Agency Budget Request FISCAL YEAR 2026–2027



Louisiana Department of Health

325 — Acadiana Area Human Services District



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Signature Page

BUDGET REQUEST

Fiscal Year Ending June 30,2027

PHYSICAL ADDRESS: 302 Dulles Drive

| BUDGET UNIT: ACADIANA AREA HUMAN SERVICES DISTRICT | Lafayette, LA |
|---|---|
| SCHEDULE NUMBER: 09 - 325 | ZIP CODE: |
| TELEPHONE NUMBER: 337-262-4190 | WEB ADDRESS: www.aahsd.org |
| WE HEREBY CERTIFY THAT THE STATEMENTS AND FIGURE TO THE BEST OF OUR KNOWLEDGE. | ES ON THE ACCOMPANYING FORMS ARE TRUE AND CORRECT |
| PRINTED NAME/TITLE: Date: October 15, 2025 EMAIL ADDRESS: Bruce.Greenstein@la.gov | PRINTED NAME/TITLE: Brad Farmer/Executive Director DATE: October 15, 2025 EMAIL ADDRESS: Brad.Farmer@la.gov |
| | EMAIL ADDRESS. |
| PROGRAM CONTACT PERSON: Brad Farmer | FINANCIAL CONTACT PERSON: Daniel Leger |
| TITLE: Executive Director | TITLE: Accountant Administrator 2 |
| TELEPHONE NUMBER: 337-262-4190 | TELEPHONE NUMBER: 337-262-4189 |
| EMAIL ADDRESS: Brad.Farmer@la.gov | EMAIL ADDRESS: Daniel.Leger@la.gov |

Operational Plan

Operational Plan Form Department Goals

DEPARTMENT NUMBER AND NAME: AAHSD - AAHSD

DEPARTMENT MISSION:

The mission of the Louisiana Department of Health is to protect and promote health and to ensure access to medical, preventive and rehabilitative services for all citizens of the State of Louisiana; The Louisiana Department of Health is dedicated to fulfilling its mission through direct provision of quality services, the development and stimulation of services to others, and the utilization of available resources in the most effective manner.

DEPARTMENT GOALS:

The goals of the Louisiana Department of Health are:

- I. To ensure that appropriate and quality health care services are provided to the citizens of Louisiana.
- II. To protect and promote the health needs of the people of Louisiana and promote effective health practices.
- III. To develop and stimulate services by others.
- IV. To utilize available resources in the most effective manner.

Operational Plan Form Agency Goals

AGENCY NUMBER AND NAME: 325 - Acadiana Area Human Services District

AGENCY MISSION:

The mission of the Acadiana Area Human Services District is to improve the quality of life for the citizens of Acadiana who have behavioral health and/or intellectual/developmental disabilities.

The Vision of Acadiana Area Human Services District is to become the preeminent provider of community-based supports and human services which promote the independence, respect, and inclusion of all citizens dealing with issues of behavioral health and/or intellectual/developmental disabilities.

The Values of Acadiana Area Human Services District are:

Accountability - To be good stewards of our resources and to exceed all contractual, legal, and regulatory requirements in providing services.

Transparency - To operate in such a manner as to be above reproach in all our governance and operational processes.

Value - To achieve optimal outcomes by implementing cost-effective evidence-based practices in a timely manner.

AGENCY GOALS:

To provide comprehensive services and supports which improve the quality of life and community participation for persons in crisis and/or with serious and persistent mental illness, emotional and behavioral disorders, addictive disorders, co-occurring disorders, and/or developmental disabilities.

To improve individual outcomes through effective implementation of evidenced-based and best practices and data-driven decision-making.

To promote healthy, safe lives for people by providing leadership in educating the community on the importance of prevention, early detection and intervention, and by facilitating coalition building to address localized community problems.

STATEMENT OF AGENCY STRATEGY FOR DEVELOPMENT OF HUMAN RESOURCE POLICIES THAT ARE HELPFUL AND BENEFICIAL TO WOMEN AND FAMILIES:

Acadiana Area Human Services District abides by all state Civil Services guidelines and procedures regarding equal opportunity for staff and in particular women and their families. The Acadiana Area Human Services District also addresses specific issues in respect to female employees and their families in the Human Resources policies for the agency and in the Acadiana Area Human Services District Personnel Handbook. All policies are reviewed annually and changes/additions are made accordingly to new mandates or as issues arise.

Acadiana Area Human Services District focuses its treatment approach on the person and family in the provision of services and supports. The family is paramount to the treatment model and serves as the basis for individual and family treatment, recovery and wellness adaptation.

Operational Plan Form Program Goals

PROGRAM NUMBER AND NAME: 3251 - Acadiana Area Human Services District

PROGRAM AUTHORIZATION:

Acadiana Area Human Services District is organized under the following provisions of the Louisiana revised statutes (LSA-RS): R.S. 373.

PROGRAM MISSION:

The mission of the Acadiana Area Human Services District is to improve the quality of life for the citizens of Acadiana who have behavioral health and/or intellectual/developmental disabilities in a timely manner.

The Vision of Acadiana Area Human Services District is to become the preeminent provider of community-based supports and human services which promote the independence, respect, and inclusion of all citizens dealing with issues of behavioral health and/or intellectual/developmental disabilities.

The Values of Acadiana Area Human Services District are:

Accountability - To be good stewards of our resources and to exceed all contractual, legal, and regulatory requirements in providing services.

Transparency - To operate in such a manner as to be above reproach in all our governance and operational processes.

Value - To achieve optimal outcomes by implementing cost-effective evidence-based practices in a timely manner.

PROGRAM GOALS:

Administration:

To develop clear policy objectives, well-defined local roles and responsibilities, and measures to ensure accountability of the provision of quality services to consumers.

Behavioral Health:

Goal 1: To provide behavioral health treatment services as part of the State's continuum of care (per the Human Services Accountability and Implementation Plan) in Acadia, Evangeline, Iberia, Lafayette, St. Landry, St. Martin, and Vermilion parishes.

- Goal 2: To improve accessibility for emergency and non-emergency behavioral health services.
- Goal 3: To increase stakeholders' involvement in planning, education, and decision-making within the range of services offered by AAHSD.

Developmental Disabilities:

Goal 1: To provide access to appropriate, comprehensive community based supports for individuals with disabilities, their families and/or support system(s) such that they will be able to be maintained within their communities.

- Goal 2: To provide quality services and supports information and opportunities for choice for individuals with developmental disabilities and their families.
- Goal 3: To increase stakeholders' involvement in planning, education, and decision-making within the range of services offered by AAHSD.

PROGRAM ACTIVITY:

Operational Plan Form Program Goals

PROGRAM NUMBER AND NAME: 3251 - Acadiana Area Human Services District

Acadiana Area Human Services District is one program comprised of administrative, behavioral health and developmental disabilities functions.

PROGRAM ACTIVITY: Administration

The Louisiana Department of Health (LDH), its program offices and the Louisiana Legislature have created a statewide integrated human services delivery system with local accountability and management to provide behavioral health and developmental disabilities services. These local human service systems are referred to as local governmental entities (LGEs). LGEs feature practices such as a framework anchored in clear policy objectives, well-defined local roles and responsibilities, and measures to assure accountability of delivering quality services to consumers that assist in determining the relative efficiency and effectiveness of public systems. Act 373 of the 2008 Legislative Session, requires that LDH shall not contract with a new LGE until LDH, in consultation with the Human Services Interagency Council (HSIC), has determined and confirmed in writing to the governor that LDH is prepared to contract the provision of services to the LGE after the LGE has successfully completed the Readiness Assessment. The Acadiana Area Human Services District was created by Act 373 in the 2008 Legislative Session for the parishes of Acadia, Evangeline, Iberia, Lafayette, St. Landry, St. Martin and Vermilion. A ten member board was seated in January of 2010 and an Executive Director was hired in November 2011. The Acadiana Area Human Services District will participate in the statewide initiative to transition from the statewide SMO to the five Bayou Health companies to implement an electronic health record to assist with continuous documentation efforts, scheduling of clients to maximize provider time, invoicing and billing procedures to improve collection efforts and standardization of forms/ procedures. Acadiana Area Human Services District is seeking national reaccreditation with CARF for its 5 behavioral clinics sites within the region.

PROGRAM ACTIVITY: Behavioral Health

Mental Health

Acadiana Area Human Services District provides Mental Health outpatient clinic services for children, adolescents, and adults. Core services include screening, assessment, crisis evaluation, individual/group/family therapy, medication management (which includes administration and education), and screening for persons with co-occurring disorders. Contracted services include evidence-based practice (Assertive Community Treatment) and Case Management Services for adults and children/adolescents, as well as housing assistance and assistance in application for Supplemental Security Income (SSI). Service delivery includes full participation in the Healthy Louisiana (formerly Bayou Health) initiative.

Addictive Disorders

Acadiana Area Human Services District provides Addictive Disorders outpatient clinic services for adolescents and adults and contracts with community vendors to provide Prevention services to children and adolescents. Core services include orientation/screening, referral, assessment; education, outpatient, intensive outpatient, and aftercare group treatment for gambling addiction, drug screens, HIV/STD/TBB services, and medical history/mental status exams. Addictive Disorders and Prevention service providers focus their attention on providing comprehensive, fully integrated prevention and treatment services and actively seek assistance of partnerships and collaborations to fully meet needs of individuals, families, and communities.

PROGRAM ACTIVITY: Developmental Disabilities

Developmental Disabilities core services consist of serving as the Single Point of Entry (SPOE) into the Developmental Disabilities (DD) Services System and providing support coordination services to individuals and their families through DD and other available community resources. Staff members assess the needs for support and services, develop individual plans of support, make applicable referrals, and provide ongoing coordination for the client's support plans. Targeted services are centered on Home and Community-Based Services Waiver programs and Federal criteria which allow services to be provided in a home or community-based setting for the recipient who would otherwise require institutional care. The Family Support Program is designed to assist individuals whose needs exceed those normally used resources in the community, and other natural resources available. Individual and Family Supports include but are not limited to: respite care, personal assistance services, specialized clothing, such as adult briefs, dental and medical services not covered by other sources, equipment and supplies, communication services, crisis intervention, specialized utility costs, specialized nutrition, and family education. The Flexible Family Fund Program is intended to assist families with children with severe or profound disabilities to offset the extraordinary costs of maintaining their child in their own home. The program provides a monthly stipend to families of children who have qualifying exceptionalities identified through their local educational authority.

Operational Plan Form Program Goals

PROGRAM NUMBER AND NAME: 3251 - Acadiana Area Human Services District

Operational Plan Form Activities/Objectives - Performance Indicators

DEPARTMENT ID: 09 - LDH

AGENCY ID: 325 - Acadiana Area Human Services District

PROGRAM ID: 3251 - Acadiana Area Human Services District

PM OBJECTIVE: 3251-01 - To provide programmatic leadership and direction to the programs of behavioral health (addictive disorders and mental health) and developmental disabilities services under AAHSD; to continue the operational activity of the AAHSD administrative office in relation to the Readiness Assessment Criteria and other regulatory/ licensure processes and according to the terms of the Memorandum of Understanding (MOU) each year through June 30, 2027.

Children's Budget Link:

Human Resource Policies Beneficial to Women and Families Link:

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other:

Explanatory Notes:

| | | | | Performance Indicator Values | | | | | | |
|--------------------------|-------|---|------|--|--|--|--|--|---|--|
| Performance Indicator | Level | Performance Indicator Name | Unit | Year End Performance Standard 2024 - 2025 | Actual Year End Performance 2024 - 2025 | Performance Standard as Initially Appropriated 2025 - 2026 | Existing Performance Standard 2025 - 2026 | Performance at Continuation Budget Level 2026 - 2027 | Performance at Executive Budget Level 2026 - 2027 | Performance Standard as Initially Appropriated 2026 - 2027 |
| 25057 | К | Percentage of clients who indicate they would continue to receive services at AAHSD clinics if given the choice to go elsewhere | Р | 90 | 97.67 | 90 | 90 | 90 | 0 | 0 |
| 25058 | K | Percentage of clients who indicate they would recommend AAHSD services to family and friends | Р | 90 | 99 | 90 | 90 | 90 | 0 | 0 |

| | | | | General Performance Information | | | | | |
|-------------|-------|--|------|---------------------------------------|---------------------------------------|---------------------------------------|---------------------------------------|---------------------------------------|--|
| Performance | | Performance Indicator Name | Unit | Performance Indicator Values | | | | | |
| Indicator | Level | | | Prior Year Actual FY2020 - 2021 | Prior Year Actual FY2021 - 2022 | Prior Year Actual FY2022 - 2023 | Prior Year Actual FY2023 - 2024 | Prior Year Actual FY2024 - 2025 | |
| 25043 | G | Total number of individuals served in the Acadiana Area Human Services District | N | 14,845 | 15,000 | 16,359 | 16,433 | 16,450 | |
| 25044 | G | Total number of individuals served by outpatient mental health in Acadiana Area Human Services District | N | 6,555 | 644 | 6,118 | 5,638 | 5,194 | |
| 25046 | G | Total numbers of individuals served by outpatient Addictive Disorders in Acadiana Area Human Services District | N | 824 | 751 | 700 | 579 | 582 | |
| 25047 | G | Total number of enrollees in prevention programs | N | 8,651 | 6,250 | 9,541 | 9,601 | 9,699 | |

Operational Plan Form Activities/Objectives - Performance Indicators

DEPARTMENT ID: 09 - LDH

AGENCY ID: 325 - Acadiana Area Human Services District

PROGRAM ID: 3251 - Acadiana Area Human Services District

PM OBJECTIVE: 3251-02 - Each year through June 30, 2027, AAHSD will work as part of the State's continuum of care that centers on behavioral disorders, addictive disorders, and co-occurring disorders.

Children's Budget Link:

Human Resource Policies Beneficial to Women and Families Link:

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other:

Explanatory Notes:

| | | | | Performance Indicator Values | | | | | | |
|--------------------------|-------|--|------|--|--|--|--|--|---|--|
| Performance Indicator | Level | Performance Indicator Name | Unit | Year End Performance Standard 2024 - 2025 | Actual Year End Performance 2024 - 2025 | Performance Standard as Initially Appropriated 2025 - 2026 | Existing Performance Standard 2025 - 2026 | Performance at Continuation Budget Level 2026 - 2027 | Performance at Executive Budget Level 2026 - 2027 | Performance Standard as Initially Appropriated 2026 - 2027 |
| 25040 | К | Percentage of individuals successfully completing the 24-hour residential addictive disorders treatment program | Р | 50 | 50 | 50 | 50 | 50 | 0 | 0 |
| 25052 | К | Number of adults receiving mental health services in all AAHSD behavioral health clinics | N | 5,000 | 4,330 | 5,000 | 5,000 | 5,000 | 0 | 0 |
| 25053 | К | Number of children/adolescents receiving mental health services in all AAHSD behavioral health clinics | N | 500 | 864 | 500 | 500 | 500 | 0 | 0 |
| 25054 | К | Percentage of adults receiving mental health services who indicate that they would choose to continue to receive services from AAHSD if given the choice to receive services elsewhere | P | 90 | 97.67 | 90 | 90 | 90 | 0 | 0 |
| 25055 | K | Percentage of mental health clients who would recommend AAHSD services to others | Р | 90 | 99 | 90 | 90 | 90 | 0 | 0 |
| 25056 | K | Percentage of mental health cash subsidy slots utilized | Р | 90 | 100 | 90 | 90 | 90 | 0 | 0 |

Operational Plan Form Activities/Objectives - Performance Indicators

DEPARTMENT ID: 09 - LDH

AGENCY ID: 325 - Acadiana Area Human Services District

PROGRAM ID: 3251 - Acadiana Area Human Services District

PM OBJECTIVE: 3251-03 - Through the Developmental Disabilities activity, AAHSD will foster and facilitate independence for citizens with disabilities through the availability of home- and community-based services each year through June 30,2027.

Children's Budget Link:

Human Resource Policies Beneficial to Women and Families Link:

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other:

Explanatory Notes:

| | | | | Performance Indicator Values | | | | | | |
|--------------------------|-------|--|------|--|--|--|--|--|---|--|
| Performance Indicator | Level | Performance Indicator Name | Unit | Year End Performance Standard 2024 - 2025 | Actual Year End Performance 2024 - 2025 | Performance Standard as Initially Appropriated 2025 - 2026 | Existing Performance Standard 2025 - 2026 | Performance at Continuation Budget Level 2026 - 2027 | Performance at Executive Budget Level 2026 - 2027 | Performance Standard as Initially Appropriated 2026 - 2027 |
| 25048 | К | Number of persons receiving individual and family support services | N | 200 | 211 | 260 | 260 | 260 | 0 | 0 |
| 25049 | К | Number of persons receiving Flexible Family Funds | N | 202 | 202 | 202 | 202 | 215 | 0 | 0 |
| 25050 | K | Percentage of eligibility determinations determined to be valid according to the Flexible Family Fund provisions | Р | 95 | 100 | 95 | 95 | 95 | 0 | 0 |
| 25051 | К | Number of persons receiving developmental disabilities services | N | 3,000 | 4,355 | 3,700 | 3,700 | 4,600 | 0 | 0 |



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Budget Request Overview

AGENCY SUMMARY STATEMENT

Total Agency

Means of Financing

| Description | FY2024-2025 Actuals | Existing Operating Budget as of 10/02/2025 | FY2026-2027 Total Request | Over/Under EOB | Percent Change |
|-----------------------------|------------------------|--|------------------------------|----------------|----------------|
| STATE GENERAL FUND (Direct) | 14,089,982 | 15,090,816 | 15,684,815 | 593,999 | 3.94% |
| STATE GENERAL FUND BY: | _ | _ | _ | _ | _ |
| INTERAGENCY TRANSFERS | 2,499,387 | 5,107,914 | 5,107,914 | _ | _ |
| FEES & SELF-GENERATED | 1,423,294 | 1,536,196 | 1,536,196 | _ | _ |
| STATUTORY DEDICATIONS | _ | _ | _ | _ | _ |
| FEDERAL FUNDS | 711,091 | 1,000,000 | 1,000,000 | _ | _ |
| TOTAL MEANS OF FINANCING | \$18,723,754 | \$22,734,926 | \$23,328,925 | \$593,999 | 2.61% |

Fees and Self-Generated

| Description | FY2024-2025 Actuals | Existing Operating Budget as of 10/02/2025 | FY2026-2027 Total Request | Over/Under EOB | Percent Change |
|--------------------------------|------------------------|--|------------------------------|----------------|----------------|
| Fees & Self-generated Revenues | 1,423,294 | 1,536,196 | 1,536,196 | _ | _ |
| Total: | \$1,423,294 | \$1,536,196 | \$1,536,196 | _ | _ |

Statutory Dedications

| | FY2024-2025 | Existing Operating Budget | FY2026-2027 | | |
|-------------|-------------|---------------------------|---------------|----------------|----------------|
| Description | Actuals | as of 10/02/2025 | Total Request | Over/Under EOB | Percent Change |
| Total: | _ | _ | _ | _ | _ |

Agency Expenditures

| Description | FY2024-2025 E Actuals | xisting Operating Budget as of 10/02/2025 | FY2026-2027 Total Request | Over/Under EOB | Percent Change |
|--|--------------------------|--|------------------------------|----------------|----------------|
| Salaries | _ | _ | | _ | _ |
| Other Compensation | _ | _ | _ | _ | _ |
| Related Benefits | _ | _ | _ | _ | _ |
| TOTAL PERSONAL SERVICES | _ | _ | _ | _ | _ |
| Travel | _ | _ | _ | _ | _ |
| Operating Services | _ | 286 | 293 | 7 | 2.45% |
| Supplies | 173,604 | 176,100 | 180,150 | 4,050 | 2.30% |
| TOTAL OPERATING EXPENSES | \$173,604 | \$176,386 | \$180,443 | \$4,057 | 2.30% |
| PROFESSIONAL SERVICES | _ | _ | _ | _ | _ |
| Other Charges | 18,030,609 | 21,989,736 | 22,579,678 | 589,942 | 2.68% |
| Debt Service | _ | _ | _ | _ | _ |
| Interagency Transfers | 519,542 | 568,804 | 568,804 | _ | _ |
| TOTAL OTHER CHARGES | \$18,550,151 | \$22,558,540 | \$23,148,482 | \$589,942 | 2.62% |
| Acquisitions | _ | _ | _ | _ | _ |
| Major Repairs | _ | _ | _ | _ | _ |
| TOTAL ACQ. & MAJOR REPAIRS | _ | _ | _ | _ | _ |
| TOTAL EXPENDITURES | \$18,723,754 | \$22,734,926 | \$23,328,925 | \$593,999 | 2.61% |
| Agency Positions | | | | | |
| Classified | _ | _ | _ | _ | _ |
| Unclassified | _ | _ | _ | _ | _ |
| TOTAL AUTHORIZED T.O. POSITIONS | _ | _ | _ | _ | _ |
| TOTAL AUTHORIZED OTHER CHARGES POSITIONS | 119 | 119 | 128 | 9 | 7.56% |
| TOTAL NON-T.O. FTE POSITIONS | _ | _ | _ | _ | _ |
| TOTAL POSITIONS | 119 | 119 | 128 | 9 | 7.56% |

