Center for Health Care Quality
Licensing & Certification Program

Health Facility License Fees
and
Nursing Home Administrator Program Fees

Annual Fee Report for Fiscal Year 2015-16

February 1, 2015

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EXECUTIVE SUMMARY

Program Overview

The California Department of Public Health Center for Health Care Quality, Licensing and Certification Program is responsible for regulatory oversight of licensed health care facilities and health care professionals to ensure safe, effective, and quality health care for all Californians. The Licensing and Certification Program fulfills this role by conducting periodic inspections and complaint investigations of health care facilities to ensure that they comply with federal and state laws and regulations. The Licensing and Certification Program licenses and certifies over 7,500 health care facilities and agencies in California in 30 different licensure and certification categories.

The U.S. Department of Health and Human Services' Centers for Medicare and Medicaid Services (CMS) awards grants to the Licensing and Certification Program to evaluate facilities accepting Medicare and Medicaid (Medi-Cal) payments to certify that they meet federal requirements.

The Licensing and Certification Program also certifies nurse assistants, home health aides, and hemodialysis technicians and licenses nursing home administrators. The Nursing Home Administrator Program protects the public by ensuring only qualified individuals are licensed while appropriate standards of competency are established and enforced. The Nursing Home Administrator Act identifies the authority of the Nursing Home Administrator Program, defines terms, and specifies licensing requirements. The Nursing Home Administrator Act also addresses fees, including but not limited to, state and national examinations and provides procedures for out-of-state Nursing Home Administrator licensees to obtain a one-year provisional license.

The Licensing and Certification Program activities are funded by the Licensing and Certification Program Fund (Fund 3098) through health facility license fees, Nursing Home Administrator Program fees, and by federal funds (Title XVIII and Title XIX Grants).

Fees Overview

Health Facility License Fees

The California Department of Public Health publishes the "Health Facility License Fees and Nursing Home Administrator Program Fees Annual Fee Report" in accordance with California Health and Safety Code section 1266(d) as follows:

- Publish the list of estimated fees by February 1 of each year;
- Publish a report of all costs for activities of the Licensing and Certification Program; and,
- Prepare a staffing and system analysis report including:
  - The number of surveyors and administrative support personnel devoted to the licensing and certification of health care facilities;

- The percentage of time devoted to licensing and certification activities for the various types of health facilities;
- The number of facilities receiving full surveys and the frequency and number of follow up visits;
- The number and timeliness of complaint investigations;
- Data on deficiencies and citations issued, and numbers of citation review conferences and arbitration hearings; and,
- Other applicable activities of the Licensing and Certification Program.

Health and Safety Code section 1266(d) requires the calculation of fees to be based on workload by facility type.

Health and Safety Code section 1266(d)(1)(E) states the fee for each category should be determined by dividing the aggregate state share of all costs for the Licensing and Certification Program by the appropriate metric for the category of licensure. Amounts actually received for new licensure applications, including change of ownership applications, and late payment penalties, pursuant to section 1266.5, during each FY shall be calculated and 95 percent should be applied to the appropriate fee categories in determining Licensing and Certification Program fees for the second FY following receipt of those funds. The remaining five percent shall be retained in the fund as a reserve until appropriated.

Health and Safety Code section 1266 was amended to include paragraph (c) that adds fees for skilled nursing facilities to provide $400,000 per fiscal year to the California Department of Aging's Long Term Care Ombudsman Program. The funds will support investigating complaints made against skilled nursing facilities and increasing the number of visits to those facilities. CDPH will incorporate the new fee into the basic licensing and certification fee for the skilled nursing facility fee category.

Nursing Home Administrator Program Fees

The California Department of Public Health publishes Nursing Home Administrator Program fees in accordance with Health and Safety Code section 1416.36 (b)(1), which states that the department may propose that fees be adjusted to an amount sufficient to cover the reasonable regulatory costs to the department. The proposed adjustment to fees, as well as the final fee list, with an explanation of any adjustment, shall be made available to the public by being published on the department's Internet Website. Health and Safety Code section 1416.36 (d) (1) requires the department to publish an additional report that includes:

- Estimates of costs to implement activities and estimated fee revenue.
- Recommended adjustments to fees based on projected workload and costs.
- An analysis containing the following information for the current FY and each of the previous four FYs:
  - The number of persons applying for a nursing home administrator's license, the number of nursing home administrator licenses approved or denied, and the number of nursing home administrator licenses renewed.

- The number of applicants taking the nursing home administrator exam and the number of applicants who pass or fail the exam.
- The number of persons applying for, accepted into, and completing the Administrator-In-Training Program.
- The number, source, and disposition of complaints made against persons in the Administrator-in-Training Program and licensed nursing home administrators, including the length of time between receipt of the complaint and completion of the investigation.
- The number and type of final administrative, remedial, or disciplinary actions taken against licensed nursing home administrators.
- A listing of the names and nature of violations for licensed nursing home administrators, including final administrative, remedial, or disciplinary actions taken.
- The number of appeals, informal conferences, or hearings filed by nursing home administrators or held the length of time between the request being filed, and the final determination of the appeal, and the number of administrative, remedial, or disciplinary actions taken.

Fee Methodology

Health Facility Licensing Fees

Health and Safety Code section 1266(d) provides the mandate to implement statutory authorization to collect license fees based on the workload and cost of licensing and regulating health facilities and agencies. The license fee is intended to cover the Licensing and Certification Program's cost to develop, administer, and enforce state licensure standards and other compliance activities.

The Licensing and Certification Program licensing fee methodology requires calculation of the following factors to fairly represent the cost of licensing and regulating health care facilities:

- Project the state workload percentage for each facility type based on mandated workload. (See Attachment 1)
- Determine the budget year (BY) adjusted Licensing and Certification Program Special Fund appropriation, comprised of baseline adjustments and mandated credits. (See Attachment 2)
- Apply the individual workload percentage against the BY adjusted appropriation to determine the total amount of revenue to be generated by each facility type.
- For each facility type, divide the total amount to be generated as revenue against the total number of facilities or beds to determine the initial calculated fee.
- Compare the individual facility fees initial calculations against the current fiscal year fees to determine increases or decreases for each facility type. Historically, credits may be applied to mitigate fluctuations in fee amounts from year to year.

The methodology applied to calculate fees is in accordance with Health and Safety Code section 1266(d) (1).

State workload percentages are calculated for each workload activity and grouped by facility type. Workload activities include state licensing, federal certification, and initial state and federal certification, follow-up/revisits, complaints, and investigations. The following data are used to develop the workload percentages for each activity within each facility type:

- The number of open and active facility counts (licensure and federal certification workload survey activities only);
- The annualized workload frequency for each workload activity as mandated by either state or federal statute requirements;
- The standard average hours (SAH) based on the SAH report from the Time Entry and Activity Management (TEAM) data. These data reflect the three-year average of hours required to complete each workload activity; and L&C is now using the date an investigation is closed in the federal Automated Survey Processing Environment (ASPEN) surveyor and certification system. This change captures workload from the start of an investigation to the end, when a surveyor writes up findings to fully complete an investigation, which happens after exiting a facility.
- The state funding percentage. This is the percentage charged to the Licensing and Certification Program Fund (Fund 3098) based on the specific workload activity.

Attachment 1, “State Workload Percentages FY 2015-16," provides the detailed workload analysis by facility type that was used to calculate the percentage by facility type.

The department proposes to:

1. Increase fees by 20 percent on those facilities that would have received an increase as share of their percentage of the state’s total workload.
2. Keep fees at FY 2014-15 level for those facilities that would have had decreased fees as a share of their percentage of the state’s total workload.

Table 1 below provides the proposed FY 2015-16 licensing fees for each facility type.

Table 1: Health Care Facility Licensed Fee Table

License Fees by Facility Type			
Facility Type	Fee Per Bed or Facility	FY 2014-15 Fee Amounts	FY 2015-16 Proposed Fee Amounts
Acute Psychiatric Hospitals	Bed	$ 266.58	$ 319.90
Adult Day Health Centers	Facility	$ 4,164.92	$ 4,997.90
Alternative Birthing Centers	Facility	$ 2,380.19	$ 2,380.19
Chemical Dependency Recovery Hospitals	Bed	$ 191.27	$ 229.52
Chronic Dialysis Clinics	Facility	$ 2,862.63	$ 2,862.63
Community Clinics	Facility	$ 718.36	$ 862.03
Congregate Living Health Facilities	Bed	$ 312.00	$ 374.40
Correctional Treatment Centers	Bed	$ 573.70	$ 688.44
District Hospitals Less Than 100 Beds	Bed	$ 266.58	$ 319.90
General Acute Care Hospitals	Bed	$ 266.58	$ 319.90
Home Health Agencies	Facility	$ 2,761.90	$ 2,761.90
Hospices (2-Year License Total)	Facility	$ 2,970.86	$ 2,970.86
Hospice Facilities	Bed	$ 312.00	$ 374.40
Intermediate Care Facilities (ICF)	Bed	$ 312.00	$ 374.40
ICF - Developmentally Disabled (DD)	Bed	$ 580.40	$ 696.48
ICF - DD Habilitative	Bed	$ 580.40	$ 696.48
ICF - DD Nursing	Bed	$ 580.40	$ 696.48
Pediatric Day Health/Respite Care	Bed	$ 150.41	$ 180.49
Psychology Clinics	Facility	$ 1,476.66	$ 1,771.99
Referral Agencies	Facility	$ 2,795.53	$ 2,795.53
Rehab Clinics	Facility	$ 259.35	$ 311.22
Skilled Nursing Facilities*	Bed	$ 312.00	$ 377.77
Surgical Clinics	Facility	$ 2,487.00	$ 2,984.40
Special Hospitals	Bed	$ 266.58	$ 319.90

Data Source: FY 15-16 Licensing Fees Chart

* Fee includes $3.37 per bed based on Health and Safety Code section 1266 (c) in support of the Long Term Care Ombudsman Program.

