 months of a prior foster care episode	This adjustment reduces the percentage of children who re-enter foster care within 12 months of a prior foster care episode from 12% to 6.7%. The agency's actual performance for the past four years has been much lower than their performance standard due to improvements in assessing the risk for children returning home and the provision of services to families. This adjustment would also allow the agency to align their standard with the federal standard of 6.7%. This adjustment should have been made during the Executive Budget Process.	Approval
53	26	Wildlife & Fisheries 16-513	Office of Wildlife	Wildlife	Number of acres in the coastal Wildlife Management Area (WMA), wetlands conservation area (WCA), & refuges system (revised wording)  Visitors to coastal WMA's, WCA's, and refuges (revised wording)  Acres impacted by habitat management projects  Number of mineral projects  Participants in youth hunting activities	Request is to modify performance standards for five performance indicators due to Act 613 of 2004, which transferred the White Lake property to the State of Louisiana. Funds were added with an amendment to HB 1 for the White Lake property.	Approval
54	61	LSU System 19-600	LSU-E	None	Number of first-time, full-time, degree seeking freshmen retained to the second year in public postsecondary education.	Proposed changes align indicators to the budget. These changes were recommended before Hurricane Katrina and do not take into account the storm's effect on the agency's performance. Many of these indicators will need to be	Approval

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					Retention rate of first-time freshmen to second year.	adjusted.	
55	1-A	LSU HSC 19-610	HCSD	Huey P. Long Medical Center	Average Daily Census	Adjustment modifies the Average Daily Census to reflect additional Medicaid and Uncompensated Care funding. The performance standard was 42 but is now anticipated to be 45 due to the hospital being able to admit more patients.	Approval
56	1-B	LSU HSC 19-610	HCSD	Huey P. Long Medical Center	Emergency Department Visits Total Outpatient Encounters Number of Staffed Beds	Adjustment modifies three indicators to reflect additional Medicaid and Uncompensated Care funding. As a result, the hospital will increase the following 1) Emergency Department Visits from 38,014 to 46,055, 2) Total Outpatient Encounters from 101,100 to 102,443, and 3) Number of Staffed Beds from 55 to 60.	Approval
57	2-A	LSU HSC 19-610	HCSD	University Medical Center	Average Daily Census	Adjustment modifies the Average Daily Census to reflect additional Medicaid and Uncompensated Care funding. The performance standard was 71 but is now anticipated to be 77 due to the hospital being able to admit more patients.	Approval
58	2-B	LSU HSC 19-610	HCSD	University Medical Center	Emergency Department Visits Total Outpatient Encounters Number of Staffed Beds	Adjustment modifies three indicators to reflect additional Medicaid and Uncompensated Care funding. As a result, the hospital will increase the following 1) Emergency Department Visits from 41,081 to 44,267 2) Total Outpatient Encounters from 158,605 to 163,727, and 3) Number of Staffed Beds from 99 to 104.	Approval
59	3	LSU HSC 19-610	HCSD	Lallie Kemp Regional Medical Center	Number of Staffed Beds	Adjustment modifies the Number of Staffed Beds indicator to reflect the Critical Access Hospital status of Lallie Kemp as of July 1, 2005. The Medicare Critical Access Hospital program rules only allow for the operation of 25 beds. Therefore, the hospital will reduce the number of staffed beds from 28 to 25.	Approval
60	4-A	LSU HSC 19-610	HCSD	Bogalusa Medical Center	Average Daily Census	Adjustment modifies the Average Daily Census to reflect additional Medicaid and Uncompensated Care funding. The performance standard was 55 but is now anticipated to be 56 due to the hospital being able to admit more patients.	Approval
61	4-B	LSU HSC 19-610	HCSD	Bogalusa Medical Center	Total Outpatient Encounters Number of Staffed Beds	Adjustment modifies two indicators to reflect additional Medicaid and Uncompensated Care funding. As a result, the hospital will increase the following: 1) Total Outpatient Encounters from 71,411 to 79,957 and 2) Number of Staffed Beds from 66 to 82.	Approval
62	5	LSU HSC 19-610	HCSD	Leonard J. Chabert Medical Center	Emergency Department Visits Total Outpatient Encounters Number of Staffed Beds	Adjustment modifies three indicators to reflect additional Medicaid and Uncompensated Care funding. As a result, the hospital will increase the following 1) Emergency Department Visits from	Approval