Cost Detail

Means of Financing

| Description | FY2024-2025 Actuals | Existing Operating Budget as of 10/02/2025 | FY2026-2027 Total Request | Over/Under EOB |
|--------------------------------|------------------------|--|------------------------------|----------------|
| State General Fund | 14,089,982 | 15,090,816 | 15,684,815 | 593,999 |
| Interagency Transfers | 2,499,387 | 5,107,914 | 5,107,914 | _ |
| Fees & Self-generated Revenues | 1,423,294 | 1,536,196 | 1,536,196 | _ |
| Federal Funds | 711,091 | 1,000,000 | 1,000,000 | _ |
| Total: | \$18,723,754 | \$22,734,926 | \$23,328,925 | \$593,999 |

Operating Services

| Commitment Item | Name | FY2024-2025 Actuals | Existing Operating Budget as of 10/02/2025 | FY2026-2027 Total Request | Over/Under EOB |
|---------------------------|----------------------|------------------------|--|------------------------------|----------------|
| 5300000 | TOTAL OPERATING SERV | _ | 286 | 293 | 7 |
| Total Operating Services: | | _ | \$286 | \$293 | \$7 |

Supplies

| Commitment Item | Name | FY2024-2025 Actuals | Existing Operating Budget as of 10/02/2025 | FY2026-2027 Total Request | Over/Under EOB |
|-----------------|----------------------|------------------------|--|------------------------------|----------------|
| 5400000 | TOTAL SUPPLIES | _ | 176,100 | 180,150 | 4,050 |
| 5410001 | SUP-OFFICE SUPPLIES | 35,442 | _ | _ | _ |
| 5410005 | SUP-PHARMACEUTICAL | 2,198 | _ | _ | _ |
| 5410006 | SUP-COMPUTER | 16,435 | _ | _ | _ |
| 5410008 | SUP-MEDICAL | 3,972 | _ | _ | _ |
| 5410009 | SUP-EDUCATION & REC | 532 | _ | _ | _ |
| 5410015 | SUP-AUTO | 58 | _ | _ | _ |
| 5410016 | SUP-BLD | 81,053 | _ | _ | _ |
| 5410017 | SUP-JANITORIAL | 13,997 | _ | _ | _ |
| 5410027 | SUP-OTHER MEDICAL | 127 | _ | _ | _ |
| 5410031 | SUP-REP/MNT SUP-AUTO | 3,843 | _ | _ | _ |

Supplies (continued)

| Commitment Item | Name | FY2024-2025 Actuals | Existing Operating Budget as of 10/02/2025 | FY2026-2027 Total Request | Over/Under EOB |
|-----------------|--------------|------------------------|--|------------------------------|----------------|
| 5410036 | SUP-FUELTRAC | 3,401 | _ | _ | _ |
| 5410400 | SUP-OTHER | 12,546 | _ | _ | _ |
| Total Supplies: | | \$173,604 | \$176,100 | \$180,150 | \$4,050 |

Other Charges

| Commitment Item | Name | FY2024-2025 Actuals | Existing Operating Budget as of 10/02/2025 | FY2026-2027 Total Request | Over/Under EOB |
|-----------------|----------------------|------------------------|--|------------------------------|----------------|
| 5600000 | TOTAL OTHER CHARGES | _ | 10,111,039 | 10,111,039 | _ |
| 5610003 | OTHER PUBLIC ASST | 1,318,945 | _ | _ | _ |
| 5620012 | MISC-NON EE COMP | 7,665 | _ | _ | _ |
| 5620063 | MISC-OPERATNG SVCS | 1,358,018 | _ | _ | _ |
| 5620064 | MISC-PROF SVCS | 2,647,160 | _ | _ | _ |
| 5620065 | MISC-SUPPLIES OTHER | 33,090 | _ | _ | _ |
| 5620066 | MISC-TRVL IN STATE | 2,558 | _ | _ | _ |
| 5620067 | MISC-TR OUT OF STATE | 6,987 | _ | _ | _ |
| 5620068 | MISC-ACQ/MAJ REP OTH | 33,838 | _ | _ | _ |
| 5620072 | MISC-OC SAL CLASS&UN | 7,098,269 | 7,695,425 | 8,100,335 | 404,910 |
| 5620073 | MISC-OC-SAL CLASS OT | 40,924 | _ | 31,451 | 31,451 |
| 5620074 | MISC-OC-SAL CLSS TRM | 4,672 | _ | 19,826 | 19,826 |
| 5620076 | MISC-OC-WAGES | 312,316 | _ | 83,905 | 83,905 |
| 5620078 | MISC-OC-RETIRE-STEM | 2,476,818 | 2,535,525 | 2,587,027 | 51,502 |
| 5620081 | MISC-OC-F.I.C.A. TAX | 1,690 | _ | 3,257 | 3,257 |
| 5620082 | MISC-OC-MEDICARE TAX | 99,540 | 117,225 | 118,258 | 1,033 |
| 5620083 | MISC-OC-GRP INS CONT | 1,020,191 | 1,085,522 | 1,016,124 | (69,398) |
| 5620137 | MISC-OC-PS-MEDICAL | 1,186,341 | <u> </u> | _ | _ |
| 5620160 | MISC-TRVL IN STATE | 1,743 | _ | _ | _ |
| 5620161 | MISC-TR OUT OF STATE | 3,019 | | _ | _ |
| 5620162 | MISC-TR OUT OF STATE | 7,213 | _ | _ | _ |

Other Charges (continued)

| Commitment Item | Name | FY2024-2025 Actuals | Existing Operating Budget as of 10/02/2025 | FY2026-2027 Total Request | Over/Under EOB |
|----------------------|----------------------|------------------------|--|------------------------------|----------------|
| 5620164 | MISC-OC REL BENEFITS | 3,887 | _ | _ | _ |
| 5620165 | MISC-OC-POST RET BEN | 365,724 | 445,000 | 508,456 | 63,456 |
| Total Other Charges: | | \$18,030,609 | \$21,989,736 | \$22,579,678 | \$589,942 |

Interagency Transfers

| Commitment Item | Name | FY2024-2025 Actuals | Existing Operating Budget as of 10/02/2025 | FY2026-2027 Total Request | Over/Under EOB |
|------------------------------|--------------------|------------------------|--|------------------------------|----------------|
| 5950001 | IAT-COMMODITY/SERV | 160 | _ | _ | _ |
| 5950007 | IAT-PRINTING | 823 | _ | _ | _ |
| 5950014 | IAT-TELEPHONE | 72,576 | 112,265 | 112,265 | _ |
| 5950049 | IAT-CIVIL SERVICE | 43,681 | 48,899 | 48,899 | _ |
| 5950050 | IAT-ORM INSURANCE | 175,514 | 184,793 | 184,793 | _ |
| 5950051 | IAT-OSUP | 6,959 | 6,656 | 6,656 | _ |
| 5950052 | IAT-LEG. AUDITOR | 38,871 | 39,813 | 39,813 | _ |
| 5950058 | IAT-TECH SVCS | 177,153 | 170,794 | 170,794 | _ |
| 5950059 | IAT-ST PROCUREMENT | 3,805 | 5,584 | 5,584 | _ |
| Total Interagency Transfers: | | \$519,542 | \$568,804 | \$568,804 | _ |
| Total Agency Expenditures: | | \$18,723,754 | \$22,734,926 | \$23,328,925 | \$593,999 |

PROGRAM SUMMARY STATEMENT

3251 - Acadiana Area Human Services District

Means of Financing

| Description | FY2024-2025 Actuals | Existing Operating Budget as of 10/02/2025 | FY2026-2027 Total Request | Over/Under EOB | Percent Change |
|-----------------------------|------------------------|--|------------------------------|----------------|----------------|
| STATE GENERAL FUND (Direct) | 14,089,982 | 15,090,816 | 15,684,815 | 593,999 | 3.94% |
| STATE GENERAL FUND BY: | _ | _ | _ | _ | _ |
| INTERAGENCY TRANSFERS | 2,499,387 | 5,107,914 | 5,107,914 | _ | _ |
| FEES & SELF-GENERATED | 1,423,294 | 1,536,196 | 1,536,196 | _ | _ |
| STATUTORY DEDICATIONS | _ | _ | _ | _ | _ |
| FEDERAL FUNDS | 711,091 | 1,000,000 | 1,000,000 | _ | _ |
| TOTAL MEANS OF FINANCING | \$18,723,754 | \$22,734,926 | \$23,328,925 | \$593,999 | 2.61% |

Fees and Self-Generated

| Description | FY2024-2025 Actuals | Existing Operating Budget as of 10/02/2025 | FY2026-2027 Total Request | Over/Under EOB | Percent Change |
|--------------------------------|------------------------|--|------------------------------|----------------|----------------|
| Fees & Self-generated Revenues | 1,423,294 | 1,536,196 | 1,536,196 | _ | _ |
| Total: | \$1,423,294 | \$1,536,196 | \$1,536,196 | _ | _ |

Program Expenditures

| Description | FY2024-2025 Actuals | Existing Operating Budget as of 10/02/2025 | FY2026-2027 Total Request | Over/Under EOB | Percent Change |
|----------------------------|------------------------|--|------------------------------|----------------|----------------|
| Salaries | | _ | _ | _ | _ |
| Other Compensation | _ | _ | _ | _ | _ |
| Related Benefits | <u> </u> | _ | _ | _ | _ |
| TOTAL PERSONAL SERVICES | _ | _ | _ | _ | _ |
| Travel | | _ | _ | _ | _ |
| Operating Services | _ | 286 | 293 | 7 | 2.45% |
| Supplies | 173,604 | 176,100 | 180,150 | 4,050 | 2.30% |
| TOTAL OPERATING EXPENSES | \$173,604 | \$176,386 | \$180,443 | \$4,057 | 2.30% |
| PROFESSIONAL SERVICES | _ | _ | _ | _ | _ |
| Other Charges | 18,030,609 | 21,989,736 | 22,579,678 | 589,942 | 2.68% |
| Debt Service | <u> </u> | _ | _ | _ | _ |
| Interagency Transfers | 519,542 | 568,804 | 568,804 | _ | _ |
| TOTAL OTHER CHARGES | \$18,550,151 | \$22,558,540 | \$23,148,482 | \$589,942 | 2.62% |
| Acquisitions | _ | _ | _ | _ | _ |
| Major Repairs | <u> </u> | _ | _ | _ | _ |
| TOTAL ACQ. & MAJOR REPAIRS | _ | _ | _ | _ | _ |
| TOTAL EXPENDITURES | \$18,723,754 | \$22,734,926 | \$23,328,925 | \$593,999 | 2.61% |
| Program Positions | | | | | |

| Classified | _ | _ | _ | _ | _ |
|--|-----|-----|-----|---|-------|
| Unclassified | _ | _ | _ | _ | _ |
| TOTAL AUTHORIZED T.O. POSITIONS | _ | _ | _ | _ | _ |
| TOTAL AUTHORIZED OTHER CHARGES POSITIONS | 119 | 119 | 128 | 9 | 7.56% |
| TOTAL NON-T.O. FTE POSITIONS | _ | _ | _ | _ | _ |
| TOTAL POSITIONS | 119 | 119 | 128 | 9 | 7.56% |

Cost Detail

Means of Financing

| Description | FY2024-2025 Actuals | Existing Operating Budget as of 10/02/2025 | FY2026-2027 Total Request | Over/Under EOB |
|--------------------------------|------------------------|--|------------------------------|----------------|
| State General Fund | 14,089,982 | 15,090,816 | 15,684,815 | 593,999 |
| Interagency Transfers | 2,499,387 | 5,107,914 | 5,107,914 | _ |
| Fees & Self-generated Revenues | 1,423,294 | 1,536,196 | 1,536,196 | _ |
| Federal Funds | 711,091 | 1,000,000 | 1,000,000 | _ |
| Total: | \$18,723,754 | \$22,734,926 | \$23,328,925 | \$593,999 |

Operating Services

| Commitment Item | Name | FY2024-2025 Actuals | Existing Operating Budget as of 10/02/2025 | FY2026-2027 Total Request | Over/Under EOB |
|---------------------------|----------------------|------------------------|--|------------------------------|----------------|
| 5300000 | TOTAL OPERATING SERV | _ | 286 | 293 | 7 |
| Total Operating Services: | | _ | \$286 | \$293 | \$7 |

Supplies

| Commitment Item | Name | FY2024-2025 Actuals | Existing Operating Budget as of 10/02/2025 | FY2026-2027 Total Request | Over/Under EOB |
|-----------------|----------------------|------------------------|--|------------------------------|----------------|
| 5400000 | TOTAL SUPPLIES | _ | 176,100 | 180,150 | 4,050 |
| 5410001 | SUP-OFFICE SUPPLIES | 35,442 | _ | _ | _ |
| 5410005 | SUP-PHARMACEUTICAL | 2,198 | _ | _ | _ |
| 5410006 | SUP-COMPUTER | 16,435 | _ | _ | _ |
| 5410008 | SUP-MEDICAL | 3,972 | _ | _ | _ |
| 5410009 | SUP-EDUCATION & REC | 532 | _ | _ | _ |
| 5410015 | SUP-AUTO | 58 | _ | _ | _ |
| 5410016 | SUP-BLD | 81,053 | _ | _ | _ |
| 5410017 | SUP-JANITORIAL | 13,997 | _ | _ | _ |
| 5410027 | SUP-OTHER MEDICAL | 127 | _ | _ | _ |
| 5410031 | SUP-REP/MNT SUP-AUTO | 3,843 | _ | _ | _ |

Supplies (continued)

| Commitment Item | Name | FY2024-2025 Actuals | Existing Operating Budget as of 10/02/2025 | FY2026-2027 Total Request | Over/Under EOB |
|-----------------|--------------|------------------------|--|------------------------------|----------------|
| 5410036 | SUP-FUELTRAC | 3,401 | _ | _ | _ |
| 5410400 | SUP-OTHER | 12,546 | _ | _ | _ |
| Total Supplies: | | \$173,604 | \$176,100 | \$180,150 | \$4,050 |

Other Charges

| Commitment Item | Name | FY2024-2025 Actuals | Existing Operating Budget as of 10/02/2025 | FY2026-2027 Total Request | Over/Under EOB |
|-----------------|----------------------|------------------------|--|------------------------------|----------------|
| 5600000 | TOTAL OTHER CHARGES | _ | 10,111,039 | 10,111,039 | _ |
| 5610003 | OTHER PUBLIC ASST | 1,318,945 | _ | _ | _ |
| 5620012 | MISC-NON EE COMP | 7,665 | _ | _ | _ |
| 5620063 | MISC-OPERATNG SVCS | 1,358,018 | _ | _ | _ |
| 5620064 | MISC-PROF SVCS | 2,647,160 | _ | _ | _ |
| 5620065 | MISC-SUPPLIES OTHER | 33,090 | _ | _ | _ |
| 5620066 | MISC-TRVL IN STATE | 2,558 | _ | _ | _ |
| 5620067 | MISC-TR OUT OF STATE | 6,987 | _ | _ | _ |
| 5620068 | MISC-ACQ/MAJ REP OTH | 33,838 | _ | _ | _ |
| 5620072 | MISC-OC SAL CLASS&UN | 7,098,269 | 7,695,425 | 8,100,335 | 404,910 |
| 5620073 | MISC-OC-SAL CLASS OT | 40,924 | _ | 31,451 | 31,451 |
| 5620074 | MISC-OC-SAL CLSS TRM | 4,672 | _ | 19,826 | 19,826 |
| 5620076 | MISC-OC-WAGES | 312,316 | _ | 83,905 | 83,905 |
| 5620078 | MISC-OC-RETIRE-STEM | 2,476,818 | 2,535,525 | 2,587,027 | 51,502 |
| 5620081 | MISC-OC-F.I.C.A. TAX | 1,690 | _ | 3,257 | 3,257 |
| 5620082 | MISC-OC-MEDICARE TAX | 99,540 | 117,225 | 118,258 | 1,033 |
| 5620083 | MISC-OC-GRP INS CONT | 1,020,191 | 1,085,522 | 1,016,124 | (69,398) |
| 5620137 | MISC-OC-PS-MEDICAL | 1,186,341 | <u> </u> | _ | _ |
| 5620160 | MISC-TRVL IN STATE | 1,743 | _ | _ | _ |
| 5620161 | MISC-TR OUT OF STATE | 3,019 | | _ | _ |
| 5620162 | MISC-TR OUT OF STATE | 7,213 | _ | _ | _ |

Other Charges (continued)

| Commitment Item | Name | FY2024-2025 Actuals | Existing Operating Budget as of 10/02/2025 | FY2026-2027 Total Request | Over/Under EOB |
|----------------------|----------------------|------------------------|--|------------------------------|----------------|
| 5620164 | MISC-OC REL BENEFITS | 3,887 | _ | _ | _ |
| 5620165 | MISC-OC-POST RET BEN | 365,724 | 445,000 | 508,456 | 63,456 |
| Total Other Charges: | | \$18,030,609 | \$21,989,736 | \$22,579,678 | \$589,942 |

Interagency Transfers

| Commitment Item | Name | FY2024-2025 Actuals | Existing Operating Budget as of 10/02/2025 | FY2026-2027 Total Request | Over/Under EOB |
|--|--------------------|------------------------|--|------------------------------|----------------|
| 5950001 | IAT-COMMODITY/SERV | 160 | _ | _ | _ |
| 5950007 | IAT-PRINTING | 823 | _ | _ | _ |
| 5950014 | IAT-TELEPHONE | 72,576 | 112,265 | 112,265 | _ |
| 5950049 | IAT-CIVIL SERVICE | 43,681 | 48,899 | 48,899 | _ |
| 5950050 | IAT-ORM INSURANCE | 175,514 | 184,793 | 184,793 | _ |
| 5950051 | IAT-OSUP | 6,959 | 6,656 | 6,656 | _ |
| 5950052 | IAT-LEG. AUDITOR | 38,871 | 39,813 | 39,813 | _ |
| 5950058 | IAT-TECH SVCS | 177,153 | 170,794 | 170,794 | _ |
| 5950059 | IAT-ST PROCUREMENT | 3,805 | 5,584 | 5,584 | _ |
| Total Interagency Transfers: | | \$519,542 | \$568,804 | \$568,804 | _ |
| Total Expenditures for Program 3251 | | \$18,723,754 | \$22,734,926 | \$23,328,925 | \$593,999 |
| Total Agency Expenditures: | | \$18,723,754 | \$22,734,926 | \$23,328,925 | \$593,999 |

Source of Funding Summary

Agency Overview

SOURCE OF FUNDING SUMMARY

Agency Overview

Interagency Transfers

| Description | FY2024-2025 Actuals | Existing Operating Budget as of 10/02/2025 | FY2026-2027 Total Request | Over/Under EOB | Form ID |
|-----------------------------|------------------------|--|------------------------------|----------------|---------|
| LDH-OBH | 2,455,270 | 4,967,914 | 4,947,914 | (20,000) | 45236 |
| MEDICAID | _ | 85,000 | 85,000 | _ | 45245 |
| ACT 421 TEFRA | 44,117 | 35,000 | 50,000 | 15,000 | 45256 |
| LDH-MVA | | 20,000 | 25,000 | 5,000 | 45844 |
| Total Interagency Transfers | \$2,499,387 | \$5,107,914 | \$5,107,914 | _ | |

Fees & Self-generated

| Description | FY2024-2025 Actuals | Existing Operating Budget as of 10/02/2025 | FY2026-2027 Total Request | Over/Under EOB | Form ID |
|-----------------------------|------------------------|--|------------------------------|----------------|---------|
| INEL PATIENT FEES | 56,486 | 30,000 | 30,000 | _ | 45182 |
| MEDICARE | 108,792 | 125,000 | 125,000 | _ | 45246 |
| MEDICAID | 687,642 | 1,181,196 | 1,181,196 | _ | 45247 |
| INSURANCE REC | 456,307 | 128,000 | 128,000 | _ | 45249 |
| MISC SELF-GEN REVENUE | 57,406 | 42,000 | 42,000 | _ | 45251 |
| ODR - DEBT RECOV | 56,273 | 30,000 | 30,000 | _ | 45467 |
| DRUG SCREENS | 388 | _ | _ | _ | 45468 |
| Total Fees & Self-generated | \$1,423,294 | \$1,536,196 | \$1,536,196 | _ | |

Federal Funds

| Description | FY2024-2025 Actuals | Existing Operating Budget as of 10/02/2025 | FY2026-2027 Total Request | Over/Under EOB | Form ID |
|---------------------------|------------------------|--|------------------------------|----------------|---------|
| FEDERAL | 711,091 | 1,000,000 | 1,000,000 | - | 45660 |
| Total Federal Funds | \$711,091 | \$1,000,000 | \$1,000,000 | _ | |
| Total Sources of Funding: | \$4,633,772 | \$7,644,110 | \$7,644,110 | _ | |

SOURCE OF FUNDING DETAIL

Interagency Transfers

Form 45236 — 325 - IAT OFFICE OF BEHAVIORAL HEALTH

| | Existing Operatin | g Budget as of 10/ | 02/2025 | FY2026-2 | 2027 Total Reques | t | FY202 | 7-2028 Projected | |
|----------------------------|-----------------------|--------------------|------------|-----------------------|-------------------|------------|-----------------------|------------------|------------|
| Expenditures | Means of Financing | In-Kind Match | Cash Match | Means of Financing | In-Kind Match | Cash Match | Means of Financing | In-Kind Match | Cash Match |
| Salaries | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Other Compensation | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Related Benefits | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| TOTAL PERSONAL SERVICES | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Travel | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Operating Services | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Supplies | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| TOTAL OPERATING EXPENSES | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| PROFESSIONAL SERVICES | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Other Charges | 4,967,914 | _ | _ | 4,947,914 | _ | _ | 4,947,914 | _ | _ |
| Debt Service | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Interagency Transfers | _ | _ | _ | <u> </u> | _ | _ | <u> </u> | _ | |
| TOTAL OTHER CHARGES | \$4,967,914 | _ | _ | \$4,947,914 | _ | _ | \$4,947,914 | _ | _ |
| Acquisitions | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Major Repairs | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| TOTAL ACQ. & MAJOR REPAIRS | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| TOTAL EXPENDITURES | \$4,967,914 | _ | _ | \$4,947,914 | _ | _ | \$4,947,914 | _ | _ |