Nursing Home Administrator Program Fees

In FY 2011-12, the provisions of Assembly Bill (AB) 1710 (Chapter 672, Statutes of 2012) establish a new Nursing Home Administrator Program fee methodology beginning February 1, 2013 and annually thereafter, which requires the Licensing and Certification Program to adjust the fees based on program cost and not by the Consumer Price Index. Based on this change, the Licensing and Certification Program implemented a methodology that estimates revenue per fee category based on the number of workload units and adjusts fee rates based on a policy to align fee revenues to the program costs progressively:

- Workload Units: Determine the three-year average of applications received for each fee category.

- Program Cost: Project the annual cost to administer the Nursing Home Administrator Program.
- Apply Fund Reserve Credit: Projected program costs are credited with Licensing and Certification Program Fund reserve to minimize fee increases.

For FY 2015-16, the department is proposing an approximately 30 percent increase in all fees after applying a credit of $105,410 from the Licensing and Certification Program Fund. The total program cost of $585,000 is based on FY 2015-16 projected expenditures. This approach adheres to AB 1710 and gradually aligns the fee revenues with the program costs associated with delivering the services.

Table 2 below provides the proposed FY 2015-16 Nursing Home Administrator Program fees.

Table 2: Nursing Home Administrator Program Fee Table

Nursing Home Administrator Program Fees Health & Safety Code Section 1416.36 (a) FY 2014-15 and FY 2015-16						
Fee Categories	FY 2014-15 Projected Workload Units	FY 2014-15 Fee Amount	FY 2014-15 Projected Fee Revenue	FY 2015-16 Projected Workload Units	FY 2015-16 Proposed Fee	FY 2015-16 Projected Fee Revenue
(1) Examination Application Fee	516	$ 28	$ 14,448	517	$ 40	$ 20,680
(2) Reciprocity Licensure Application Fee	22	$ 57	$ 1,235	26	$ 70	$ 1,820
(3) AIT Program Application Fee	136	$ 113	$ 15,331	135	$ 150	$ 20,250
(4) (A) Automated National Exam*	N/A	N/A	N/A	N/A	N/A	N/A
(4) (B1) Automated State Exam**	N/A	N/A	N/A	N/A	N/A	N/A
(4) (B2) Written State Exam	205	$ 159	$ 32,595	200	$ 210	$ 42,000
(5) Initial License Fee	139	$ 215	$ 29,956	131	$ 280	$ 36,680
(6) (A) Active License Renewal Fee	925	$ 215	$ 198,875	911	$ 280	$ 255,080
(6) (B) Inactive License Fee	211	$ 215	$ 45,294	183	$ 280	$ 51,240
(7) Delinquency Fee	101	$ 57	$ 5,738	90	$ 70	$ 6,300
(8) Duplicate License Fee	22	$ 28	$ 625	27	$ 40	$ 1,080
(9) Provisional License Fee	9	$ 284	$ 2,462	8	$ 370	$ 2,960
(10) Endorsement of Credential Verification Fee	44	$ 28	$ 1,232	51	$ 40	$ 2,040
(11) Preceptor Certification Fee	173	$ 57	$ 9,880	164	$ 70	$ 11,480
(12) Continuing Education Provider Fee	60	$ 170	$ 10,144	54	$ 220	$ 11,880
(13) Continuing Education Course Fee	847	$ 17	$ 14,393	805	$ 20	$ 16,100

* Automated National Exam is not administered by the State.
** The Automated State Exam is currently not offered.

Staffing and Systems Analysis

Licensing and Certification Program

Health and Safety Code section 1266(d)(2) requires the Licensing and Certification Program to prepare a staffing and systems analysis to ensure efficient and effective utilization of fees collected, proper allocation of departmental resources to the Licensing and Certification Program's activities, survey schedules, complaint investigations, entity reported incidents, citations, administrative penalties and enforcement penalties, State civil monetary penalties, appeals, data collection and dissemination, surveyor training, and policy development.

The following tables depict information from FY 2013-14, which represents the last full FY in which the Licensing and Certification Program has actual data. The purpose of displaying this information is to show the utilization of the fees that were collected in FY 2013-14.

Table 3: Number of Personnel Devoted to the Licensing and Certification of Health Care Facilities

Pursuant to Health and Safety Code section 1266(d) (2) (B) (i), Table 3 shows the number of surveyors and administrative support personnel that performed licensing and certification activities for all health facility types. Seventy-nine percent of the Licensing and Certification Program's authorized positions are assigned to Field Offices and 21 percent are assigned to other branches in Headquarters

Table 4: The Percentage of Time Devoted to Licensing and Certification Program Activities for all Licensed Health Facilities

Pursuant to Health and Safety Code section 1266(d)(2)(B)(ii), Table 4 shows the number of surveyor hours devoted to Licensing and Certification Program activities for all health facility types.

Table 5: Surveys and Follow-up Visits Performed

Pursuant to Health and Safety Code section 1266(d)(2)(B)(iii), Table 5 describes the volume of healthcare facility licensure and certification surveys which have been conducted. "Initial" means survey of facilities that have applied for licensing or certification. Follow-up visits include Initial Licensure/Certification, Re-Licensure/Certification, and Follow-up visits.

Table 6: Number of Complaint Investigations by Facility Type

Pursuant to Health and Safety Code section 1266(d)(2)(B)(iv), Table 6 shows the number of complaints received and how long it takes Licensing and Certification Program's Field Operations to initiate and complete complaint investigations. Complaint investigation timeframes are based on priority levels A through H. Complaints requiring investigation are assigned priority Levels of A through E. Complaints for situations of immediate jeopardy are assigned priority

Level A and the investigation should be initiated within 24 hours for long-term care facilities and 48 hours for non-long-term care. Non-immediate jeopardy complaints investigations include priority Levels B through E and should be initiated within 10 days. Complaints assigned priority Levels F through H do not require investigation; F & G priorities are referred to other organizations and H priorities do not require any action. Licensing and Certification Program's Field Operations considers a case complete when it has fully completed the investigation and documented the complaint as completed in its database.

Table 7: Number of Entity Reported Incident (Investigations by Facility Type

Pursuant to Health and Safety Code section 1266(d)(2)(B)(iv), Table 7 shows the number of entity reported incidents received and how long it takes Licensing and Certification Program's Field Operations to initiate and complete entity-reported incidents investigations. Investigation timeframes are based on priority levels A through H. Entity-reported incidents requiring investigation are assigned priority Levels of A through E. Entity-reported incidents for situations of immediate jeopardy are assigned priority Level A and the investigation should be initiated within 24 hours for long-term care facilities and 48 hours for non-long-term care. Complaints assigned priority Levels F through H do not require investigation; F & G priorities are referred to other organizations and H priorities do not require any action. Licensing and Certification Program's Field Operations considers a case complete when it has fully completed the investigation and documented the entity-reported incidents as completed in its database.

Table 8: Citations, Administrative Penalties and Enforcement Penalties Issued by Facility Type

Pursuant to Health and Safety Code section 1266(d)(2)(B)(v)(vi), Table 8 shows the number of citations issued, the number of administrative penalties issued, and the number of failure-to-report penalties issued for adverse events and medical breaches. The lower portion of Table 8 provides the number appeals received in FY 2013-14.

Table 9: Deficiencies by Facility Type

Pursuant to Health and Safety Code section 1266(d)(2)(B)(iv), Table 9 shows the total number of deficiencies issued in FY 2013-14. Licensing and Certification Program's Field Operations may identify one or more deficiencies (violations of statutory or regulatory requirements) for a substantiated survey or investigation (Note: Deficiency data were previously reported in Table 8). The number of deficiencies reported for long-term care facilities will not match the Quarterly Performance Metrics Reports posted on-line due to differences in reporting periods.

Table 10: State Civil Monetary Penalties Issued by Facility Type

Table 10 shows the total monetary amount of penalties issued in FY 2013-14.

Table 11: Detailed Adverse Event Report Category and Type
Pursuant to Health and Safety Code section 1279.1, Table 11 shows the number of adverse events by 7 event categories and 28 event types.

Table 12: Adverse Event Timeliness Report
Pursuant to Health and Safety Code section 1279.2, Table 12 shows the number of immediate jeopardy adverse event investigations requiring initiation within two business days and the number of all adverse event investigations for which investigation reports were completed on time.

