



Agency Glossary of Terms and Acronyms

Abandoned: A situation in which the parent or legal custodian of a child or, in the absence of a parent or legal custodian, the caregiver, while being able, has made no significant contribution to the child's care and maintenance or has failed to establish or maintain a substantial and positive relationship with the child, or both. (Section 39.01(1), F.S.)

ABC (Allocation, Budget, and Contract Control System): An agency subsystem used to track specific consumer information and process invoices.

Abuse (Child): Any willful act or threatened act that results in any physical, mental, or sexual abuse, injury, or harm that causes or is likely to cause the child's physical, mental, or emotional health to be significantly impaired. Abuse of a child includes acts or omissions. (Section 39.01(2), F.S.)

Abuse (Vulnerable Adult): Any willful act or threatened act by a relative, caregiver, or household member which causes or is likely to cause significant impairment to a vulnerable adult's physical, mental, or emotional health. Abuse includes acts or omissions. (Section 415.102(1), F.S.)

Abuse, Neglect and Exploitation (ANE) Report: A report of known or suspected ANE of a child or vulnerable adult received and accepted for investigation by the Department of Children and Families (DCF) via its Florida Abuse Hotline.

Activity: A unit of work that has identifiable starting and ending points, has purpose, consumes resources, and produces outputs. Unit cost information is determined by using the outputs of activities.

Actual Expenditures: Includes prior year actual disbursements, payables, and encumbrances. Agencies may certify forward outstanding payables and encumbrances at the end of a fiscal year for disbursement between July 1 and September 30 of the subsequent fiscal year. Certified forward amounts count in the year in which the funds are committed, rather than the year disbursed.

ADT (Adult Day Training): Services for adults with developmental disabilities that support their participation in community activities, including training and assistance with acquisition, retention, or improvement in self-help, socialization, and adaptive skills. These services include activities to enhance social development and development of

skills in performing activities of daily living, community living, and therapeutic recreation. Individuals attend ADT in facilities that are appropriate for their age and interests.

AHCA (Agency for Health Care Administration): The state agency responsible for the administration of the Florida Medicaid program, licensure, and regulation of Florida's health facilities, and for providing information to Floridians about the quality of care they receive.

Altercation: A physical confrontation occurring between a client and a member of the community, a client and provider, or two or more clients that results in law enforcement contact. If the altercation results in client injury requiring medical attention in an urgent care, emergency room or physician's office setting, it is to be reported as a Client Injury. If the altercation results in client arrest, it is to be reported as a Client Arrest. If the altercation results in a provider arrest, it is to be reported as a Provider Arrest.

APD (Agency for Persons with Disabilities): The state agency specifically tasked with serving the needs of Floridians with developmental disabilities.

APD iConnect (a.k.a. Client Data Management System or CDMS): A centralized consumer record system that collects key data at the client-specific and provider-specific levels to improve the analysis, tracking, and reporting processes.

Appropriation Category: The lowest line-item funding level in the Florida General Appropriations Act (GAA) that represents a major expenditure classification. Within budget entities, these categories may include salaries and benefits, other personal services (OPS), expenses, operating capital outlay (OCO), data processing services, fixed capital outlay (FCO), etc.

APS (Adult Protective Services): A program operated by the Department of Children and Families that provides services to protect vulnerable adults from abuse, neglect, and exploitation (ANE), safeguard such vulnerable adults from future ANE, and conduct investigations of ANE against vulnerable adults.

Anti-Fraud Activity: Action taken by the Office of the Inspector General (OIG) for the purposes of detecting or investigating fraud against the state, usually in cooperation with other state regulatory or law enforcement agencies.

ASL (American Sign Language): It is a complete, natural language that has the same linguistic properties as spoken languages, with grammar that differs from English. ASL is expressed by movements of the hands and face.

Autism: A pervasive, neurologically based developmental disability of extended duration, which causes severe learning, communication, and behavior disorders with age of onset during infancy or childhood. Individuals with autism exhibit impairment in reciprocal social interaction, impairment in verbal and nonverbal communication and imaginative ability, and a markedly restricted repertoire of activities and interests.

Baker Act: The involuntary admission of a client of APD to a receiving facility for involuntary examination or placement for psychiatric care. Criteria for initiating a Baker Act placement and individuals authorized to initiate a Baker Act of an individual is defined within Chapter 394, F.S.

Baseline Data: Indicators of a state agency's performance level, pursuant to guidelines established by the Executive Office of the Governor (EOG) in consultation with the Florida Legislature. Baseline data is a set of information that serves as a foundation used to compare other data acquired afterwards.

Budget Entity: A unit or function at the lowest level to which funds are specifically appropriated in the General Appropriations Act. A budget entity can be a department, division, program, or service and can have one or more program components.

CARES Program: Comprehensive Assessment and Review for Long-Term Care Services (CARES) is Florida's federally mandated pre-admission screening program for nursing home applicants.