Form 45236 — 325 - IAT OFFICE OF BEHAVIORAL HEALTH

| Question | Narrative Response |
|--|---|
| State the purpose, source and legal citation. | These funds are to be used to provide prevention and treatment services to compulsive gamblers throughout the State, operating expenses due to enactment of HB 157 of the 2002 Regular Legislative Session. Funds received from federal grants for services provided in community behavioral health clinics for mental health services. |
| Agency discretion or Federal requirement? | Some funds are used specifically for social service substance abuse prevention and treatment block grant contracts. Other funds are agency discretion. |
| Describe any budgetary peculiarities. | Some funds are restricted based upon the terms of the grant and are to be used only for identification of and provision of housing and case management services. Others are not. |
| Is the Total Request amount for multiple years? | Not Applicable. |
| Additional information or comments. | Not Applicable. |
| Provide the amount of any indirect costs. | Not Applicable. |
| Any indirect costs funded with other MOF? | Not Applicable. |
| Objectives and indicators in the Operational Plan. | Not Applicable. |
| Additional information or comments. | Not Applicable. |

Form 45245 — 325 - IAT MOLINA

| Existing Operating Budget as of 10/02/2025 | | 02/2025 | FY2026-2 | 2027 Total Reques | t | FY2027-2028 Projected | | | |
|--|-----------------------|---------------|------------|-----------------------|---------------|-----------------------|-----------------------|---------------|------------|
| Expenditures | Means of Financing | In-Kind Match | Cash Match | Means of Financing | In-Kind Match | Cash Match | Means of Financing | In-Kind Match | Cash Match |
| Salaries | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Other Compensation | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Related Benefits | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| TOTAL PERSONAL SERVICES | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Travel | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Operating Services | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Supplies | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| TOTAL OPERATING EXPENSES | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| PROFESSIONAL SERVICES | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Other Charges | 85,000 | _ | _ | 85,000 | _ | _ | 85,000 | _ | _ |
| Debt Service | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Interagency Transfers | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| TOTAL OTHER CHARGES | \$85,000 | _ | _ | \$85,000 | _ | _ | \$85,000 | _ | _ |
| Acquisitions | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Major Repairs | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| TOTAL ACQ. & MAJOR REPAIRS | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| TOTAL EXPENDITURES | \$85,000 | _ | _ | \$85,000 | _ | _ | \$85,000 | _ | _ |

Form 45245 — 325 - IAT MOLINA

| Question | Narrative Response |
|--|--|
| State the purpose, source and legal citation. | These funds are from the patients of the behavioral health clinics that have 'traditional Medicaid'; thus payments are received from Molina for these Title XIX (Medicaid) behavioral health services provided. The revenues collected will offset expenditures incurred by AAHSD to deliver the requested services. |
| Agency discretion or Federal requirement? | Not applicable. |
| Describe any budgetary peculiarities. | None. |
| Is the Total Request amount for multiple years? | Not applicable. |
| Additional information or comments. | Not applicable. |
| Provide the amount of any indirect costs. | Not applicable. |
| Any indirect costs funded with other MOF? | Not applicable. |
| Objectives and indicators in the Operational Plan. | Not applicable. |
| Additional information or comments. | Not applicable. |

Form 45256 — 325 - IAT-ACT 421 TEFRA

| | Existing Operating Budget as of 10/02/2025 | | | FY2026-2027 Total Request | | | FY2027-2028 Projected | | |
|----------------------------|--|---------------|------------|---------------------------|---------------|------------|-----------------------|---------------|------------|
| Expenditures | Means of Financing | In-Kind Match | Cash Match | Means of Financing | In-Kind Match | Cash Match | Means of Financing | In-Kind Match | Cash Match |
| Salaries | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Other Compensation | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Related Benefits | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| TOTAL PERSONAL SERVICES | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Travel | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Operating Services | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Supplies | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| TOTAL OPERATING EXPENSES | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| PROFESSIONAL SERVICES | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Other Charges | 35,000 | _ | _ | 50,000 | _ | _ | 50,000 | _ | _ |
| Debt Service | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Interagency Transfers | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| TOTAL OTHER CHARGES | \$35,000 | _ | _ | \$50,000 | _ | _ | \$50,000 | _ | _ |
| Acquisitions | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Major Repairs | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| TOTAL ACQ. & MAJOR REPAIRS | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| TOTAL EXPENDITURES | \$35,000 | _ | _ | \$50,000 | _ | _ | \$50,000 | _ | _ |

Form 45256 — 325 - IAT-ACT 421 TEFRA

| Question | Narrative Response | | | | |
|--|---|--|--|--|--|
| State the purpose, source and legal citation. | Act 421 of the 2019 Regular Legislative Session provides for the TEFRA option within the Louisiana Medicaid program through which children with disabilities can access Medicaid-funded services regardless of their parents' income. | | | | |
| Agency discretion or Federal requirement? | Agency discretion. | | | | |
| Describe any budgetary peculiarities. | Not applicable. | | | | |
| Is the Total Request amount for multiple years? | Not applicable. | | | | |
| Additional information or comments. | Not applicable. | | | | |
| Provide the amount of any indirect costs. | Not applicable. | | | | |
| Any indirect costs funded with other MOF? | Not applicable. | | | | |
| Objectives and indicators in the Operational Plan. | Not applicable. | | | | |
| Additional information or comments. | Not applicable. | | | | |

Source of Funding Detail Interagency Transfers

Form 45844 — 325 - IAT - PASRR

| | | g Budget as of 10/ | /02/2025 | | 2027 Total Reques | t | | 7-2028 Projected | |
|----------------------------|-----------------------|--------------------|------------|-----------------------|-------------------|------------|-----------------------|------------------|------------|
| Expenditures | Means of Financing | In-Kind Match | Cash Match | Means of Financing | In-Kind Match | Cash Match | Means of Financing | In-Kind Match | Cash Match |
| Salaries | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Other Compensation | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Related Benefits | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| TOTAL PERSONAL SERVICES | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Travel | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Operating Services | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Supplies | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| TOTAL OPERATING EXPENSES | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| PROFESSIONAL SERVICES | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Other Charges | 20,000 | _ | _ | 25,000 | _ | _ | 25,000 | _ | _ |
| Debt Service | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Interagency Transfers | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| TOTAL OTHER CHARGES | \$20,000 | _ | _ | \$25,000 | _ | _ | \$25,000 | _ | _ |
| Acquisitions | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Major Repairs | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| TOTAL ACQ. & MAJOR REPAIRS | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| TOTAL EXPENDITURES | \$20,000 | _ | _ | \$25,000 | _ | _ | \$25,000 | _ | _ |

Source of Funding Detail Interagency Transfers

Form 45844 — 325 - IAT - PASRR

| Question | Narrative Response |
|--|---|
| State the purpose, source and legal citation. | Preadmission Screening and Resident Review (PASRR) is a federal requirement to help ensure that individuals are not inappropriately placed in nursing homes for long term care. The purpose of this evaluation and approval process is to assure that individuals are not being placed in nursing facilities unnecessarily or without adequate supports. (OCDD) is responsible for evaluation and approval of nursing facility (NF) admissions involving people with intellectual/developmental disabilities (I/DD) in compliance with the Code of Federal Regulations CFR 42, Part 483 Subpart C Preadmission Screening and Resident Review of Individuals with Mental Illness and/or Intellectual/Developmental Disability (PASRR). |
| Agency discretion or Federal requirement? | Agency Discretion. |
| Describe any budgetary peculiarities. | Not Applicable. |
| ls the Total Request amount for multiple years? | Not Applicable. |
| Additional information or comments. | Not Applicable. |
| Provide the amount of any indirect costs. | Not Applicable. |
| Any indirect costs funded with other MOF? | Not Applicable. |
| Objectives and indicators in the Operational Plan. | Not Applicable. |
| Additional information or comments. | Not Applicable. |

Source of Funding Detail Federal Funds

Federal Funds

Form 45660 — 325 - FED-CCBHC GRANT

| | Existing Operating Budget as of 10/02/2025 | | | FY2026-2 | 2027 Total Reques | t | FY2027-2028 Projected | | |
|----------------------------|--|---------------|------------|-----------------------|-------------------|------------|-----------------------|---------------|------------|
| Expenditures | Means of Financing | In-Kind Match | Cash Match | Means of Financing | In-Kind Match | Cash Match | Means of Financing | In-Kind Match | Cash Match |
| Salaries | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Other Compensation | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Related Benefits | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| TOTAL PERSONAL SERVICES | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Travel | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Operating Services | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Supplies | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| TOTAL OPERATING EXPENSES | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| PROFESSIONAL SERVICES | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Other Charges | 1,000,000 | _ | _ | 1,000,000 | _ | _ | 1,000,000 | _ | _ |
| Debt Service | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Interagency Transfers | _ | _ | _ | <u> </u> | _ | _ | <u> </u> | _ | _ |
| TOTAL OTHER CHARGES | \$1,000,000 | _ | _ | \$1,000,000 | _ | _ | \$1,000,000 | _ | _ |
| Acquisitions | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Major Repairs | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| TOTAL ACQ. & MAJOR REPAIRS | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| TOTAL EXPENDITURES | \$1,000,000 | _ | _ | \$1,000,000 | _ | _ | \$1,000,000 | _ | _ |

Source of Funding Detail Federal Funds

Form 45660 — 325 - FED-CCBHC GRANT

| Question | Narrative Response |
|--|---|
| State the purpose, source and legal citation. | Certified Community Behavioral Health Clinics (CCBHCs) Planning, Development, and Implementation Grants (Short Title: CCBHC-PDI Grants). The purpose of this program is to help to transform community behavioral health systems and provide comprehensive, coordinated behavioral health care by establishing new CCBHC programs. CCBHCs provide person and family-centered integrated services. The intent of the CCBHC - PDI grant program is to assist organizations in the planning for and development and implementation of a CCBHC that meets the CCBHC Certification Criteria. The agency is anticipating the award of the CCBHC-IA (Certified Community Behavioral Health Clinic Improvement and Advancement) grant. The purpose is to improve and expand community behavioral health systems, providing comprehensive, coordinated care for individuals with mental illness and/or substance use disorders. This funding helps certified clinics enhance their services, including crisis care, outpatient treatment, and recovery supports, while adhering to federal certification criteria. The grant also supports efforts to improve behavioral health equity by addressing disparities and promoting recovery. |
| Agency discretion or Federal requirement? | Agency discretion |
| Describe any budgetary peculiarities. | Not Applicable. |
| Is the Total Request amount for multiple years? | No |
| Additional information or comments. | Not Applicable. |
| Provide the amount of any indirect costs. | Not Applicable. |
| Any indirect costs funded with other MOF? | Not Applicable. |
| Objectives and indicators in the Operational Plan. | Not Applicable. |
| Additional information or comments. | Not Applicable. |

Fees & Self-generated

Form 45182 — 325 - SG-INELIGIBLE PATIENT FEES

| | Existing Operating Budget as of 10/02/2025 | | | FY2026-2 | 2027 Total Reques | t | FY2027-2028 Projected | | |
|----------------------------|--|---------------|------------|-----------------------|-------------------|------------|-----------------------|---------------|------------|
| Expenditures | Means of Financing | In-Kind Match | Cash Match | Means of Financing | In-Kind Match | Cash Match | Means of Financing | In-Kind Match | Cash Match |
| Salaries | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Other Compensation | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Related Benefits | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| TOTAL PERSONAL SERVICES | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Travel | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Operating Services | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Supplies | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| TOTAL OPERATING EXPENSES | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| PROFESSIONAL SERVICES | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Other Charges | 30,000 | _ | _ | 30,000 | _ | _ | 30,000 | _ | _ |
| Debt Service | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Interagency Transfers | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| TOTAL OTHER CHARGES | \$30,000 | _ | _ | \$30,000 | _ | _ | \$30,000 | _ | _ |
| Acquisitions | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Major Repairs | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| TOTAL ACQ. & MAJOR REPAIRS | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| TOTAL EXPENDITURES | \$30,000 | _ | _ | \$30,000 | _ | _ | \$30,000 | _ | _ |

Form 45182 — 325 - SG-INELIGIBLE PATIENT FEES

| Question | Narrative Response |
|--|--|
| State the purpose, source and legal citation. | Ineligible Patient Fees are revenues collected from patients who have copays for insurance benefits, debt recovery, or who pay for their own cost of care as determined from a sliding fee scale based on income. |
| Agency discretion or Federal requirement? | Agency discretion. |
| Describe any budgetary peculiarities. | The number of patients with insurance benefits available to them affects this revenue source. Patients who have no third party benefits but who have the resources to pay for their own cost of care also have a direct impact on the collection of these funds. |
| ls the Total Request amount for multiple years? | Not applicable. |
| Additional information or comments. | Not applicable. |
| Provide the amount of any indirect costs. | Not applicable. |
| Any indirect costs funded with other MOF? | Not applicable. |
| Objectives and indicators in the Operational Plan. | Through administrative activity, Acadiana Area Human Services District will provide for the management and operational activities of services for addictive disorders, developmental disabilities and behavioral health. |
| Additional information or comments. | Not applicable. |

Form 45246 — 325 - SG-MEDICARE

| | Existing Operatin | g Budget as of 10/ | 02/2025 | | 027 Total Reques | | | 7-2028 Projected | |
|----------------------------|-----------------------|--------------------|------------|-----------------------|------------------|------------|-----------------------|------------------|------------|
| Expenditures | Means of Financing | In-Kind Match | Cash Match | Means of Financing | In-Kind Match | Cash Match | Means of Financing | In-Kind Match | Cash Match |
| Salaries | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Other Compensation | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Related Benefits | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| TOTAL PERSONAL SERVICES | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Travel | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Operating Services | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Supplies | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| TOTAL OPERATING EXPENSES | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| PROFESSIONAL SERVICES | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Other Charges | 125,000 | _ | _ | 125,000 | _ | _ | 125,000 | _ | _ |
| Debt Service | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Interagency Transfers | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| TOTAL OTHER CHARGES | \$125,000 | _ | _ | \$125,000 | _ | _ | \$125,000 | _ | _ |
| Acquisitions | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Major Repairs | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| TOTAL ACQ. & MAJOR REPAIRS | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| TOTAL EXPENDITURES | \$125,000 | _ | _ | \$125,000 | _ | _ | \$125,000 | _ | _ |

Form 45246 — 325 - SG-MEDICARE

| Question | Narrative Response |
|--|--|
| State the purpose, source and legal citation. | These revenues represent collections of fees for services to patients who are Medicare eligible in the behavioral health clinic. |
| Agency discretion or Federal requirement? | Agency discretion |
| Describe any budgetary peculiarities. | None |
| Is the Total Request amount for multiple years? | Not applicable. |
| Additional information or comments. | Not applicable. |
| Provide the amount of any indirect costs. | Not applicable. |
| Any indirect costs funded with other MOF? | Not applicable. |
| Objectives and indicators in the Operational Plan. | Through administrative activity, Acadiana Area Human Services District will provide for the management and operational activities of services for addictive disorders, developmental disabilities and behavioral health. |
| Additional information or comments. | Not applicable. |

Form 45247 — 325 - SG-MEDICAID MCO & ZBA

| | | g Budget as of 10/ | 02/2025 | | 2027 Total Reques | t | | 7-2028 Projected | |
|----------------------------|-----------------------|--------------------|------------|-----------------------|-------------------|------------|-----------------------|------------------|------------|
| Expenditures | Means of Financing | In-Kind Match | Cash Match | Means of Financing | In-Kind Match | Cash Match | Means of Financing | In-Kind Match | Cash Match |
| Salaries | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Other Compensation | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Related Benefits | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| TOTAL PERSONAL SERVICES | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Travel | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Operating Services | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Supplies | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| TOTAL OPERATING EXPENSES | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| PROFESSIONAL SERVICES | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Other Charges | 1,181,196 | _ | _ | 1,181,196 | _ | _ | 1,181,196 | _ | _ |
| Debt Service | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Interagency Transfers | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| TOTAL OTHER CHARGES | \$1,181,196 | _ | _ | \$1,181,196 | _ | _ | \$1,181,196 | _ | _ |
| Acquisitions | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Major Repairs | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| TOTAL ACQ. & MAJOR REPAIRS | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| TOTAL EXPENDITURES | \$1,181,196 | _ | _ | \$1,181,196 | _ | _ | \$1,181,196 | _ | _ |

Form 45247 — 325 - SG-MEDICAID MCO & ZBA

| Question | Narrative Response |
|--|--|
| State the purpose, source and legal citation. | These revenues represent collections of fees for services to patients who are Medicaid eligible in the behavioral health clinic. |
| Agency discretion or Federal requirement? | Agency discretion. |
| Describe any budgetary peculiarities. | None. |
| Is the Total Request amount for multiple years? | Not applicable. |
| Additional information or comments. | Not applicable. |
| Provide the amount of any indirect costs. | Not applicable. |
| Any indirect costs funded with other MOF? | Not applicable. |
| Objectives and indicators in the Operational Plan. | Through administrative activity, Acadiana Area Human Services District will provide for the management and operational activities of services for addictive disorders, developmental disabilities and behavioral health. |
| Additional information or comments. | Not applicable. |

Form 45249 — 325 - SG-PRIVATE INSURANCE

| | | g Budget as of 10/ | 02/2025 | | 2027 Total Reques | t | | 7-2028 Projected | |
|----------------------------|-----------------------|--------------------|------------|-----------------------|-------------------|------------|-----------------------|------------------|------------|
| Expenditures | Means of Financing | In-Kind Match | Cash Match | Means of Financing | In-Kind Match | Cash Match | Means of Financing | In-Kind Match | Cash Match |
| Salaries | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Other Compensation | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Related Benefits | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| TOTAL PERSONAL SERVICES | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Travel | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Operating Services | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Supplies | _ | _ | _ | _ | _ | _ | _ | _ | |
| TOTAL OPERATING EXPENSES | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| PROFESSIONAL SERVICES | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Other Charges | 128,000 | _ | _ | 128,000 | _ | _ | 128,000 | _ | _ |
| Debt Service | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Interagency Transfers | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| TOTAL OTHER CHARGES | \$128,000 | _ | _ | \$128,000 | _ | _ | \$128,000 | _ | _ |
| Acquisitions | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Major Repairs | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| TOTAL ACQ. & MAJOR REPAIRS | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| TOTAL EXPENDITURES | \$128,000 | _ | _ | \$128,000 | _ | _ | \$128,000 | _ | _ |

Form 45249 — 325 - SG-PRIVATE INSURANCE

| Question | Narrative Response |
|--|--|
| State the purpose, source and legal citation. | These revenues also represent collections of fees for behavioral health services to patients who have private insurance benefits. |
| Agency discretion or Federal requirement? | Agency Discretion. |
| Describe any budgetary peculiarities. | None. |
| Is the Total Request amount for multiple years? | Not applicable. |
| Additional information or comments. | Not applicable. |
| Provide the amount of any indirect costs. | Not applicable. |
| Any indirect costs funded with other MOF? | Not applicable. |
| Objectives and indicators in the Operational Plan. | Through administrative activity, Acadiana Area Human Services District will provide for the management and operational activities of services for addictive disorders, developmental disabilities and behavioral health. |
| Additional information or comments. | Not applicable. |

Form 45251 — 325 - SG-MISCELLANEOUS/DWI/PROB&PAROLE/MAC FEE

| | | g Budget as of 10/ | 02/2025 | FY2026-2027 Total Request | | t | FY2027-2028 Projected | | |
|----------------------------|-----------------------|--------------------|------------|---------------------------|---------------|------------|-----------------------|---------------|------------|
| Expenditures | Means of Financing | In-Kind Match | Cash Match | Means of Financing | In-Kind Match | Cash Match | Means of Financing | In-Kind Match | Cash Match |
| Salaries | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Other Compensation | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Related Benefits | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| TOTAL PERSONAL SERVICES | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Travel | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Operating Services | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Supplies | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| TOTAL OPERATING EXPENSES | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| PROFESSIONAL SERVICES | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Other Charges | 42,000 | _ | _ | 42,000 | _ | _ | 42,000 | _ | _ |
| Debt Service | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Interagency Transfers | _ | _ | _ | _ | _ | _ | _ | _ | |
| TOTAL OTHER CHARGES | \$42,000 | _ | _ | \$42,000 | _ | _ | \$42,000 | _ | _ |
| Acquisitions | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Major Repairs | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| TOTAL ACQ. & MAJOR REPAIRS | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| TOTAL EXPENDITURES | \$42,000 | _ | _ | \$42,000 | _ | _ | \$42,000 | _ | _ |