Table 13: Other Applicable Activities (Surveyor Training Provided in FY 2013-14)
Pursuant to Health and Safety Code section 1266(d)(2)(B)(vi), Table 13 shows the number of surveyors trained for each type of training offered for Licensing and Certification Program surveyors.

Table 3: Number of Personnel Devoted to the Licensing and Certification of Health Care Facilities

Number of Personnel Devoted to the Licensing and Certification of Health Care Facilities
Health and Safety Code Section 1266(d)(2)(B)(i)
SFY 2013-14

Personnel Types	14 Field Offices		Headquarters		Total L&C		LA County	
	# of Positions	%of Total	# of Positions	%of Total	# of Positions	%of Total	# of Positions	%of Total
Surveyors & Various State Consultants								
Surveyors[1]	451.20	42.60%	-	0.00%	451.20	42.60%	131	73.60%
Various State Consultants	52.00	4.91%	2.00	0.19%	54.00	5.10%	8	4.49%
Administrative Support Personnel								
Managers/Supervisors & Support Staff [2]	333.05	31.44%	221.00	20.86%	554.05	52.31%	39	21.91%
Total	836.25	78.95%	223.00	21.05%	1,059.25	100.00%	178	100.00%

This chart represents the number of positions in L&C and Los Angeles County. Data is based on the number of adjusted position as reported in the 2014/15 May Revise Estimate. The following detail describes personnel function in 14 L&C field offices statewide and the 5 Los Angeles County Offices:

Personnel in the Field Offices and LA County Contract

The Los Angeles County performs their own L&C activities and contracts with the CDPH to report information. L&C Field Offices and Los Angeles County perform the same common functions which include:

Evaluating and reporting on services and conditions;
Cite deficiencies and issue penalties;
Issue, deny or revoke licenses, and approve plans of correction; and,
Control performance of other public agencies' survey staff.

[1] Classifications include: Health Facilities Evaluator Nurse, Health Facilities Evaluator I, Health Facilities Evaluator Trainee.

[2] Classifications include: Associate Accounting Analyst, Associate Governmental Program Analyst, Associate Health Program Advisor, Associate Information Systems Analyst, Associate Program Analyst (Spec.), Career Executive Assignment, Data Processing Manager I/II/III, Deputy Director, Nurse Consultant II, Health Facilities Evaluator II (Sup), Health Facilities Evaluator I/II, Health Facilities Evaluator Manager I/II, Health Facilities Evaluator Specialist, Health Program Manager III, Health Program Specialist I/II, Management Services Technician, Office Assistant, Office Technician, Program Technician, Program Technician II, Research Program Specialist I/II, Staff Programmer Analyst, Supervising Program Technician I/II, Staff Counsel III, Senior/Staff Information Systems Specialist, Staff Services Analyst, Staff Services Manager I/II/III, Word Processing Technician

Data Source: SFY 14/15 May Revise Estimate

Table 4: The Percentage of Licensing and Certification Program Activities by Licensed Health Facility Type

The Percentage of Time Devoted to L&C Activities for all Licensed Health Facilities Health and Safety Code Section 1266(d)(2)(B)(ii) FY 2013-14		
Facility Type	**Hours***	**Percentage to Total Hours**
Acute Psychiatric Hospital	2,622	0.30%
Adult Day Health Center	1,136	0.13%
Alternate Birthing Center	9	0.00%
Chemical Dependency Recovery Hospital	49	0.01%
Chronic Dialysis Clinic/ESRD	19,307	2.20%
Community Clinic/Free Clinics/RHC	3,502	0.40%
Congregate Living Health Facility	1,320	0.15%
Correctional Treatment Center	2,737	0.31%
General Acute Care Hospital	108,104	12.34%
Home Health Agencies	42,024	4.80%
Hospice	13,456	1.54%
Hospice Facility	359	0.04%
Intermediate Care Facilities	3,400	0.39%
Intermediate Care Facilities DD/H/N/IID	108,151	12.34%
Pediatric Day Health or Respite Care	117	0.01%
Psychology Clinic	-	0.00%
Referral Agency	10	0.00%
Rehabilitation Clinic/CORF/OTP/SP	3,528	0.40%
Skilled Nursing Facilities	537,251	61.31%
Surgical Clinic/ASC	29,133	3.32%
Totals	**876,215**	**100%**

* Total workload hours includes direct survey hours, facility admin hours, and pure admin hours.
Data Source: TEAM (SFY 2013-14 Standard Average Hours Report for Exited Complaints/Closed Surveys)

Table 5: Surveys and Follow-up Visits Performed:

Surveys and Follow-up Visits Performed
Health & Safety Code Section 1266(d)(2)(B)(iii)
FY 2013-14

Facility Type	Licensing Survey		Certification Survey		Licensing & Certification Revisits
	Initial	Re-licensure	Initial	Re-certification	
Acute Psychiatric Hospital	1	1		1	4
Adult Day Health Center		4			
Alternative Birthing Center	1				
Chemical Dependency Recovery Hospital					
Chronic Dialysis Clinic/ESRD	33	2	37	81	87
Community Clinic/Free Clinic/RHC	33	3	5	26	20
Congregated Living Health Facility	16	2			
Correctional Treatment Center	2	10			4
General Acute Care Hospital	15	91	1	32	53
Home Health Agencies	95	13	9	200	204
Hospice	165	2	10	47	47
Hospice Facility	6				
Intermediate Care Facilities		1			1
Intermediate Care Facilities DD/H/N/MR	20	29	13	1,124	981
Pediatric Care Health or Respite Care Facility					
Psychology Clinic					
Referral Agency	1				
Rehabilitation Clinic/CORF/OTP/SP			1	23	20
Skilled Nursing Facilities	8	177	6	1,147	1,216
Surgical Clinic/ASC			1	135	153
Totals	**396**	**335**	**83**	**2,816**	**2,790**
Long-term Care Totals	**44**	**209**	**19**	**2,271**	**2,198**
Non-long-term Care Totals	**352**	**126**	**64**	**545**	**592**

Source: Research and Evaluation Section
Data Source: ASPEN Database
Extraction Date: July 17, 2014
Publication Date: December 22, 2014

Table 6: Number of Complaint Investigations by Facility Type

Number of Complaint Investigations by Facility Type
Health & Safety Codes Section 1266(d)(2)(B)(iv)
FY 2013-14

Facility Category	Volume			Timeliness											
				Initiation				Completion							
				Immediate Jeopardy (IJ) * (24 hours LTC - 2 days NLTC)		Non-Immediate Jeopardy ** (10 working days)		Number of Complaints Completed During Reporting Period by Working Days from Receipt to Completion				Complaints Completed by Working Days from Receipt to Completion, as a Percentage of Total Completed During Reporting Period			
	Complaints Received During Reporting Period	Complaints Completed During Reporting Period (Regardless of Receipt Date)	Growth/ Reduction in Open Complaints	Number Received	Percent Initiated Timely	Number Received	Percent Initiated Timely	≤90	91-180	181-365	>365	≤90	91-180	181-365	>365
Long-Term Care															
Congregated Living Health Facility	40	30	10	9	100%	29	72%	21	4	4	1	70%	13%	13%	3%
Intermediate Care Facility	189	144	45	7	86%	141	96%	65	26	38	15	45%	18%	26%	10%
Intermediate Care Facility-DD/H/N/IID	397	450	-53	24	100%	346	97%	276	52	45	77	61%	12%	10%	17%
Pediatric Care Health and Respite Care Facility	7	7	0	3	100%	4	75%	7	0	0	0	100%	N/A	N/A	N/A
Skilled Nursing Facility	5,877	6,049	-172	304	95%	5,292	98%	3,650	764	599	1,036	60%	13%	10%	17%
Total Long-Term Care	**6,510**	**6,680**	**-170**	**347**	**96%**	**5,812**	**98%**	**4,019**	**846**	**686**	**1,129**	**60%**	**13%**	**10%**	**17%**
Non-Long Term Care															
Acute Psychiatric Hospital	164	209	-45	2	100%			51	49	26	83	24%	23%	12%	40%
Adult Day Health Care	23	29	-6	2	100%			6	8	5	10	21%	28%	17%	34%
Alternative Birthing Center	1	0	1	0	N/A			0	0	0	0	N/A	N/A	N/A	N/A
Chemical Dependency Recovery Hospital	0	5	-5	0	N/A			0	0	0	5	N/A	N/A	N/A	100%
Chronic Dialysis Clinic	162	137	25	9	100%			61	37	24	15	45%	27%	18%	11%
Community Clinic	135	132	3	2	100%			57	29	20	26	43%	22%	15%	20%
Correctional Treatment Center	39	20	19	0	N/A			10	3	5	2	50%	15%	25%	10%
General Acute Care Hospital	3,297	3,621	-324	81	90%			1,121	625	625	1,250	31%	17%	17%	35%
Home Health Agency	273	330	-57	8	75%			118	58	58	96	36%	18%	18%	29%
Hospice	133	161	-28	4	75%			55	40	33	33	34%	25%	20%	20%
Hospice Facility	2	0	2	0	N/A			0	0	0	0	N/A	N/A	N/A	N/A
Other ***	10	16	-6	2	100%			8	2	4	2	50%	13%	25%	13%
Referral Agency	0	0	0	0	N/A			0	0	0	0	N/A	N/A	N/A	N/A
Rehabilitation Clinic	4	5	-1	0	N/A			3	2	0	0	60%	40%	N/A	N/A
Surgical Clinic	57	53	4	3	100%			28	9	2	14	53%	17%	4%	26%
Total Non-Long Term Care	**4,300**	**4,718**	**-418**	**113**	**90%**			**1,518**	**862**	**802**	**1,536**	**32%**	**18%**	**17%**	**33%**
Total	**10,810**	**11,398**	**-588**	**460**	**95%**	**5,812**	**98%**	**5,537**	**1,708**	**1,488**	**2,665**	**49%**	**15%**	**13%**	**23%**

* Long-Term Care Facilities require initiation within 24 hours; Non-Long Term Care Facilities require initiation within two business days.