CDC+ (Consumer-Directed Care Plus) Program: An alternative to the traditional iBudget waiver that gives an eligible person the opportunity to hire workers and vendors to help with daily care needs, such as personal care, respite, and transportation. Workers may be family members or others familiar to the consumer. To be eligible for the CDC+ Program, an individual must be receiving services from the agency through the iBudget waiver. The CDC+ Program provides the opportunity to improve quality of life, empowering the consumer to make choices about the kinds of supports and services needed. Together with the assistance of a trained CDC+ Consultant, who is also a WSC, the consumer plans their own supports, manages an established budget, and makes decisions regarding care and staff.

CDC+ Purchasing Plan: A written spending plan that details the services and supports the CDC+ consumer or their designated Representative may purchase with the CDC+ monthly budget allocation.

CDC+ Representative: An uncompensated individual designated by the consumer to assist with managing the consumer's budget allowance and needed services. The CDC+ Representative advocates for and acts on behalf of the consumer in CDC+ matters. (Section 409.221 (4)(c)(6), F.S.)

Client: Any person with developmental disabilities who is determined eligible by the agency for services as defined in Chapter 393, F.S.

CMAT (Children's Multidisciplinary Assessment Team): When a child or youth under 21 years of age has a serious or complex medical condition that may require long-term care services, the CMAT may review the case to determine eligibility for services to meet the individual's medical needs. CMAT's primary purpose is to review the medical and

psychosocial assessment and make a medically necessary determination of eligibility for Medicaid-funded long-term care services.

CMS (Centers for Medicare & Medicaid Services): The federal agency within the United States Department of Health and Human Services (HHS) that administers the Medicare program and works with state governments to administer Medicaid, the State Children's Health Insurance Program (SCHIP), and health insurance portability standards.

Commodity: Any of the various supplies, materials, goods, merchandise, equipment, information technology, and other personal property, including a mobile home, trailer, or other portable structure with floor space of less than 5,000 square feet, purchased, leased, or otherwise contracted for by the state and its agencies. Commodity also includes interest on deferred-payment commodity contracts, approved pursuant to Section 287.063, F.S. However, commodities purchased for resale are excluded from this definition. Printing of publications shall be considered a commodity, when let upon contract pursuant to Section 283.33, F.S., whether purchased for resale or not.

Contract: A formal written agreement, legally binding, between the agency and a contractor detailing the commodities or services to be provided by the contractor in exchange for the price to be paid for such commodities or services by the agency. The agreement includes terms and conditions, which the parties must perform in compliance with statutes and regulations, and specific details on how, when, where, and to whom the contractor should provide a commodity or service.

Contract Document: Refers to the contract and any amendments, renewals, and extensions that may include attachments, exhibits, and documents incorporated by reference regardless of the method of procurement.

Contractual Service: Refers to a vendor's time and effort rather than the furnishing of specific commodities. The term applies only to those services rendered by individuals and firms who are contractors. Services may include, but are not limited to, evaluations, consultations, maintenance services, accounting, security, management systems, management consulting, educational training programs, research and development studies or reports, and professional, technical, and social services. Contractual service does not include any contract for the furnishing of labor or materials for the construction, renovation, repair, modification, or demolition of any facility, building, portion of building, utility, park, parking lot, or structure or other improvement to real property, entered into pursuant to Chapter 255, F.S. and Rule 60D:5, F.A.C. Commodities, which are acquired incidental to the acquisition of a contractual service, are considered to be part of the acquisition or purchase of the contractual service.

Coronavirus Disease 2019 (COVID-19): Is a respiratory disease caused by SARS-CoV-2, a new coronavirus discovered in 2019. The virus is thought to spread mainly from

person to person through respiratory droplets produced when an infected person coughs, sneezes, or talks. Some people who are infected may not have symptoms. For people who have symptoms, illness can range from mild to severe. Adults 65 years and older and people of any age with underlying medical conditions are at higher risk for severe illness.

CP (Cerebral Palsy): A group of disabling symptoms of extended duration, which results from damage to the developing brain that may occur before, during, or after birth and that results in the loss or impairment of control over voluntary muscles. Cerebral Palsy keeps the brain from communicating necessary tasks to the rest of the body.

CPS (Child Protective Services): A program that is operated by the Department of Children and Families to provide services to protect children from child abuse and neglect, to safeguard such children from future abuse and neglect, and to conduct investigations of child abuse and neglect.

Crisis: One or more of the situations described in Rule 65G-1.047, F.A.C., Crisis Status Criteria.

Critical Incident: An incident, as specified in Rule 65G-2.010(5)(a), F.A.C., that involves a client or an APD provider that may put the client's health and safety at risk. Critical Incident categories include: a life-threatening injury or illness; a missing child or adult who has been adjudicated incompetent; negative media involvement; a provider arrest; sexual misconduct; an unexpected client death; verified abuse, neglect, or exploitation investigation; and a violent crime arrest.

CWE (Crisis Waiver Enrollment): Individuals determined to be in crisis will be prioritized for available waiver placements in order of the severity of crisis, with the severity determined by risk to the health, safety, and welfare of each applicant. Crisis criteria for waiver enrollment includes: the applicant is currently homeless; the applicant exhibits behaviors that, without provision of immediate waiver services, may create a life-threatening situation for the applicant or others; and the applicant's current caregiver is in extreme duress and is no longer able to provide for the applicant's health and safety because of illness, injury, or advanced age.