Form 45251 — 325 - SG-MISCELLANEOUS/DWI/PROB&PAROLE/MAC FEE

| Question | Narrative Response |
|--|---|
| State the purpose, source and legal citation. | These funds are revenues collected for copies of medical records, etc. Act 28 of the First Extraordinary Session of 1986 provided that the Office of Addictive Disorders may assess a fee per session for DWI Programs, revenues received from preparing enrollments for Medicaid benefits. Probation and Parole funds are to used to provide outpatient group and individual therapy to addictive disordered citizens who are supervised by Louisiana Department of Public Safety and Corrections and United States Probation Court. |
| Agency discretion or Federal requirement? | Agency discretion. |
| Describe any budgetary peculiarities. | None. |
| Is the Total Request amount for multiple years? | Not applicable. |
| Additional information or comments. | Not applicable. |
| Provide the amount of any indirect costs. | Not applicable. |
| Any indirect costs funded with other MOF? | Not applicable. |
| Objectives and indicators in the Operational Plan. | Through administrative activity, Acadiana Area Human Services District will provide for the management and operational activities of services for addictive disorders, developmental disabilities and behavioral health. |
| Additional information or comments. | Not applicable. |

Form 45467 — 325 - SG-ODR OFFICE OF DEBT RECOVERY

| | | g Budget as of 10/ | 02/2025 | FY2026-2027 Total Request | | FY2027-2028 Projected | | | |
|----------------------------|-----------------------|--------------------|------------|---------------------------|---------------|-----------------------|-----------------------|---------------|------------|
| Expenditures | Means of Financing | In-Kind Match | Cash Match | Means of Financing | In-Kind Match | Cash Match | Means of Financing | In-Kind Match | Cash Match |
| Salaries | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Other Compensation | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Related Benefits | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| TOTAL PERSONAL SERVICES | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Travel | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Operating Services | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Supplies | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| TOTAL OPERATING EXPENSES | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| PROFESSIONAL SERVICES | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Other Charges | 30,000 | _ | _ | 30,000 | _ | _ | 30,000 | _ | _ |
| Debt Service | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Interagency Transfers | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| TOTAL OTHER CHARGES | \$30,000 | _ | _ | \$30,000 | _ | _ | \$30,000 | _ | _ |
| Acquisitions | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| Major Repairs | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| TOTAL ACQ. & MAJOR REPAIRS | _ | _ | _ | _ | _ | _ | _ | _ | _ |
| TOTAL EXPENDITURES | \$30,000 | _ | _ | \$30,000 | _ | _ | \$30,000 | _ | _ |

Form 45467 — 325 - SG-ODR OFFICE OF DEBT RECOVERY

| Question | Narrative Response |
|--|--|
| State the purpose, source and legal citation. | These funds are revenues received from the Office of Debt Recovery. |
| Agency discretion or Federal requirement? | Agency discretion. |
| Describe any budgetary peculiarities. | None. |
| Is the Total Request amount for multiple years? | Not applicable. |
| Additional information or comments. | Not applicable. |
| Provide the amount of any indirect costs. | Not applicable. |
| Any indirect costs funded with other MOF? | Not applicable. |
| Objectives and indicators in the Operational Plan. | Through administrative activity, Acadiana Area Human Services District will provide for the management and operational activities of services for addictive disorders, developmental disabilities and behavioral health. |
| Additional information or comments. | Not applicable. |

Form 45468 — 325 - SG-URINE DRUG SCREENS

| | Existing Operatin | g Budget as of 10, | /02/2025 | FY2026-2027 Total Request | | | FY2027-2028 Projected | | | |
|----------------------------|-----------------------|--------------------|------------|---------------------------|---------------|------------|-----------------------|---------------|------------|--|
| Expenditures | Means of Financing | In-Kind Match | Cash Match | Means of Financing | In-Kind Match | Cash Match | Means of Financing | In-Kind Match | Cash Match | |
| Salaries | _ | _ | _ | _ | _ | _ | _ | _ | _ | |
| Other Compensation | _ | _ | _ | _ | _ | _ | _ | _ | _ | |
| Related Benefits | _ | _ | _ | _ | _ | _ | _ | _ | _ | |
| TOTAL PERSONAL SERVICES | _ | _ | _ | _ | _ | _ | _ | _ | _ | |
| Travel | _ | _ | _ | _ | _ | _ | _ | _ | _ | |
| Operating Services | _ | _ | _ | _ | _ | _ | _ | _ | _ | |
| Supplies | _ | _ | _ | _ | _ | _ | _ | _ | _ | |
| TOTAL OPERATING EXPENSES | _ | _ | _ | _ | _ | _ | _ | _ | _ | |
| PROFESSIONAL SERVICES | _ | _ | _ | _ | _ | _ | _ | _ | _ | |
| Other Charges | _ | _ | _ | _ | _ | _ | _ | _ | _ | |
| Debt Service | _ | _ | _ | _ | _ | _ | _ | _ | _ | |
| Interagency Transfers | _ | _ | _ | _ | _ | _ | _ | _ | _ | |
| TOTAL OTHER CHARGES | _ | _ | _ | _ | _ | _ | _ | _ | _ | |
| Acquisitions | _ | _ | _ | _ | _ | _ | _ | _ | _ | |
| Major Repairs | _ | _ | _ | _ | _ | _ | _ | _ | _ | |
| TOTAL ACQ. & MAJOR REPAIRS | _ | _ | _ | _ | _ | _ | _ | _ | _ | |
| TOTAL EXPENDITURES | _ | _ | _ | _ | _ | _ | _ | _ | _ | |

Form 45468 — 325 - SG-URINE DRUG SCREENS

| Question | Narrative Response |
|--|--|
| State the purpose, source and legal citation. | Act 17 of the 1996 Legislative Session authorized Office of Addictive Disorders to assess and collect a co-pay for each urine screen administrated. |
| Agency discretion or Federal requirement? | Agency discretion. |
| Describe any budgetary peculiarities. | None. |
| Is the Total Request amount for multiple years? | Not applicable. |
| Additional information or comments. | Not applicable. |
| Provide the amount of any indirect costs. | Not applicable. |
| Any indirect costs funded with other MOF? | Not applicable. |
| Objectives and indicators in the Operational Plan. | Through administrative activity, Acadiana Area Human Services District will provide for the management and operational activities of services for addictive disorders, developmental disabilities and behavioral health. |
| Additional information or comments. | Not applicable. |

Expenditures by Means of Financing Existing Operating Budget

EXPENDITURES BY MEANS OF FINANCING

Existing Operating Budget

| Expenditures | Used as a Cash Match | Total Means of Financing By | Total State General | Interagency Transfers Form ID 45236 LDH-0BH | Interagency Transfers Form ID 45245 MEDICAID | Interagency Transfers Form ID 45256 ACT 421 TEFRA |
|----------------------------|------------------------|-----------------------------|---------------------|---|--|---|
| Salaries | useu as a Casii Mattii | Expenditure | Fund | LVN-VDN | MEDICAID | ACI 421 IEFRA |
| | _ | _ | _ | _ | _ | _ |
| Other Compensation | _ | _ | _ | _ | _ | _ |
| Related Benefits | _ | _ | _ | _ | _ | _ |
| TOTAL PERSONAL SERVICES | _ | _ | _ | _ | - | _ |
| Travel | _ | _ | _ | _ | _ | _ |
| Operating Services | _ | 286 | 286 | _ | _ | _ |
| Supplies | _ | 176,100 | 176,100 | _ | _ | _ |
| TOTAL OPERATING EXPENSES | _ | \$176,386 | \$176,386 | _ | _ | _ |
| PROFESSIONAL SERVICES | _ | _ | _ | _ | _ | _ |
| Other Charges | _ | 21,989,736 | 14,345,626 | 4,967,914 | 85,000 | 35,000 |
| Debt Service | _ | _ | _ | _ | _ | _ |
| Interagency Transfers | _ | 568,804 | 568,804 | _ | _ | _ |
| TOTAL OTHER CHARGES | _ | \$22,558,540 | \$14,914,430 | \$4,967,914 | \$85,000 | \$35,000 |
| Acquisitions | _ | _ | _ | _ | _ | _ |
| Major Repairs | _ | _ | _ | _ | _ | _ |
| TOTAL ACQ. & MAJOR REPAIRS | _ | _ | _ | _ | _ | _ |
| TOTAL EXPENDITURES | _ | \$22,734,926 | \$15,090,816 | \$4,967,914 | \$85,000 | \$35,000 |

Expenditures by Means of Financing Existing Operating Budget

| Expenditures | Interagency Transfers Form ID 45844 LDH-MVA | Fees & Self-generated Form ID 45182 INEL PATIENT FEES | Fees & Self-generated Form ID 45246 MEDICARE | Fees & Self-generated Form ID 45247 MEDICAID | Fees & Self-generated Form ID 45249 INSURANCE REC | Fees & Self-generated Form ID 45251 MISC SELF-GEN REVENUE |
|----------------------------|---|---|--|--|---|--|
| Salaries | _ | _ | _ | _ | _ | _ |
| Other Compensation | _ | _ | _ | _ | _ | _ |
| Related Benefits | _ | _ | _ | _ | _ | _ |
| TOTAL PERSONAL SERVICES | _ | _ | _ | _ | _ | _ |
| Travel | _ | _ | _ | _ | _ | _ |
| Operating Services | _ | _ | _ | _ | _ | _ |
| Supplies | _ | _ | - | _ | _ | _ |
| TOTAL OPERATING EXPENSES | _ | _ | _ | _ | _ | _ |
| PROFESSIONAL SERVICES | _ | _ | _ | _ | _ | _ |
| Other Charges | 20,000 | 30,000 | 125,000 | 1,181,196 | 128,000 | 42,000 |
| Debt Service | _ | _ | _ | _ | _ | _ |
| Interagency Transfers | _ | _ | _ | _ | _ | _ |
| TOTAL OTHER CHARGES | \$20,000 | \$30,000 | \$125,000 | \$1,181,196 | \$128,000 | \$42,000 |
| Acquisitions | _ | _ | _ | _ | _ | _ |
| Major Repairs | _ | _ | _ | _ | _ | _ |
| TOTAL ACQ. & MAJOR REPAIRS | _ | _ | _ | _ | _ | _ |
| TOTAL EXPENDITURES | \$20,000 | \$30,000 | \$125,000 | \$1,181,196 | \$128,000 | \$42,000 |

Expenditures by Means of Financing Existing Operating Budget

| Expenditures | Fees & Self-generated Form ID 45467 ODR - DEBT RECOV | Federal Funds Form ID 45660 FEDERAL |
|----------------------------|--|---|
| Salaries | _ | _ |
| Other Compensation | _ | _ |
| Related Benefits | _ | _ |
| TOTAL PERSONAL SERVICES | _ | _ |
| Travel | _ | _ |
| Operating Services | _ | _ |
| Supplies | _ | _ |
| TOTAL OPERATING EXPENSES | _ | _ |
| PROFESSIONAL SERVICES | _ | _ |
| Other Charges | 30,000 | 1,000,000 |
| Debt Service | _ | _ |
| Interagency Transfers | _ | _ |
| TOTAL OTHER CHARGES | \$30,000 | \$1,000,000 |
| Acquisitions | _ | _ |
| Major Repairs | _ | _ |
| TOTAL ACQ. & MAJOR REPAIRS | _ | _ |
| TOTAL EXPENDITURES | \$30,000 | \$1,000,000 |

Expenditures by Means of Financing Total Request

Total Request

| Expenditures | Used as a Cash Match | Total Means of Financing By Expenditure | Total State General Fund | Interagency Transfers Form ID 45236 LDH-0BH | Interagency Transfers Form ID 45245 MEDICAID | Interagency Transfers Form ID 45256 ACT 421 TEFRA |
|----------------------------|----------------------|---|-----------------------------|---|--|---|
| Salaries | — | — | | | —————————————————————————————————————— | — — — |
| Other Compensation | _ | _ | <u>—</u> | _ | _ | _ |
| Related Benefits | _ | _ | _ | _ | _ | _ |
| TOTAL PERSONAL SERVICES | _ | _ | _ | _ | _ | _ |
| Travel | _ | _ | _ | _ | _ | _ |
| Operating Services | _ | 293 | 293 | _ | _ | _ |
| Supplies | _ | 180,150 | 180,150 | _ | _ | _ |
| TOTAL OPERATING EXPENSES | _ | \$180,443 | \$180,443 | _ | _ | _ |
| PROFESSIONAL SERVICES | _ | _ | _ | _ | _ | _ |
| Other Charges | _ | 22,579,678 | 14,935,568 | 4,947,914 | 85,000 | 50,000 |
| Debt Service | _ | _ | _ | _ | _ | _ |
| Interagency Transfers | _ | 568,804 | 568,804 | _ | _ | _ |
| TOTAL OTHER CHARGES | _ | \$23,148,482 | \$15,504,372 | \$4,947,914 | \$85,000 | \$50,000 |
| Acquisitions | _ | _ | _ | _ | _ | _ |
| Major Repairs | _ | _ | _ | _ | _ | _ |
| TOTAL ACQ. & MAJOR REPAIRS | _ | _ | _ | _ | _ | _ |
| TOTAL EXPENDITURES | _ | \$23,328,925 | \$15,684,815 | \$4,947,914 | \$85,000 | \$50,000 |

Expenditures by Means of Financing Total Request

| Expenditures | Interagency Transfers Form ID 45844 LDH-MVA | Federal Funds Form ID 45660 FEDERAL | Fees & Self-generated Form ID 45182 INEL PATIENT FEES | Fees & Self-generated Form ID 45246 MEDICARE | Fees & Self-generated Form ID 45247 MEDICAID | Fees & Self-generated Form ID 45249 INSURANCE REC |
|----------------------------|---|---|---|--|--|---|
| Salaries | | | | | | |
| Other Compensation | _ | _ | _ | _ | _ | _ |
| Related Benefits | _ | _ | _ | _ | _ | _ |
| TOTAL PERSONAL SERVICES | _ | _ | _ | _ | _ | _ |
| Travel | _ | _ | _ | _ | _ | _ |
| Operating Services | _ | _ | _ | _ | _ | _ |
| Supplies | _ | _ | _ | _ | _ | _ |
| TOTAL OPERATING EXPENSES | _ | _ | _ | _ | _ | _ |
| PROFESSIONAL SERVICES | _ | _ | _ | _ | _ | _ |
| Other Charges | 25,000 | 1,000,000 | 30,000 | 125,000 | 1,181,196 | 128,000 |
| Debt Service | _ | _ | _ | _ | _ | _ |
| Interagency Transfers | _ | _ | _ | _ | _ | _ |
| TOTAL OTHER CHARGES | \$25,000 | \$1,000,000 | \$30,000 | \$125,000 | \$1,181,196 | \$128,000 |
| Acquisitions | _ | _ | _ | _ | _ | _ |
| Major Repairs | _ | _ | _ | _ | _ | _ |
| TOTAL ACQ. & MAJOR REPAIRS | _ | _ | - | _ | _ | _ |
| TOTAL EXPENDITURES | \$25,000 | \$1,000,000 | \$30,000 | \$125,000 | \$1,181,196 | \$128,000 |

Expenditures by Means of Financing Total Request

| Expenditures | Fees & Self-generated Form ID 45251 MISC SELF-GEN REVENUE | Fees & Self-generated Form ID 45467 ODR - DEBT RECOV |
|----------------------------|--|--|
| Salaries | _ | _ |
| Other Compensation | _ | _ |
| Related Benefits | _ | _ |
| TOTAL PERSONAL SERVICES | _ | _ |
| Travel | _ | _ |
| Operating Services | _ | _ |
| Supplies | _ | _ |
| TOTAL OPERATING EXPENSES | _ | _ |
| PROFESSIONAL SERVICES | _ | _ |
| Other Charges | 42,000 | 30,000 |
| Debt Service | _ | _ |
| Interagency Transfers | _ | _ |
| TOTAL OTHER CHARGES | \$42,000 | \$30,000 |
| Acquisitions | _ | _ |
| Major Repairs | _ | _ |
| TOTAL ACQ. & MAJOR REPAIRS | _ | _ |
| TOTAL EXPENDITURES | \$42,000 | \$30,000 |

Revenue Collections/Income Interagency Transfers

REVENUE COLLECTIONS/INCOME

Interagency Transfers

003 - Interagency Transfers

| Source | Commitment Item | Commitment Item Name | FY2024-2025 Actuals | FY-2026 Estimate | FY2026-2027 Projected | Over/Under Current Year Estimate |
|--|--------------------|----------------------|------------------------|---------------------|--------------------------|-------------------------------------|
| SOURCE | | | | | | |
| LDH-OBH | 4710059 | MR-FROM STATE AGENCY | 2,455,270 | 4,947,914 | 4,947,914 | _ |
| MEDICAID | 4710059 | MR-FROM STATE AGENCY | _ | 85,000 | 85,000 | _ |
| ACT 421 TEFRA | 4710059 | MR-FROM STATE AGENCY | 49,441 | 50,000 | 50,000 | _ |
| LDH-MVA | 4710059 | MR-FROM STATE AGENCY | 12,511 | 25,000 | 25,000 | _ |
| Total Collections/Income | | | \$2,517,222 | \$5,107,914 | \$5,107,914 | _ |
| ТҮРЕ | | | | | | |
| Expenditures Source of Funding F | orm (BR-6) | | 2,499,387 | 5,107,914 | 5,107,914 | _ |
| Transfer | | | 17,835 | _ | _ | _ |
| Total Expenditures, Transfers and C | arry Forwards to | Next FY | \$2,517,222 | \$5,107,914 | \$5,107,914 | _ |
| Difference in Total Collections/Income and Total Expenditures, Transfers and Carry Forwards to Next FY | | _ | _ | _ | _ | |

Revenue Collections/Income Fees & Self-generated

Fees & Self-generated

002 - Fees & Self-generated Revenues

| Source | Commitment Item | Commitment Item Name | FY2024-2025 Actuals | FY-2026 Estimate | FY2026-2027 Projected | Over/Under Current Year Estimate |
|--|---|----------------------|------------------------|---------------------|--------------------------|-------------------------------------|
| SOURCE | | | | | | |
| INEL PATIENT FEES | 4550032 | FEES-INELIG PATIENT | 56,486 | 30,000 | 30,000 | _ |
| MEDICARE | 4650010 | SALE NON ST-SERVICES | 108,792 | 125,000 | 125,000 | _ |
| MEDICAID | 4650010 | SALE NON ST-SERVICES | 1,196,045 | 1,106,196 | 1,106,196 | _ |
| MEDICAID | 4650010 | SALE NON ST-SERVICES | 96,558 | 75,000 | 75,000 | _ |
| INSURANCE REC | 4650024 | SALE NS-COMM INS | 456,307 | 128,000 | 128,000 | _ |
| MISC SELF-GEN REVENUE | 4650010 | SALE NON ST-SERVICES | 57,406 | 42,000 | 42,000 | _ |
| ODR - DEBT RECOV | 4650010 | SALE NON ST-SERVICES | 56,273 | 30,000 | 30,000 | _ |
| DRUG SCREENS | 4650049 | SALE NS-URINE COPAY | 388 | _ | _ | _ |
| Total Collections/Income | | | \$2,028,255 | \$1,536,196 | \$1,536,196 | _ |
| ТҮРЕ | | | | | | |
| Expenditures Source of Funding F | orm (BR-6) | | 1,423,294 | 1,536,196 | 1,536,196 | _ |
| Transfer | | | 604,961 | _ | _ | _ |
| Total Expenditures, Transfers and Ca | Total Expenditures, Transfers and Carry Forwards to Next FY | | \$2,028,255 | \$1,536,196 | \$1,536,196 | _ |
| Difference in Total Collections/Income and Total Expenditures, Transfers and Carry Forwards to Next FY | | _ | | _ | _ | |

Revenue Collections/Income Federal Funds

Federal Funds

006 - Federal Funds

| Source | Commitment Item | Commitment Item Name | FY2024-2025 Actuals | FY-2026 Estimate | FY2026-2027 Projected | Over/Under Current Year Estimate |
|--|--------------------|----------------------|------------------------|---------------------|--------------------------|-------------------------------------|
| SOURCE | | | | | | |
| FEDERAL | 4060035 | FR-OTHER | 711,091 | 1,000,000 | 1,000,000 | _ |
| Total Collections/Income | | | \$711,091 | \$1,000,000 | \$1,000,000 | _ |
| ТҮРЕ | | | | | | |
| Expenditures Source of Funding F | orm (BR-6) | | 711,091 | 1,000,000 | 1,000,000 | _ |
| Total Expenditures, Transfers and Ca | arry Forwards to | Next FY | \$711,091 | \$1,000,000 | \$1,000,000 | _ |
| Difference in Total Collections/Income and Total Expenditures, Transfers and Carry Forwards to Next FY | | _ | _ | _ | _ | |

Justification of Differences

Form 46217 — 325 - IAT LDH-0BH

| Question | Narrative Response |
|--|--------------------|
| Explain any transfers to other appropriations. | Not applicable. |
| Break out INA by Source of Funding. | Not applicable. |
| Additional information or comments. | Not applicable. |

Form 46242 — 325 - SG-INELIGIBLE PATIENT FEES

| Question | Narrative Response |
|--|--------------------|
| Explain any transfers to other appropriations. | Not applicable. |
| Break out INA by Source of Funding. | Not applicable. |
| Additional information or comments. | Not applicable. |

Form 46249 — 325 - IAT MOLINA

| Question | Narrative Response |
|--|--------------------|
| Explain any transfers to other appropriations. | Not applicable. |
| Break out INA by Source of Funding. | Not applicable. |
| Additional information or comments. | Not applicable. |

Form 46250 — 325 - SG-MEDICARE

| Question | Narrative Response |
|--|--------------------|
| Explain any transfers to other appropriations. | Not applicable. |
| Break out INA by Source of Funding. | Not applicable. |
| Additional information or comments. | Not applicable. |