** Does not apply to Non-Long Term Care Facilities.

*** Facility type or license status unknown.

Data Source/Extraction Date: ASPEN/July 17, 2014

Publication Date: November 07, 2014

Table 7: Number of Entity Reported Incident Investigations by Facility Type

Number of Entity Reported Incident (ERI) Investigations by Facility Type
Health & Safety Codes Section 1266(d)(2)(B)(iv)
FY 2013-14

Facility Category	Volume			Timeliness									
				Initiation		Completion							
				Immediate Jeopardy (IJ)* (24 hours LTC - 2 days NLTC)		Number of ERIs Completed During Reporting Period by Working Days from Receipt to Completion				ERIs Completed by Working Days from Receipt to Completion, as a Percentage of Total Completed During Reporting Period			
	ERIs Received During Reporting Period	ERIs Completed During Reporting Period (Regardless of Receipt Date)	Growth/ Reduction in Open ERIs	Number Received	Percent Initiated Timely	≤90	91-180	181-365	>365	≤90	91-180	181-365	>365
Long-Term Care													
Congregated Living Health Facility	19	25	-6	1	100%	15	4	4	2	60%	16%	16%	8%
Intermediate Care Facility	1,209	1,105	104	14	93%	824	142	86	53	75%	13%	8%	5%
Intermediate Care Facility-DD/H/N/IID	5,858	6,168	-310	39	90%	4,215	932	622	399	68%	15%	10%	6%
Pediatric Care Health and Respite Care Facility	1	1	0	0	0%	1	0	0	0	100%	N/A	N/A	N/A
Skilled Nursing Facility	12,206	13,618	-1,412	251	97%	9,214	1,495	1,525	1,384	68%	11%	11%	10%
Total Long-Term Care	**19,293**	**20,917**	**-1,624**	**305**	**96%**	**14,269**	**2,573**	**2,237**	**1,838**	**68%**	**12%**	**11%**	**9%**
Non-Long Term Care													
Acute Psychiatric Hospital	448	448	0	2	100%	208	90	93	57	46%	20%	21%	13%
Adult Day Health Care	7	7	0	0	N/A	2	0	0	5	29%	N/A	N/A	71%
Alternative Birthing Center	0	0	0	0	N/A	0	0	0	0	N/A	N/A	N/A	N/A
Chemical Dependency Recovery Hospital	36	10	26	0	N/A	5	0	1	4	50%	N/A	10%	40%
Chronic Dialysis Clinic	98	72	26	4	100%	53	11	6	2	74%	15%	8%	3%
Community Clinic	192	106	86	0	N/A	47	25	13	21	44%	24%	12%	20%
Correctional Treatment Center	503	443	60	1	100%	336	55	32	20	76%	12%	7%	5%
General Acute Care Hospital	7,866	7,702	164	59	97%	3,245	1,024	1,049	2,384	42%	13%	14%	31%
Home Health Agency	134	172	-38	0	N/A	61	30	28	53	35%	17%	16%	31%
Hospice	100	94	6	0	N/A	48	20	16	10	51%	21%	17%	11%
Hospice Facility	0	0	0	0	N/A	0	0	0	0	N/A	N/A	N/A	N/A
Other ***	0	0	0	0	N/A	0	0	0	0	N/A	N/A	N/A	N/A
Referral Agency	0	0	0	0	N/A	0	0	0	0	N/A	N/A	N/A	N/A
Rehabilitation Clinic	0	0	0	0	N/A	0	0	0	0	N/A	N/A	N/A	N/A
Surgical Clinic	35	31	4	2	100%	19	3	4	5	61%	10%	13%	16%
Total Non-Long Term Care	**9,419**	**9,085**	**334**	**68**	**97%**	**4,024**	**1,258**	**1,242**	**2,561**	**44%**	**14%**	**14%**	**28%**
Total	**28,712**	**30,002**	**-1,290**	**373**	**96%**	**18,293**	**3,831**	**3,479**	**4,399**	**61%**	**13%**	**12%**	**15%**

* Long-Term Care Facilities require initiation within 24 hours; Non-Long Term Care Facilities require initiation within two business days.
*** Facility type or license status unknown.
Data Source/Extraction Date: ASPEN/July 17, 2014
Publication Date: November 07, 2014

Table 8: Citations, Administrative Penalties and Enforcement Penalties Issued by Facility Type

Citations and Administrative Penalties & Enforcement Penalties Issued by Facility Type
Health & Safety Code Section 1266(d)(2)(B)(v)(vi)
FY 2013-14

Facility Category	CItations Issued (by Definitions) (HSC 1424)						3.2 NHPPD Administrative Penalties	Administrative Penalties (H&S 1280.3)	Failure to Report Penalties Adverse Events (H&S 1280.4)	Medical Breaches	
	AA	A	B	WMF	WMO	RD				Administrative Penalties (H&S 1280.15)	Failure to Report Penalties (H&S 1280.15)
Acute Psychiatric Hospital	-	-	-	-	-	-	-	-	-	-	-
Adult Day Health Care	-	-	-	-	-	-	-		-	-	-
Alternative Birthing Center	-	-	-	-	-	-	-	-	-	-	-
Chemical Dependency Recovery Hospital	-		-		-	-	-	-	-	1	
Chronic Dialysis Clinic	-	-	-	-	-	-	-	-	-	-	2
Community Clinic	-	-	-	-	-	-	-	-	-	1	8
Congregate Living Health Facility	-	1	3	-	-	-	-	-	-	-	-
Correctional Treatment Center	-	-	-	-	-	-	-	-	-	-	-
General Acute Care Hospital	-	-	-	-	-	-	-	41	51	20	118
Home Health Agency	-	-	-	-	-	-	-	-	-	1	1
Hospice	-	-	-	-	-	-	-	-	-	-	2
Hospice Facility	-	-	-	-	-	-	-	-	-	-	-
Intermediate Care Facility	-	1	14	-	-	-	-	-	-	-	-
Intermediate Care Facility DD/H/N	3	16	76	1	-	-	-	-	-	-	-
Pediatric Day Health & Respite Care Facility	-	-	-	-	-	-	-	-	-	-	-
Psychology Clinic	-	-	-	-	-	-	-	-	-	-	-
Referral Agency	-	-	-	-	-	-	-	-	-	-	-
Rehabilitation Clinic	-	-	-	-	-	-	-	-	-	-	-
Skilled Nursing Facility	5	83	328	2	-	-	48	-	-	2	14
Surgical Clinic	-	-	-	-	-	-	-	-	-	-	-
Total	**8**	**101**	**421**	**3**	**-**	**-**	**48**	**41**	**51**	**25**	**145**

Note: Data on deficiencies issued has been moved to Table 9

Citation Appeals Statewide
Health & Safety Code Section 1266(d)(2)(B)(v)
SFY 2013-14

Appeal Received Type	Number of Appeals Received
Administrative Law Judge (ALJ)	30
Binding Arbitration (BA)	26
Court Appeal	42
Total	**98**

Data Source: ELMS Database
Data Extraction Date: July 17, 2014
Publication Date: October 6, 2014

Table 9: Deficiencies by Facility Type

Deficiencies by Facility Type Health & Safety Codes Section 1266(d)(2)(B)(iv) FY 2013-14	
Facility Type	**Deficiencies Issued**
Acute Psychiatric Hospital	-
Adult Day Health Care	110
Alternative Birthing Center	-
Chemical Dependency Recovery Hospital	6
Chronic Dialysis Clinic/End Stage Renal Disease	1,130
Community Clinic/Free clinic/Rural Health Clinic/FQHC	243
Congregated Living Health Facility	61
Correctional Treatment Center	130
General Acute Care Hospital/ Organ Transplant Center/Special Hospital	4,029
Home Health Agency	1,724
Hospice	649
Hospice Facility - HOFA	1
Intermediate Care Facility	43
Intermediate Care Facility DD/Habilitative/Nursing/IID	5,657
Pediatric Care Health and Respite Care Facility	1
Psychology Clinic	-
Referral Agency	-
Rehabilitation Clinic/ Comprehensive Outpatient Rehabilitation Facility/OPT-SP	258
Skilled Nursing Facility	13,753
Surgical Clinic/ Ambulatory Surgical Clinic	1,570
Total	**29,365**