DCF (Department of Children and Families): The state agency that provides social services to children, adults, refugees, domestic violence victims, human trafficking victims, the homeless community, childcare providers, people with disabilities, and the elderly. DCF services include investigating allegations of abuse, neglect, and exploitation involving children or adults with developmental disabilities.

DCF/FSFN (Department of Children and Families/Florida Safe Families Network): A system that houses data from investigations of abuse, neglect, and exploitation.

DCF/OAH (Department of Children and Families/Office of Appeal Hearings): A work unit that has bidirectional access to the agency's Legal Case Management System (LCMS) for Medicaid hearings.

DD (Developmental Disability): A disorder or syndrome defined in Florida statute as autism, cerebral palsy, intellectual disability, spina bifida, Down syndrome, Prader-Willi syndrome, and Phelan-McDermid syndrome that manifests before the age of 18 and constitutes a substantial handicap that can be expected to continue indefinitely.

DD Awareness Month (Developmental Disabilities Awareness Month): March is national Developmental Disabilities Awareness Month. It helps raise awareness and advocates for people with intellectual and developmental disabilities.

DDCs (Developmental Disability Centers): State owned and operated facilities, formerly known as developmental disabilities institutions, which offer treatment and care of individuals with developmental disabilities.

DDDP (Developmental Disabilities Defendant Program): A secure residential facility that provides competency training and testing for persons with developmental disabilities alleged to have committed a felony and who are court-ordered into the facility (see "Forensic" definition).

DEAM (Disability Employment Awareness Month): October is Disability Employment Awareness Month, which raises awareness about disability employment issues and celebrates the many contributions of exceptional employers and workers with disabilities.

Demand: The number of output units that are eligible to benefit from a service or activity.

DEO (Department of Economic Opportunity): The state agency, in collaboration with their partners, that assists the Governor in advancing Florida's economy by championing the state's economic development vision and administering state and federal programs and initiatives to help visitors, citizens, businesses, and communities.

Division of Vocational Rehabilitation (VR): Federal-state program within the Department of Education that helps people who have physical or mental disabilities obtain or keep a job.

DOEA (Department of Elder Affairs): The state agency that administers programs and services for elders across the state of Florida.

DOH (Department of Health): The state agency responsible for protecting the public health and safety of the residents and visitors of the state of Florida.

DOH, Bureau of Vital Statistics: A state office within the Department of Health that is responsible for the uniform and efficient registration, compilation, storage, and preservation of all vital records in the state (Chapter 282, F.S.). Vital records mean

certificates or reports of birth, death, fetal death, marriage, dissolution of marriage, name change filed pursuant to Section 68.07, F.S., and data related thereto.

Down Syndrome: A disorder caused by the presence of an extra chromosome 21. This genetic disorder, also known as trisomy 21, varies in severity, causes lifelong intellectual disability and developmental delays, and, in some people, causes health problems.

EEP (Employment Enhancement Project): The EEP is a program funded by the Florida Legislature to provide opportunities and supports to clients on the agency's waiting list who want to work, obtain, and maintain competitive employment or internships. Jobseekers must be 18 years of age or older and on the agency's waiting list to qualify. The Florida Legislature has appropriated nonrecurring funds for this program since Fiscal Year 2013-2014. In Fiscal Year 2022-2023, the Florida Legislature began funding this program with recurring funds.

EOG: Executive Office of the Governor.

Estimated Expenditures: Includes the amount estimated to be expended during the current fiscal year. These amounts will be computer-generated, based on current year appropriations adjusted for vetoes and special appropriations.

Expenditure: An amount of money spent or the action of spending money.

Expenses: The usual, ordinary, and incidental expenditures by an agency or the judicial branch, including, but not limited to, such items as commodities and supplies of a consumable nature, current obligations, and fixed charges, and excluding expenditures classified as operating capital outlay. Payments to other funds or local, state, or federal agencies are included in this budget classification of expenditures.

FACTS (Florida Accountability Contract Tracking System): An online tool developed by the Department of Financial Services to make the government contracting process in Florida more transparent through the creation of a centralized, statewide contract-reporting system.

FAS (Financial Application System): A system used to query the Florida Accounting Information Resource system (FLAIR).

FCCs (Family Care Councils): The mission of the FCCs of Florida is to educate and empower individuals with developmental disabilities and their families, partnering with the Agency for Persons with Disabilities, to bring quality services to individuals with dignity and choice. July 2022 marks 30 years since the FCCs were formed. The 15 local councils throughout the state consist of Governor-appointed volunteers who provide education and empowerment for self-advocates in Florida, as well as their families. FCC members are individuals with intellectual and developmental disabilities and parents, siblings, grandparents, and guardians of people who qualify for services from APD.

