

Summary of August 15 Performance Standard Adjustments (FY 04-05)

<u>Agenda #</u>	<u>OPB Log Agenda #</u>	<u>Department</u>	<u>Agency</u>	<u>Program</u>	<u>Performance Indicator Name</u>	<u>Justification for Adjustment</u>	<u>LFO Recommendation</u>
1	73	Executive	Executive Office	Administration	Percentage of cases resolved within 365 days	Performance indicators for the La. Commission on Human Rights were inadvertently changed by OPB from 50% to 70%. OPB discovered the error and requested that this be adjusted through this process rather than through an amendment to the appropriations bill.	Approval
2	15A	Executive	NE La. War Veterans' Home	NE La. War Veterans' Home	Average state cost per patient day	This performance indicator was based upon the agency's requested amount rather than the actual appropriation to this agency. The adjustment brings the performance indicator in line with the FY 05 appropriation level.	Approval
3	15B	Executive	NE La. War Veterans' Home	NE La. War Veterans' Home	Average cost per patient day	This performance indicator was based upon the agency's requested amount rather than the actual appropriation to this agency. The adjustment brings the performance indicator in line with the FY 05 appropriation level.	Approval
4	11 R A, B & C	Justice	Attorney General	Criminal	<p>Number of schools that received informational program educating on the dangers of the Internet and cyber crime</p> <p>Number of occasions designed to raise public awareness of the dangers of the Internet and cyber crime through public forums and the press</p> <p>Number of hours on the Internet in proactive investigative activity</p> <p>Number of Louisiana law enforcement officers trained on how to conduct proactive investigative activity</p> <p>Average number of days to begin an investigation after receiving a complaint involving immediate threat</p>	An amendment was made to the appropriations bill adding \$288,947 (Fed) and four positions to the program for the continuation of the Internet Crimes Against Children grant from the U.S. Department of Justice. Performance goals were set to reflect appropriation levels.	Approval
5	42A	Elected Officials	LT. Governor	Grants	Number of Participants	This is a key performance indicator, the objective is to increase the number of people benefiting from community service projects through the grants program. The initial standard set for FY 04-05 was 185, the proposed revision is 250. Federal funding information was not available at the time that HB 1 was passed.	Approval
5 (continued)	42A	Elected Officials	LT. Governor	Grants	Number of parishes with Americorps National Service Projects.	This is a support performance indicator, the objective is to increase the number of people benefiting from community service projects through the grants program. The initial standard set for FY 04-05	Approval

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						was 19, the proposed revision is 30. Federal funding information was not available at the time that HB 1 was passed. This is a key indicator.	
6	42B	Elected Officials	LT. Governor	Grants	Number of students participating	The objective of this indicator is to provide higher quality services to 3,800 student participants in the Learn and Serve Program. The initial standard set for FY 04-05 was 5,306, the proposed revision is 3,800. This number is more reflective of the year-end activity for FY 03-04 (3,360).	Approval
					Total number of grant recipient institutions	This is a key indicator, the objective is to increase the number of student participants in the Learn and Serve Program by 2%. The initial performance standard for FY 04-05 was 68, the proposed revision is 33. In FY 03-04 the actual performance for each quarter was at least 56. The standard should not be less than the activity for the lowest performing quarter for the previous year. There was no statistical data provided to justify this requested revision.	Approval
					Number of community volunteers participating	This is a support performance indicator, the objective is to increase the number of students participants in the Learn and Serve Program by 2%. The initial performance standard for FY 04-05 was 910, the proposed revision is 500. In FY 03-04 the actual performance for each reporting quarter was 500. The requested revision is more reflective of prior year activity.	Approval
7	7	Economic Development	Business Services	Business Services Small Business Development Centers	Number of businesses assisted through counseling through SBDC's	Adjustment resulted per Act 1 of 2004 that appropriated funds for the Loyola University SBDC. Due to the addition of funding for this entity, performance indicators required an upward adjustment.	Approval
					Number of individuals trained through SBDC's		
8	8A	Economic Development	Business Dev.	Resource Services EDAP	Number of contracts approved and funded	Adjustment resulted per Act 2 of 2004 that appropriated funds for Economic Development Awards Program. Originally, there were no monies appropriated for this program in Act1. Due to the appropriation of funds, the performance measures were raised from zero.	Approval
					Anticipated number of jobs created by applicants		
					Anticipated private investment by applicants		
					Anticipated annual payroll added by applicants		
					Anticipated state tax benefits generated based on new payroll of projects funded		