Form 46264 — 325 - SG-MEDICAID T19 (MCO)

| Question | Narrative Response |
|--|--------------------|
| Explain any transfers to other appropriations. | Not applicable. |
| Break out INA by Source of Funding. | Not applicable. |
| Additional information or comments. | Not applicable. |

Form 46265 — 325 - MEDICAID T19 (MCO) ZBA

| Question | Narrative Response |
|--|--------------------|
| Explain any transfers to other appropriations. | Not applicable. |
| Break out INA by Source of Funding. | Not applicable. |
| Additional information or comments. | Not applicable. |

Form 46266 — 325 - SG-PRIVATE INSURANCE

| Question | Narrative Response |
|--|--------------------|
| Explain any transfers to other appropriations. | Not applicable. |
| Break out INA by Source of Funding. | Not applicable. |
| Additional information or comments. | Not applicable. |

Form 46267 — 325 - SG - MISC/DWI/MAC FEE/PROBATION & PAROLE/LSART

| Question | Narrative Response |
|--|--------------------|
| Explain any transfers to other appropriations. | Not applicable. |
| Break out INA by Source of Funding. | Not applicable. |
| Additional information or comments. | Not applicable. |

Form 46268 — 325 - SG - ODR

| Question | Narrative Response |
|--|--------------------|
| Explain any transfers to other appropriations. | Not applicable. |
| Break out INA by Source of Funding. | Not applicable. |
| Additional information or comments. | Not applicable. |

Form 46269 — 325 - SG - URINE DRUG SCREENS

| Question | Narrative Response |
|--|--------------------|
| Explain any transfers to other appropriations. | Not applicable. |
| Break out INA by Source of Funding. | Not applicable. |
| Additional information or comments. | Not applicable. |

Form 46270 — 325 - IAT ACT 421 TEFRA

| Question | Narrative Response |
|--|--------------------|
| Explain any transfers to other appropriations. | Not applicable. |
| Break out INA by Source of Funding. | Not applicable. |
| Additional information or comments. | Not applicable. |

Form 46600 — 325 - FED-CCBHC GRANT

| Question | Narrative Response |
|--|--------------------|
| Explain any transfers to other appropriations. | Not applicable. |
| Break out INA by Source of Funding. | Not applicable. |
| Additional information or comments. | Not applicable. |

Form 46679 — 325 - IAT PASRR

| Question | Narrative Response |
|--|--------------------|
| Explain any transfers to other appropriations. | Not applicable. |
| Break out INA by Source of Funding. | Not applicable. |
| Additional information or comments. | Not applicable. |

SCHEDULE OF REQUESTED EXPENDITURES

3251 - Acadiana Area Human Services District

Operating Services

| FY2026-2027 Request | Description |
|------------------------|--------------------------|
| 293 | FuelTrac Expenses |
| \$293 | Total Operating Services |

Supplies

| FY2026-2027 Request | Description |
|------------------------|--|
| 180,150 | Supplies for office, computer, building, medical, janitorial, and vehicles |
| \$180,150 | Total Supplies |

Other Charges

| FY2026-2027 Request | Means of Financing | Description |
|------------------------|--------------------------------|---|
| 1,536,196 | Fees & Self-generated Revenues | |
| \$1,536,196 | | Behavioral Health/DD contracts for consulting, interpretative services, nurse practitioner, physicians, psychiatric services and other professional contracts |
| 2,466,929 | State General Fund | |
| \$2,466,929 | | Other Operating Services, Other Public Assistance, Miscellaneous Professional Services |
| 1,000,000 | Federal Funds | |
| 5,107,914 | Interagency Transfers | |
| \$6,107,914 | | Other Operating services, professional services, and personnel services/related benefits |
| 12,468,639 | State General Fund | |
| \$12,468,639 | | Personnel Services and Related Benefits |
| \$22,579,678 | Total Other Charges | |

Interagency Transfers

| FY2026-2027 Request | Means of Financing | Receiving Agency | Description |
|------------------------|-----------------------------|-------------------------------|--------------------|
| 48,899 | State General Fund | | |
| \$48,899 | | STATE CIVIL SERVICE | IAT-CIVIL SERVICE |
| 39,813 | State General Fund | | |
| \$39,813 | | LEGISLATIVE AUDITOR | IAT-LEG. AUDITOR |
| 184,793 | State General Fund | | |
| \$184,793 | | OFFICE OF RISK MANAGEMENT | IAT-ORM INSURANCE |
| 6,656 | State General Fund | | |
| \$6,656 | | UNIFORM PAYROLL OFFICE | IAT-OSUP |
| 5,584 | State General Fund | | |
| \$5,584 | | DOA-OFFICE OF ST PROCUREMENT | IAT-ST PROCUREMENT |
| 170,794 | State General Fund | | |
| \$170,794 | | DOA-OFFICE OF TECHNOLOGY SVCS | IAT-TECH SVCS |
| 112,265 | State General Fund | | |
| \$112,265 | | OFF. TELECOMMUNICATIONS MGMT | IAT-TELEPHONE |
| \$568,804 | Total Interagency Transfers | | |



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Continuation Budget Adjustments

Agency Summary Statement Total Agency

AGENCY SUMMARY STATEMENT

Total Agency

Means of Financing

| | Existing Operating Budget | | | | | | FY2026-2027 Requested |
|-----------------------------|------------------------------|---------------|-----------|------------|----------|--------------|--------------------------|
| Description | as of 10/02/2025 | Non-Recurring | Inflation | Compulsory | Workload | Other | Continuation Level |
| STATE GENERAL FUND (Direct) | 15,090,816 | _ | 4,057 | 488,242 | <u> </u> | 101,700 | 15,684,815 |
| STATE GENERAL FUND BY: | _ | _ | _ | _ | _ | _ | _ |
| INTERAGENCY TRANSFERS | 5,107,914 | _ | _ | _ | _ | _ | 5,107,914 |
| FEES & SELF-GENERATED | 1,536,196 | _ | _ | _ | _ | _ | 1,536,196 |
| STATUTORY DEDICATIONS | _ | _ | _ | _ | _ | _ | _ |
| FEDERAL FUNDS | 1,000,000 | _ | _ | _ | _ | _ | 1,000,000 |
| TOTAL MEANS OF FINANCING | \$22,734,926 | _ | \$4,057 | \$488,242 | _ | \$101,700 | \$23,328,925 |

Fees and Self-Generated

| Description | Existing Operating Budget as of 10/02/2025 | Non-Recurring | Inflation | Compulsory | Workload | Other | FY2026-2027 Requested Continuation Level |
|--------------------------------|--|---------------|--------------|------------|----------|-------|--|
| Fees & Self-generated Revenues | 1,536,196 | _ | _ | _ | _ | _ | 1,536,196 |
| Total: | \$1,536,196 | _ | _ | _ | _ | _ | \$1,536,196 |

Statutory Dedications

| Description | Existing Operating Budget as of 10/02/2025 | Non-Recurring | Inflation | Compulsory | Workload | Other | FY2026-2027 Requested Continuation Level |
|-------------|--|---------------|-----------|------------|----------|-------|--|
| Total: | _ | _ | _ | _ | _ | _ | _ |

Expenditures and Positions

| Description | Existing Operating Budget as of 10/02/2025 | Non-Recurring | Inflation | Compulsory | Workload | Other | FY2026-2027 Requested Continuation Level |
|--|--|---------------|--------------|------------|----------|-----------|--|
| Salaries | _ | _ | _ | _ | _ | _ | _ |
| Other Compensation | _ | _ | _ | _ | _ | _ | _ |
| Related Benefits | _ | _ | _ | _ | _ | _ | _ |
| TOTAL PERSONAL SERVICES | _ | _ | _ | _ | _ | _ | _ |
| Travel | _ | _ | _ | _ | _ | _ | _ |
| Operating Services | 286 | _ | 7 | _ | _ | _ | 293 |
| Supplies | 176,100 | _ | 4,050 | _ | _ | _ | 180,150 |
| TOTAL OPERATING EXPENSES | \$176,386 | _ | \$4,057 | _ | _ | _ | \$180,443 |
| PROFESSIONAL SERVICES | _ | _ | _ | _ | _ | _ | _ |
| Other Charges | 21,989,736 | _ | _ | 488,242 | _ | 101,700 | 22,579,678 |
| Debt Service | _ | _ | _ | _ | _ | _ | _ |
| Interagency Transfers | 568,804 | _ | _ | _ | _ | _ | 568,804 |
| TOTAL OTHER CHARGES | \$22,558,540 | _ | _ | \$488,242 | _ | \$101,700 | \$23,148,482 |
| Acquisitions | _ | _ | _ | _ | _ | _ | _ |
| Major Repairs | _ | _ | _ | _ | _ | _ | _ |
| TOTAL ACQ. & MAJOR REPAIRS | _ | _ | _ | _ | _ | _ | _ |
| TOTAL EXPENDITURES | \$22,734,926 | _ | \$4,057 | \$488,242 | _ | \$101,700 | \$23,328,925 |
| Classified | <u> </u> | _ | _ | _ | _ | _ | _ |
| Unclassified | _ | _ | _ | _ | _ | _ | _ |
| TOTAL AUTHORIZED T.O. POSITIONS | _ | _ | _ | _ | _ | _ | _ |
| TOTAL AUTHORIZED OTHER CHARGES POSITIONS | 119 | _ | _ | _ | _ | 9 | 128 |
| TOTAL NON-T.O. FTE POSITIONS | _ | _ | _ | _ | _ | _ | _ |

CONTINUATION BUDGET ADJUSTMENTS - SUMMARIZED

Form 48211 — FY26-27 Standard Inflation Adjustment Means of Financing

| | Amount |
|-----------------------------|--------------|
| STATE GENERAL FUND (Direct) | 4,057 |
| STATE GENERAL FUND BY: | _ |
| INTERAGENCY TRANSFERS | _ |
| FEES & SELF-GENERATED | _ |
| STATUTORY DEDICATIONS | _ |
| FEDERAL FUNDS | _ |
| TOTAL MEANS OF FINANCING | \$4,057 |

Expenditures

| | Amount |
|----------------------------|---------|
| Salaries | _ |
| Other Compensation | _ |
| Related Benefits | _ |
| TOTAL PERSONAL SERVICES | _ |
| Travel | _ |
| Operating Services | 7 |
| Supplies | 4,050 |
| TOTAL OPERATING EXPENSES | \$4,057 |
| PROFESSIONAL SERVICES | _ |
| Other Charges | _ |
| Debt Service | _ |
| Interagency Transfers | _ |
| TOTAL OTHER CHARGES | _ |
| Acquisitions | _ |
| Major Repairs | _ |
| TOTAL ACQ. & MAJOR REPAIRS | _ |
| TOTAL EXPENDITURES | \$4,057 |

| | FTE |
|--|-----|
| Classified | _ |
| Unclassified | _ |
| TOTAL AUTHORIZED T.O. POSITIONS | _ |
| TOTAL AUTHORIZED OTHER CHARGES POSITIONS | _ |
| TOTAL NON-T.O. FTE POSITIONS | _ |

Form 48076 — 325 - COMPULSORY/SALARIES Means of Financing

| | Amount |
|-----------------------------|-----------|
| STATE GENERAL FUND (Direct) | 424,786 |
| STATE GENERAL FUND BY: | _ |
| INTERAGENCY TRANSFERS | _ |
| FEES & SELF-GENERATED | _ |
| STATUTORY DEDICATIONS | _ |
| FEDERAL FUNDS | _ |
| TOTAL MEANS OF FINANCING | \$424,786 |

Expenditures

| | Amount |
|----------------------------|-----------|
| Salaries | _ |
| Other Compensation | _ |
| Related Benefits | _ |
| TOTAL PERSONAL SERVICES | _ |
| Travel | _ |
| Operating Services | _ |
| Supplies | _ |
| TOTAL OPERATING EXPENSES | _ |
| PROFESSIONAL SERVICES | _ |
| Other Charges | 424,786 |
| Debt Service | _ |
| Interagency Transfers | _ |
| TOTAL OTHER CHARGES | \$424,786 |
| Acquisitions | _ |
| Major Repairs | _ |
| TOTAL ACQ. & MAJOR REPAIRS | _ |
| TOTAL EXPENDITURES | \$424,786 |

| | FTE |
|--|-----|
| Classified | _ |
| Unclassified | _ |
| TOTAL AUTHORIZED T.O. POSITIONS | _ |
| TOTAL AUTHORIZED OTHER CHARGES POSITIONS | _ |
| TOTAL NON-T.O. FTE POSITIONS | _ |

Form 48077 — 325 - RETIREE GROUP INSURANCE ADJUSTMENT Means of Financing

| | Amount |
|-----------------------------|----------|
| STATE GENERAL FUND (Direct) | 63,456 |
| STATE GENERAL FUND BY: | _ |
| INTERAGENCY TRANSFERS | _ |
| FEES & SELF-GENERATED | _ |
| STATUTORY DEDICATIONS | _ |
| FEDERAL FUNDS | _ |
| TOTAL MEANS OF FINANCING | \$63,456 |

Expenditures

| | Amount |
|----------------------------|--------------|
| Salaries | _ |
| Other Compensation | _ |
| Related Benefits | _ |
| TOTAL PERSONAL SERVICES | _ |
| Travel | _ |
| Operating Services | _ |
| Supplies | _ |
| TOTAL OPERATING EXPENSES | _ |
| PROFESSIONAL SERVICES | _ |
| Other Charges | 63,456 |
| Debt Service | _ |
| Interagency Transfers | - |
| TOTAL OTHER CHARGES | \$63,456 |
| Acquisitions | _ |
| Major Repairs | _ |
| TOTAL ACQ. & MAJOR REPAIRS | _ |
| TOTAL EXPENDITURES | \$63,456 |

| | FTE |
|--|-----|
| Classified | _ |
| Unclassified | _ |
| TOTAL AUTHORIZED T.O. POSITIONS | _ |
| TOTAL AUTHORIZED OTHER CHARGES POSITIONS | _ |
| TOTAL NON-T.O. FTE POSITIONS | _ |

Form 49042 — 325 - CCBHC JA to TO Positions Means of Financing

| | Amount |
|-----------------------------|--------|
| STATE GENERAL FUND (Direct) | _ |
| STATE GENERAL FUND BY: | _ |
| INTERAGENCY TRANSFERS | _ |
| FEES & SELF-GENERATED | _ |
| STATUTORY DEDICATIONS | _ |
| FEDERAL FUNDS | _ |
| TOTAL MEANS OF FINANCING | _ |

Expenditures

| | Amount |
|----------------------------|--------|
| Salaries | _ |
| Other Compensation | _ |
| Related Benefits | _ |
| TOTAL PERSONAL SERVICES | _ |
| Travel | _ |
| Operating Services | _ |
| Supplies | _ |
| TOTAL OPERATING EXPENSES | _ |
| PROFESSIONAL SERVICES | _ |
| Other Charges | _ |
| Debt Service | _ |
| Interagency Transfers | _ |
| TOTAL OTHER CHARGES | _ |
| Acquisitions | _ |
| Major Repairs | _ |
| TOTAL ACQ. & MAJOR REPAIRS | _ |
| TOTAL EXPENDITURES | _ |

| | FTE |
|--|-----|
| Classified | _ |
| Unclassified | _ |
| TOTAL AUTHORIZED T.O. POSITIONS | _ |
| TOTAL AUTHORIZED OTHER CHARGES POSITIONS | 8 |
| TOTAL NON-T.O. FTE POSITIONS | _ |

Form 49066 — 325 - MSC 2 Position Means of Financing

| | Amount |
|-----------------------------|-----------|
| STATE GENERAL FUND (Direct) | 101,700 |
| STATE GENERAL FUND BY: | |
| INTERAGENCY TRANSFERS | _ |
| FEES & SELF-GENERATED | |
| STATUTORY DEDICATIONS | |
| FEDERAL FUNDS | |
| TOTAL MEANS OF FINANCING | \$101,700 |

Expenditures

| | Amount |
|----------------------------|-----------|
| Salaries | _ |
| Other Compensation | _ |
| Related Benefits | _ |
| TOTAL PERSONAL SERVICES | _ |
| Travel | _ |
| Operating Services | _ |
| Supplies | _ |
| TOTAL OPERATING EXPENSES | _ |
| PROFESSIONAL SERVICES | _ |
| Other Charges | 101,700 |
| Debt Service | _ |
| Interagency Transfers | _ |
| TOTAL OTHER CHARGES | \$101,700 |
| Acquisitions | _ |
| Major Repairs | _ |
| TOTAL ACQ. & MAJOR REPAIRS | _ |
| TOTAL EXPENDITURES | \$101,700 |

| | FTE |
|--|-----|
| Classified | _ |
| Unclassified | _ |
| TOTAL AUTHORIZED T.O. POSITIONS | _ |
| TOTAL AUTHORIZED OTHER CHARGES POSITIONS | 1 |
| TOTAL NON-T.O. FTE POSITIONS | _ |

PROGRAM SUMMARY STATEMENT

3251 - Acadiana Area Human Services District

Means of Financing

| | Existing Operating Budget | | | | | | FY2026-2027 Requested |
|-----------------------------|------------------------------|---------------|-----------|------------|----------|--------------|--------------------------|
| Description | as of 10/02/2025 | Non-Recurring | Inflation | Compulsory | Workload | Other | Continuation Level |
| STATE GENERAL FUND (Direct) | 15,090,816 | _ | 4,057 | 488,242 | <u> </u> | 101,700 | 15,684,815 |
| STATE GENERAL FUND BY: | _ | _ | _ | _ | _ | _ | _ |
| INTERAGENCY TRANSFERS | 5,107,914 | _ | _ | _ | _ | _ | 5,107,914 |
| FEES & SELF-GENERATED | 1,536,196 | _ | _ | _ | _ | _ | 1,536,196 |
| STATUTORY DEDICATIONS | _ | _ | _ | _ | _ | _ | _ |
| FEDERAL FUNDS | 1,000,000 | _ | _ | _ | _ | _ | 1,000,000 |
| TOTAL MEANS OF FINANCING | \$22,734,926 | _ | \$4,057 | \$488,242 | _ | \$101,700 | \$23,328,925 |

Fees and Self-Generated

| Description | Existing Operating Budget as of 10/02/2025 | Non-Recurring | Inflation | Compulsory | Workload | Other | FY2026-2027 Requested Continuation Level |
|--------------------------------|--|---------------|-----------|--------------|--------------|--------------|--|
| Fees & Self-generated Revenues | 1,536,196 | _ | _ | _ | _ | _ | 1,536,196 |
| Total: | \$1,536,196 | _ | _ | - | _ | - | \$1,536,196 |

Expenditures and Positions

| Description | Existing Operating Budget as of 10/02/2025 | Non-Recurring | Inflation | Compulsory | Workload | Other | FY2026-2027 Requested Continuation Level |
|--|--|---------------|--------------|------------|----------|-----------|--|
| Salaries | _ | _ | _ | _ | _ | _ | _ |
| Other Compensation | _ | _ | _ | _ | _ | _ | _ |
| Related Benefits | _ | _ | _ | _ | _ | _ | _ |
| TOTAL PERSONAL SERVICES | _ | _ | _ | _ | _ | _ | _ |
| Travel | _ | _ | _ | _ | _ | _ | _ |
| Operating Services | 286 | _ | 7 | _ | _ | _ | 293 |
| Supplies | 176,100 | _ | 4,050 | _ | _ | _ | 180,150 |
| TOTAL OPERATING EXPENSES | \$176,386 | _ | \$4,057 | _ | _ | _ | \$180,443 |
| PROFESSIONAL SERVICES | _ | _ | _ | _ | _ | _ | _ |
| Other Charges | 21,989,736 | _ | _ | 488,242 | _ | 101,700 | 22,579,678 |
| Debt Service | _ | _ | _ | _ | _ | _ | _ |
| Interagency Transfers | 568,804 | _ | _ | _ | _ | _ | 568,804 |
| TOTAL OTHER CHARGES | \$22,558,540 | _ | _ | \$488,242 | _ | \$101,700 | \$23,148,482 |
| Acquisitions | _ | _ | _ | _ | _ | _ | _ |
| Major Repairs | _ | _ | _ | _ | _ | _ | _ |
| TOTAL ACQ. & MAJOR REPAIRS | _ | _ | _ | _ | _ | _ | _ |
| TOTAL EXPENDITURES | \$22,734,926 | _ | \$4,057 | \$488,242 | _ | \$101,700 | \$23,328,925 |
| Classified | <u> </u> | _ | _ | _ | _ | _ | _ |
| Unclassified | _ | _ | _ | _ | _ | _ | _ |
| TOTAL AUTHORIZED T.O. POSITIONS | _ | _ | _ | _ | _ | _ | _ |
| TOTAL AUTHORIZED OTHER CHARGES POSITIONS | 119 | _ | _ | _ | _ | 9 | 128 |
| TOTAL NON-T.O. FTE POSITIONS | _ | _ | _ | _ | _ | _ | _ |

CONTINUATION BUDGET ADJUSTMENTS - BY PROGRAM

Form 48211 — FY26-27 Standard Inflation Adjustment

3251 - Acadiana Area Human Services District

Means of Financing

| | Amount |
|-----------------------------|---------|
| STATE GENERAL FUND (Direct) | 4,057 |
| STATE GENERAL FUND BY: | _ |
| INTERAGENCY TRANSFERS | _ |
| FEES & SELF-GENERATED | _ |
| STATUTORY DEDICATIONS | _ |
| FEDERAL FUNDS | _ |
| TOTAL MEANS OF FINANCING | \$4,057 |