FCCF (Family Care Council Florida): The organization that functions as a statewide board of the FCCs. Through the FCCF, representatives from each local council meet bimonthly to educate and discuss common concerns while working together to represent individuals with developmental disabilities and their families as a united voice.

FCO (Fixed Capital Outlay): Real property (land, buildings including appurtenances, fixtures and fixed equipment, structures, etc.), including additions, replacements, major repairs, and renovations to real property that materially extend its useful life or materially improve or change its functional use. Includes furniture and equipment necessary to furnish and operate a new or improved facility.

FDDC (Florida Developmental Disabilities Council): Their mission is to advocate and promote meaningful participation in all aspects of life for Floridians with developmental disabilities. They are committed to advocating and promoting programs, practices, and innovative initiatives that enhance the independence, productivity, inclusion, and self-determination of individuals with developmental disabilities in all aspects of life.

FDEM (Florida Division of Emergency Management): The FDEM plans for and responds to both natural and man-made disasters. These range from floods and hurricanes to incidents involving hazardous materials or nuclear power. The division prepares and implements a statewide Comprehensive Emergency Management Plan, and routinely conducts extensive exercises to test state and county emergency response capabilities.

FFMIS: Florida Financial Management Information System.

FLAIR: Florida Accounting Information Resource system.

FLAIR RECON: A Florida Accounting Information Resource system functionality, which reconciles invoices between APD's subsystem called the Allocation, Budget, and Contract Control System (ABC) and the Financial Application System (FAS) within FLAIR.

Florida Abuse Hotline: The central abuse hotline maintained by DCF that serves as the state's central reporting center for allegations of abuse, neglect, and exploitation for children and vulnerable adults.

Florida Whistle-blower's Act: Section 112.3187, F.S., creates a procedure for complainants to follow and provides a civil right of action against retaliation for some complainants.

FMMIS (Florida Medicaid Management Information System): An information system that is overseen by AHCA. This system is used to process Florida Medicaid claims and encounter transactions and to produce and retrieve management information relating to the Florida Medicaid program.

Forensic Services: A state-funded program that provides a secure setting for persons who are alleged to have committed a felony and who are court-ordered into such a facility (see “DDDP” definition).

FTE (Full-Time Equivalent): It is equivalent to one employee working full time.

GAA (General Appropriations Act): Provides funds for annual period beginning July 1 and ending the following year on June 30, as well as supplemental appropriations, to pay salaries and other expenses, capital outlay, buildings or other improvements, and other specified purposes of various agencies of state government.

GH (Group Home): A licensed residential facility that provides a family living environment, including supervision and care necessary to meet the physical, emotional, and social needs of its residents as established in Chapter 393, F.S.

GR (General Revenue): A collection of state taxes and selected fees deposited into a fund and appropriated by the Legislature for any purpose.

HCBS (Home and Community-Based Services): The name of a program and services provided by the agency through the iBudget waiver. The iBudget waiver provides supports and services to eligible persons with developmental disabilities living at home or in a home-like setting. The iBudget waiver program is funded by both federal and matching state dollars. This waiver reflects use of an individual budgeting approach and enhanced opportunities for self-determination. The purpose of this waiver is to promote and maintain the health of eligible individuals with developmental disabilities, provide medically necessary supports and services to delay or prevent institutionalization, and foster the principles of self-determination as a foundation for services and supports.

High Watch Process: A process designed to provide additional monitoring and support to clients who have been identified as meeting specific criteria regarding their behavioral or medical needs. Examples include Baker Acts, emergency room visits, and violent crime arrests. By providing monitoring and technical assistance to the provider as well as any additional needed supports, this added focus of agency resources promotes more stability and success towards independence on a long-term basis for these consumers.

HIPAA (Health Insurance Portability and Accountability Act): A federal law enacted in 1996. The primary goal is to make it easier for people to keep health insurance, protect the confidentiality and security of health care information, and help the health care industry control administrative costs.

iBudget (Individual Budgeting): A term associated with the agency’s Home and Community-Based Services program that is used to describe both an electronic system and a method for determining a person’s allocation of funds for services. iBudget considers the legislative appropriation for the fiscal year and individual characteristics correlated with costs to generate a base budget amount for each person. iBudget is also

known as the Developmental Disabilities Individual Budgeting waiver, an approved HCBS Medicaid waiver also used by participants in the CDC+ Program.

ICA (Individual Comprehensive Assessment): APD's assessment tool that will eventually replace the Questionnaire for Situational Information (QSI) for determining a person's level of need and support in areas of community living and functional, behavioral, and physical health. The ICA also provides relevant information for use of a resource allocation algorithm to assign a funding range for each person receiving services, estimates a person's degree of social integration into the community to stimulate improved social integration efforts for a person who may be isolated, and detects possible risks or threats in a person's life situation and alerts assessors, WSCs, APD staff, and providers that attention may be required to help the individual avoid undue hardship, illness, or harm. Note: The ICA was previously known as the Next Generation Questionnaire for Situational Information (NGQSI).