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9	8B	Economic Development	Resource Services	Resource Services Workforce Training	Number of Contracts approved and funded Anticipated number of Louisianans provided job training by applicants Anticipated new capital investment by applicants	Adjustment resulted per Act 1 of 2004 that reduced the amount of anticipated funding, from \$15.6 million in Executive Budget to \$7.6 million, for the LED fund. Due to less money being available than anticipated, the performance measures were adjusted downward.	Approval
10	8C	Economic Development	Resource Services	Resource Services Financial Assistance	Number of financial assistance projects approved and funded Anticipated number of jobs created or retained by applicants Amount approved for financial assistance Number of Venture Capital projects approved and funded Anticipated dollars leveraged on approved funding for Venture Capital projects per state dollar	Adjustment resulted per Act 1 of 2004 that reduced the amount of anticipated funding, from \$15.6 million in Executive Budget to \$7.6 million, for the LED fund. Due to less money being available than anticipated, the performance measures were adjusted downward.	Approval
11	44A	CRT	State Parks	Parks & Recreation	Number of reservations completed	The initial standard set for FY 2004-05 was 52,950. The revised standard is 61,868, which is a 2% increase over the FY 03-04 year-end performance. This adjustment is necessary to address the anticipated increase in completed reservations due to the opening of South Toledo Bend State Park.	Approval
12	44B	CRT	State Parks	Parks & Recreation	Number of programs and events offered	The initial standard set for FY 2004-05 was 5,350. The revised standard is 18,300. This number is more reflective of the growth in activity that occurred in FY 2003-04. The fourth quarter actual for the prior fiscal year was 18,106.	Approval
12 (continued)	44B	CRT	State Parks	Parks & Recreation	Total attendance at programs and events Number of programs offered off-site	The initial standard set for FY 2004-05 was 141,565. The revised standard is 195,900. This number is more reflective of the growth in activity that occurred in FY 2003-04. The fourth quarter actual for the prior fiscal year was 193,963. The initial standard set for FY 2004-05 was 52. The revised standard is 127. This number is more reflective of the growth in activity that occurred in FY 2003-04. The fourth quarter actual for the prior fiscal year was 126.	Approval Approval

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13	45A	CRT	Cultural Development	Development	Sites jeopardized due to insufficient information system	The initial standard set for FY 2004-05 was 3,200. The revised standard is zero. An archaeologist position has been funded, this will ensure that no site be jeopardized due to insufficient information in the system.	Approval
					Percentage of proposed projects reviewed	The initial standard was set for FY 2004-05 was 80%. The revised standard is 100%. An archaeologist position has been funded, this will ensure that all proposed projects be reviewed.	Approval
14	43A	CRT	Tourism	Marketing	Direct visitor spending by visitors to LA in (billions)	The initial standard for FY 2004-05 was set at \$9.1 billion. The revised standard is \$9.5 billion. This adjustment is based on prior year actual.	Approval
					Total number of visitors to LA in (millions)	The initial standard for FY 2004-05 was set at 24 million. The revised standard is 26 million. This adjustment is based on prior year actual.	Approval
					Sales taxes collected from visitor spending	The initial standard for FY 2004-05 was set at 405. The revised standard is 413. This adjustment is based on prior year actual.	Approval
					Number of overseas and Canadian visitors in (thousands)	The initial standard for FY 2004-05 was set at 460. The revised standard is 330. This adjustment is based on prior year actual. Fourth quarter activity for FY 03-04 was 300, the national trend show an increase in travel of 5% to 10% for these visitors. This proposed revision reflects this trend.	Approval
15	43B	CRT	Tourism	Marketing	Total mail, telephone and internet inquiries	The initial standard for FY 2004-05 was set at 2.3 million. The revised standard is 2.5 million. This adjustment is based on prior year actual.	Approval
16	43C	CRT	Tourism	Marketing	Hotel/Motel room nights sold	The initial standard for FY 2004-05 was set at 16.1million. The revised standard is 17,160,000. This adjustment is based on an approximate 2% increase over the fourth quarter activity for the prior year.	Approval
17	75	Corrections	Corrections Administration	Adult Services	Systemwide Average Monthly Enrollment in vo-tech program Systemwide number receiving vo-tech certificate	Adjustment resulted per Act 1 of 2004 that appropriated funds for vocational-technical training at state secure adult correctional facilities. The adjustment reflects FY 02-03 actual data.	Approval
18	55	Corrections	C. Paul Phelps Correctional	Rehabilitation	Average monthly enrollment in vo-tech program Number of inmates receiving vo-tech certificates	Adjustment resulted per Act 1 of 2004 that appropriated funds for vocational-technical training at state secure adult correctional	Approval

