

DIVISION OF DEVELOPMENTAL DISABILITIES (DDD)
CONSOLIDATED FINANCIAL REPORT (CFR)
FY09 LIST OF DHS/DDD-FUNDED PROGRAMS AND CFR REPORTING REQUIREMENTS
TO BE REPORTED AS COST CENTERS ON THE CFR AND SUBMITTED TO DHS/OCA

DDD Program Code	CFR REP REQ? (Y or N)	DHS/DDD-FUNDED Program Descriptions	DHS FUND TYPE	Cover Provider Info	List of Programs Reported	CFR SCHEDULE/REPORT NAME					Type of Service Unit to be Reported on CFR
						PROG COST	PROG REVENUE	PROG PERSON'L	PROG CONSUL'T	SERVICE UNITS	
55A	N	HBS SERVICE FACILITATION	POS								
55D	N	HBS PERSONAL SUPPORT	POS								
55N	N	HBS NURSING - RN	POS								
55P	N	HBS NURSING - LPN	POS								
55T	N	HBS TRANSPORTATION	POS								
55V	N	HBS OUT-OF-HOME RESPITE	POS								
55W	N	HBS PERSONAL EMERGENCY RESPONSE SYSTEM	POS								
56U	N	BEHAVIORAL INTERVENTION PLAN	POS								
57G	N	BEHAVIORAL COUNSELING GROUP	POS								
57U	N	BEHAVIORAL COUNSELING INDIVIDUAL	POS								
58G	N	BEHAVIORAL THERAPY GROUP	POS								
58U	N	BEHAVIORAL THERAPY INDIVIDUAL	POS								
60D/61D	Y	DD CILA-24-HR, (Must be reported as a separate cost center in a separate program column)	POS	X	X	X	X	X	X	X	CLIENT DAYS
60D/61D	Y	DD CILA-Intermittent (Must be reported as a separate cost center in a separate program column)	POS	X	X	X	X	X	X	X	CLIENT DAYS
60D	Y	DD CILA-In-Home Family (Must be reported as a separate cost center in a separate program column)	POS	X	X	X	X	X	X	X	CLIENT DAYS
60D	Y	DD CILA-Host Family (Must be reported as a separate cost center in a separate program column)	POS	X	X	X	X	X	X	X	CLIENT DAYS
60D	Y	DD CILA - Foster Care (Must be reported as a separate cost center in a separate program column)									
61D	Y	POS CILA (May be combined with other DD CILA of the same type (60D 24-Hr or Intermittent) as one cost center)	POS	X	X	X	X	X	X	X	CLIENT DAYS
65H	N	CSLA - HOURLY	POS								
67D	Y	COMMUNITY LIVING FACILITY (CLF)	POS	X	X	X	X	X	X	X	24-HR DAY
68D	Y	HOME/INDIVIDUAL PLACEMENT (HIP)	POS	X	X	X	X	X	X	X	24-HR DAY
690	N	HB FAMILY ASSISTANCE PROGRAM (FAP)-CHILD	HB								
73D	N	RELATED SUPPORT (No New Funding)	POS								
87D	N	IN-HOME RESPITE CARE	POS								
880	N	GROUP RESPITE	GIA								
89D	N	RESIDENTIAL RESPITE CARE	POS								

- POS PURCHASE OF SERVICE / FEE FOR SERVICE
GIA GRANT-IN-AID FUNDING
HB HOME BASED SUPPORTS FUNDING
- NOTES: 1. If you are not certain which program codes you are required to report in detail on the CFR, you may call the DHS/DDD POS Unit at 217/782-0632.
2. If a program code in the above TABLE is not required to be reported (small type) in detail on the CFR either as a separate program cost column or in combination with an identical service with another program code, that program data must NOT be combined with other similar services that are required to be reported in a column on the CFR.
EXAMPLE ONE: a community agency serves 31A-, 31S-, 380-, and 38U-funded individuals in the same facility on the same day using some of the same staff. 380 and 38U, Regular Work, is a day program service, but it is not Developmental Training (31A & 31S are). Therefore, the expenses and revenue for the services provided to the 380- and 38U-funded individuals MUST NOT be combined with expenses and revenue for the services provided to the 31A- and 31S-funded individuals in the DT column on the CFR.
EXAMPLE TWO: a residential provider has 3 types of residential supports. 41D, 17D and 60D are small community residential settings, however, 17D and 60D are required to be reported on the CFR in separate columns each and 41D is not required. Therefore, 41D data MUST NOT be combined with 17D or 60D cost center columns on the CFR. Similarly, 17D and 60D must each appear in separate cost center program columns on the CFR. They cannot be combined just because they are both community group home settings.