

STATE OF CONNECTICUT

DEPARTMENT OF DEVELOPMENTAL DISABILITIES FY 2011 OPERATIONAL PLAN USER'S GUIDE

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I. INTRODUCTION

The Operational Plan (OP-PLAN) software consists of an excel spreadsheet environment. The user's input all of the financial and statistical information onto the spreadsheets.

The intent of this User's Guide is to facilitate completion of the Operational Plan filing and to complement those sections of the *Department of Developmental Disabilities and Social Services Operating Manual* that address the Operational Plan process.

A. **WHAT IS REFLECTED ON THE OP-PLAN?**

The following types of DDS-funded programs are currently reflected in detailed cost centers on the OP-Plan (and subsequent Annual Report):

DAY SERVICES:

- Day Support Options (DSO)
- Individual Supported Employment (SEI)
- Group Employment (GSE)
- Sheltered Employment (SHE)

RESIDENTIAL SERVICES:

- Community living Arrangements (CLA)
- Continuous Residential Supports (CRS)
- Individualized Home Supports (IHS)
- Community Training Home Support (CTH Support)

All non-DDS activity must be reflected in an "Other" cost center. The dollar value total of all these cost centers, including the "Other", would equal the same dollar threshold reflected on a provider's regular audited financial statements or budget for the company as a whole.

INDIVIDUAL SUPPORTS and Fee For Services:

Providers who serve participants through Individual Supports and/or Vendor Service Authorizations can either use a separate cost center on the "Other Services" worksheet or in the service worksheet as with contracted participants (Day, IHS, etc.). Individuals covered by an ISA or Vendor Service Authorizations whose services do not fit the Day, IHS, or other definite model (i.e. Personal Supports, adult companions, etc) should be documented in it's own cost center under the "Other Services" worksheet. If costs are to be captured within the service worksheet (Day, IHS, etc) the number of participants for those individuals should be reflected in the authorized openings for those cost centers (Day, IHS, etc) and the revenue offset should be listed under Program Revenue (Line 18).

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BIRTH TO THREE SERVICES:

Birth to Three providers should reflect budgeted expenses in the **Other** cost center. The *Birth to Three Cost Report* will be reflected in the Annual Report at a later date.

ICF-MR:

ICF-MR models should **not** be reflected in individual cost centers on the OP-Plan (and subsequent Annual Report) but reflected in the aggregate in a single ICF/MR cost center in the "Other " worksheet.

OTHER:

The **Other** cost center must reflect all non-DDS activities. Failure to include an other cost center when applicable will result in delay regarding approval of contracts and contract amendments. Providers have the option of reflecting OTHER services in individual cost centers on the OP-Plan should they choose to do so, but are not required to do so and may continue to reflect OTHER in the aggregate in a single OTHER cost center.

B. WHAT SHOULD NOT BE REFLECTED ON THE INITIAL OP-PLAN?

The OP-PLAN should only reflect budgeted service dollars that will be continued in future years (annualized). Expenditures associated with the following types of revenues DO NOT belong in the Initial OP-PLAN:

- one-time dollars
- temporary service supplement
- SL development

C. WHAT SHOULD BE REFLECTED ON THE FINAL OP-PLAN?

The Final OP-PLAN should reflect all service dollars contracted for the fiscal year including expenditures associated with the following types of revenues :

- one-time dollars
- temporary service supplement

Agencies that open a new CLA during the current fiscal year should include the following expenditures on the final Operational Report for that year only:

- cash advance - CLA.
- advance payment (start-up)

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Each of the above examples has its own source documentation exclusive of the OP-PLAN.

D. READ THIS SECTION BEFORE YOU BEGIN WORKING WITH THE OP-PLAN

All the spreadsheets and formulas are already designed and in place for you. You merely have to enter the financial and statistical data and save the files because everything is already set up for you:

- You do not need in-depth familiarity with spreadsheets to work with the program.
- The spreadsheets have been protected and providers are not able to use the Cut and Paste buttons.