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			Center			facilities. The adjustment reflects FY 02-03 actual data.	
19	65	Corrections	C. Paul Phelps Correctional Center	Health Services	Average cost for health services per inmate day	Adjustment resulted from funding increases in employer contributions for retirement benefits per Act 14 of 2003.	Approval
20	56	Corrections	Louisiana State Penitentiary	Rehabilitation	Average monthly enrollment in vo-tech program Number of inmates receiving vo-tech certificates	Adjustment resulted per Act 1 of 2004 that appropriated funds for vocational-technical training at state secure adult correctional facilities. The adjustment reflects FY 02-03 actual data.	Approval
21	74	Corrections	Louisiana State Penitentiary	Health Services	Average cost for health services per inmate day	Adjustment resulted from funding increases in employer contributions for retirement benefits per Act 14 of 2003.	Approval
22	57	Corrections	Avoyelles Correctional Center	Rehabilitation	Average monthly enrollment in vo-tech program Number of inmates receiving vo-tech certificates	Adjustment resulted per Act 1 of 2004 that appropriated funds for vocational-technical training at state secure adult correctional facilities. The adjustment reflects FY 02-03 actual data.	Approval
23	66	Corrections	Avoyelles Correctional Center	Health Services	Average cost for health services per inmate day	Adjustment resulted from funding increases in employer contributions for retirement benefits per Act 14 of 2003.	Approval
24	58	Corrections	Louisiana Correctional Institute for Women	Rehabilitation	Average monthly enrollment in vo-tech program Number of inmates receiving vo-tech certificates	Adjustment resulted per Act 1 of 2004 that appropriated funds for vocational-technical training at state secure adult correctional facilities. The adjustment reflects FY 02-03 actual data.	Approval
25	59	Corrections	Winn Correctional Center	Purchase of Correctional Services	Average monthly enrollment in vo-tech program Number of inmates receiving vo-tech certificates	Adjustment resulted per Act 1 of 2004 that appropriated funds for vocational-technical training at state secure adult correctional facilities. The adjustment reflects FY 02-03 actual data.	Approval
26	60	Corrections	Allen Correctional Center	Purchase of Correctional Services	Average monthly enrollment in vo-tech program Number of inmates receiving vo-tech certificates	Adjustment resulted per Act 1 of 2004 that appropriated funds for vocational-technical training at state secure adult correctional facilities. The adjustment reflects FY 02-03 actual data.	Approval
27	61	Corrections	Dixon Correctional Institute	Rehabilitation	Average monthly enrollment in vo-tech program Number of inmates receiving vo-tech certificates	Adjustment resulted per Act 1 of 2004 that appropriated funds for vocational-technical training at state secure adult correctional facilities. The adjustment reflects FY 02-03 actual data.	Approval
28	67	Corrections	Dixon Correctional Institute	Health Services	Average cost for health services per inmate day	Adjustment resulted from funding increases in employer contributions for retirement benefits per Act 14 of 2003.	Approval
29	76A	Corrections	Dabadie Correctional	Health Services	Average cost for health services per inmate day	Adjustment resulted from funding increases in employer contributions for retirement benefits per Act 14 of 2003.	Approval

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			Center				
30	76B	Corrections	Dabadie Correctional Center	Rehabilitation	Average monthly enrollment in vo-tech program Number of inmates receiving vo-tech certificates	Adjustment resulted per Act 1 of 2004 that appropriated funds for vocational-technical training at state secure adult correctional facilities. The adjustment reflects FY 02-03 actual data.	Approval
31	62	Corrections	Elayn Hunt Correctional Center	Rehabilitation	Average monthly enrollment in vo-tech program Number of inmates receiving vo-tech certificates	Adjustment resulted per Act 1 of 2004 that appropriated funds for vocational-technical training at state secure adult correctional facilities. The adjustment reflects FY 02-03 actual data.	Approval
32	68	Corrections	Elayn Hunt Correctional Center	Health Services	Average cost for health services per inmate day	Adjustment resulted from funding increases in employer contributions for retirement benefits per Act 14 of 2003.	Approval
33	63	Corrections	David Wade Correctional Center	Rehabilitation	Average monthly enrollment in vo-tech program Number of inmates receiving vo-tech certificates	Adjustment resulted per Act 1 of 2004 that appropriated funds for vocational-technical training at state secure adult correctional facilities. The adjustment reflects FY 02-03 actual data.	Approval
34	69	Corrections	David Wade Correctional Center	Health Services	Average cost for health services per inmate day	Adjustment resulted from funding increases in employer contributions for retirement benefits per Act 14 of 2003.	Approval
35	64	Corrections	Washington Correctional Center	Rehabilitation	Average monthly enrollment in vo-tech program Number of inmates receiving vo-tech certificates	Adjustment resulted per Act 1 of 2004 that appropriated funds for vocational-technical training at state secure adult correctional facilities. The adjustment reflects FY 02-03 actual data.	Approval
36	70	DPS	Gaming Control Board	Gaming Control Board	Number of Administrative hearings held Number of administrative hearing officer decisions- Casino Gaming Number of LA gaming Control Board decisions - Casino Gaming Number of administrative actions - Casino Gaming Number of licenses & permits issued - Casino Gaming	Due to the commencement of slot machine gaming at various race tracks through out the state, there will be an increase in applications for permits for key gaming employees and vendors, and administrative, regulatory hearings and appeals. Therefore, there is justification for shifting the performance indicators upward.	Approval
37	71	Corrections	Office of Youth Development	Administration	Average cost per day/youth in residential program Average cost per case in nonresidential programs	Adjustments resulted per Act 1 of 2004 that increased funding for community based juvenile programs.	Approval
38	72	Corrections	Office of Youth	Contract Services	Number of residential contract programs	Adjustments resulted per Act 1 of 2004 that increased funding	Approval