ICF/IID (Intermediate Care Facility for Individuals with Intellectual Disabilities): A facility licensed in accordance with state law and certified in accordance with federal regulations, pursuant to the Social Security Act, as a provider of Medicaid services to individuals who are intellectually disabled or who have a related condition. A residential facility licensed and certified by AHCA under part VIII of Chapter 400, F.S. The term also refers to a Medicaid benefit that enables states to provide comprehensive and individualized health care and rehabilitation services to individuals with intellectual disabilities or related conditions to promote their functional status and independence. ICF/IIDs provide active treatment that is the continuous, aggressive, and consistent implementation of a program of specialized and generic training, and health or related services, directed toward helping the individual function with as much self-determination and independence as possible.

IFS (Individual and Family Services) Fund: A fund provided to the state through federal Social Services Block Grant (SSBG), authorized under Title XX of the Social Security Act. This fund may be used for a variety of services. However, federal interpretation specifically prohibits the use of SSBG funds for providing medical services, dental services, and for providing direct stipends to individuals or their families.

Incident: An incident which could potentially impact the health, safety, and well-being of an APD client or clients. The incident may or may not occur under the care of a provider and can involve clients of APD and provider employees. Incidents are either Critical Incidents or Reportable Incidents, which are both enumerated as categories. Provider reporting criteria of incidents are specified in Rule 65G-2.010(5), F.A.C.

Incident Management: A process of tracking and resolving an event that could potentially impact the health, safety, and well-being of agency clients. Providers must take immediate action in the situation to resolve the emergency and to ensure the health and safety of the individual and all other clients. Providers must complete and submit all

incident reports and follow-up reports using the agency's Incident Reporting Form. The timely reporting and submission of incident reports to the agency, as well as the appropriate management of incidents, is vital in ensuring the health, safety, and wellbeing of agency clients.

Incident Management System (IMS): APD's statewide automated system used to report and respond to critical and reportable incidents involving APD clients living in the community.

Indicator: A single quantitative or qualitative statement that reports information about the nature of a condition, entity, or activity. This term is used commonly as a synonym for the word "measure."

Information Technology Resources: Includes data processing-related equipment, software, materials, services, telecommunications, personnel, facilities, maintenance, and training.

Input: See "Performance Measure" definition.

Intellectual Disability: The term used to describe a condition resulting in significantly subaverage general intellectual functioning existing concurrently with deficits in adaptive behavior which manifests before the age of 18 and can reasonably be expected to continue indefinitely. "Adaptive behavior" refers to the effectiveness or degree with which an individual meets the standards of personal independence and social responsibility expected of his or her age, cultural group, and community. "Significantly subaverage general intellectual functioning" means performance that is two or more standard deviations from the mean score on a standardized intelligence test specified in the rules of this agency.

Internal Audit: An Office of the Inspector General (OIG) examination of financial or performance issues within the organization that result in a report. These audits may also involve providers under agency contract.

Internal Investigation: An OIG inquiry of misconduct, misuse, and misappropriation issues within the agency resulting in an official report. Internal investigations may also involve agency-contracted providers.

IOE: Itemization of Expenditure

Judicial Branch: All officers, employees, and offices of the Supreme Court, district courts of appeal, circuit courts, county courts, and the Judicial Qualifications Commission.

LAS/PBS (Legislative Appropriations System/Planning and Budgeting Subsystem): The statewide appropriations and budgeting system owned and maintained by the Executive Office of the Governor.

LBC (Legislative Budget Commission): A standing joint committee of the Legislature. The Commission reviews and approves/disapproves agency requests to amend original approved budgets; reviews agency spending plans; and takes other actions related to the fiscal matters of the state, as authorized in statute. It is composed of 14 members appointed to two-year terms by the President of the Senate and by the Speaker of the House of Representatives.

LBR (Legislative Budget Request): A request to the Legislature, filed pursuant to section 216.023, F.S., or supplemental detailed requests filed with the Legislature, for the amounts of money an agency or branch of government believes will be needed to perform the functions that it is authorized, or which it is requesting authorization by law, to perform.

LRPP (Long Range Program Plan): A plan developed on an annual basis by each state agency that is policy-based, priority-driven, accountable, and developed through careful examination and justification of all programs and their associated costs. Each plan is developed by examining the needs of agency customers and clients and proposing programs and associated costs to address those needs based on state priorities as established by law, the agency mission, and legislative authorization. The plan provides the framework and context for preparing the Legislative Budget Request and includes performance indicators for evaluating the impact of programs and agency performance.

LTC (Long-Term Care): Services provided on an ongoing basis to people with developmental disabilities in a residential setting, such as a developmental disability center.

Management Review: An OIG assessment of agency management issues as requested by agency managers, usually related to some program, process, or personnel.

MCM (Medical Case Manager and/or Medical Case Management): A health care practitioner employed by the agency to provide consultation and technical assistance regarding the health and safety of agency clients.

Medicaid Waiver: See “Waiver” definition.