The worksheets in the OP-PLAN rely heavily on the concept of cell linking to pull data from one workbook page to another. When you save the workbook, all changes made within the workbook will be saved. It is recommended that you save the workbook pages on a regular basis especially after completing each worksheet.

II. THE BASICS

A. WHEN TO FILE

The rate setting regulations, CGS Sec. 17-313b-2(1) specify that the initial OP-PLAN shall be filed no later than the first business day following April 1. **Due to the late issuance of the OP Plan Software, submission has been extended until May 21, 2010.**

B. WHERE TO FILE

Electronically file the OP-PLAN with the PRIMARY REGION.

C. WHAT TO FILE

A complete OP-PLAN filing consists of electronically filing the spreadsheet and a transmittal letter to the resource manager.

D. AMENDMENTS

An amended OP-Plan is required if:

1. a cost center is added or deleted; e.g., a new CLA or closing an IHS;
2. a statewide funding increase or decrease; e.g., annual COLA and fringe benefit adjustment, or
3. as required by DDS.

An amended OP-Plan is not required for other funding changes, such as one time funding. All that is required is a contract amendment.

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E. Final Operational Report

An end of year revised Op-Plan is required to be submitted by July 31, 2010.

F. OTHER QUESTIONS

PROCEDURAL QUESTIONS: call your *Primary Region Resource Manager*.

TECHNICAL OR SOFTWARE QUESTIONS: call Peter Mason at (860) 418-6077.

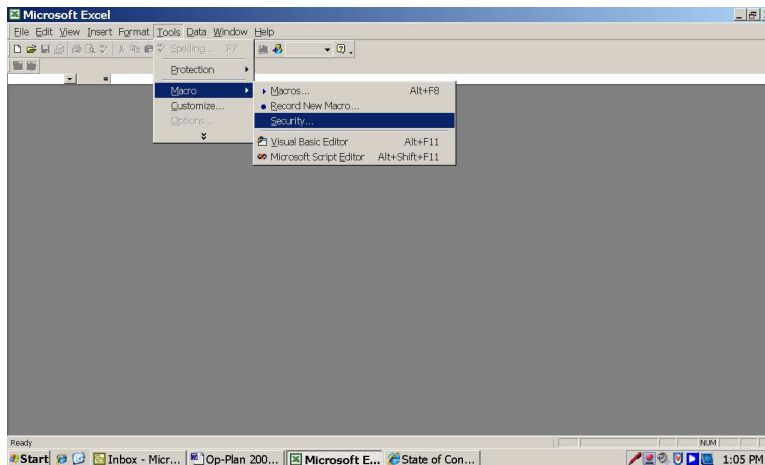
III. WORKING WITH THE PROGRAM

A. HOW TO INSTALL:

Simply open the file using Excel software. The Op Plan is ready to use.

B. Installation Problems :

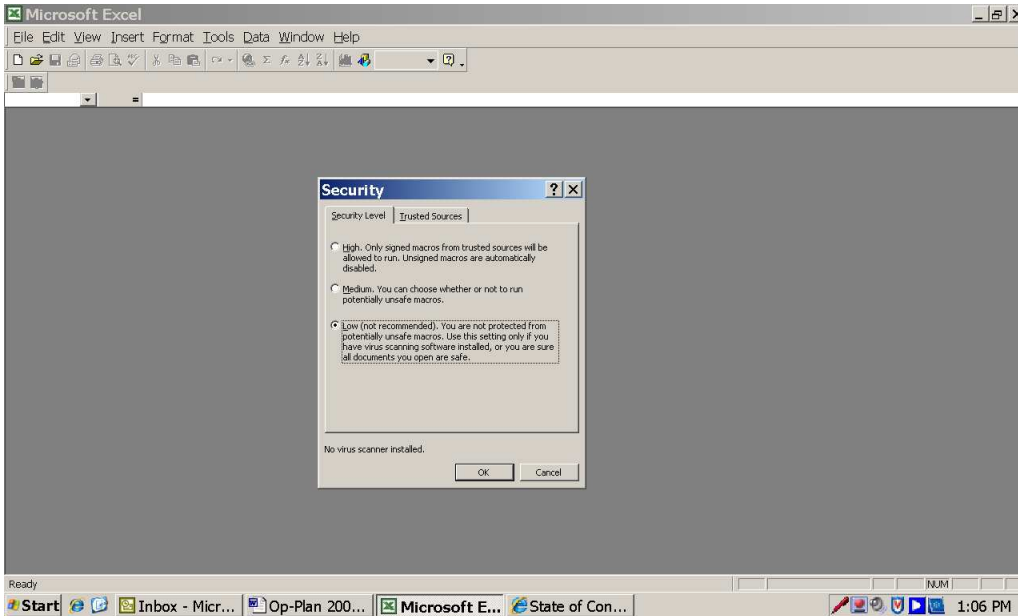
A number of providers last year had problems with the macros in the spreadsheet because their security level on the excel software was set too high. If you receive a message that states, "The macros in this project are disabled." You will need to reset your security level. First, click on the Tools button on the toolbar at the top of the page. Next, click on the Security button.