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				Development	Cost per day per youth in residential programs Average daily census, residential programs Number of nonresidential programs Cost per case in nonresidential programs Average daily census, nonresidential programs Number of clients served in nonresidential programs	for community based juvenile programs.	
39	23A	DHH	MVA	Administration	Percentage of procedural closures at renewal	This indicator was established in FY 03 to measure the achievements of the Field Operations section in retaining eligible children. Policy and procedure changes made in the second quarter of FY 04 enabled field staff to make no less than 3 attempts to telephone the recipient to obtain the necessary information to extend the eligibility period when the recipient failed to return required verification. Due to an increase in staff (39 positions) and the changes in procedures to retain eligible children, MVA is requesting a reduction in the target from 8% to 5%, which will more accurately reflect anticipated performance.	Approval
40	23B	DHH	MVA	Administration	Percentage of licensing surveys conducted	MVA requests an increase from 80% to 90% in the target for the percentage of surveys conducted. The adjustment is necessary to account for 6 additional surveyors that were granted to the Health Standards section per Act 1 and in conjunction with Act 558 of the R.S. 2004 (\$171,500 added for additional surveys).	Approval
41	23C	DHH	MVA	Administration	Percentage of goals achieved	This is a technical correction due to an error in the initial budget request submission and the Executive Budget Supporting Document. The PI for this indicator should have been set at 100% instead of 90%. (90% was the standard for this indicator last year, and this value was erroneously carried forward in the submission of the budget request for FY 05.)	Approval
42	23D	DHH	MVA	Administration	Number of school boards quarterly claims targeted for monitoring	Act 660 of the 2004 Regular Legislative Session eliminated the Medicaid Administrative Claiming Trust Fund, and will now allow payments to be made directly to school boards. DHH anticipates more timely and efficient payment of such claims, resulting in an increase in the number of claims reviewed. According to DHH, it is now estimated that the auditors will be able to review 15 claims per quarter, except during the summer quarter due to the absence of school staff in July. It is estimated that 10 audits can be performed in the summer quarter. The modification of this process requires the PS to be adjusted from 48 to 55 per quarter.	Approval
43	21	DHH	MVP	Payments to Private Providers	Children/adolescent psychiatric admissions in the pilot regions	MVP is requesting an increase in the PS for this indicator from 1,600 to 3,000 admissions per year in the Mental Health	Approval

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						Rehabilitation Program. The adjustment is required to accommodate a Medicaid State Plan amendment that changed service definitions and reimbursement methodology in this program (approved by CMS 6/10/04). DHH is also adding the Alexandria region to the program. Information provided by DHH indicates that implementation of the program will be begin on 1/1/05, and that 100% of the projected increase will come from the Alexandria region.	
					Mental Health Rehabilitation enrollment from Hospital Admissions Review Process (HARP) program in the pilot regions	MVP is requesting an increase in this PS from 160 to 240 enrollments per year. Same explanation as above.	Approval
44	22	DHH	MVP	Payments for Uncompensated Care	Total DSH funds collected in millions Total federal funds collected in millions Total State Match in millions Public Disproportionate Share (DSH) in millions Amount of federal funds collected in millions (public only) State Match in millions (public only)	MVP is requesting an adjustment (increase) to all targets relative to collection of funds for DSH payments as follows: from \$1,030.3 to \$1,034.6 (increase \$4.3 M) from \$732.0 to \$735.1 (increase \$3.1 M) from \$298.3 to \$299.5 (increase \$1.2 M) from \$951.8 to \$970.9 (increase \$19.1 M) from \$676.2 to \$689.7 (increase \$13.5 M)	Approval
44 (continued)	22	DHH	MVP	Payments for Uncompensated Care		from \$275.6 to \$281.2 (increase \$5.6) These adjustments are required to align them with the initial appropriation in Act 1 R.S. 2004. The additional \$4.3 M increase in total DSH payments will allow DHH to make court approved payments to rural health clinics for allowable charges for medical services performed in FY 01, 02, and 03. As such, these payments will not count against the FY 05 DSH cap.	
45	24	DHH	Office of the Secretary	Management and Finance	Average number for days to complete investigations for community incidents (modified)	This adjustment is requested to modify one key indicator and to add a new one. The modification requested adds "for community incidents" to the PI name.	Approval
					Average number for days to complete investigations for community incidents (New)	This is a new indicator that is requested as a result of a change to the current investigation policy and procedure for this type of incident. Investigator positions were transferred from the developmental centers to the Bureau of Protective Services (BPS), which will allow that unit to assume responsibility for investigation of incidents that occur within the state operated developmental facilities.	Approval
46	25	DHH	Office of the Secretary	Management and Finance	Number of allocated MR/DD (NOW) waiver slots	This adjustment is requested to align the NOW waiver program to the provisions in Act 1 R.S. 04 relative to the addition of 66 waiver slots and \$3.8 M in funding for emergency placements in the program. The additional 66 slots will increase the total available NOW slots from 4,576 to 4,642.	Approval

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					Average cost per waiver slot	This is a technical correction due to an error in the initial budget request submission and the Executive Budget Supporting Document. DHH is requesting an adjustment in the average cost per waiver slot from \$47,000 to \$57,000. For FY 04, waiver services were provided to approximately 4,433 disabled individuals at a total cost of \$203,500,917 (avg. \$45,900). For FY 05, DHH will phase in the additional 66 slots that were added to the program (see above). Initial estimates for total expenditures are approximately \$221,049,301 with approximately 4,500 to 4,550 receiving services (based on historical performance that indicates approximately 97% of available slots are filled at any given point in time). The average cost, based on the initial estimates from DHH, is approximately \$49,000 per slot. The LFO has requested information from DHH to support the estimated \$57,000 per slot as requested in the PI adjustment.	Disapproval
46 (continued)	25	DHH	Office of the Secretary	Management and Finance	Average length of time, in days, to fill a slot	The Bureau of Community Supports and Services is requesting a reduction from 122 to 120 days in the average time to fill a waiver slot. This adjustment is requested to reflect changes in the agency's appropriation and activities that are different than in prior years.	Approval
47	32	DHH	NOH&RC	Admin & General Support	Percentage compliance with CMS long-term care standards	The agency received additional funding of \$24,275 (IAT) during the appropriations process. As a result, the adjustment is requested to better reflect appropriation level. (Act 1057 approval)	Approval
48	77	DHH	NOH&RC	Patient Services	Average Daily Census; Cost per Client Day; Occupancy Rate; and Staff to Client Ratio	Requested adjustments did not meet the criteria of Title 39 nor the criteria under the provisions of Act 1057.	Disapproval
49	37	DHH	OPH	Vital Records	Total number of birth, death, fetal death, marriage, divorce, abortion and still birth certificates sold	OPH request to delete the indicator that tracks the number of certificates accepted to the number of certificates sold with the intent to more accurately tie in revenues with sales volume. The LFO recommends approval to add the new indicator, and further recommends to maintain the number of records accepted indicator for statistical purposes.	Approval
50	38	DHH	OPH	Personal Health Svcs.	Average cost per child served	Based on the operating budget for Early Steps in FY 04/05 and the estimated number of children served, OPH request to increase the initial standard by \$2,300. The LFO recommends disapproval as the revised average costs does not match the actual average cost as computed by the LFO. For FY 04/05, the operating budget for Early Steps is \$26,672,666. If OPH projects 5,375 children served, then the average cost per child should be \$4,962.	Disapproval