Medical Necessity: Medical or allied care, goods, or services furnished or ordered that meet the following conditions: 1. Be necessary to protect life, to prevent significant illness or significant disability, or to alleviate severe pain; 2. Be individualized, specific, and consistent with symptoms or confirmed diagnosis of the illness or injury under treatment, and not in excess of the patient’s needs; 3. Be consistent with generally accepted professional medical standards as determined by the Medicaid program, and not experimental or investigational; 4. Be reflective of the level of service that can be safely furnished, and for which no equally effective and more conservative or less costly treatment is available; statewide; and, 5. Be furnished in a manner not primarily intended for the convenience of the individual, the individual’s caretaker, or the provider.

MSP: Medicaid State Plan.

Narrative: Justification for each service and activity required at the program component detail level of the agency's budget request. An explanation, in many instances, will be required to provide a full understanding of how the dollar requirements were computed.

NASBO: National Association of State Budget Officers.

NASDDDS (National Association of State Directors of Developmental Disabilities Services): An organization that represents the nation's agencies in 50 states and the District of Columbia providing services to children and adults with intellectual and developmental disabilities and their families. NASDDDS promotes visionary leadership, systems innovation, and the development of national policies that support Home and Community-Based Services for individuals with disabilities and their families.

NCI (National Core Indicators): They are nationally standardized performance indicators that include approximately 100 outcomes related to understanding the overall health of public developmental disabilities agencies. Associated with each core indicator is a source from which the data is collected in collaboration with the Human Services Research Institute (HSRI). Sources of information include consumer surveys (e.g., empowerment and choice issues), family surveys (e.g., satisfaction with supports), provider surveys (e.g., staff turnover), and state systems data (e.g., expenditures, mortality, etc.). National Core Indicators provide Florida a way to compare its performance against other states.

Nonrecurring: Expenditure or revenue limited to one fiscal year, or not expected to be needed or available after the current fiscal year.

Notice of Non-Compliance (NNC): A plan submitted by an APD licensed residential provider to correct, fix, or remediate identified deficiencies, alerts, complaints, incident reports, audits and other items cited as out of compliance. The NNC is the action plan used by APD to track and ensure all citations and complaints identified are addressed and resolved by the provider within an established timeframe.

OCO (Operating Capital Outlay): Equipment, fixtures, and other tangible personal property of a nonconsumable and nonexpendable nature. OCO applies to items valued at \$1,000 or more that have an expected life of one year or more.

OIG (Office of the Inspector General): In accordance with Section 20.055, F.S., an Office of Inspector General (OIG) is established in each state agency to provide a central point for coordination of and responsibility for activities that promote accountability, integrity, and efficiency in government. Though the Inspector General (IG) is under the general supervision of the agency head for administrative purposes, the IG reports directly to the Chief Inspector General (CIG) to maintain independence from the agency. The CIG reports directly to the Governor both administratively and functionally.

OPB: Office of Policy and Budget, Executive Office of the Governor.

OPPAGA (Office of Program Policy Analysis and Government Accountability): OPPAGA is an office of the Legislature that provides data, evaluative research, and objective analyses to assist legislative budget and policy deliberations. OPPAGA also conducts research as directed by state law, the presiding officers, or the Joint Legislative Auditing Committee.

OPS (Other Personal Services): Refers to an employment classification and a budget category for compensation for services rendered by a person who is not a regular or full-time employee in an established position. This includes, but is not limited to, temporary employees, students, graduate assistants and fellows, part-time academic employees, board members, consultants, and others specifically budgeted for an agency in this category.

Outcome: See Performance Measure definition.

Output: See Performance Measure definition.

Outsourcing: Contracting with a vendor for the delivery of a service or item (includes the responsibility for performance). Outsourcing includes everything from contracting for minor administration tasks to contracting for major portions of activities or services that support the agency mission.

PASRR (Preadmission Screening and Resident Review): A federal requirement to help ensure that individuals are not inappropriately placed in nursing homes for long-term care. PASRR requires that Medicaid-certified nursing facilities evaluate all applicants for serious mental illness (SMI) and/or intellectual disability (ID), offer all applicants the most appropriate setting for their needs (in the community, a nursing facility, or acute care settings), and provide all applicants the services they need in those settings. PASRR is an important tool for states to use in rebalancing services away from institutions and toward supporting people in their homes, and to comply with the Supreme Court decision, *Olmstead vs L.C.* (1999). Under the Americans with Disabilities Act, individuals with disabilities cannot be required to be institutionalized to receive public benefits that could be furnished in community-based settings.

Pass Through: A situation in which funds flow through an agency's budget to other entities (e.g., local governments) without the agency having discretion on how the funds are managed and spent. The activities (outputs) associated with the expenditure of the funds are not measured at the state level. NOTE: This definition of "pass through" only applies for the purposes of long-range program planning.

Performance Ledger: The official compilation of information about state agency performance-based programs and measures, including approved programs, approved outputs and outcomes, baseline data, approved standards for each performance

measure, and any approved adjustments thereto, as well as actual agency performance for each measure.

Performance Measure: A quantitative or qualitative indicator used to assess state agency performance. Three types used for the LRPP are:

- Input means the quantities of resources used to produce goods or services and the demand for those goods and services.
- Outcome means an indicator of the actual impact or public benefit of a service.
- Output means the actual service or product delivered by a state agency.