The security level should be set to the lowest level.

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C. MAIN MENU

The main menu contains six options:

- Contents
- Demographics
- Residential Worksheet
- Day Worksheet
- Other Worksheet
- Day Summary Worksheet
- Residential Summary Worksheet
- Summary Worksheet
- A&G Worksheet
- Employee Benefits Worksheet
- Information Worksheet

D. BASIC COMMANDS

The OP-PLAN schedules are in eleven (11) spreadsheet pages in one (1) workbook. To enter the statistical and financial data onto these worksheets, you will minimally need to know how to retrieve and save this workbook.

1. MOVING WITHIN A SPREADSHEET

Each square in the spreadsheet is called a cell. Use the cursor keys (arrow keys), the page down PGDN, page up PGUP or HOME keys to maneuver from cell to cell. The cells

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where you need to enter data are within the green lines. These are unprotected. All the other cells are protected. The PC will beep at you if you try to enter something into a protected cell.

2. FREEZING TOP AND/OR LEFT MARGINS

The software does not freeze the top margins automatically. To freeze the a line, set the cursor to the line where you would like to freeze, click on the windows tab at the top of the page and click the Freeze Panes tab.

E. DEFINE YOUR COST CENTERS

Click on the worksheet to enter the cost centers. There is a drop down tab to enter the region where the cost center is located. List the Cost Center number in the labeled cell. Type the name of the Cost Center in the labeled cell. There is a drop down that lists the program types for the worksheet.

You are required to enter the following data on a cost center screen:

DDS REGION -	Enter the DDS region where THIS particular program is located. A pop-up box with the available choices will appear if you do not enter a valid region (i.e., NR, SR, WR).
COST CENTER # -	Enter the cost center number you have assigned for this particular program/model. This is a number, which the provider establishes and it should remain constant for the life of the program/model. It would be helpful to use the same number on the Annual Report.
COST CENTER NAME -	This is the unabbreviated spelling of the cost center description, as you want it to appear on the printed Setup Sheet.
PROGRAM TYPE-	A pop-up box with the available choices will appear if you do not enter a valid region (i.e., CLA,CRS,IHS,GSE,DSO,SHE,SEi).

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F. PRINT REPORTS

Worksheets can be printed from either the Content Worksheet or the individual Worksheet. Click on the appropriate "PRINT" tab for the worksheet you would like to print. When printing the Residential, Day and Other Worksheets, there are three options to choose.

Print <15 – Choose this option if you have 15 or less Cost Centers in that Worksheet

Print 15 to 30 – Choose this option if you have between 15 and 30 Cost Centers in that Worksheet

Print >30 – Choose this option if you have 30 or more Cost Centers in that Worksheet

G. BACKUP OP-PLAN

3. BACKUP FILES

To save your OP Plan to a disk click the "File" tab in the upper right hand corner. Hit the "Save As" tab and choose the a: drive. Be sure you have a formatted floppy disc in the a: drive.

IV. OP-PLAN SCHEDULES

A. Demographics

General Information

This page is used to input the general information on the provider. A section has been added to identify all amendments to the initial Operational Report.