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51	33	DHH	OMH-State Office	Patient Services	Number of families or individuals assessed for risk factors Number of youth with family service plans implemented Number of youth receiving infant mental health services	TANF funding of \$4m for Early Childhood Supports & Services program was restored during the legislative process. These supporting indicators were adjusted to reflect appropriation levels.	Approval
52	34A	DHH	MH Area C	Patient Services	Total persons served-Central La. St. Hosp. (CLSH) Overall average daily census (CLSH) Overall occupancy rate (CLSH) Average cost per inpatient day Percent of total clients who are forensic involved Percent of adults served in civil hospitals who are forensic involved	The agency received \$1.2m (SGF) for inpatient beds at CLSH; \$605,913 (SGF) was restored to avoid closure of rural mental health clinics; and E. A. Conway Psychiatric Unit was transferred to LSU (\$2.1m and 38 T.O.). Key and supporting indicators were adjusted to reflect appropriation levels.	Approval
53	34B			Patient Services	Total adults served in CMHC area-wide Total persons served area-wide across all system components Total persons served - Acute Psychiatric Units Average cost per acute unit inpatient day (area-wide)	The agency received \$1.2m (SGF) for inpatient beds at CLSH; \$605,913 (SGF) was restored to avoid closure of rural mental health clinics; and E. A. Conway Psychiatric Unit was transferred to LSU (\$2.1m and 38 T.O.). Key and supporting indicators were adjusted to reflect appropriation levels.	Approval
54	35A	DHH	MH Area B	Patient Services	Total persons served - inpatient (Jackson Campus)	The agency received \$1.2m (SGF) for inpatient beds at East La. State Hospital; and \$2.3m (SGF) was restored to avoid closure of rural mental health clinics. Key indicators were adjusted to reflect appropriation levels.	Approval
55	35B			Patient Services	Total persons served area-wide Total persons served in CMHC area-wide	The agency received \$1.2m (SGF) for inpatient beds at East La. State Hospital; and \$2.3m (SGF) was restored to avoid closure of rural mental health clinics. Key indicators were adjusted to reflect appropriation levels.	Approval
56	36A	DHH	MH Area A	Patient Services	Average daily inpatient census Average cost per inpatient day (SELH) Total inpatients served (SELH) Total inpatients served (NOAH)	The agency received \$2.2m (SGF) for inpatient adolescent beds at Southeast La. Hospital; and \$1.2m (SGF) was restored to avoid closure of rural mental health clinics. Key indicators were adjusted to reflect appropriation levels.	Approval
57	36B			Patient Services	Total persons served in CMHC area-wide	The agency received \$2.2m (SGF) for inpatient adolescent beds at Southeast La. Hospital; and \$1.2m (SGF) was restored to avoid closure of rural mental health clinics. Key indicators were adjusted to reflect appropriation levels.	Approval
58	26-31	DHH	MDC, HDC, NDC, PDC, RDC, and	MR/DD Services and Supports	Average cost per client day	The level of funding was modified for each of the developmental centers during the legislative process. Key indicators were adjusted	Approval

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			SDC			to reflect appropriation levels.	
59	26	DHH	SDC	MR/DD Services and Supports	Occupancy rate	Requested adjustment did not meet the criteria of Title 39 nor the criteria under the provisions of Act 1057.	Disapproval
60	19	Social Services	Office of Family Support	Client Services	Cost per case	Adjust indicators to reflect the current budget	Approval
61	18	Social Services	LA Rehabilitation Services	Specialized Rehabilitation Services	Number of consumers who receive personal care attendant services	Adjust indicators to reflect the current budget	Approval
62	4	Wildlife and Fisheries	Office of Fisheries	Fisheries	Number of acres treated	An amendment after introduction of the appropriation bill added \$20,000 in State General Funds to this program for weed eradication. These additional funds will be used to purchase more herbicide that will enable treatment of 130 more acres. During FY 05, this will result in an increase from 35,900 to 36,030 for the referenced performance indicator.	Approval
63	9A	Civil Service	DAL	Administration	Number of cases docketed	The initial standard set for FY 2004-05 was 10,500. The revised standard is 8,000. This request is a result of the removal of Wildlife and Fisheries class one violations from the jurisdiction of the DAL effective July 1, 2004.	Approval
					Number of hearings conducted	The initial standard set for FY 2004-05 was 9,000. The revised standard is 7,600. This request is a result of the removal of Wildlife and Fisheries class one violations from the jurisdiction of the DAL effective July 1, 2004.	Approval
					Numbers of settlements	The initial standard set for FY 2004-05 was 1,600. The revised standard is 870. This request is a result of the removal of Wildlife and Fisheries class one violations from the jurisdiction of the DAL effective July 1, 2004.	Approval
64	9B	Civil Service	DAL	Administration	Number of decisions or orders issued	The initial standard set for FY 2004-05 was 11,300. The revised standard is 8,900. This request is a result of the removal of Wildlife and Fisheries class one violations from the jurisdiction of the DAL effective July 1, 2004.	Approval
65	80A	Higher Education	Southern University Board of Supervisors	SUNO	Fall, 2004 headcount enrollment Percent change in Fall baseline year	Projected marginal increases in headcounts Projected marginal increases in headcounts	Approval
66	80B				Total minority Fall headcount enrollment	Technical error	Approval
					Percent change in minority Fall headcount enrollment over Fall, 2000, baseline	Technical error	Approval