* Lab and X-ray are not included.
Note: Deficiency data was previously reported in Table 8.
Data Source: ASPEN Database
Data Extraction: July 17, 2014
Publication Date: October 6, 2014

Table 10: State Civil Monetary Penalties Issued by Facility Type

State Civil Monetary Penalties Issued by Facility Type

FY 2013-14

Facility Category	Citations (HSC 1424)	3.2 NHPPD Administrative Penalties	Administrative Penalties H&S 1280.3	Failure to Report Penalties Adverse Events (H&S 1280.4)	Medical Breaches	
					Administrative Penalties (H&S 1280.15)	Failure to Report Penalties (H&S 1280.15)
Acute Psychiatric Hospital	-	-	-	-	-	-
Adult Day Health Care	-	-	-	-	-	-
Alternative Birthing Center	-	-	-	-	-	-
Chemical Dependency Recovery Hospital	-	-	-	-	$ 127,500	
Chronic Dialysis Clinic	-	-	-	-		$ 7,100
Community Clinic	-	-	-	-	$ 25,000	$ 32,900
Congregate Living Health Facility	$ 7,600	-	-	-	-	-
Correctional Treatment Center	-	-	-	-	-	-
General Acute Care Hospital	-	-	$ 2,725,000	$ 186,900	$ 1,310,000	$ 147,800
Home Health Agency	-	-	-	-	$ 25,000	$ 400
Hospice	-	-	-	-	-	$ 200
Hospice Facility	-	-	-	-	-	-
Intermediate Care Facility	$ 3,400	-	-	-	-	-
Intermediate Care Facility/Developmentally Disabled	$ 229,100	-	-	-	-	-
Pediatric Day Health & Respite Care Facility	-	-	-	-	-	-
Psychology Clinic	-	-	-	-	-	-
Referral Agency	-	-	-	-	-	-
Rehabilitation Clinic	-	-	-	-	-	-
Skilled Nursing Facility	$ 2,246,650	$ 825,000	-	-	$ 269,700	$ 3,360
Surgical Clinic	-	-	-	-	-	-
Total	**$ 2,486,750**	**$ 825,000**	**$ 2,725,000**	**$ 186,900**	**$ 1,757,200**	**$ 191,760**

Data Source: ELMS Database
Data Extraction Date: July 17, 2014
Publication Date: October 6, 2014

Table 11: Detailed Adverse Event Report Category and Type

Detailed Adverse Event Report Category and Type Health and Safety Code 1279.1 FY 2013-2014	
Adverse Event by Category and Type	
01.- Surgical Events	**432**
01.- Surgery performed on a wrong body part	41
02.- Surgery performed on the wrong patient	1
03.- Wrong surgical procedure performed on a patient	21
04-. Retention of a foreign object in a patient	337
05.- Death during or up to 24 hours after surgery	32
02.- Product or Device Events	**15**
06.- Death or serious disability associated with the use of contaminated drug, device, or biologic	6
07-. Death or serious disability associated with the use of a device other than as intended	8
08.- Death or serious disability due to intravascular air embolism	1
03.- Patient Protection Events	**27**
09.- Infant discharged to the wrong person	-
10.- Death or serious disability due to disappearance	2
11.- Suicide or attempted suicide	25
04.- Care Management Events	**1,191**
12.- Death or serious disability associated with a medication error	45
13.- Death or serious disability associated with incompatible blood	1
14.- Maternal death or serious disability associated with labor or delivery	9
15.- Death or serious disability directly related to hypoglycemia	1
16.- Death or serious disability associated with hyperbilirubinemia in neonates	2
17.- Stage 3 or 4 decubitis ulcer acquired after admission	1,133
18.- Death or serious disability due to spinal manipulation therapy	-
05.- Environmental Events	**35**
19.- Death or serious disability associated with electric shock	-
20.- Oxygen line contains wrong or toxic gas	-
21.- Death or serious disability associated with a burn	4
22.- Death associated with a fall	29
23.- Death or serious disability associated with the use of restraints or bedrails	2
06.- Criminal Events	**55**
24.- Case ordered or provided by someone impersonating a licensed health provider	-
25.- Abduction of a patient of any age	1
26.- Sexual assault on a patient	44
27.- Death or significant injury from a physical assault	10
07.- Other	**130**
28.- Adverse event or series of adverse events	130
Total Adverse Events	**1,885**

Data Source: ASPEN Database
Data Extraction: July 17, 2014
Publication Date: December 22, 2014

Table 12: Adverse Event Timeliness Report

Adverse Event Timeliness Report Health and Safety Code 1279.2 SFY 2013-14						
Adverse Event Report Type	**Total AEs**	**Immediate Jeopardy**			**Non-Immediate Jeopardy**	
		Required Investigation Within Two Business Days[1]	**# Initiated On Time[2]**	**# Completed On Time[3]**	**Non-Immediate Jeopardy Adverse Events**	**# Completed On Time[3]**
Surgical Events	432	-	-	-	432	87
Product or Device Events	15	-	-	-	15	5
Patient Protection Events	27	4	4	-	23	7
Care Management Events	1,191	4	4	1	1,187	360
Environmental Events	35	1	1	-	34	5
Criminal Events	55	10	10	3	45	10
Other	130	7	7	1	123	28
Total	**1,885**	**26**	**26**	**5**	**1,859**	**502**

1. HSC 1279.2 (a)(1)

2. HSC 1279.2 (b)

3. Completed within 45 business days

Data Source: ASPEN Database
Data Extraction: July 17, 2014
Publication Data: December 22, 2014

Table 13: Other Applicable Activities (Surveyor Training Provided in FY 2013-14)

Other Applicable Activities Health & Safety Section 1266 (d)(2)(b)(vi) Surveyors Training Provided in FY 2013-14	
Course Name and Description	**Number of Surveyors Trained:**
Ambulatory Surgery Centers (ASC) Basic Surveyor Online Training	60
EMTALA Basic Surveyor Training Online Course	27
Advanced EMTALA Live Course	24
Fundamentals of Patient Safety in Hospitals Online Course	82
Live Webinar Basic ICF/IID Surveyor Training Course	23
Basic ICF/IID Training Course	21
ASPEN Technical Basic Training Course - Session 1	1
Basic Home Health Agency Surveyor Training	12
Home Health Agency Webinar Training	13
Basic Hospice Surveyor Training Course	31
Basic Hospice Training on-Line	9
Basic Hospital Surveyor Training Course	19
Basic Long Term Care Surveyor Training Course- CA MAT	96
CLIA Introduction to Individualized Quality Control Plan Training Course (IQCP)	10
ESRD Basic Technical Core Survey Training Course	12
ESRD Core Survey Conversion Training Course	13
ESRD Core Training Course for Experienced Surveyors	23
STAR Training Course (ESRD)	19
Basic Life Safety Code Surveyor Training Course	1
Fire Safety Evaluation System/Board and Care Surveyor Training Course	1
NFPA 99 Health Care Facilities Training Course	1
QIES Basic Training Course#2 (combined)	7
QIES Workbench Advanced Training Course	1
RAI Coordinators Training Course	2
Survey Executives Training Institute (SETI)	2
Orientation of Newly Employed Surveyors	97
Quality Indicator Survey (QIS) Process	33
Orientation to BLSC	6
Hospice QAPI part 1-2	10
Hospice End of Life Issues	7
Hospice/Hospitalization or Death	6
Forensic Wound Identification	87
Basic Long Term Care: Traditional	9
Evaluation and Treatment of Depression	24
Basic Life Safety Code: The Surveyor Process	13
POD Life Safety	6
Fire Safety Evaluation Systems Board	1
Fire Evaluation Systems	1
Basic Medication in ICF/MR	1
Common Drugs Side Affects in ICF/MR	20
Common Issues Facing the Elderly	25
H1N1 In the Elderly Population	19

Data Source : Staff Education Quality Improvement Section

Table 13: Other Applicable Activities (cont.)

Other Applicable Activities Health & Safety Section 1266 (d)(2)(b)(vi) Surveyors Training Provided in FY 2013-14	
Course Name and Description	**Number of Surveyors Trained:**
Alternative Sanctions for Home	25
Reducing the use of Seclusion	8
Paid Feeding Assistance Guidance Training	4
Down Syndrome Aging	7
Electronic Health Records	14
CLIA New Quality Control	7
Fall Prevention	98
How to be an Effective Team	31
Pain Management	14
ESRD STAR Light Webinar	12
First Things First: Nursing	1
Getting the Most out of ICF/IID	22
Governing Body Refresher	5
HHA Survey Protocol Webinar	12
Hospital Complaint Investigation	8
Hospital Immediate Jeopardy	8
Basic Medications In Nursing Homes	29
Being an Effective Witness	19
Behavior Modification: Theories	22
Burnout: Caregiver	17
Burnout: Surveyors	22
Burnout: Staff	23
Facilitating Communication in Individuals	10
ICF/MR Understanding	7
Physical Restraint Use in Nursing Homes	174
Infection Control In ASC's	7
Primary Prevention: Preventative Measures	14
Infection Control in Nursing	12
SCG News Magazine: Legal Ramifications (combined)	74
Hospital Complaint	62
Secondary Prevention: Preventing	14
Issues of Infection Control	2
Nursing Home vs ICF/MR	5
Nursing Home Immunization	8
Nursing Home Journal Volume III	95
Nursing Home Journal Volume IV	90
ICF/MR Understanding	7
Infection Control in ASC's	7
Partnership for Patients	5
Partnership for Patients QAPI	4
Medicare Part D Impact on the Nursing Homes	10
Basic Health Facility Surveyor Non - LTC	100
Basic Health Facility Surveyor: Introduction	114
Principles of Documentation Training Quarterly	172
Principles of Documentation Web Based Training	155

Data Source : Staff Education Quality Improvement Section

Table 13: Other Applicable Activities (cont.)