B. EMPLOYEE BENEFITS

Workbook Page Name: EMPLOYEE BENEFITS

Employee Benefits expenses must be manually allocated to the individual cost centers. The method of allocation must be deemed reasonable by DDS. Generally, once a method is chosen, it should not change from year to year without a good reason. The Board of Directors should sign off on the allocation method and any changes that are made to it. Furthermore, the percentage of Employee Benefits expense charged to DDS-funded cost centers should not exceed the percentage of Employee Benefits expense charged to non-DDS-funded cost centers. Any deviations from this rule are subject to further review and will need to be justified.

Only list the employee benefits associated with the employees. Do not include any benefits associated with participant remuneration in this section. Participant remuneration is covered in the non-salary section of the day program schedule.

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The employee benefit categories are as follows:

SOCIAL SECURITY	Social Security (FICA) (Mandatory)
UNEMPLOYMENT	Unemployment Insurance (Mandatory)
WORKER'S COMP	Worker's Compensation (Mandatory)
INSURANCE	Combine the amounts for any insurance such as Short Term Disability, Long Term Disability, Health, Dental, Life and Self-Insurance.
RETIREMENT	Enter any amounts associated with retirement - related benefits such as Pensions.
OTHER	Use this line for any employee benefits not covered above.

C. ADMINISTRATIVE EXPENSES

Workbook Page Name: A&G WORKSHEET

Administration expenses must be manually allocated to the individual cost centers. The method of allocation must conform to the OPM cost standards. The cost standards are found on the OPM website. The link is as follows:

http://www.ct.gov/opm/cwp/view.asp?a=2981&Q=382994&opmNav_GID=1806

Generally, once a method is chosen, it should not change from year to year without a good reason. The Board of Directors should sign off on the allocation method and any changes that are made to it. Furthermore, the percentage of Administrative and General expense charged to DDS-funded cost centers should not exceed the percentage of Administrative and General expense charged to non-DDS-funded cost centers. Any deviations from this rule are subject to further review and will need to be justified.

There are four (4) categories for ADMINISTRATION SALARIES & WAGES.

ADMINISTRATION -	Enter here the Full-Time Equivalent (FTE) and budgeted costs associated with the salaries of the Executive Director/Administrator, Assistant Administrators and Other Directors (Program Managers). The FTE equals the administration staff hours divided by 2080. FTEs are entered in column C.
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PA No. 07-238, Section 7 states that the total cost allowance for the salary of the director of the organization shall not exceed \$100,000. Therefore, the dollar figure for the salary of the director

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of the organization indicated within the category of Administration, (line 1 a.) should not be greater than \$100,000.

There are two ways to approach this. One method is for the provider to report only the \$100,000. Any additional salary paid but not reported will be come a reconciling item between the COR/ACOR and the State Single Audit.

An alternative method would be to include the full cost of the director's salary within line 1 a., and then deduct the excess over \$100,000 on line in 6 a., Non-reimbursable Costs That Are Directly Related to This Cost Center. For more information on Section 7 of Public Act 07-238 Follow the link :

http://www.cga.ct.gov/asp/cgabillstatus/cgabillstatus.asp?selBillType=Public+Act&bill_num=238&which_year=2007&SUBMIT1.x=10&SUBMIT1.y=9

BUSINESS -

This category is for the salaries associated with the business functions such as Business Manager, Finance Director, Accountant, Bookkeeper and Personnel Director.

SECRETARIAL/CLERICAL-

Only those secretarial and clerical salaries associated with the administrative function of the agency should be included on this line. Any salary cost of such positions associated with particular program areas **must** be allocated directly to that program area. Enter secretarial or clerical salary expenses in the staffing worksheets for residential or day programs if you allocate them to those programs.

OTHER --

Use this line to budget any administrative and general salaries not included in the lines above.

There are sixteen (16) categories for ADMINISTRATION NON-SALARY.