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67	82A				Fall, 2004 headcount enrollment Percent change in enrollment from Fall, 2000 baseline year		
68	82B				Fall, 2004 minority headcount enrollment Percentage change in minority enrollment from Fall, 2000 baseline year	Technical error	Approval
69	78	Higher Education	University of LA Bd of Supervisors	Nicholls St University	Maintain Fall headcount enrollment	Editing oversight	Approval
70	81	Higher Education	University of LA Bd of Supervisors	Grambling St University	Percentage change in minority enrollment Fall 2004 minority headcount	Technical adjustment Technical error	Approval
71	79	Higher Education	University of LA Bd of Supervisors	UL-Monroe	To minimize the decrease of Fall headcount enrollment To minimize the decrease of Fall minority headcount enrollment	Editing oversight in the objective Editing oversight in the objective	Approval
72	39A	Spec. Schools	LSD	Admin. /Support	Administrative/Support Services Program per- centage of total expenditures	The initial standard set for FY 2004-05 was 25.30%. The re- vised standard is 25%. This request is a result of increased funding for the current fiscal year.	Approval
73	39A	Spec. Schools	LSD	Admin. /Support	Administrative/Support Services cost per student (total of all)	The initial standard set for FY 2004-05 was \$17,318. The re- vised standard is \$17,365. This request is a result of increased funding for the current fiscal year.	Approval
74	40	Spec. Schools	LSD	Instructional	Instructional Services Cost per on-campus student	The initial standard set for FY 2004-05 was \$33,309. The re- vised standard is \$34,835. This request is a result of increased funding for the current fiscal year.	Approval
75	41	Spec. Schools	LSD	Residential	Residential cost per student	The initial standard set for FY 2004-05 was \$16,124. The revised standard is \$16,185. This request is a result of increased funding for the current fiscal year.	Approval
76	12A	Spec. Schools	LSMSA	Admin. / Support	Program cost percentage of school total	The initial standard set for FY 2004-05 was 14.7%. The re- vised standard is 15%. This request is a result of increased funding for the current fiscal year.	Approval
					Program cost per student	The initial standard set for FY 2004-05 was \$2,814. The re- vised standard is \$3,036. This request is a result of increased funding for the current fiscal year.	Approval

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					Difference in SGF appropriation between LSMSA and sister schools nationwide	The initial standard set for FY 2004-05 was (\$2,927). The revised standard is (\$2,220). This request is a result of increased funding for the current fiscal year.	Approval
77	13A	Spec. Schools	LSMSA	Instructional	Total grants and scholarships (in millions)	The initial standard set for FY 2004-05 was \$7.0 million. The revised standard is \$8.5 million. This revision is based on a three year trend where total grants averaged \$8.5 million.	Approval
					National Merit Scholarship Program Semi-finalists	Duplicate indicator - This request retains the key indicator and deletes the support indicator.	Approval
78	13B	Spec. Schools	LSMSA	Instructional	Number of sections taught by adjunct instructors.	The initial standard set for FY 2004-05 was 54. The revised standard is 50. This request is necessary to address the addition of one full-time position at the school. This addition decreases the number of sections taught by adjunct professors.	Approval
79	13C	Spec. Schools	LSMSA	Instructional	Instructional Program Cost per student	The initial standard set for FY 2004-05 was \$9,358. The revised standard is \$9,784. This request is a result of increased funding for the current fiscal year.	Approval
					Instructional Program percentage of school total	The initial standard set for FY 2004-05 was 48.7%. The revised standard is 48.40%. This request is a result of increased funding for the current fiscal year.	Approval
80	13D	Spec. Schools	LSMSA	Instructional	No. of students enrolled in for- credit summer courses	The initial standard set for FY 2004-05 was 20. The revised standard is 60. This request is a result of increased funding for the current fiscal year.	Approval
					No. of non-credit summer short courses scheduled	The initial standard set for FY 2004-05 was 0. The revised standard is 1. This request is a result of increased funding for the current fiscal year.	Approval
					No. of students enrolled in non-credit short courses	The initial standard set for FY 2004-05 was 0. The revised standard is 20. This request is a result of increased funding for the current fiscal year.	Approval
81	14	Spec. Schools	LSMSA	Residential	Residential Program percentage of school total	The initial standard set for FY 2004-05 was 18.20%. The revised standard is 18.40%. This request is a result of increased funding for the current fiscal year.	Approval
					Residential Program cost per student	The initial standard set for FY 2004-05 was \$3,490. The revised standard is \$3,715. This request is a result of increased	Approval