Other Applicable Activities Health & Safety Section 1266 (d)(2)(b)(vi) Surveyors Training Provided in FY 2013-14	
Course Name and Description	**Number of Surveyors Trained:**
Principles of Documentation Non - LTC	137
Adaptation: Dealing with Changing Needs parts 1-3	40
Advanced Life Safety Code: Building	8
Advanced Life Safety Code: Fire Alarm	8
Advanced Life Safety Code: Sprinkler	8
Alzheimer's and related Dementia - Part 1-2	11
Dementia in LTC Facilities	40
Certification and Enforcement Orientation	22
CMS Long Term Care Journal: Pressure	102
CMS Long Term Care Journal: Urinary	100
How to Enhance the Quality of Dining	21
Form Institutional to Individual Care	74
Improving MDS Accuracy - ADL's	1
Improving MDS Accuracy - Disease	14
MDS 3.0 Part 1 - An Introduction	82
Interview Technique	95
Appendix J	22
Mental Illness in Nursing Homes	53
Hydration	97
Introducing the New Psychosocial Outcome	86
D.A.V.E	10
Sexual Abuse in LTC	34
Team Leadership Skills for Survey Teams	103
The Survey Team Leader: Entrance and Exit	103
The Survey Leader: Time	103
The Surveyor in Court: Depositions	30
Decision Making	20
Dealing with Turbulence in Organizations	11
CMS Basic Home Health Agency Surveyor	9
The use of the 5 Senses in Decisions	44
Delivery of Care to a Diverse Population	13
To Do or Not to DO: Surveyor Boundaries	70
Making Sense of Data	25
Investigative Techniques	96
Liability Notices and Beneficial Appeal	83
Managing Depression in LTC	21
Listening: It's not just Hearing the Words	26
Electronic Health Records	138
Treatment Modalities for Management	9
ICF/IID Tag - W249 Review	56
Wound Care	4
Alternative Sanctions	25
Medical Aspects of Neglect	95
Initiative to Improve	75
Surveying for Anti-Psychotic Medications	537

Data Source : Staff Education Quality Improvement Section

Table 13: Other Applicable Activities (cont.)

Other Applicable Activities Health & Safety Section 1266 (d)(2)(b)(vi) Surveyors Training Provided in FY 2013-14	
Course Name and Description	**Number of Surveyors Trained:**
Severity and Scope - Anti-psychotic use in NH	572
Overview of Anti-psychotic Medication use in NH	541
TotalLMS Bulletin - Administrator Mode	8
TotalLMS Bulletin - Learner Mode	12
TotalLMS Bulletin - Manager Mode	6
TotalLMS Bulletin - Report Manager	6
TotalLMS Bulletin - Compatibility Settings	6
TotalLMS Bulletin - Enrollment Specialist	2
TotalLMS Bulletin - Enrollment Specialist Assessment	3
TotalLMS Bulletin - Learner Basics	122
TotalLMS State Training Coordinator Course Pretest	1
TotalLMS State Training Coordinator Course Posttest	2
TotalLMS State Training Coordinator Course	1
TotalLMS State Training Coordinator Course Registration and Credits	1
TotalLMS State Training Coordinator Course Disposition Authority	5
Training Coordinator Training Draft	1
Dementia Training	1,693
Dementia Overview - Webinar	568
Dementia Scope - Webinar	564
Dementia Survey - Webinar	561
New Surveyor Academy Training	389
Pharmacy Investigating Psychotherapeutic Medications Webinar Training	310
Statement of Qualifications Webinar Training	102
State Webinar Training Managers/Supervisors/Training Supervisors Q1-Q6 Intake Prioritization	104
Training Supervisor Face-2 Face	12
State Webinar Training Managers/Supervisors/Training Supervisors QI Study Results for POC	102
State Webinar Training Review of New DRT Process for Field Supervisors/Managers	86
SEQIS Face-2-Face Training	8
CMS ICF/IID Training Webinar	21
State Webinar Training Administrative Penalties	94
QI Face-2 Face HQ	6
Training Supervisor Face-2 Face	20
State Webinar Training Managers/Supervisors/Training Supervisors Q1-Q6 Intake Prioritization	103

Data Source : Staff Education Quality Improvement Section

Table 13: Other Applicable Activities (cont.)

Other Applicable Activities Health & Safety Section 1266 (d)(2)(b)(vi) Surveyors Training Provided in FY 2013-14	
Course Name and Description	**Number of Surveyors Trained:**
State Webinar Training Managers/Supervisors/Training Supervisors Q9 Complaint/Incident Investigation	406
Surveying NH Anti-psychotic Use Webinar Training	393
Plan of Correction Approval and Verification D.O. Training	195
State Webinar Training Dealing with Dementia Behaviors	235
Using the Automatic Dispensing Tool	30
Investigating Pressure Ulcers	9
Investigating Falls and Fractures	7
General Principles of Infection Control	22
Abbreviated Survey	4
Aspen Updates	2
CMS Updated Appendix P,F155,F309,F322	11
LTC Infection Prevention Program& Surveillance	13
Major Challenges to MSDS 3.0	4
Prioritizing Complaints Quality of Improvement Life Considerations	16
SNF - Surveying their Infection Control Program	40
Principle of Investigative Skills	1
Surveying Anti-Psychotic Use in SNF	19
Anti-Psychotic Webinar	1
POD P4 L.A. Training	160
POC Review L.A. Training	140

Data Source : Staff Education Quality Improvement Section

Nursing Home Administrator Program

Health and Safety Code section 1416 requires Nursing Home Administrator Program to prepare a list of data showing License, Exam and Administrator-in-Training Program activities and Administrator violations as shown in the tables for FYs 2010-2014.

Table 14: Nursing Home Administrator Violations

Pursuant to Health and Safety Code section 1416.36(d)(1)(C)(vi), Table 14 provides the listing of names and nature of violations for individual licensed Nursing Home Administrators; final administrative, remedial, or disciplinary actions taken; and the fiscal year in which the action was taken.

Table 15: Nursing Home Administrator License, Exam, and Administrator-in-Training Program

Pursuant to Health and Safety Code section 1416(d)(1)(C), Table 15 shows the number of applications for Nursing Home Administrator‘s licenses and the status, the number of Nursing Home Administrator exams taken and the results, the number of applicants for the Administrator-in-Training program and the status, the number of complaints received for Administrator-in-Training and Nursing Home Administrators, the number of actions against Nursing Home Administrators, and the number of Nursing Home Administrator appeals, informal conferences, or hearings filed by nursing a home administrator.

Table 14: Nursing Home Administrator Violations

Nursing Home Administrator Violations Health & Safety Code Section 1416.36 (d)(1)(C)(vi) FY 2011/12-2014/15			
NHA #	**Complaint/Allegation**	**Final Administrative, Remedial, or Disciplinary Action**	**Fiscal Year**
6650	Patient care	Probation complete	11/12
5190	Patient care	Warning Letter	11/12
7060	Patient care	NHA Currently on Probation	11/12
5190	Patient care	NHA Currently on Probation	11/12
2913	Miscellaneous	License Revoked	11/12
5449	Miscellaneous	NHA Currently on Probation	11/12
6783	Patient care	NHA Currently on Probation	12/13
5282	Patient care	Warning Letter	12/13
6775	Patient care	Warning Letter	12/13
4642	Patient care	Warning Letter	12/13
6428	Patient care	Warning Letter	12/13
6852	Patient care	Warning Letter	12/13
144	Patient care	Warning Letter	12/13
7170	Patient care	Warning Letter	12/13
3256	Patient care	Warning Letter	12/13
6873	Patient care	Warning Letter	12/13
6513	Patient care	Warning Letter	12/13
7292	Patient care	Warning Letter	12/13
7286	Patient care	Warning Letter	12/13
5839	Patient care	Warning Letter	12/13
5870	Patient care	Warning Letter	12/13
7056	Patient care	Warning Letter	12/13
1688	Patient care	Warning Letter	12/13
7097	Patient care	Warning Letter	12/13
5869	Patient care	Warning Letter	12/13
5715	Patient care	Warning Letter	12/13
6868	Patient care	Warning Letter	12/13
7149	Patient care	Warning Letter	12/13
3883	Patient care	Warning Letter	12/13
6729	Patient care	Warning Letter	12/13
6418	Patient care	Warning Letter	12/13
7072	Patient care	Warning Letter	12/13
5759	Patient care	Warning Letter	12/13

Data Source: Nursing Home Administrator Program

Table 14: Nursing Home Administrator Violations (cont.)