ACCOUNTING & AUDITING-

Enter any amounts associated with accounting and auditing expenses. Examples of accounting services providers might include payroll services, quarterly tax preparation and annual audits.

LEGAL FEES-

Use this line to budget any expenses for legal fees.

OFFICE SUPPLIES-

This line includes office supplies, postage and other sundry items associated with the administrative activities of the provider agency. Do not include office supplies directly associated with the activity of a day program.

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OCCUPANCY COSTS-	Site costs attributable solely to the administrative office, such as rent, depreciation, property taxes and utilities.
DUES AND MEMBERSHIP FEES-	Dues and membership fees to professional or affiliate organizations, licenses, subscriptions.
MANAGEMENT SERVICES-	Management fees paid to organizations providing management function to the provider agency.
CONSULTANT SERVICES-	Consultant fees paid to organizations providing consulting fees. Services must relate to the administration of the provider agency.
DATA PROCESSING-	Data processing supplies or fees.
STAFF DEVELOPMENT AND SEMINAR-	Expenses pertaining to staff development and training for administrative staff only.
TEMPORARY HELP-	Temporary office help not directly employed by you.
DEPRECIATION & AMORTIZATION -	Depreciation on office equipment, amortization.
INSURANCE-	Umbrella, liability, property, self-insurance, other insurance associated with the administrative function of the provider agency. Report vehicle insurance under Vehicle Costs category below.
EMPLOYEE MILEAGE-	Employee mileage reimbursement for use of personal vehicles as associated with the administrative function of the provider agency.
VEHICLE COSTS-	Vehicle costs associated with agency vehicles assigned to the administrative function such as lease, depreciation, fuel, repairs, insurance, fees and taxes.
LEASE EQUIPMENT AND MAINTENANCE-	Costs associated with the leasing and maintaining of equipment associated with the administrative function such as copy machines, computers, etc.
OTHER-	Administrative expenses not covered in the above categories, such as repairs and maintenance, ACOR late filing penalties, etc. There are four (4) lines available for OTHER EXPENSES. If more than four (4) lines are necessary, you may combine items.

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EMPLOYEE BENEFITS and INTEREST must be allocated manually to the A&G Worksheet, as well as the deduction for non-reimbursable costs (if applicable) and the application of offsetting revenues.

EMPLOYEE BENEFITS-	Employee benefits attributable to the A&G SALARIES & WAGES.
INTEREST-	Interest expense attributable to A&G.
LESS NON-REIMBURSABLE COSTS-	Non-reimbursable costs included in the above category lines must be offset here. Specifically: entertainment, fines and penalties, bad debts and cost of action to collect receivables, taxes (except for payroll, use and property), advertisement except for recruitment of personnel, contingency reserves, legal/ accounting/professional services incurred to represent the agency in actions involving government, medical and dental services which can be covered by Title 19, costs substituted by the Fair Rental Allowance in the Room & Board calculation, amortization of goodwill, depreciation on assets reported on GI-7 (ACOR) FUND RAISING and costs associated with donations and start up costs for a CLA not yet opened, unallowable related party cost, and Executive Director salary in excess of \$100,000.
LESS OTHER OP & NON OP REVENUE-	Enter revenues that could be used to defray DDS's fair share of A&G cost.

The spreadsheet calculates the total allowable administrative and general expense. This figure is compared with the amount of A&G that has been allocated on the summary worksheets. If there is a discrepancy, the difference will be displayed on line 45 of the Administrative and General worksheet.

D. SERVICE COST

Workbook Page Name: Residential, Day and Other

TOTAL OPENINGS

Enter the total number of licensed beds or agreed upon program openings. (This is the program capacity regardless of how many openings or licensed beds DDS purchases).

For example, in Day Programs, there are sometimes extra openings, which are purchased by ICF/MR providers or by other state agencies.