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						funding for the current fiscal year.	
82	5	Special Schools and Commissions	Office of Student Financial Assistance	Administrative	Percentage of Administrative Costs Total OSFA Budget	Adjust indicators to accurately reflect the current budget Adjust indicators to accurately reflect the current budget	Approval
83	6	Special Schools and Commissions	Office of Student Financial Assistance	Scholarship and grants	Total Amount Awarded Administrative Costs of S/G Program Total S/G and TOPS Awards	Adjust indicators to accurately reflect the current budget Adjust indicators to accurately reflect the current budget Adjust indicators to accurately reflect the current budget	Approval
84	16	Spec. Schools	NOCCA	Admin. / Support	Administration / Support Cost per student	The initial standard set for FY 2004-05 was \$1,852. The revised standard is \$1,853. This request is a result of increased funding for the current fiscal year.	Approval
85	17	Spec. Schools	NOCCA	Instructional	Instructional Cost per student	The initial standard set for FY 2004-05 was \$8,879. The revised standard is \$8,904. This request is a result of increased funding for the current fiscal year.	Approval
86	1	Education	Subgrantee Assistance	Disadvantaged or Disabled Student Support	Percentage of at-risk children served (LA4). Number of at-risk preschool children served (LA4).	The current objective for these indicators references the source of funding for the program as Interagency Transfer from DSS. The funding sources for the LA4 program were changed during the Legislative Session to include State General Funds. The changes will delete such reference in the objective.	Approval
87	2	Education	Subgrantee Assistance	School and Community Support	Number of students served by the after school education activity.	The TANF After School Program was eliminated from the Executive Budget and later restored during the Legislative Session at the same funding level. The indicator is being restored, but the performance standard is being changed from 7,000 to 9,000 students to reflect more recent data collected.	Approval
88	3	Education	Recovery School District	Recovery School District	Percentage of students who meet or exceed mastery performance levels on the Criterion-Referenced Tests in English Language Arts. Percentage of students who meet or exceed mastery performance levels on the Criterion-Referenced Tests in Math. Percentage of students who meet or exceed the 50th percentile on the Norm-Referenced Tests.	The Recovery School District is a new agency and appropriation created during the Legislative Session. The program indicators are necessary to track the success of the Recovery District students on the Criterion-Referenced Tests and Norm-Referenced Tests.	Approval
88	3	Education	Recovery School	Recovery School	Percent of all schools that have adequate yearly		

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(continued)			District	District	progress as defined by the School Accountability System.		
89	46	LSU HSC	HCSD	Administration	Administration budget as a % of total HCSD operating budget	This performance standard adjustment reflects administrative support services (\$9.2 million) as a percentage of the total operating budget for FY 04/05 (\$848.4 million)	Approval
90	47	LSU HSC	HCSD	E.K. Long	Emergency department visits	This adjustment request to change a key indicator to more accurately reflect projections based on 03/04 utilization data. The initial standard for ER visits is being reduced by 392 visits.	Approval
					Total outpatient encounters	This adjustment request to change a key indicator to more accurately reflect projections based on 03/04 utilization data. The initial standard for outpatient encounters is being reduced by 7,243 visits.	Approval
					Avg length of stay for psychiatric inpatients	Technical adjustment due to an error in rounding in lapas	Approval
					Avg length of stay for acute medical/surgical inpatients	Technical adjustment due to an error in rounding in lapas	Approval
					Readmission rate	Technical adjustment due to an error in rounding in lapas	Approval
					FTE staff per patient	Technical adjustment due to an error in rounding in lapas	Approval
91	48	LSU HSC	HCSD	H.P. Long	Emergency department visits	This adjustment request to change a key indicator to more accurately reflect projections based on 03/04 utilization data. The initial standard for ER visits is being reduced by 7,948 visits.	Approval
					Total outpatient encounters	This adjustment request to change a key indicator to more accurately reflect projections based on 03/04 utilization data. The initial standard for outpatient encounters is being reduced by 12,425 visits.	Approval
					Avg length of stay for psychiatric inpatients	Technical adjustment due to an error in rounding in lapas	Approval
					Avg length of stay for acute medical/surgical inpatients	Technical adjustment due to an error in rounding in lapas	Approval
					Readmission rate	Technical adjustment due to an error in rounding in lapas	Approval
					FTE staff per patient	Technical adjustment due to an error in rounding in lapas	Approval
92	49	LSU HSC	HCSD	University	Emergency department visits	This adjustment request to change a key indicator to more accurately reflect projections based on 03/04 utilization data. The initial standard for ER visits is being reduced by 1,811 visits.	Approval
					Total outpatient encounters	This adjustment request to change a key indicator to more accurately reflect projections based on 03/04 utilization data. The initial standard for outpatient encounters is being reduced by 1,028 visits.	Approval
					Avg length of stay for psychiatric inpatients	Technical adjustment due to an error in rounding in lapas	Approval
					Avg length of stay for acute medical/surgical inpatients	Technical adjustment due to an error in rounding in lapas	Approval
92	49	LSU HSC	HCSD	University	Emergency department visits	This adjustment request to change a key indicator to more accurately reflect projections based on 03/04 utilization data. The initial standard for ER visits is being reduced by 1,811 visits.	Approval
(continued)					Total outpatient encounters	This adjustment request to change a key indicator to more accurately reflect projections based on 03/04 utilization data. The initial standard for outpatient encounters is being reduced by 1,028 visits.	Approval
					Avg length of stay for psychiatric inpatients	Technical adjustment due to an error in rounding in lapas	Approval
					Avg length of stay for acute medical/surgical inpatients	Technical adjustment due to an error in rounding in lapas	Approval
					Readmission rate	Technical adjustment due to an error in rounding in lapas	Approval
					FTE staff per patient	Technical adjustment due to an error in rounding in lapas	Approval