Phelan-McDermid Syndrome: A disorder caused by the loss of the terminal segment of the long arm of chromosome 22, which occurs near the end of the chromosome at a location designated q13.3, typically leading to developmental delay, intellectual disability, dolichocephaly, hypotonia, or absent or delayed speech.

PMDS: Payroll Management Data System.

Plan of Remediation (POR): A plan submitted by a provider to correct, fix, or remediate identified deficiencies, alerts, complaints, incident reports, audits and other items cited as out of compliance. The POR is the action plan used by APD to track and ensure all citations and complaints identified are addressed and resolved by the provider within an established timeframe.

Policy Area: A grouping of related activities that reflect major statewide priorities. Policy areas summarize data at a statewide level by using the first two digits of the 10-digit LAS/PBS program component code. Data collection will sum across state agencies when using this statewide code.

Prader-Willi Syndrome: It is an inherited condition typified by neonatal hypotonia with failure to thrive, hyperphagia or an excessive drive to eat which leads to obesity usually at 18 to 36 months of age, mild to moderate intellectual disability, hypogonadism, short stature, mild facial dysmorphism, and a characteristic neurobehavior.

Primary Service Outcome Measure: The service outcome measure which is approved as the performance measure that best reflects and measures the intended outcome of a service. Generally, there is only one primary service outcome measure for each agency service.

Privatization: Occurs when the state relinquishes a function, service, or responsibility or reduces its role in the delivery of a service or specific activity.

Procurement: The act of obtaining commodities or contractual services through standardized methods, policies, or law.

Program: A set of services and activities undertaken in accordance with a plan of action organized to realize identifiable goals and objectives based on legislative authorization (a program can consist of single or multiple services). For purposes of budget development, programs are identified in the General Appropriations Act by a title that begins with the word "Program." In some instances, a program consists of several services, and in other cases the program has no services delineated within it; the service is the program in these cases. The LAS/PBS code is used for purposes of both program identification and service identification. "Service" is a "budget entity" for purposes of the Long Range Program Plan.

Program Component: An aggregation of generally related objectives which, because of their special character, related workload, and interrelated output, can logically be considered an entity for purposes of organization, management, accounting, reporting, and budgeting.

Program Purpose Statement: A brief description of approved program responsibilities and policy goals. The purpose statement reflects essential services needed to accomplish the agency's mission.

Provider: Any entity, facility, person, or group that is contracted with APD to provide services; or any person or entity providing care or support to clients on behalf of APD.

Purchasing Categories/Thresholds: The categories related to specific dollar amounts that govern required procurement procedures as established by Section 287.017, F.S.

Qlarant: A quality improvement organization (formerly called Delmarva) that is contracted by the state of Florida's Agency for Health Care Administration (AHCA) to provide quality assurance for the State's Developmental Disabilities Services System. It also works in partnership with the Agency for Persons with Disabilities conducting activities related to quality information, provider monitoring, and plans of remediation.

Qualified Organization: The term "Qualified Organization" means an organization determined by the agency (APD) to meet the requirements of Section 393.0663, F.S., and of the Developmental Disabilities Individual Budgeting Waiver Services Coverage and Limitations Handbook. The agency shall use Qualified Organizations for the purpose of providing all support coordination services to iBudget clients in this state.

Questionnaire for Situational Information (QSI): The agency-approved assessment for determining a person's level of need and support in areas of community living and functional, behavioral, and physical health. The QSI is administered by trained and certified agency staff. Note: The QSI will eventually be replaced by the Individual Comprehensive Assessment (ICA).

Random Moment Sampling (RMS): RMS is a statistically valid method for determining the percent of effort expended by a given population on behalf of any variety of specific programs and activities. It is used to determine how funds should be claimed among the

various programs for federal reimbursement and it involves a calculated number of random observations to be made quarterly on a randomly selected date and at an independently selected time.

Regions or Regional Office: Refers to the structure of the agency's field offices from consolidation of 14 area offices into six (6) regions (Northwest Region, Northeast Region, Central Region, Suncoast Region, Southeast Region, and Southern Region).

Reliability: The extent to which the measuring procedure yields the same results on repeated trials and data is complete and sufficiently error free for the intended use.

Reportable Incident: An incident, as specified in Rule 65G-2.010(5)(b), F.A.C., that involves an APD client or an APD provider that may put the client's health and safety at risk. Reportable Incident categories are Altercation, Baker Act, Client Injury, Emergency Room Visit/Hospitalization, Expected Client Death, Missing Competent Adult, Suicide Attempt, and Non-Violent Crime Arrest.

Resident: A person who has a developmental disability and resides at a residential facility, whether or not such person is a client of the agency per Section 393.063, F.S.

Rish Park: A recreational area named after William J. (Billy Joe) Rish that is operated and managed by the Department of Environmental Protection. The park is located on the St. Joseph Peninsula near Port St. Joe and Cape San Blas in Northwest Florida. The park is specifically designed for individuals with disabilities and their families. Features include an accessible Olympic-size swimming pool, boardwalk, and cabins for overnight lodging.