Nursing Home Administrator Violations Health & Safety Code Section 1416.36 (d)(1)(C)(vi) FY 2011/12-2014/15			
NHA #	**Complaint/Allegation**	**Final Administrative, Remedial, or Disciplinary Action**	**Fiscal Year**
6960	Patient care	Warning Letter	12/13
5685	Patient care	Warning Letter	12/13
7527	Patient care	Warning Letter	12/13
5065	Patient care	Warning Letter	12/13
4488	Patient care	Warning Letter	12/13
6897	Patient care	Warning Letter	12/13
5509	Patient care	Warning Letter	12/13
3688	Patient care	Warning Letter	12/13
5861	Patient care	Warning Letter	12/13
5869	Patient care	Warning Letter	12/13
3552	Patient care	Warning Letter	12/13
7291	Patient care	Warning Letter	12/13
6966	Patient care	Warning Letter	13/14
6877	Patient care	Warning Letter	13/14
6885	Patient care	Warning Letter	13/14
6784	Patient care	Warning Letter	13/14
962	Patient care	Warning Letter	13/14
6424	Patient care	Warning Letter	13/14
7078	Patient care	Warning Letter	13/14
7445	Patient care	Warning Letter	13/14
6997	Patient care	Warning Letter	13/14
6529	Patient care	Warning Letter	13/14
5520	Patient care	Warning Letter	13/14
5310	Patient care	Warning Letter	13/14
5028	Patient care	Warning Letter	13/14
6587	Patient care	Warning Letter	13/14
7417	Patient care	Warning Letter	13/14
3149	Patient care	Warning Letter	13/14
7430	Patient care	Warning Letter	13/14
6799	Patient care	Warning Letter	13/14
5341	Failure to report abuse	12 Month probation	13/14
3766	Failure to report abuse	12 Month probation	13/14
6759	W & I 15630(B)(1)	Warning letter	13/14
5932	Patient care negligence	Warning letter	13/14
4921	Arrested for Fraud	Immediate suspension	13/14
7321	Patient care negligence	Warning letter	13/14
4620	H & S 1416.6	12 Month probation	14/15
7579	Unprofessional conduct	12 Month probation	14/15
7618	H & S 1416.75	License Revoked	14/15

Table 15: Nursing Home Administrator License, Exam, and Administrator-in-Training Program

Nursing Home Administrator Program License, Exam, and Administrator -in-Training Program Health & Safety Code Section 1416.36 (d)(1)(C) FY 2009/10-2014/15						
		FY 10/11	**FY 11/12**	**FY 12/13**	**FY 13/14**	**FY 14/15****
(i) Persons applying for NHA License	Applied	*	*	142	122	14
	Approved	108	109	142	120	14
	Denied	*	*	0	2	0
	Renewed	1,365	1,250	1,180	1,207	236
(ii) State Exam	Examinees	249	206	219	219	40
	Passed	137	110	138	130	20
	Failed	112	96	81	89	22
(iii) Administrator-in-Training Program	Applied	*	*	147	124	24
	Accepted	18	51	135	122	24
	Completed	16	25	45	110	15
(iv) Complaints Received [1]	AIT	*	*	1	0	0
	NHA	22	29	81	30	3
(v) Actions Against NHA's [2]		1	6	39	24	3
(vi) NHA Violations Listing		See Table 14				
(vii) Appeals, Informal Appeals, Informal Conferences or Hearings [3]	Number of NHA Appeals, Informal Conferences or Hearings Filed	1	0	1	2	0
	Time Between Request & Final Determination	1 month	28 months	N/A	8 months	11 months
	Final Actions Upheld	1	1	0	2	1

* Data not available

** Current FY data July 1 – September 1, 2014

[1] Sources of complaints include, but not limited to: facility, general public, victim, witness, family member, mandated reporter, ombudsman, governmental agencies.

[2] Types of actions against Nursing Home Administrators include warnings, suspensions, revocations, denials, probations, and fines as a result of complaints received.

[3] Appeals, Informal Appeals, Informal Conferences or Hearings based on substantiated complaints received.

Attachment 1: State Workload Percentages FY 2015-16

CALIFORNIA DEPARTMENT OF PUBLIC HEALTH
CENTER FOR HEALTH CARE QUALITY - LICENSING AND CERTIFICATION PROGRAM
STATE WORKLOAD PERCENTAGES FY 2015-16

FACILITY TYPES	ACTIVITIES	PCA	LICENSED FACILITY COUNT	LICENSING SURVEY FREQUENCY RATE	SURVEY AUTHORITY/WORKLOAD DATA SOURCE	STANDARD AVERAGE HOURS	WORKLOAD SURVEY	ANNUALIZED SURVEY HOURS	STATE MATCH	STATE WORKLOAD HOURS	STATE PERCENTAGES BY ACTIVITIES*	STATE PERCENTAGES BY FACILITY TYPE
1 ALTERNATIVE BIRTHING CENTERS	RE-LICENSURE	31068	7	33%	HSC 1278. Once every 3 yrs.	22.39	2.33	69.84	100%	69.84	0.01%	0.01%
	COMPLAINT INVESTIGATION	31068			Report of Monthly Complaint	14.54	1.00	19.44	100%	19.44	0.00%	
	AGED COMPLAINTS	31068			Report of Monthly Complaint	14.54	0.33	6.48	100%	6.48	0.00%	
	Subtotal						**3.66**	**95.76**		**95.76**	**0.01%**	
2 ADULT DAY HEALTH CENTER	RE-LICENSURE	31051	271	50%	HSC 1583.5 Once every 2 yrs	78.49	135.50	14,218.44	100%	14,218.44	1.67%	2.21%
	COMPLAINT / ERI INVESTIGATION	31051			Report of Monthly Complaint	44.56	63.00	3,753.05	100%	3,753.05	0.44%	
	FIELD VISIT	31051			Prior 2014-15 Licensing Wrkld Estimate	20.89	4.00	111.71	100%	111.71	0.01%	
	AGED COMPLAINTS	31051				44.56	12.67	754.58	100%	754.58	0.09%	
	Subtotal						**215.17**	**18,837.78**		**18,837.78**	**2.21%**	
3 ACUTE PSYCHIATRIC HOSPITAL	RE-LICENSURE	31010	37	33%	HSC 1279 (b) Once every 3 yrs.	172.80	12.33	2,849.20	100%	2,849.20	0.34%	1.65%
	FIELD VISIT	31010			2014-15 Licensing Wrkld Estimate	10.34	1.00	13.82	100%	13.82	0.00%	
	COMPLAINT (or ERI)	31010			Report of Monthly Complaint	9.04	714.00	8,629.09	100%	8,629.09	1.01%	
	AGED COMPLAINTS	31010			Report of Monthly Complaint	9.04	184.33	2,227.77	100%	2,227.77	0.26%	
	COMPLAINT - DEEMED	31157			2014 Federal Grant 100% Wrkld	9.04	29.00	350.48	12.50%	43.81	0.01%	
	FULL VALIDATION AFTER COMPLAINT	31011			2014 Federal Grant 100% Wrkld	139.47	1.00	186.46	12.50%	23.31	0.00%	
	RE-CERTIFICATION	31011			2014 Federal Grant 100% Wrkld	139.47	9.00	1,678.11	12.50%	209.76	0.03%	
	RECERTIFICATION FOLLOW UP / REVISITS	31011			2014 Federal Grant 100% Wrkld	72.95	3.00	292.58	12.50%	36.57	0.00%	
	LIFE SAFETY CODE	31012			2014 Federal Grant 100% Wrkld	11.82	9.00	142.22	12.50%	17.78	0.00%	
	Subtotal						**962.66**	**16,369.74**		**14,051.12**	**1.65%**	
4 CHRONIC DIALYSIS CLINIC	RE-LICENSURE	31063	4	33%	HSC 1228 (C) Once every 3 yrs.	12.68	1.33	22.60	100%	22.60	0.00%	1.18%
	INITIAL LICENSURE	31063			2014-15 Licensing Wrkld Estimate	21.22	14.00	397.17	100%	397.17	0.05%	
	COMPLAINT / ERI INVESTIGATION	31063			Report of Monthly Complaint	10.62	120.00	1,703.74	100%	1,703.74	0.20%	
	AGED COMPLAINTS	31063			Report of Monthly Complaint	16.12	79.00	1,702.51	100%	1,702.51	0.20%	
	FIELD VISIT	31063			2014-15 Licensing Wrkld Estimate	9.69	6.00	77.73	100%	77.73	0.01%	
	End Stage Renal Disease											
	RE-CERTIFICATION	31064			2014 Federal Grant 100% Wrkld	124.81	165.00	27,531.62	12.50%	3,441.45	0.40%	
	TARGETED SAMPLE	31064			2014 Federal Grant 100% Wrkld	124.81	60.00	10,011.50	12.50%	1,251.44	0.15%	
	3.0-YEAR AVERAGE (33%-29%)	31064			2014 Federal Grant 100% Wrkld	124.81	23.00	3,837.74	12.50%	479.72	0.06%	
	INITIAL CERTIFICATION (New Providers)	31064			2014 Federal Grant 100% Wrkld	29.09	26.00	1,011.15	12.50%	126.39	0.01%	
	INITIAL CERTIFICATION - FOLLOW UP	31064			2014 Federal Grant 100% Wrkld	2.12	13.00	36.84	12.50%	4.61	0.00%	
	RE-CERTIFICATION FOLLOW-UP/REVISITS	31064			2014 Federal Grant 100% Wrkld	39.88	80.00	4,265.24	12.50%	533.16	0.06%	
	LIFE SAFETY CODE	31126			2014 Federal Grant 100% Wrkld	8.94	9.00	107.57	12.50%	13.45	0.00%	
	COMPLAINT INVESTIGATION	31190			2014 Federal Grant 100% Wrkld	16.12	120.00	2,586.10	12.50%	323.26	0.04%	
	Subtotal						**716.33**	**53,291.50**		**10,077.22**	**1.18%**	
5 CHEMICAL DEPENDENCY RECOVERY HOSPITAL	RE-LICENSURE	31014	6	50%	2014-15 Licensing Wrkld Estimate	103.00	3.00	413.10	100%	413.10	0.05%	0.12%
	COMPLAINT / ERI INVESTIGATION	31014			Report of Monthly Complaint	8.47	27.00	305.74	100%	305.74	0.04%	
	AGED COMPLAINTS	31014			Report of Monthly Complaint	8.47	26.00	294.41	100%	294.41	0.03%	
	Subtotal						**56.00**	**1,013.25**		**1,013.25**	**0.12%**	