Expenditures

| | Amount |
|----------------------------|---------|
| Salaries | _ |
| Other Compensation | _ |
| Related Benefits | _ |
| TOTAL PERSONAL SERVICES | _ |
| Travel | _ |
| Operating Services | 7 |
| Supplies | 4,050 |
| TOTAL OPERATING EXPENSES | \$4,057 |
| PROFESSIONAL SERVICES | _ |
| Other Charges | _ |
| Debt Service | _ |
| Interagency Transfers | _ |
| TOTAL OTHER CHARGES | _ |
| Acquisitions | _ |
| Major Repairs | _ |
| TOTAL ACQ. & MAJOR REPAIRS | _ |
| TOTAL EXPENDITURES | \$4,057 |

Positions

| | FTE |
|--|-----|
| Classified | _ |
| Unclassified | _ |
| TOTAL AUTHORIZED T.O. POSITIONS | _ |
| TOTAL AUTHORIZED OTHER CHARGES POSITIONS | _ |
| TOTAL NON-T.O. FTE POSITIONS | _ |

Statutory Dedications

| | Amount |
|--------|--------|
| Total: | _ |

Supporting Detail

Means of Financing

| Description | Amount |
|--------------------|---------|
| State General Fund | 4,057 |
| Total: | \$4,057 |

Operating Services

| Commitment item | Name | Amount |
|-----------------|----------------------|--------|
| 5300000 | TOTAL OPERATING SERV | 7 |
| Total: | | \$7 |

Supplies

| Commitment item | Name | Amount |
|-----------------|----------------|---------|
| 5400000 | TOTAL SUPPLIES | 4,050 |
| Total: | | \$4,050 |

Form 48076 — 325 - COMPULSORY/SALARIES

3251 - Acadiana Area Human Services District

MEANS OF FINANCING

| | Amount |
|-----------------------------|-----------|
| STATE GENERAL FUND (Direct) | 424,786 |
| STATE GENERAL FUND BY: | _ |
| INTERAGENCY TRANSFERS | _ |
| FEES & SELF-GENERATED | _ |
| STATUTORY DEDICATIONS | _ |
| FEDERAL FUNDS | _ |
| TOTAL MEANS OF FINANCING | \$424,786 |

EXPENDITURES

| | Amount |
|----------------------------|-----------|
| Salaries | _ |
| Other Compensation | _ |
| Related Benefits | _ |
| TOTAL PERSONAL SERVICES | _ |
| Travel | _ |
| Operating Services | _ |
| Supplies | _ |
| TOTAL OPERATING EXPENSES | _ |
| PROFESSIONAL SERVICES | _ |
| Other Charges | 424,786 |
| Debt Service | _ |
| Interagency Transfers | _ |
| TOTAL OTHER CHARGES | \$424,786 |
| Acquisitions | _ |
| Major Repairs | _ |
| TOTAL ACQ. & MAJOR REPAIRS | _ |
| TOTAL EXPENDITURES | \$424,786 |

| | FTE |
|--|-----|
| Classified | _ |
| Unclassified | _ |
| TOTAL AUTHORIZED T.O. POSITIONS | _ |
| TOTAL AUTHORIZED OTHER CHARGES POSITIONS | _ |
| TOTAL NON-T.O. FTE POSITIONS | _ |

| Question | Narrative Response |
|--|---|
| Explain the need for this request. | This adjustment funds the salaries, wages and related benefits for incumbents and vacancies per the PEP report. |
| Cite performance indicators for the adjustment. | N/A |
| What would the impact be if this is not funded? | N/A |
| Is revenue a fixed amount or can it be adjusted? | N/A |
| Is the expenditure of these revenues restricted? | N/A |
| Additional information or comments. | N/A |

Form 48077 — 325 - RETIREE GROUP INSURANCE ADJUSTMENT

3251 - Acadiana Area Human Services District

MEANS OF FINANCING

| | Amount |
|-----------------------------|----------|
| STATE GENERAL FUND (Direct) | 63,456 |
| STATE GENERAL FUND BY: | _ |
| INTERAGENCY TRANSFERS | _ |
| FEES & SELF-GENERATED | _ |
| STATUTORY DEDICATIONS | _ |
| FEDERAL FUNDS | _ |
| TOTAL MEANS OF FINANCING | \$63,456 |

EXPENDITURES

| | Amount |
|----------------------------|----------|
| Salaries | _ |
| Other Compensation | _ |
| Related Benefits | _ |
| TOTAL PERSONAL SERVICES | _ |
| Travel | _ |
| Operating Services | _ |
| Supplies | _ |
| TOTAL OPERATING EXPENSES | _ |
| PROFESSIONAL SERVICES | _ |
| Other Charges | 63,456 |
| Debt Service | _ |
| Interagency Transfers | _ |
| TOTAL OTHER CHARGES | \$63,456 |
| Acquisitions | _ |
| Major Repairs | _ |
| TOTAL ACQ. & MAJOR REPAIRS | _ |
| TOTAL EXPENDITURES | \$63,456 |

| | FTE |
|--|-----|
| Classified | _ |
| Unclassified | _ |
| TOTAL AUTHORIZED T.O. POSITIONS | _ |
| TOTAL AUTHORIZED OTHER CHARGES POSITIONS | _ |
| TOTAL NON-T.O. FTE POSITIONS | _ |

| Question | Narrative Response |
|---|--|
| Explain the need for this request. This adjustment funds anticipated growth in Retirees group insurance in FY 2027 in accordance with DC | |
| Cite performance indicators for the adjustment. | N/A |
| What would the impact be if this is not funded? | Could not cover additional retirees group insurance. |
| Is revenue a fixed amount or can it be adjusted? | N/A |
| Is the expenditure of these revenues restricted? | N/A |
| Additional information or comments. | N/A |

Form 49042 — 325 - CCBHC JA to TO Positions

3251 - Acadiana Area Human Services District

MEANS OF FINANCING

| | Amount |
|-----------------------------|--------|
| STATE GENERAL FUND (Direct) | _ |
| STATE GENERAL FUND BY: | _ |
| INTERAGENCY TRANSFERS | _ |
| FEES & SELF-GENERATED | _ |
| STATUTORY DEDICATIONS | _ |
| FEDERAL FUNDS | _ |
| TOTAL MEANS OF FINANCING | _ |

EXPENDITURES

| | Amount |
|----------------------------|--------|
| Salaries | _ |
| Other Compensation | _ |
| Related Benefits | _ |
| TOTAL PERSONAL SERVICES | _ |
| Travel | _ |
| Operating Services | _ |
| Supplies | _ |
| TOTAL OPERATING EXPENSES | _ |
| PROFESSIONAL SERVICES | _ |
| Other Charges | _ |
| Debt Service | _ |
| Interagency Transfers | _ |
| TOTAL OTHER CHARGES | _ |
| Acquisitions | _ |
| Major Repairs | _ |
| TOTAL ACQ. & MAJOR REPAIRS | _ |
| TOTAL EXPENDITURES | _ |

| | FTE |
|--|-----|
| Classified | _ |
| Unclassified | _ |
| TOTAL AUTHORIZED T.O. POSITIONS | _ |
| TOTAL AUTHORIZED OTHER CHARGES POSITIONS | 8 |
| TOTAL NON-T.O. FTE POSITIONS | _ |

| Question | Narrative Response |
|--|--|
| Explain the need for this request. | Due to Job Appointments expiring, this request is to convert the existing four Licensed Practical Nurse and four Case Manager job appointments to T.O. positions. These job appointments were initially requested as a part of AAHSDís Certified Community Behavioral Health Clinic (CCBHC) initiative funded by Federal Funds. A Certified Community Behavioral Health Clinic (CCBHC) is a specially designated clinic that provides a comprehensive range of mental health and substance use services. CCBHCs serve anyone who walks through the door, regardless of their diagnosis and insurance status. They must provide nine types of services with an emphasis on providing 24-hour crisis care, evidence-based practices, care coordination with local primary care and hospital partners, and integration with physical health care. CCBHC is an administrative structure utilized to fund clinical programs. Acadiana Area Human Services District was awarded a Certified Community Behavioral Health Clinic- Planning, Development, and Implementation grant in 2022. This federal grant funding has allowed the organization to enhance primary care screenings, targeted case management, and care coordination, which are required services. These eight positions are essential in providing these services. The CCBHC model has been embraced on a national and local basis. The state of Louisiana is currently taking steps to adopt this model as a standard of care for those citizens who have serious mental health and substance use challenges and disorders. These eight positions and the staff that are in them, have tremendously improved AAHSDís outcomes and adherence to the CCBHC requirements. All eight have been thoroughly trained and bring a wealth of knowledge of community resources, care coordination, and nursing care. |
| Cite performance indicators for the adjustment. | N/A |
| What would the impact be if this is not funded? | N/A |
| Is revenue a fixed amount or can it be adjusted? | N/A |
| Is the expenditure of these revenues restricted? | N/A |
| Additional information or comments. | This is a cost neutral request. |

Form 49066 — 325 - MSC 2 Position

3251 - Acadiana Area Human Services District

MEANS OF FINANCING

| | Amount |
|-----------------------------|-----------|
| STATE GENERAL FUND (Direct) | 101,700 |
| STATE GENERAL FUND BY: | _ |
| INTERAGENCY TRANSFERS | _ |
| FEES & SELF-GENERATED | _ |
| STATUTORY DEDICATIONS | _ |
| FEDERAL FUNDS | _ |
| TOTAL MEANS OF FINANCING | \$101,700 |

EXPENDITURES

| | Amount |
|----------------------------|-----------|
| Salaries | _ |
| Other Compensation | _ |
| Related Benefits | _ |
| TOTAL PERSONAL SERVICES | _ |
| Travel | _ |
| Operating Services | _ |
| Supplies | _ |
| TOTAL OPERATING EXPENSES | _ |
| PROFESSIONAL SERVICES | _ |
| Other Charges | 101,700 |
| Debt Service | _ |
| Interagency Transfers | _ |
| TOTAL OTHER CHARGES | \$101,700 |
| Acquisitions | _ |
| Major Repairs | _ |
| TOTAL ACQ. & MAJOR REPAIRS | _ |
| TOTAL EXPENDITURES | \$101,700 |

| | FTE |
|--|-----|
| Classified | _ |
| Unclassified | _ |
| TOTAL AUTHORIZED T.O. POSITIONS | _ |
| TOTAL AUTHORIZED OTHER CHARGES POSITIONS | 1 |
| TOTAL NON-T.O. FTE POSITIONS | _ |

| Question | Narrative Response |
|--|--|
| Explain the need for this request. | This request is for an additional Medical Certification Specialist (MCS) position to alleviate the continuous increase in caseload size. Since 2019 our waiver population has increased from 2,191 to 2,778 (current) with the same amount of MCS. The number of MCS assigned a full caseload has remained at 10 since 2019. Our caseload sizes have increased from 219/caseload in 2019 to currently 277/caseload. Within the past 6 fiscal years we have received 1,646 initial waiver participants. This averages out to 274 new cases per year. Each year we add on an entire caseload work of assignments to our already demanding caseloads. Our office experiences a caseload growth of 23% per year, based on that continuous growth another position would be needed every 4 years to keep up with the demand. We have not had a T.O. increase since 2009. The MCS review initial/annual plans for participants in their caseload, review/close critical incidents within 30 days, review/approve revisions, review/present waiver exception requests, and participate in annual Support Coordination (S/C) monitoring. In the past fiscal year we received 2,146 revisions, 2,536 critical incidents, 59 exception requests, and monitored 72 S/C records. The S/C monitoring includes record reviews, participant interviews, S/C interviews, and agency audit. As our number of caseload sizes continue to increase so does the other actions required. Additionally in 2021-2022 fiscal year ACT 421 Medicaid program was added to MCS duties and require initial and annual reviews by an RN and another MCS solely assigned PASSR and ICF certifications. The ACT 421 caseloads have increased in number by 88%. In the initial fiscal year we had 194 cases and within the past fiscal year we are at 502 cases. The funds will be recurring to provide a full time position to keep up with the continuous caseload increase. Based on the CMS 1915(c) HCBS waiver guidelines within the Social Security Act; The LGE shall meet the federally mandated assurance and sub-assurances for the following: 1. Le |
| Cite performance indicators for the adjustment. | N/A |
| What would the impact be if this is not funded? | If this position is not funded, our current staff will be overburdened by an already growing caseload; therefore, fewer clients will receive needed services, certifications will take longer to process, and they will not be able to appropriately focus on providing quality care to meet the specific needs of each individual. |
| Is revenue a fixed amount or can it be adjusted? | N/A |
| Is the expenditure of these revenues restricted? | N/A |
| Additional information or comments. | N/A |

Technical and Other Adjustments

AGENCY SUMMARY STATEMENT

Total Agency

| Means of Financing | Existing Operating Budget as of 10/02/2025 | FY2026-2027 Requested Continuation Adjustment | FY2026-2027 Requested in this Adjustment Package | FY2026-2027 Requested Realignment |
|--|--|---|--|--------------------------------------|
| STATE GENERAL FUND (Direct) | 15,090,816 | 593,999 | _ | 15,684,815 |
| STATE GENERAL FUND BY: | _ | _ | _ | _ |
| INTERAGENCY TRANSFERS | 5,107,914 | _ | _ | 5,107,914 |
| FEES & SELF-GENERATED | 1,536,196 | _ | _ | 1,536,196 |
| STATUTORY DEDICATIONS | _ | _ | _ | _ |
| FEDERAL FUNDS | 1,000,000 | _ | _ | 1,000,000 |
| TOTAL MEANS OF FINANCING | \$22,734,926 | \$593,999 | _ | \$23,328,925 |
| Salaries | _ | _ | _ | _ |
| Other Compensation | _ | _ | _ | _ |
| Related Benefits | _ | _ | _ | _ |
| TOTAL PERSONAL SERVICES | _ | _ | _ | _ |
| Travel | _ | _ | _ | _ |
| Operating Services | 286 | 7 | _ | 293 |
| Supplies | 176,100 | 4,050 | _ | 180,150 |
| TOTAL OPERATING EXPENSES | \$176,386 | \$4,057 | _ | \$180,443 |
| PROFESSIONAL SERVICES | _ | _ | _ | _ |
| Other Charges | 21,989,736 | 589,942 | _ | 22,579,678 |
| Debt Service | _ | _ | _ | _ |
| Interagency Transfers | 568,804 | _ | _ | 568,804 |
| TOTAL OTHER CHARGES | \$22,558,540 | \$589,942 | _ | \$23,148,482 |
| Acquisitions | _ | _ | _ | _ |
| Major Repairs | _ | _ | _ | _ |
| TOTAL ACQ. & MAJOR REPAIRS | _ | _ | _ | _ |
| TOTAL EXPENDITURES | \$22,734,926 | \$593,999 | _ | \$23,328,925 |
| Classified | _ | _ | _ | _ |
| Unclassified | _ | _ | _ | _ |
| TOTAL AUTHORIZED T.O. POSITIONS | _ | _ | _ | _ |
| TOTAL AUTHORIZED OTHER CHARGES POSITIONS | 119 | 9 | _ | 128 |
| TOTAL NON-T.O. FTE POSITIONS | _ | _ | _ | _ |

Agency Summary Statement Program Breakout

PROGRAM BREAKOUT

| | Requested in this | |
|--|--------------------|-------------------|
| Means of Financing | Adjustment Package | Services District |
| STATE GENERAL FUND (Direct) | _ | _ |
| STATE GENERAL FUND BY: | _ | _ |
| INTERAGENCY TRANSFERS | _ | _ |
| FEES & SELF-GENERATED | _ | _ |
| STATUTORY DEDICATIONS | _ | _ |
| FEDERAL FUNDS | _ | _ |
| TOTAL MEANS OF FINANCING | _ | _ |
| Salaries | _ | _ |
| Other Compensation | _ | _ |
| Related Benefits | _ | _ |
| TOTAL SALARIES | _ | _ |
| Travel | _ | _ |
| Operating Services | _ | _ |
| Supplies | _ | _ |
| TOTAL OPERATING EXPENSES | _ | _ |
| PROFESSIONAL SERVICES | _ | _ |
| Other Charges | _ | _ |
| Debt Service | _ | _ |
| Interagency Transfers | _ | _ |
| TOTAL OTHER CHARGES | _ | _ |
| Acquisitions | _ | _ |
| Major Repairs | _ | _ |
| TOTAL ACQ. & MAJOR REPAIRS | _ | _ |
| TOTAL EXPENDITURES & REQUEST | _ | _ |
| Classified | _ | _ |
| Unclassified | _ | _ |
| TOTAL AUTHORIZED T.O. POSITIONS | _ | _ |
| TOTAL AUTHORIZED OTHER CHARGES POSITIONS | _ | _ |
| TOTAL NON-T.O. FTE POSITIONS | _ | _ |

PROGRAM SUMMARY STATEMENT

3251 - Acadiana Area Human Services District

| Means of Financing | Existing Operating Budget as of 10/02/2025 | FY2026-2027 Requested Continuation Adjustment | FY2026-2027 Requested in this Adjustment Package | FY2026-2027 Requested Realignment |
|--|--|---|--|--------------------------------------|
| STATE GENERAL FUND (Direct) | 15,090,816 | 593,999 | _ | 15,684,815 |
| STATE GENERAL FUND BY: | _ | _ | _ | _ |
| INTERAGENCY TRANSFERS | 5,107,914 | _ | _ | 5,107,914 |
| FEES & SELF-GENERATED | 1,536,196 | _ | _ | 1,536,196 |
| STATUTORY DEDICATIONS | _ | _ | _ | _ |
| FEDERAL FUNDS | 1,000,000 | _ | _ | 1,000,000 |
| TOTAL MEANS OF FINANCING | \$22,734,926 | \$593,999 | _ | \$23,328,925 |
| Salaries | _ | _ | _ | _ |
| Other Compensation | _ | _ | _ | _ |
| Related Benefits | _ | _ | _ | _ |
| TOTAL PERSONAL SERVICES | _ | _ | _ | _ |
| Travel | _ | _ | _ | _ |
| Operating Services | 286 | 7 | _ | 293 |
| Supplies | 176,100 | 4,050 | _ | 180,150 |
| TOTAL OPERATING EXPENSES | \$176,386 | \$4,057 | _ | \$180,443 |
| PROFESSIONAL SERVICES | _ | _ | _ | _ |
| Other Charges | 21,989,736 | 589,942 | _ | 22,579,678 |
| Debt Service | _ | _ | _ | _ |
| Interagency Transfers | 568,804 | _ | _ | 568,804 |
| TOTAL OTHER CHARGES | \$22,558,540 | \$589,942 | _ | \$23,148,482 |
| Acquisitions | _ | _ | _ | _ |
| Major Repairs | _ | _ | _ | _ |
| TOTAL ACQ. & MAJOR REPAIRS | _ | _ | _ | _ |
| TOTAL EXPENDITURES | \$22,734,926 | \$593,999 | _ | \$23,328,925 |
| Classified | _ | _ | _ | _ |
| Unclassified | _ | _ | _ | _ |
| TOTAL AUTHORIZED T.O. POSITIONS | _ | _ | _ | _ |
| TOTAL AUTHORIZED OTHER CHARGES POSITIONS | 119 | 9 | _ | 128 |
| TOTAL NON-T.O. FTE POSITIONS | _ | _ | _ | _ |

New or Expanded Requests

AGENCY SUMMARY STATEMENT

Total Agency

| Means of Financing and Expenditures | Existing Operating Budget as of 10/02/2025 | FY2026-2027 Requested Continuation Adjustment | FY2026-2027 Requested in Technical/Other Package | FY2026-2027 Requested New/Expanded | FY2026-2027 Requested Realignment |
|--|--|--|--|---------------------------------------|--------------------------------------|
| STATE GENERAL FUND (Direct) | 15,090,816 | 593,999 | _ | - | 15,684,815 |
| STATE GENERAL FUND BY: | _ | _ | _ | _ | _ |
| INTERAGENCY TRANSFERS | 5,107,914 | _ | _ | _ | 5,107,914 |
| FEES & SELF-GENERATED | 1,536,196 | _ | _ | _ | 1,536,196 |
| STATUTORY DEDICATIONS | _ | _ | _ | _ | _ |
| FEDERAL FUNDS | 1,000,000 | _ | _ | _ | 1,000,000 |
| TOTAL MEANS OF FINANCING | \$22,734,926 | \$593,999 | _ | _ | \$23,328,925 |
| Salaries | _ | _ | _ | _ | _ |
| Other Compensation | _ | _ | _ | _ | _ |
| Related Benefits | _ | _ | _ | _ | _ |
| TOTAL PERSONAL SERVICES | _ | _ | _ | _ | _ |
| Travel | _ | _ | _ | _ | _ |
| Operating Services | 286 | 7 | _ | _ | 293 |
| Supplies | 176,100 | 4,050 | _ | _ | 180,150 |
| TOTAL OPERATING EXPENSES | \$176,386 | \$4,057 | _ | _ | \$180,443 |
| PROFESSIONAL SERVICES | _ | _ | _ | _ | _ |
| Other Charges | 21,989,736 | 589,942 | - | - | 22,579,678 |
| Debt Service | _ | _ | _ | _ | _ |
| Interagency Transfers | 568,804 | _ | _ | _ | 568,804 |
| TOTAL OTHER CHARGES | \$22,558,540 | \$589,942 | _ | _ | \$23,148,482 |
| Acquisitions | _ | _ | _ | <u> </u> | _ |
| Major Repairs | _ | _ | _ | _ | _ |
| TOTAL ACQ. & MAJOR REPAIRS | _ | _ | _ | _ | _ |
| TOTAL EXPENDITURES | \$22,734,926 | \$593,999 | _ | _ | \$23,328,925 |
| Classified | - | _ | - | - | _ |
| Unclassified | _ | _ | _ | _ | _ |
| TOTAL AUTHORIZED T.O. POSITIONS | _ | _ | _ | _ | _ |
| TOTAL AUTHORIZED OTHER CHARGES POSITIONS | 119 | 9 | _ | _ | 128 |
| TOTAL NON-T.O. FTE POSITIONS | _ | _ | _ | _ | _ |