ROM (Regional Operations Manager): An executive-level manager who operates and directs activities in one of the agency's six Regional Offices and any field offices within their region. All six ROMs report to directly to the APD Deputy Director of Operations.

Salary & Benefits: The cash compensation for services rendered to state employees for a specific period of time, and the corresponding state-sponsored benefits (retirement, health insurance, etc.) or federally required taxes (Social Security, FICA, etc.) paid on behalf of the employee.

SAN (Significant Additional Needs): As provided in Section 393.063(39), Florida Statutes, it is an additional need for medically necessary services which would place the health and safety of the client, the client's caregiver, or the public in serious jeopardy if it is not met. The term also includes services to meet an additional need that the client requires in order to remain in the least restrictive setting, including, but not limited to, employment services and transportation services.

Secure Web-Based Payroll Systems: Also known as the CDC+ Program timesheet system. It is used for claims submission and reporting and is available in both English and Spanish.

Service: See Budget Entity.

Service Provider: An individual or business determined eligible to deliver Medicaid services that has an agreement with the agency to provide services to people with developmental disabilities.

SETS (Supported Employment Tracking System): An internet-based system used to track consumers who have jobs or are working to obtain jobs. Consumer demographic information is uploaded nightly into SETS from ABC. Information from the Department of Revenue and Department of Economic Opportunity is uploaded quarterly. The system interacts with ABC in real time for EEP claim payments.

SL (Supported Living): Supported Living is a category of individually determined services designed and coordinated in such a manner as to assist adult clients who require ongoing supports to live as independently as possible in their own homes, be integrated into the community, and participate in community life to the fullest extent possible.

SNF (Skilled Nursing Facility): An SNF is a lot like a nursing home but offers more “skilled” medical expertise and services. They have licensed nurses and therapists on staff to assist residents with their medical care.

Spina Bifida: Refers to a person with a medical diagnosis of spina bifida cystica or myelomeningocele. When an individual has Spina Bifida, the spine and the cord inside the spine do not develop properly.

SSI (Supplemental Security Income): A benefit administered by the Social Security Administration for adults and children with disabilities who have limited income and resources. Americans ages 65 and older without disabilities who meet financial criteria also may be eligible for SSI benefits.

Standard: The level of performance of an outcome or output.

Superintendent: The person responsible for the day-to-day operations and administration of an APD facility. This includes ensuring the proper physical condition, fiscal operation, resident/employee safety, and staff management.

SWOT: Strengths, Weaknesses, Opportunities, and Threats.

SWOT Analysis: Is a strategic planning technique used to help an organization identify its strengths, weaknesses, opportunities, and threats.

TRAIN Florida: The Learning Management System (LMS) used by APD to offer training to agency providers. LMS includes a centralized and searchable database of courses.

TSC: Trends and Conditions Statement.

Unit Cost: The average total cost of producing a single unit of output – goods and services for a specific agency activity.

UR/CSR (Utilization Review/Continued Stay Review): The periodic evaluation of an individual's need for continued stay in an Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID).

Validity: The appropriateness of the measuring instrument in relation to the purpose for which it is being used.

Waiting List: A registration of persons who meet the agency's eligibility criteria as defined in Section 393.063, F.S., and level-of-care criteria for the iBudget waiver, waiting for waiver services in one of seven priority categories. There is not an actual timeframe for the length of waiting. Each year, the number of individuals who can be added to the waiver is contingent upon the availability of funds, level of need, and waiting list category.

Waiting List Priority Categories: Section 393.065(5), F.S. describes the waiting list priority categories. There are a total of seven categories.

Waiver: Refers to the Home and Community-Based Services program and iBudget waiver authorized under Title IX of the Social Security Act. Waivers provide an alternative program to institutional care. The iBudget waiver consists of state and federal matching funds for services so individuals can live in their community rather than in an institutional setting.

Wellness Visit: On-site visit conducted by designated APD employees or other authorized officials or individuals to assess the health, safety, and welfare of a client who is the subject of an allegation of ANE or sexual misconduct, which occurred within an APD-licensed facility, Adult Day Training (ADT) program, or Supported Living setting.

WSC (Waiver Support Coordinator): An employee of a qualified organization as defined in section 393.0663, F.S., who is selected by the client or the client's legal representative to assist the client and family in identifying their capacities, needs, and resources; finding and gaining access to necessary supports and services; coordinating the delivery of supports and services; advocating on behalf of the client and family; maintaining relevant records; and monitoring and evaluating the delivery of supports and services to determine the extent to which they meet the needs and expectations identified by the client, family, and others who participated in the development of the support plan with person-centered planning.

Zero Tolerance Initiative: The agency's multi-pronged approach to dealing with all forms of abuse, neglect, exploitation, and sexual misconduct committed against individuals with developmental disabilities. This initiative includes Training and Education, Monitoring and Quality Assurance, Consideration of Rule and Statutory Changes, and Public Awareness.