



State of Connecticut
Department of Developmental Services



Dannel P. Malloy
Governor

Terrence W. Macy, Ph.D.
Commissioner

Joseph W. Drexler, Esq.
Deputy Commissioner

Operations Center Memo 2014-03

To: Purchase of Services Contracted Private Providers
From: Peter Mason, Manager, DDS Operations Center
Cc: Joe Drexler, Deputy Commissioner, Assistant Regional Directors of Private Services, Resource Administrators, CCPA, CT Non Profits, ARC/CT
Date: March 3, 2014
RE: Eight Month Expense Report

As a requirement of the Purchase of Service (POS) contract with the Department of Developmental Services (DDS), each POS contracted provider is required to submit an Eight Month Expense Report (July 1 – February 28) to DDS each year by March 31. The Eighth Month Report was modified last year based upon requests from the Provider community to further reduce and streamline reporting requirements.

The 2014 Eight Month Report uses the same format of comparing the budgeted amount with actual costs for the time period of July - February as the previous Report, with the addition of reporting a new estimated End of Fiscal Year budget amount based on the actual costs to date plus the projected budget from March 1 – June 30. If the provider does not add a new program with annualized funding of more than \$100,000 between the submission of the Eighth Month Report and the end of the fiscal year ending June 30, 2014, the estimated End of Fiscal Year Budget Amount will take the place of the Final Operational Report usually due in July. Providers that add a new program with annualized funding of more than \$100,000 between the submission of the Eighth Month Report and the end of the fiscal year ending June 30, 2014 will be required to submit a Final Operation Plan by July 15, 2014.

Providers will continue to use the total budgeted amount for each program type from the most recent Operational Plan (Op. Plan) submitted by the provider prior to February 28. All Contract Service Authorizations (CSA) and Vendor Service Authorizations (VSA) should be inputted for the appropriate program. As a reminder, the CSA is paid via the POS contract and the VSA is paid via a Fiscal Intermediary. In developing the Fiscal Year 2014 Op. Plan, providers were given the option of either accounting for their expenses for services that were funded via the VSA in either the applicable cost centers on the “Residential” and “Day” tabs, or in separate cost centers on the “Other” tab. For providers who chose to include the expenses associated with the VSA participants in the applicable cost centers on the “Residential” and “Day” tabs on the Op. Plan, the agency must input the total number of CSA’s and VSA’s in the appropriate program and record VSA revenue in line 7.b. Less FEE for SERVICE REVENUE.

As a reminder, Providers must have a separate cost center for each waiver support category (CLA , CRS, IHS, Personal Supports, Adult Companion, Healthcare Coordination, Behavioral Consulting, DSO, GSE, Sheltered, ISE, Individualized Day – vocational and non-vocational may be combined).

The Eight Month Report and instructions can be found on the DDS Website under the Provider page at the following link: <http://www.ct.gov/dds/cwp/view.asp?a=3166&Q=498824>

Electronically submit the completed Expense Report to the DDS Operations Center Resource Manager II with a copy to Sandra.McNally@ct.gov and Pat.Dillon@ct.gov. by March 31.

If you have any questions regarding the new report, please feel free to contact Sandra.McNally@ct.gov.