Fees and Self-Generated

| | | | FY2026-2027 Requested | | |
|--------------------------------|---------------------------|-------------------------|-----------------------|-----------------------|-----------------------|
| | Existing Operating Budget | FY2026-2027 Requested | in Technical/Other | FY2026-2027 Requested | FY2026-2027 Requested |
| Description | as of 10/02/2025 | Continuation Adjustment | Package | New/Expanded | Realignment |
| Fees & Self-generated Revenues | 1,536,196 | _ | _ | _ | 1,536,196 |
| Total: | \$1,536,196 | _ | _ | _ | \$1,536,196 |

Statutory Dedications

| Existing Operat Description as of | ting Budget 10/02/2025 | FY2026-2027 Requested Continuation Adjustment | FY2026-2027 Requested in Technical/Other Package | FY2026-2027 Requested New/Expanded | FY2026-2027 Requested Realignment |
|-----------------------------------|---------------------------|--|--|---------------------------------------|--------------------------------------|
| Total: | _ | _ | _ | _ | _ |

PROGRAM SUMMARY STATEMENT

3251 - Acadiana Area Human Services District

| Means of Financing and Expenditures | Existing Operating Budget as of 10/02/2025 | FY2026-2027 Requested Continuation Adjustment | FY2026-2027 Requested in Technical/Other Package | FY2026-2027 Requested New/Expanded | FY2026-2027 Requested Realignment |
|--|--|--|--|---------------------------------------|--------------------------------------|
| STATE GENERAL FUND (Direct) | 15,090,816 | 593,999 | _ | - | 15,684,815 |
| STATE GENERAL FUND BY: | _ | _ | _ | _ | _ |
| INTERAGENCY TRANSFERS | 5,107,914 | _ | _ | _ | 5,107,914 |
| FEES & SELF-GENERATED | 1,536,196 | _ | _ | _ | 1,536,196 |
| STATUTORY DEDICATIONS | _ | _ | _ | _ | _ |
| FEDERAL FUNDS | 1,000,000 | _ | _ | _ | 1,000,000 |
| TOTAL MEANS OF FINANCING | \$22,734,926 | \$593,999 | _ | _ | \$23,328,925 |
| Salaries | _ | _ | _ | _ | _ |
| Other Compensation | _ | _ | _ | _ | _ |
| Related Benefits | _ | _ | _ | _ | _ |
| TOTAL PERSONAL SERVICES | _ | _ | _ | _ | _ |
| Travel | _ | _ | _ | _ | _ |
| Operating Services | 286 | 7 | _ | _ | 293 |
| Supplies | 176,100 | 4,050 | _ | _ | 180,150 |
| TOTAL OPERATING EXPENSES | \$176,386 | \$4,057 | _ | _ | \$180,443 |
| PROFESSIONAL SERVICES | _ | _ | _ | _ | _ |
| Other Charges | 21,989,736 | 589,942 | - | - | 22,579,678 |
| Debt Service | _ | _ | _ | _ | _ |
| Interagency Transfers | 568,804 | _ | _ | _ | 568,804 |
| TOTAL OTHER CHARGES | \$22,558,540 | \$589,942 | _ | _ | \$23,148,482 |
| Acquisitions | _ | _ | _ | <u> </u> | _ |
| Major Repairs | _ | _ | _ | _ | _ |
| TOTAL ACQ. & MAJOR REPAIRS | _ | _ | _ | _ | _ |
| TOTAL EXPENDITURES | \$22,734,926 | \$593,999 | _ | _ | \$23,328,925 |
| Classified | - | _ | - | - | _ |
| Unclassified | _ | _ | _ | _ | _ |
| TOTAL AUTHORIZED T.O. POSITIONS | _ | _ | _ | _ | _ |
| TOTAL AUTHORIZED OTHER CHARGES POSITIONS | 119 | 9 | _ | _ | 128 |
| TOTAL NON-T.O. FTE POSITIONS | _ | _ | _ | _ | _ |

Fees and Self-Generated

| | | | FY2026-2027 Requested | | |
|--------------------------------|---------------------------|-------------------------|-----------------------|-----------------------|-----------------------|
| | Existing Operating Budget | FY2026-2027 Requested | in Technical/Other | FY2026-2027 Requested | FY2026-2027 Requested |
| Description | as of 10/02/2025 | Continuation Adjustment | Package | New/Expanded | Realignment |
| Fees & Self-generated Revenues | 1,536,196 | _ | _ | _ | 1,536,196 |
| Total: | \$1,536,196 | _ | _ | _ | \$1,536,196 |

Statutory Dedications

| Existing Operat Description as of | ting Budget 10/02/2025 | FY2026-2027 Requested Continuation Adjustment | FY2026-2027 Requested in Technical/Other Package | FY2026-2027 Requested New/Expanded | FY2026-2027 Requested Realignment |
|-----------------------------------|---------------------------|--|--|---------------------------------------|--------------------------------------|
| Total: | _ | _ | _ | _ | _ |



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Total Request Summary

AGENCY SUMMARY STATEMENT

Total Agency

Means of Financing

| Description | FY2024-2025 Actuals | Existing Operating Budget as of 10/02/2025 | FY2026-2027 Requested Continuation Adjustments | FY2026-2027 Requested in Technical/Other Adjustments | FY2026-2027 Requested New or Expanded Adjustments | FY2026-2027 Total Request | Over/Under EOB |
|-----------------------------|------------------------|--|---|---|--|------------------------------|----------------|
| STATE GENERAL FUND (Direct) | 14,089,982 | 15,090,816 | 593,999 | _ | _ | 15,684,815 | 593,999 |
| STATE GENERAL FUND BY: | _ | _ | _ | _ | _ | _ | _ |
| INTERAGENCY TRANSFERS | 2,499,387 | 5,107,914 | _ | _ | _ | 5,107,914 | _ |
| FEES & SELF-GENERATED | 1,423,294 | 1,536,196 | _ | _ | _ | 1,536,196 | _ |
| STATUTORY DEDICATIONS | _ | _ | _ | _ | _ | _ | _ |
| FEDERAL FUNDS | 711,091 | 1,000,000 | _ | _ | _ | 1,000,000 | _ |
| TOTAL MEANS OF FINANCING | \$18,723,754 | \$22,734,926 | \$593,999 | _ | _ | \$23,328,925 | \$593,999 |

Statutory Dedications

| Description | FY2024-2025 Actuals | Existing Operating Budget as of 10/02/2025 | FY2026-2027 Requested Continuation Adjustments | FY2026-2027 Requested in Technical/Other Adjustments | FY2026-2027 Requested New or Expanded Adjustments | FY2026-2027 Total Request | Over/Under EOB |
|-------------|------------------------|--|---|---|--|------------------------------|----------------|
| Total: | _ | _ | _ | _ | _ | _ | _ |

Expenditures and Positions

| Description | FY2024-2025 Actuals | Existing Operating Budget as of 10/02/2025 | FY2026-2027 Requested Continuation Adjustments | FY2026-2027 Requested in Technical/Other Adjustments | FY2026-2027 Requested New or Expanded Adjustments | FY2026-2027 Total Request | Over/Under EOB |
|--|------------------------|--|---|---|--|------------------------------|----------------|
| Salaries | _ | _ | _ | | | | _ |
| Other Compensation | _ | _ | _ | _ | _ | _ | _ |
| Related Benefits | _ | _ | _ | _ | _ | _ | _ |
| TOTAL PERSONAL SERVICES | _ | _ | _ | _ | _ | _ | _ |
| Travel | _ | _ | _ | _ | _ | _ | _ |
| Operating Services | _ | 286 | 7 | _ | _ | 293 | 7 |
| Supplies | 173,604 | 176,100 | 4,050 | _ | _ | 180,150 | 4,050 |
| TOTAL OPERATING EXPENSES | \$173,604 | \$176,386 | \$4,057 | _ | _ | \$180,443 | \$4,057 |
| PROFESSIONAL SERVICES | _ | _ | _ | _ | _ | _ | _ |
| Other Charges | 18,030,609 | 21,989,736 | 589,942 | _ | _ | 22,579,678 | 589,942 |
| Debt Service | _ | _ | _ | _ | _ | _ | _ |
| Interagency Transfers | 519,542 | 568,804 | _ | _ | _ | 568,804 | _ |
| TOTAL OTHER CHARGES | \$18,550,151 | \$22,558,540 | \$589,942 | _ | _ | \$23,148,482 | \$589,942 |
| Acquisitions | _ | _ | _ | _ | _ | _ | _ |
| Major Repairs | _ | _ | _ | _ | _ | _ | _ |
| TOTAL ACQ. & MAJOR REPAIRS | _ | - | _ | _ | - | _ | - |
| TOTAL EXPENDITURES | \$18,723,754 | \$22,734,926 | \$593,999 | _ | _ | \$23,328,925 | \$593,999 |
| Classified | _ | _ | _ | _ | _ | _ | _ |
| Unclassified | _ | _ | _ | _ | _ | _ | _ |
| TOTAL AUTHORIZED T.O. POSITIONS | _ | _ | _ | _ | _ | _ | _ |
| TOTAL AUTHORIZED OTHER CHARGES POSITIONS | 119 | 119 | 9 | _ | _ | 128 | 9 |
| TOTAL NON-T.O. FTE POSITIONS | _ | _ | _ | _ | _ | _ | _ |

PROGRAM SUMMARY STATEMENT

3251 - Acadiana Area Human Services District

Means of Financing

| Description | FY2024-2025 Actuals | Existing Operating Budget as of 10/02/2025 | FY2026-2027 Requested Continuation Adjustments | FY2026-2027 Requested in Technical/Other Adjustments | FY2026-2027 Requested New or Expanded Adjustments | FY2026-2027 Total Request | Over/Under EOB |
|-----------------------------|------------------------|--|---|---|--|------------------------------|----------------|
| STATE GENERAL FUND (Direct) | 14,089,982 | 15,090,816 | 593,999 | _ | _ | 15,684,815 | 593,999 |
| STATE GENERAL FUND BY: | _ | _ | _ | _ | _ | _ | _ |
| INTERAGENCY TRANSFERS | 2,499,387 | 5,107,914 | _ | _ | _ | 5,107,914 | _ |
| FEES & SELF-GENERATED | 1,423,294 | 1,536,196 | _ | _ | _ | 1,536,196 | _ |
| STATUTORY DEDICATIONS | _ | _ | _ | _ | _ | _ | _ |
| FEDERAL FUNDS | 711,091 | 1,000,000 | _ | _ | _ | 1,000,000 | _ |
| TOTAL MEANS OF FINANCING | \$18,723,754 | \$22,734,926 | \$593,999 | _ | _ | \$23,328,925 | \$593,999 |

Expenditures and Positions

| | FY2024-2025 | Existing Operating Budget | FY2026-2027 Requested Continuation | FY2026-2027 Requested in Technical/Other | FY2026-2027 Requested New or Expanded | FY2026-2027 | |
|--|--------------|------------------------------|--|--|---|---------------|----------------|
| Description | Actuals | as of 10/02/2025 | Adjustments | Adjustments | Adjustments | Total Request | Over/Under EOB |
| Salaries | _ | _ | _ | _ | _ | _ | _ |
| Other Compensation | _ | _ | _ | _ | _ | _ | _ |
| Related Benefits | _ | _ | _ | _ | _ | _ | _ |
| TOTAL PERSONAL SERVICES | _ | _ | _ | _ | _ | _ | _ |
| Travel | _ | <u> </u> | _ | _ | _ | _ | _ |
| Operating Services | _ | 286 | 7 | _ | _ | 293 | 7 |
| Supplies | 173,604 | 176,100 | 4,050 | _ | _ | 180,150 | 4,050 |
| TOTAL OPERATING EXPENSES | \$173,604 | \$176,386 | \$4,057 | _ | _ | \$180,443 | \$4,057 |
| PROFESSIONAL SERVICES | _ | _ | _ | _ | _ | _ | _ |
| Other Charges | 18,030,609 | 21,989,736 | 589,942 | _ | _ | 22,579,678 | 589,942 |
| Debt Service | _ | _ | _ | _ | _ | _ | _ |
| Interagency Transfers | 519,542 | 568,804 | _ | _ | _ | 568,804 | _ |
| TOTAL OTHER CHARGES | \$18,550,151 | \$22,558,540 | \$589,942 | _ | _ | \$23,148,482 | \$589,942 |
| Acquisitions | _ | _ | _ | _ | _ | _ | _ |
| Major Repairs | _ | <u> </u> | _ | _ | _ | _ | _ |
| TOTAL ACQ. & MAJOR REPAIRS | _ | _ | _ | _ | _ | _ | _ |
| TOTAL EXPENDITURES | \$18,723,754 | \$22,734,926 | \$593,999 | _ | _ | \$23,328,925 | \$593,999 |
| Classified | _ | _ | _ | <u> </u> | _ | _ | _ |
| Unclassified | _ | _ | _ | _ | _ | _ | _ |
| TOTAL AUTHORIZED T.O. POSITIONS | _ | _ | _ | _ | _ | _ | _ |
| TOTAL AUTHORIZED OTHER CHARGES POSITIONS | 119 | 119 | 9 | _ | _ | 128 | 9 |
| TOTAL NON-T.O. FTE POSITIONS | _ | _ | _ | _ | _ | _ | _ |

- 104 -

Addenda

Agency: 325 ACADIANA AREA HUMAN SERVICES DISTRICT

STATE OF LOUISIANA

Childrens Budget

Department Summary

Fiscal Year 2026 - 2027 Report Date: 10/31/25

CHILD - DS

| Service Number | Service Name | Agency Number | Agency Name | General Fund | IAT | Self Generated | Stat Deds | Federal Funds | Total Funds | Positions |
|-------------------|--|------------------|---|--------------|-------------|----------------|-----------|---------------|-------------|-----------|
| AAHSD01 | Children and Adolescent Behavioral and Development | 325 | Acadiana Area Human Services District | \$3,619,785 | \$1,186,122 | \$317,660 | \$0 | \$137,157 | \$5,260,724 | 29 |
| | | | Total: | \$3,619,785 | \$1,186,122 | \$317,660 | \$0 | \$137,157 | \$5,260,724 | 29 |

Department: 09A - LDH

Agency: 325 ACADIANA AREA HUMAN SERVICES DISTRICT

STATE OF LOUISIANA Childrens Budget by Department CHILD - DC Fiscal Year 2026 - 2027

Report Date: 10/31/25

| | | , _ора | | | |
|-----------------------------|------------------------------|------------------------|--------------|-----------------|-------------------|
| Means of Financing: | Existing Operating Budget | Requested Continuation | Requested NE | Total Requested | Total Recommended |
| STATE GENERAL FUND (Direct) | \$3,543,662 | \$3,619,785 | \$0 | \$3,619,785 | \$0 |
| STATE GENERAL FUND BY: | | | | | |
| INTERAGENCY TRANSFERS | \$1,183,334 | \$1,186,122 | \$0 | \$1,186,122 | \$0 |
| FEES & SELF-GENERATED | \$317,660 | \$317,660 | \$0 | \$317,660 | \$0 |
| STATUTORY DEDICATIONS | \$0 | \$0 | \$0 | \$0 | \$0 |
| FEDERAL FUNDS | \$133,708 | \$137,157 | \$0 | \$137,157 | \$0 |
| TOTAL MEANS OF FINANCING | \$5,178,364 | \$5,260,724 | \$0 | \$5,260,724 | \$0 |
| Salaries | \$0 | \$0 | \$0 | \$0 | \$0 |
| Other Compensation | \$0 | \$0 | \$0 | \$0 | \$0 |
| Related Benefits | \$0 | \$0 | \$0 | \$0 | \$0 |
| TOTAL PERSONAL SERVICES | \$0 | \$0 | \$0 | \$0 | \$0 |
| Travel | \$0 | \$0 | \$0 | \$0 | \$0 |
| Operating Services | \$0 | \$0 | \$0 | \$0 | \$0 |
| Supplies | \$0 | \$0 | \$0 | \$0 | \$0 |
| TOTAL OPERATING EXPENSES | \$0 | \$0 | \$0 | \$0 | \$0 |
| PROFESSIONAL SERVICES | \$0 | \$0 | \$0 | \$0 | \$0 |
| Other Charges | \$5,178,364 | \$5,260,724 | \$0 | \$5,260,724 | \$0 |
| Debt Service | \$0 | \$0 | \$0 | \$0 | \$0 |
| Interagency Transfers | \$0 | \$0 | \$0 | \$0 | \$0 |
| TOTAL OTHER CHARGES | \$5,178,364 | \$5,260,724 | \$0 | \$5,260,724 | \$0 |
| Acquisitions | \$0 | \$0 | \$0 | \$0 | \$0 |
| Major Repairs | \$0 | \$0 | \$0 | \$0 | \$0 |
| TOTAL ACQ. & MAJOR REPAIRS | \$0 | \$0 | \$0 | \$0 | \$0 |

| Department: 09A - LDH Agency: 325 ACADIANA AREA HUMAN SERVIC | | ATE OF LOUIS Childrens Budg by Departmen | et | | CHILD - DC scal Year 2026 - 2027 Report Date: 10/31/25 |
|--|-------------|--|-----|-------------|--|
| TOTAL EXPENDITURES | \$5,178,364 | \$5,260,724 | \$0 | \$5,260,724 | \$0 |
| Classified | 0 | 0 | 0 | 0 | 0 |
| Unclassified | 0 | 0 | 0 | 0 | 0 |
| TOTAL AUTHORIZED T.O. POSITIONS | 0 | 0 | 0 | 0 | 0 |
| TOTAL AUTHORIZED OTHER CHARGES POSITIONS | 29 | 29 | 0 | 29 | 0 |
| TOTAL NON-T.O. FTE POSITIONS | 0 | 0 | 0 | 0 | 0 |
| TOTAL POSITIONS | 29 | 29 | 0 | 29 | 0 |

STATE OF LOUISIANA

Childrens Budget Agency Summary CHILD - AS Fiscal Year 2026 - 2027

Report Date: 10/31/25

325 - Acadiana Area Human Services District

Agency: 325 ACADIANA AREA HUMAN SERVICES DISTRICT

| Service Number | Service Name | Program Number | Program Name | General Fund | IAT | Self Generated | Stat Deds | Federal Funds | Total Funds | Positions |
|-------------------|---|-------------------|--|--------------|-------------|----------------|-----------|---------------|-------------|-----------|
| AAHSD01 | Children and Adolescent Behavioral and Development | 3251 | Acadiana Area Human Services District | \$3,619,785 | \$1,186,122 | \$317,660 | \$0 | \$137,157 | \$5,260,724 | 29 |
| | | | Total: | \$3,619,785 | \$1,186,122 | \$317,660 | \$0 | \$137,157 | \$5,260,724 | 29 |

STATE OF LOUISIANA

Agency: 325 ACADIANA AREA HUMAN SERVICES DISTRICT

Childrens Budget by Agency

CHILD - AC Fiscal Year 2026 - 2027

Report Date: 10/31/25

325 - Acadiana Area Human Services District

| Means of Financing: | Existing Operating Budget | Requested Continuation | Requested NE | Total Requested | Total Recommended |
|-----------------------------|------------------------------|---------------------------|--------------|-----------------|-------------------|
| STATE GENERAL FUND (Direct) | \$3,543,662 | \$3,619,785 | \$0 | \$3,619,785 | \$0 |
| STATE GENERAL FUND BY: | | | | | |
| INTERAGENCY TRANSFERS | \$1,183,334 | \$1,186,122 | \$0 | \$1,186,122 | \$0 |
| FEES & SELF-GENERATED | \$317,660 | \$317,660 | \$0 | \$317,660 | \$0 |
| STATUTORY DEDICATIONS | \$0 | \$0 | \$0 | \$0 | \$0 |
| FEDERAL FUNDS | \$133,708 | \$137,157 | \$0 | \$137,157 | \$0 |
| TOTAL MEANS OF FINANCING | \$5,178,364 | \$5,260,724 | \$0 | \$5,260,724 | \$0 |
| Salaries | \$0 | \$0 | \$0 | \$0 | \$0 |
| Other Compensation | \$0 | \$0 | \$0 | \$0 | \$0 |
| Related Benefits | \$0 | \$0 | \$0 | \$0 | \$0 |
| TOTAL PERSONAL SERVICES | \$0 | \$0 | \$0 | \$0 | \$0 |
| Travel | \$0 | \$0 | \$0 | \$0 | \$0 |
| Operating Services | \$0 | \$0 | \$0 | \$0 | \$0 |
| Supplies | \$0 | \$0 | \$0 | \$0 | \$0 |
| TOTAL OPERATING EXPENSES | \$0 | \$0 | \$0 | \$0 | \$0 |
| PROFESSIONAL SERVICES | \$0 | \$0 | \$0 | \$0 | \$0 |
| Other Charges | \$5,178,364 | \$5,260,724 | \$0 | \$5,260,724 | \$0 |
| Debt Service | \$0 | \$0 | \$0 | \$0 | \$0 |
| Interagency Transfers | \$0 | \$0 | \$0 | \$0 | \$0 |
| TOTAL OTHER CHARGES | \$5,178,364 | \$5,260,724 | \$0 | \$5,260,724 | \$0 |
| Acquisitions | \$0 | \$0 | \$0 | \$0 | \$0 |
| Major Repairs | \$0 | \$0 | \$0 | \$0 | \$0 |

| Department: 09A - LDH Agency: 325 ACADIANA AREA HUMAN SERVICE | | TATE OF LOUIS Childrens Budg by Agency | | F | CHILD - AC Fiscal Year 2026 - 2027 Report Date: 10/31/25 |
|---|-------------|--|-----|-------------|--|
| TOTAL ACQ. & MAJOR REPAIRS | \$0 | \$0 | \$0 | \$0 | \$0 |
| TOTAL EXPENDITURES | \$5,178,364 | \$5,260,724 | \$0 | \$5,260,724 | \$0 |
| Classified | 0 | 0 | 0 | 0 | 0 |
| Unclassified | 0 | 0 | 0 | 0 | 0 |
| TOTAL AUTHORIZED T.O. POSITIONS | 0 | 0 | 0 | 0 | 0 |
| TOTAL AUTHORIZED OTHER CHARGES POSITION | 29 | 29 | 0 | 29 | 0 |
| TOTAL NON-T.O. FTE POSITIONS | 0 | 0 | 0 | 0 | 0 |
| TOTAL POSITIONS | 29 | 29 | 0 | 29 | 0 |