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DDS CONTRACTED OPENINGS	Enter the number of licensed beds or program openings DDS is purchasing.
TOTAL CONTRACTED SERVICE AUTHORIZATIONS	Enter the total number of Contract Service Authorizations for each day program.
DAYS OPEN	Enter the number of working days the program/model will be open during the contract year. (e.g., 365, 250, 240).
TOTAL AUTHORIZED CSA DAYS	Enter the total number of days authorized for all Contract Service Authorizations in each program
DIRECT SUPPORTS FTE	The total direct staff support hours divided by 2080.
SALARIES	The total cost of all salaries and wages (direct care and supervisory) directly attributed to this cost center.
EMPLOYEE BENEFITS	Employee benefits attributable to the SALARIES & WAGES of this cost center
<u>NON-SALARY CLASSIFICATIONS</u>	The following items are included in non-salary:
CONTRACT PERSONNEL-	Costs associated with contracted personnel or services. Examples may include psychologists or other professionals. If the agency purchases direct care staff coverage from a management agency, please break out data by position type (i.e., manager, supervisor, aide).
GENERAL SUPPLIES & SVCS-	General supplies and services directly attributable to a program (i.e., not attributable to the Administration cost center) such as personnel recruitment for direct care staff for the program.
EMP TRAINING FEES & MATERIAL-	Expenses relating to employee training or travel reimbursement for the same.
PARTICIPANT MED-EDUC & REC educational supplies and services.	Expenses relating to participant medical, (Residential Screens only) and recreational

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PARTICIPANT SALARIES & BENEFITS-(Day Screens Only)	Expenses for participant program wages and employee benefits.
AMORTIZATION OF STARTUP-(Residential Screens Only)	Amortization of the startup funds over the appropriate time period.
BUILDING COSTS-(Day Screens Only)	Expenses for rent or depreciation and interest costs.
UTIL INS MAINT & OTHER-(Day Screens Only)	Equipment costs (rent and/or insurance, maintenance, utilities and other sundry costs associated with plant operation and maintenance.
INTEREST-	Interest expense directly attributable to the worksheet
EMPLOYEE MILEAGE-	Costs associated with reimbursement of expenses incurred by employees using personal vehicles in job-related situations (e.g., mileage, tolls, parking, etc.).
VEHICLE DEPRECIATION-	Depreciation expenses for agency-owned vehicles used for this cost center.
VEHICLE RENTAL-	Rental expenses for vehicles leased by the agency and used for this cost center.
VEHICLE INTEREST-	Vehicle interest expense directly attributable to the worksheet
VEHICLE OPERATING COSTS-	Costs for gasoline, oil, maintenance & repairs and insurance, etc.
OTHER TRANS COSTS-	Costs not related to vehicles (i.e., public transportation, contracted transportation service).
NONREIMBURSABLE COSTS-	Non-reimbursable costs included in the above category lines must be deducted from the total non-salary line. Specifically: entertainment, fines and penalties, bad debts and cost of action to collect receivables; taxes (except for payroll, use and property); advertisement, except for recruitment of personnel; contingency reserves; legal/accounting/professional services incurred to

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represent the agency in actions involving government; medical and dental services which can be covered by Title 19; costs substituted by the Fair Rental Allowance in the Room & Board calculation; amortization of goodwill; depreciation on assets reported on GI-7 (Annual Report); fund raising and costs associated with donations and start up costs for a CLA not yet opened.

PROGRAM REVENUE -

Use this line to offset any budgeted revenue or income associated with this cost center.

Other Revenue Towards DDS

Purchased Openings (Non Annualized)

- 1.) Include the amount of anticipated additional revenue received from Non-DDS purchasers of openings. **An example of this would be when DDS pays \$10,000 per opening but the provider receives \$12,000 for a purchased opening reimbursed by a Vendor Authorization. The additional \$2,000 would go on this line.**
- 2.) Include revenues which could be used to defray DDS's fair share of this program's cost. Examples include restricted donations specifically designated as restricted to this program OR fund raising revenues used to pay for items DDS does not fund. Do not include per diem type revenues associated with authorized openings DDS does not purchase.

Children Room and Board (Residential Only)

- 1.) Include the anticipated room and board amount funded by DDS. Room and Board for children is funded through DDS until the individual turns 18 years old.

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DEPARTMENT OF Developmental Disabilities

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