**Summary of August 15 Performance Standard Adjustments (FY 05-06)**

<u>Agenda #</u>	<u>OPB Log Agenda #</u>	<u>Department/Schedule #</u>	<u>Agency</u>	<u>Program</u>	<u>Performance Indicator Name</u>	<u>Justification for Adjustment</u>	<u>LFO Recommendation</u>
						48,502 to 49,702 2) Total Outpatient Encounters from 172,554 to 182,104, and 3) Number of Staffed Beds from 82 to 83.	
63	6-A	LSU HSC 19-610	HCSD	Medical Center of Louisiana at New Orleans	Average Daily Census	Adjustment modifies the Average Daily Census to reflect additional Medicaid and Uncompensated Care funding. The performance standard was 389 but is now anticipated to be 416 due to the hospital being able to admit more patients.	Approval
64	6-B	LSU HSC 19-610	HCSD	Medical Center of Louisiana at New Orleans	Number of Staffed Beds	Adjustment modifies the Number of Staffed Beds to reflect additional Medicaid and Uncompensated Care funding. The performance standard was 561 but is now anticipated to be 572.	Approval
65	12	LSU HSC 19-610	HCSD	Earl K. Long Medical Center	Emergency Department Visits Total Outpatient Encounters	Adjustment modifies two indicators to reflect additional Medicaid and Uncompensated Care funding. As a result, the hospital will increase the following: 1) Emergency Department Visits from 44,181 to 44,415 and 2) Total Outpatient Encounters from 168,668 to 179,795.	Approval
66	13	LSU HSC 19-610	HCSD	W.O. Moss Regional Medical Center	Number of Staffed Beds	Adjustment modifies the Number of Staffed Beds to reflect additional Medicaid and Uncompensated Care funding. The performance standard was 30 but is now anticipated to be 32.	Approval
67	7	Special Schools 19-661	OSFA	Administrative and Support	Administrative/Support Services Program Expenditures	This proposed change corrects an error. These changes were recommended before Hurricane Katrina and do not take into account the storm's effect on the agency's performance. Many of these indicators will need to be adjusted.	Approval
68	8	Special Schools 19-661	OSFA	Scholarship and Grants	Total Scholarship/Grant and START Savings Program	Proposed changes align indicators to the budget. These changes were recommended before Hurricane Katrina and do not take into account the storm's effect on the agency's performance. Many of these indicators will need to be adjusted.	Approval
69	9	Special Schools 19-661	OSFA	TOPS Tuition	Total amount awarded	Proposed changes align indicators to the budget. These changes were recommended before Hurricane Katrina and do not take into account the storm's effect on the agency's performance. Many of these indicators will need to be adjusted.	Approval
					Total number of award recipients	Proposed changes align indicators to the budget. These changes were recommended before Hurricane Katrina and do not take into account the storm's effect on the agency's performance. Many of these indicators will need to be adjusted.	Approval
70	28-RA	Special Schools 19-673	NOCCA	Administration and Support	Maintain an agency budget of no more than 20% of the total agency budget	Proposed changes align indicators to the budget. These changes were recommended before Hurricane Katrina and do	Approval

Summary of August 15 Performance Standard Adjustments (FY 05-06)

<u>Agenda #</u>	<u>OPB Log Agenda #</u>	<u>Department/Schedule #</u>	<u>Agency</u>	<u>Program</u>	<u>Performance Indicator Name</u>	<u>Justification for Adjustment</u>	<u>LFO Recommendation</u>
					Total Cost per student for the entire NOCCA/R program	not take into account the storm's effect on the agency's performance. Many of these indicators will need to be adjusted.	
71	28-RB	Special Schools 19-673	NOCCA	Administration and Support	Total enrollment in all programs	Proposed changes align indicators to the budget. These changes were recommended before Hurricane Katrina and do not take into account the storm's effect on the agency's performance. Many of these indicators will need to be adjusted.	Approval
72	15	Education 19-681	Subgrantee Assistance	Disadvantaged and Disabled Student Support	Percentage of at-risk children served (LA 4) Number of at-risk preschool children served (LA 4) Number of at-risk preschool children served by before and after 4-hour programs Number of at-risk preschool children served by instructional 6-hour programs	The performance standards were changed to reflect a lower number of students being served in the LA4 program than previously estimated. The first estimate was based upon dividing the additional \$20 million appropriated for the program by the reimbursement rate of \$5,000. The estimate did not take into consideration the fact that some districts may switch their Starting Points preschool students, which were being reimbursed at a lower rate, to the LA 4 reimbursement rate, therefore allowing for a lower number of students to be served.	Approval
73	16	Education 19-697	Nonpublic Assistance	Required Services	Percentage of requested expenditures reimbursed	The funding for this program was restored during the Legislative Session, however, the performance standard was not restored to the correct percentage. This change restores the previous performance standard.	Approval