STATE OF LOUISIANA

Childrens Budget by Agency/Program and Service

CHILD1 Fiscal Year 2026 - 2027

Report Date: 10/31/25

325 - Acadiana Area Human Services District

Agency: 325 ACADIANA AREA HUMAN SERVICES DISTRICT

3251 - Acadiana Area Human Services District

AAHSD01 - Children and Adolescent Behavioral and Development

| Means of Financing: | Existing Operating Budget | Requested Continuation | Requested NE | Total Requested | Total Recommended |
|-----------------------------|------------------------------|------------------------|--------------|-----------------|-------------------|
| STATE GENERAL FUND (Direct) | \$3,543,662 | \$3,619,785 | \$0 | \$3,619,785 | \$0 |
| STATE GENERAL FUND BY: | | | | | |
| INTERAGENCY TRANSFERS | \$1,183,334 | \$1,186,122 | \$0 | \$1,186,122 | \$0 |
| FEES & SELF-GENERATED | \$317,660 | \$317,660 | \$0 | \$317,660 | \$0 |
| STATUTORY DEDICATIONS | \$0 | \$0 | \$0 | \$0 | \$0 |
| FEDERAL FUNDS | \$133,708 | \$137,157 | \$0 | \$137,157 | \$0 |
| TOTAL MEANS OF FINANCING | \$5,178,364 | \$5,260,724 | \$0 | \$5,260,724 | \$0 |
| Salaries | \$0 | \$0 | \$0 | \$0 | \$0 |
| Other Compensation | \$0 | \$0 | \$0 | \$0 | \$0 |
| Related Benefits | \$0 | \$0 | \$0 | \$0 | \$0 |
| TOTAL PERSONAL SERVICES | \$0 | \$0 | \$0 | \$0 | \$0 |
| Travel | \$0 | \$0 | \$0 | \$0 | \$0 |
| Operating Services | \$0 | \$0 | \$0 | \$0 | \$0 |
| Supplies | \$0 | \$0 | \$0 | \$0 | \$0 |
| TOTAL OPERATING EXPENSES | \$0 | \$0 | \$0 | \$0 | \$0 |
| PROFESSIONAL SERVICES | \$0 | \$0 | \$0 | \$0 | \$0 |
| Other Charges | \$5,178,364 | \$5,260,724 | \$0 | \$5,260,724 | \$0 |
| Debt Service | \$0 | \$0 | \$0 | \$0 | \$0 |
| Interagency Transfers | \$0 | \$0 | \$0 | \$0 | \$0 |
| TOTAL OTHER CHARGES | \$5,178,364 | \$5,260,724 | \$0 | \$5,260,724 | \$0 |

| Department: 09A - LDH Agency: 325 ACADIANA AREA HUMAN SERVIO | CES DISTRICT | TATE OF LOUIS Childrens Budo Agency/Program ar | get | F | CHILD1 Fiscal Year 2026 - 2027 Report Date: 10/31/25 |
|--|--------------|--|-----|-------------|--|
| Acquisitions | \$0 | \$0 | \$0 | \$0 | \$0 |
| Major Repairs | \$0 | \$0 | \$0 | \$0 | \$0 |
| TOTAL ACQ. & MAJOR REPAIRS | \$0 | \$0 | \$0 | \$0 | \$0 |
| TOTAL EXPENDITURES | \$5,178,364 | \$5,260,724 | \$0 | \$5,260,724 | \$0 |
| Classified | 0 | 0 | 0 | 0 | 0 |
| Unclassified | 0 | 0 | 0 | 0 | 0 |
| TOTAL AUTHORIZED T.O. POSITIONS | 0 | 0 | 0 | 0 | 0 |
| TOTAL AUTHORIZED OTHER CHARGES POSITION | 29 | 29 | 0 | 29 | 0 |
| TOTAL NON-T.O. FTE POSITIONS | 0 | 0 | 0 | 0 | 0 |
| TOTAL POSITIONS | 29 | 29 | 0 | 29 | 0 |

STATE OF LOUISIANA

CHILD2 Fiscal Year 2026 - 2027

Agency: 325 ACADIANA AREA HUMAN SERVICES DISTRICT

Childrens Budget Narrative

Report Date: 10/31/25

| Form ID: | 47142 |
|-------------------|--|
| Form Description: | 325 - CHILDREN'S BUDGET |
| Service: | AAHSD01 - Children and Adolescent Behavioral and Development |

Question and Narrative Response

Describe the service:

This Program manages behavioral health and developmental disability for children in the parishes of Acadia, Evangeline, Iberia, Lafayette, St. Martin, St. Landry, and Vermillion.

How does this fulfill the program's mission?

Mission of the Acadiana Area Human Services District (AAHSD) is to improve the quality of life for the citizens of Acadiana who have behavioral health and/or intellectual/developmental disorders.

Who are the principal users?

Primary Users of this service are children and adolescents under the age of 18 who reside in the seven parish catchment area of the Acadiana Area Human Services District.

Who primarily benefits from the service?

Those that benefit from this service are children and adolescents under the age of 18 who reside in the seven parish catchment area of the Acadiana Area Human Services District.

Related objectives and performance measures:

STATE OF LOUISIANA

Childrens Budget Narrative

CHILD2 Fiscal Year 2026 - 2027

Report Date: 10/31/25

Question and Narrative Response

Objectives included in the FY 2027 Operational Plan that are related all or in-part to services for children are:

Objective 1: To provide programmatic leadership and direction to the programs of behavioral health (addictive disorders and mental health) and developmental disabilities services under AAHSD.

Performance Measure: K - Percentage AAHSD clients who state they would continue to receive services at our clinic if given the choice to go elsewhere.

Performance Measure: K - Percentage of AAHSD clients who state they would recommend the clinics to family and friends.

Objective 2: To work as part of the State's continuum of care that centers on behavioral disorders, addictive disorders, and co-occurring disorders.

Performance Measure: K - Number of children/adolescents served with MH services in all AAHSD Behavioral Health clinics.

Performance Measure: K - Percentage of MH cash subsidy slots utilized.

Agency: 325 ACADIANA AREA HUMAN SERVICES DISTRICT

Objective 3: To foster and facilitate independence for citizens with disabilities through the availability of home and community based services.

Performance Measure: K - Number of people receiving individual and family support services.

Performance Measure: K - Number of people receiving flexible fund services.

General Indicators:

Performance Measure: G - Total number of individuals served in the Acadiana Area Human Services District (AAHSD).

Performance Measure: G - Total number of individuals served by outpatient mental health in AAHSD.

Performance Measure: G - Total number of individuals served by outpatient Addictive Disorders in AAHSD.

Performance Measure: G - Total number of enrollees in prevention programs.

Agency: 325 ACADIANA AREA HUMAN SERVICES DISTRICT

STATE OF LOUISIANA

Childrens Budget Narrative CHILD2

Fiscal Year 2026 - 2027 Report Date: 10/31/25

STATE OF LOUISIANA

Sunset Review

SUNSET1

Fiscal Year 2026 - 2027

Report Date: 10/31/25

SUNSET1 - Page 1 of 1

Agency: 325 ACADIANA AREA HUMAN SERVICES DISTRICT

Information Technology

INFORMATION TECHNOLOGY

| DEPARTMENT | | |
|---|--------------------------------|-------------------------------|
| 325-Acadiana Area Human Services District | PRIOR YEAR ACTUAL 2024-2025 | OPERATING BUDGET 2025-2026 |
| MEANS OF FINANCING | | |
| STATE GENERAL FUND (Direct) | \$159,513 | \$166,019 |
| INTERAGENCY TRANSFERS | | |
| FEES & SELF-GENERATED REVENUES | | |
| STATUTORY DEDICATIONS | | |
| FEDERAL FUNDS | \$7,395 | |
| TOTAL MEANS OF FINANCING | \$166,908 | \$166,019 |

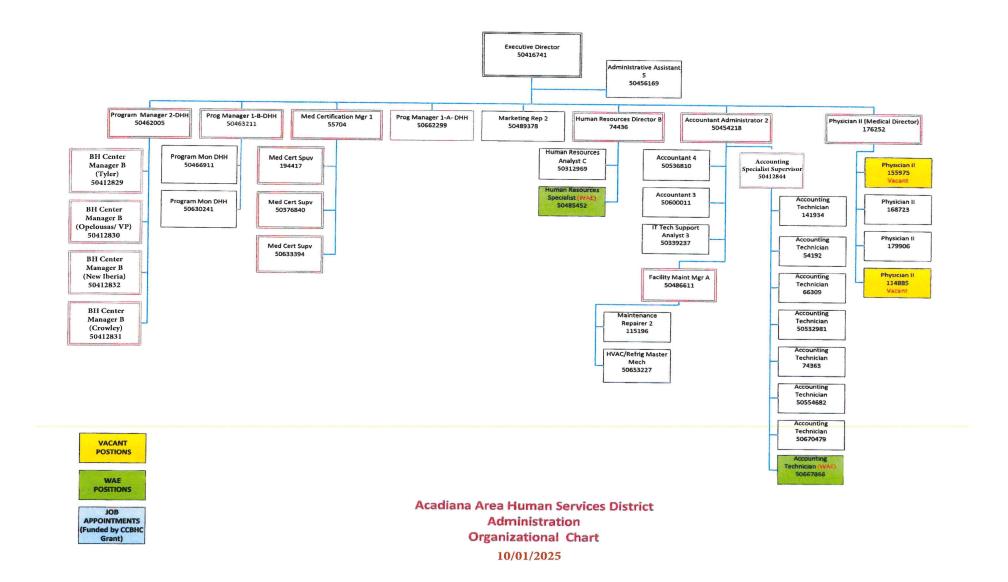
| EXPENDITURES AND REQUESTS | PARTITION OF THE PARTIT | 公司 和 [1] [1] [1] [2] [2] [2] [2] [2] [2] [2] [2] [2] [2 |
|--|--|--|
| PERSONAL SERVICES | | |
| Salaries | \$85,075 | \$87,776 |
| Other Compensation | | |
| Related Benefits | \$40,066 | \$39,974 |
| TOTAL PERSONAL SERVICES | \$125,141 | \$127,750 |
| OPERATING EXPENSES | | |
| Software Licensing | | |
| Software Maintenance | \$17,937 | \$14,769 |
| Hardware Rentals, Leases, or Financing | | |
| Hardware Maintenance | | |
| Data Lines and Circuits | | |
| Contract Services | | |
| Travel | | |
| Supplies | \$16,435 | \$23,500 |
| Other (Specify) | | |
| TOTAL OPERATING EXPENSES | \$34,372 | \$38,269 |
| TOTAL PROFESSIONAL SERVICES | | |
| ACQUISITIONS AND MAJOR REPAIRS | | |
| Hardware Acquisitions | \$7,395 | \$0 |
| Major Repairs | - | |
| TOTAL ACQUISITIONS & MAJOR REPAIRS | \$7,395 | \$0 |
| TOTAL EXPENDITURES AND REQUESTS | \$166,908 | \$166,019 |

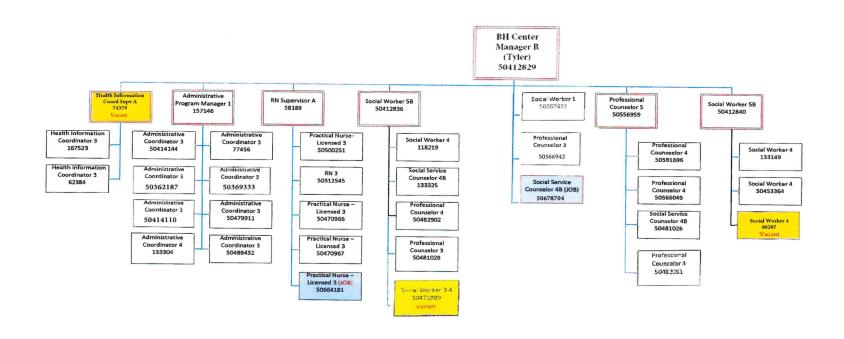
| | Wo | rker Ty | /pe | Worker Type | | |
|---------------------------|---------|---------|----------|-------------|-------|----------|
| | Perm IT | | | Perm IT | | |
| Job Function | T.O. | Other | Contract | T.O. | Other | Contract |
| Infrastructure | | | | | | |
| Application Development | | | | | | |
| Management/Administration | 1.00 | | | 1.00 | | |
| Vacant | | | | | | |
| TOTAL FTEs by Worker Type | 1.00 | 0.00 | 0.00 | 1.00 | 0.00 | 0.00 |
| TOTAL FTEs by Year | | 1.00 | | | 1.00 | |

| Department/Agency Name Approved IT-10s With Funding in | | | Acadiana Area Human Services District/325 | | | | | |
|---|--------------------------|---|---|-------------|-------------|-------------|-------|--|
| | | | Planned Funding | | | | | |
| Existing Operating Budget | | Current FY | Fiscal Year | Fiscal Year | Fiscal Year | Fiscal Year | | |
| IT-10 No. | Project/Initiative Title | Percent Complete As of Sept. 1, 2024 | 25-26 | 26-27 | 27-28 | 28-29 | 29-30 | Total |
| | N/A | | | | | | | \$0 |
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| | | Total | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 |

General Addenda

GENERAL ADDENDA





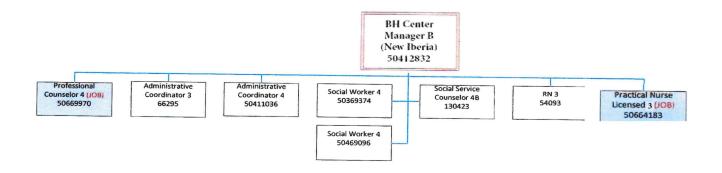
Acadiana Area Human Services District Tyler Behavioral Health Clinic Organizational Chart

10/01/2025

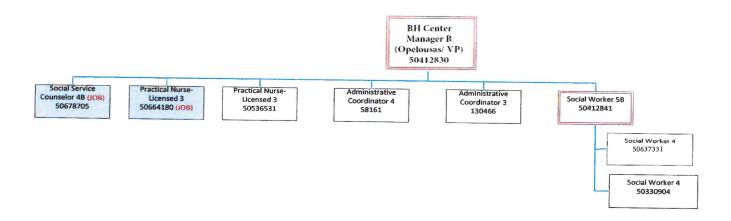


Acadiana Area Human Services District Crowley Behavioral Health Clinic Organizational Chart

10/01/2025



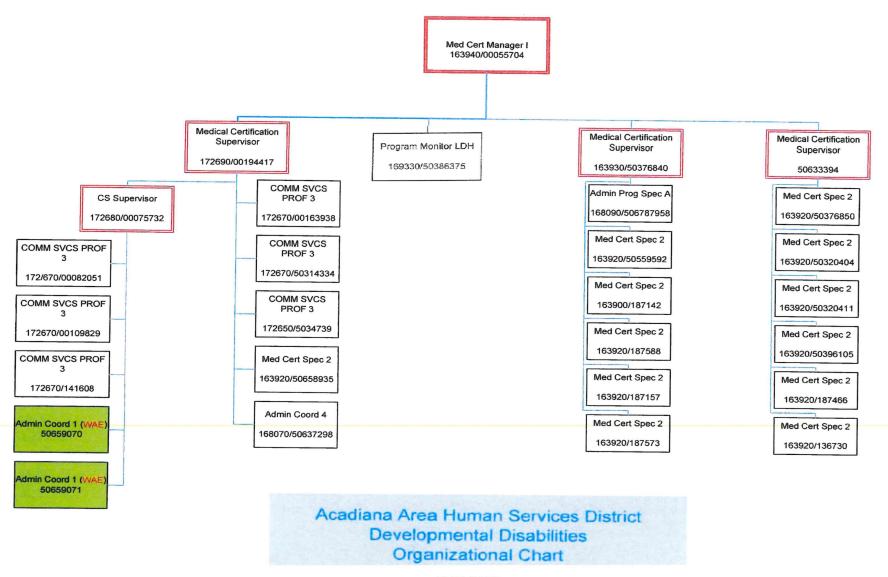
Acadiana Area Human Services District
New Iberia Behavioral Health Center
Organizational Chart
10/01/2025



Acadiana Area Human Services District
Opelousas Behavioral Health Clinic
Organizational Chart
10/01/2025



Acadiana Area Human Services District
Ville Platte Behavioral Health Clinic
Organizational Chart
10/01/2025



10/01/2025

BR-19B (08/20)

INTERAGENCY AGREEMENT

NOTE: It is the Receiving Agency's responsibility to ensure the execution of this Agreement. Both Agencies must submit copies of this Agreement with their Budget Request (and any subsequent BA-7s as documentation for I.A.T. revenues and I.A.T. expenses).

Date

Sending Agency Fiscal Officer

INTERAGENCY AGREEMENT

BR-19B

| | | (8/08) |
|-------------------------------|---|--|
| Interagency Agreement Between | LDH - Acadiana Area Human Services District #09-325 (Recipient Agency and #) | and LDH - Office of Behavioral Health #09-330 (Sending Agency and #) |
| For Fiscal Year 2026-2027 | LDH - Acadiana Area Human Services District #09-325 (Agency Name and #) | is budgeted to receive the following revenue from |
| | LDH - Office of Behavioral Health #09-330 (Agency Name and #) | _ by Interagency Transfer for the following reason(s): |
| The reason | on for the Interagency Agreement is: | |
| | Compulsive and Problem Gaming Fund - Treatment Compulsive and Problem Gaming Fund - Prevention Partnership for Success III (PFS III) - Fed CFDA # 93.243 State Opioid Response 4.0 (LaSOR 4.0) - Fed CFDA # 93.788 Substance Abuse Prev & Treat Block Grant (SAPT) - Fed CFDA # 93.959 Temporary Assistance for Needy Families (TANF) - Fed CFDA # 93.558 Tobacco Tax Health Care Fund Total Addictive Disorders Mental Health Block Grant (MHBG) - Federal CFDA # 93.958 Projects for Assistance in Transition from Homelessness (PATH) - Federal CFDA # Zero Suicide - Federal CFDA # 93.243 Total Mental Health | # 93.150 Amount |
| Rei | Daniel Sea 9/10/2025 Cipient Agency Fiscal Officer Date | |
| | Lauri Hatlelid September 3, 2025 | |

NOTE: It is the Receiving Agency's responsibility to ensure the execution of this Agreement.

Sending Agency Fiscal Officer

Both Agencies must submit copies of this Agreement with their Budget Request (and any subsequent BA-7s as documentation for I.A.T. revenues and I.A.T.

Date

BR-19B

| | | | | | (08/20) |
|---|--|---|-------------|---|-------------------------|
| Interagency Agreement Betwee | en <u>LDH-Acadiana Area Human D</u> (Recipient Agency and # | Dervices District (AAHSD) 09-325 | and | LDH-Medical Vendor Administration (Sending Agency and #) | ı (MVA)/09-305 |
| Fiscal Year 2026-2027 | LDH-Acadiana Area Human De (Agency Name and #) | Pervices District (AAHSD) 09-325 | | is budgeted to receive the following | <u>revenue</u> \$25,000 |
| from LDH-Medical Vendor Ad (Sending Agency I | | Transfer for the following reason(s): | _ | by Interagency Transfer for the follo | wing reason(s): |
| will reimburse AA | AHSD for all PASRR related activities at | d on the Memorandum of Understanding t the enhanced rate of 75% FFP in acco ent, computer software, travel expenses | rdance with | CFR 433.15(b) (9). This includes | |
| - | Recipient Agency Fiscal Officer | Date 10/10/25 | | | |
| - | Clint Summers Digitally signed by Cliet Summers Sufficient Client Summers Sufficient Client Summers, Sufficient Client Summer, Sufficient Client Summers, Sufficient Client Summers, Sufficient Client Summers, Sufficient Client Summers Sufficient Client Sufficient Sufficien | 10/24/25 Date | | | |

INTERAGENCY AGREEMENT

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