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93	50	LSU HSC	HCSD	W.O. Moss	# of staffed beds	This adjustment request to increase the number of staffed beds from 25 to 38 as W.O. Moss is re-opening 13 surgical beds in FY 04/05.	Approval					
					Emergency department visits	This adjustment request to change a key indicator to more accurately reflect projections based on 03/04 utilization data. The initial standard for ER visits is being increased by 393 visits.	Approval					
					Total outpatient encounters	This adjustment request to change a key indicator to more accurately reflect projections based on 03/04 utilization data. The initial standard for outpatient encounters is being reduced by 202 visits.	Approval					
					Avg length of stay for psychiatric inpatients	Technical adjustment due to an error in rounding in lapas	Approval					
					Avg length of stay for acute medical/surgical inpatients	Technical adjustment due to an error in rounding in lapas	Approval					
					Readmission rate	Technical adjustment due to an error in rounding in lapas	Approval					
					FTE staff per patient	Technical adjustment due to an error in rounding in lapas	Approval					
94	51	LSU HSC	HCSD	Lallie Kemp	Emergency department visits	This adjustment request to change a key indicator to more accurately reflect projections based on 03/04 utilization data. The initial standard for ER visits is being reduced by 1,289 visits.	Approval					
					Total outpatient encounters	This adjustment request to change a key indicator to more accurately reflect projections based on 03/04 utilization data. The initial standard for outpatient encounters is being reduced by 8,187 visits.	Approval					
					Avg length of stay for acute medical/surgical inpatients	Technical adjustment due to an error in rounding in lapas	Approval					
					Readmission rate	Technical adjustment due to an error in rounding in lapas	Approval					
					FTE staff per patient	Technical adjustment due to an error in rounding in lapas	Approval					
					95	52	LSU HSC	HCSD	Bogalusa	Emergency department visits	This adjustment request to change a key indicator to more accurately reflect projections based on 03/04 utilization data. The initial standard for ER visits is being increased by 190 visits.	Approval
										Total outpatient encounters	This adjustment request to change a key indicator to more accurately reflect projections based on 03/04 utilization data. The initial standard for outpatient encounters is being increased by 3,696 visits.	Approval
Avg length of stay for psychiatric inpatients	Technical adjustment due to an error in rounding in lapas	Approval										
Avg length of stay for acute medical/surgical inpatients	Technical adjustment due to an error in rounding in lapas	Approval										
Readmission rate	Technical adjustment due to an error in rounding in lapas	Approval										
FTE staff per patient	Technical adjustment due to an error in rounding in lapas	Approval										
95 (continued)	52	LSU HSC	HCSD	Bogalusa						Readmission rate	Technical adjustment due to an error in rounding in lapas	Approval
96	53	LSU HSC	HCSD	L.J. Chabert	# of staffed beds	This adjustment request to increase the number of staffed beds from 83 to 99 as L.J. Chabert is opening a telemetry unit in FY 04/05.	Approval					
					Emergency department visits	This adjustment request to change a key indicator to more accurately	Approval					

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					Total outpatient encounters	reflect projections based on 03/04 utilization data. The initial standard for ER visits is being reduced by 3,042 visits. This adjustment request to change a key indicator to more accurately reflect projections based on 03/04 utilization data. The initial standard for outpatient encounters is being increased by 9,821 visits.	Approval
					Avg length of stay for psychiatric inpatients	Technical adjustment due to an error in rounding in lapas	Approval
					Avg length of stay for acute medical/surgical inpatients	Technical adjustment due to an error in rounding in lapas	Approval
					Readmission rate	Technical adjustment due to an error in rounding in lapas	Approval
					FTE staff per patient	Technical adjustment due to an error in rounding in lapas	Approval
97	54	LSU HSC	HCSD	MCLNO	Emergency department visits	This adjustment request to change a key indicator to more accurately reflect projections based on 03/04 utilization data. The initial standard for ER visits is being reduced by 19,709 visits.	Approval
					Total outpatient encounters	This adjustment request to change a key indicator to more accurately reflect projections based on 03/04 utilization data. The initial standard for outpatient encounters is being reduced by 64,520 visits.	Approval
					Avg length of stay for psychiatric inpatients	Technical adjustment due to an error in rounding in lapas	Approval
					Avg length of stay for acute medical/surgical inpatients	Technical adjustment due to an error in rounding in lapas	Approval
					Readmission rate	Technical adjustment due to an error in rounding in lapas	Approval
					FTE staff per patient	Technical adjustment due to an error in rounding in lapas	Approval