Source: BFSU/FY 2015-16 November Estimate

CALIFORNIA DEPARTMENT OF PUBLIC HEALTH
CENTER FOR HEALTH CARE QUALITY - LICENSING AND CERTIFICATION PROGRAM
STATE WORKLOAD PERCENTAGES FY 2015-16

FACILITY TYPES	ACTIVITIES	PCA	LICENSED FACILITY COUNT	LICENSING SURVEY FREQUENCY RATE	SURVEY AUTHORITY/WORKLOAD DATA SOURCE	STANDARD AVERAGE HOURS	WORKLOAD SURVEY	ANNUALIZED SURVEY HOURS	STATE MATCH	STATE WORKLOAD HOURS	STATE PERCENTAGES BY ACTIVITIES*	STATE PERCENTAGES BY FACILITY TYPE
6 CONGREGATE LIVING HEALTH FACILITY	RE-LICENSURE	31053	74	50%	HSC 1422 1 or 2 yrs	22.29	37.00	1,102.58	100%	1,102.58	0.13%	**0.29%**
	INITIAL LICENSURE	31053			2014-15 Licensing Wrkld Estimate	23.38	6.00	187.54	100%	187.54	0.02%	
	COMPLAINT / ERI INVESTIGATION	31053			Report of Monthly Complaint	17.86	42.00	1,002.83	100%	1,002.83	0.12%	
	FIELD VISIT	31053			2014-15 Licensing Wrkld Estimate	3.67	1.00	4.91	100%	4.91	0.00%	
	AGED COMPLAINTS	31053			Report of Monthly Complaint	17.86	8.67	206.93	100%	206.93	0.02%	
	Subtotal						**94.67**	**2,504.80**		**2,504.80**	**0.29%**	
7 COMMUNITY CLINIC	RE-LICENSURE	31055	1,030	33%	HSC 1228 (c) Once every 3 yrs, except © RHC and Accredited Clinics	7.35	343.33	3,373.63	100%	3,373.63	0.40%	**1.13%**
	INITIAL LICENSURE	31055			2014-15 Licensing Wrkld Estimate	24.00	13.00	417.11	100%	417.11	0.05%	
	COMPLAINT / ERI INVESTIGATION	31055			Report of Monthly Complaint	8.38	300.00	3,360.96	100%	3,360.96	0.40%	
	AGED COMPLAINTS	31055			Report of Monthly Complaint	8.12	152.67	1,657.29	100%	1,657.29	0.20%	
	FIELD VISIT	31055			2014-15 Licensing Wrkld Estimate	11.92	7.00	111.55	100%	111.55	0.01%	
	Rural Health Clinic											
	RE-CERTIFICATION (RHC)	31127			2014 Federal Grant 100% Wrkld	43.25	43.00	2,486.30	12.50%	310.79	0.04%	
	TARGETED SURVEYS	31127			2014 Federal Grant 100% Wrkld	43.25	25.00	1,445.52	12.50%	180.69	0.02%	
	6.0 YEAR AVG. (16.7%-14.3%)	31127			2014 Federal Grant 100% Wrkld	43.25	7.00	404.75	12.50%	50.59	0.01%	
	INITIAL SURVEY (New Providers)	31127			2014 Federal Grant 100% Wrkld	17.74	4.00	94.87	12.50%	11.86	0.00%	
	INITIAL FOLLOW UP	31127			2014 Federal Grant 100% Wrkld	7.11	2.00	19.01	12.50%	2.38	0.00%	
	COMPLAINT INVESTIGATION - NLTC	31202			2015 Federal Grant 100% Wrkld	8.12	15.00	162.83	12.50%	20.35	0.00%	
	Portable X-Ray Suppliers											
	INITIAL SURVEY	31056			2014 Federal Grant 100% Wrkld	16.88	6.00	135.40	12.50%	16.93	0.00%	
	INITIAL FOLLOW UP	31056			2014 Federal Grant 100% Wrkld	7.07	6.00	56.71	12.50%	7.09	0.00%	
	RECERTIFICATION 7 YEAR INTERVAL	31056			2014 Federal Grant 100% Wrkld	48.11	5.00	321.59	12.50%	40.20	0.00%	
	6.0- YEAR AVG. (16.6%-14.1%)	31056			2014 Federal Grant 100% Wrkld	48.11	1.00	64.32	12.50%	8.04	0.00%	
	FOLLOW UP /REVISITS	31056			2014 Federal Grant 100% Wrkld	15.03	6.00	120.56	12.50%	15.07	0.00%	
	5% TARGETED SURVEYS	31056			2014 Federal Grant 100% Wrkld	48.11	2.00	128.64	12.50%	16.08	0.00%	
	Subtotal						**938.00**	**14,361.04**		**9,600.61**	**1.13%**	
8 CORRECTIONAL TREATMENT CENTERS	RE-LICENSURE	31072	20	50%	HSC 1279 Once every 2 yrs	150.85	10.00	2,016.71	100%	2,016.71	0.24%	**1.02%**
	INITIAL LICENSURE	31072			2014-15 Licensing Wrkld Estimate	312.51	2.00	835.59	100%	835.59	0.10%	
	COMPLAINT INVESTIGATION	31072			Report of Monthly Complaint	9.52	386.00	4,912.73	100%	4,912.73	0.58%	
	FIELD VISIT	31072			2014-15 Licensing Wrkld Estimate	17.52	2.00	46.84	100%	46.84	0.00%	
	AGED COMPLAINTS	31072			Report of Monthly Complaint	9.52	71.00	903.64	100%	903.64	0.10%	
	Subtotal						**471.00**	**8,715.51**		**8,715.51**	**1.02%**	

Source: BFSU/FY 2015-16 November Estimate

CALIFORNIA DEPARTMENT OF PUBLIC HEALTH

CENTER FOR HEALTH CARE QUALITY - LICENSING AND CERTIFICATION PROGRAM

STATE WORKLOAD PERCENTAGES FY 2015-16

FACILITY TYPES	ACTIVITIES	PCA	LICENSED FACILITY COUNT	LICENSING SURVEY FREQUENCY RATE	SURVEY AUTHORITY/WORKLOAD DATA SOURCE	STANDARD AVERAGE HOURS	WORKLOAD SURVEY	ANNUALIZED SURVEY HOURS	STATE MATCH	STATE WORKLOAD HOURS	STATE PERCENTAGES BY ACTIVITIES*	STATE PERCENTAGES BY FACILITY TYPE
9 GENERAL ACUTE CARE HOSPITAL	RE-LICENSURE	31005	432	33%	HSC 1279 (a) Once every 3 yrs	34.73	144.00	6,685.99	100%	6,685.99	0.78%	27.22%
	PATIENT SAFETY LICENSING	31005			2014-15 Licensing Wrkld Estimate	72.24	31.00	2,993.90	100%	2,993.90	0.35%	
	INITIAL LICENSURE	31005			2014-15 Licensing Wrkld Estimate	85.77	14.00	1,605.32	100%	1,605.32	0.19%	
	COMPLAINT	31005			Report of Monthly Complaint	10.59	9,334.00	132,148.48	100%	132,148.48	15.50%	
	AGED COMPLAINTS	31152			Report of Monthly Complaint	10.59	4,459.67	63,138.86	100%	63,138.86	7.41%	
	REVIEW MEDICAL ERROR PLAN (MERP)	31005			2014-15 Licensing Wrkld Estimate	78.70	115.00	12,099.60	100%	12,099.60	1.42%	
	FIELD VISIT	31005			2014-15 Licensing Wrkld Estimate	16.03	202.00	4,328.96	100%	4,328.96	0.51%	
	CAL	31005			2014-15 Licensing Wrkld Estimate	42.84	6.00	343.64	100%	343.64	0.04%	
	Deemed											
	FULL VALIDATION AFTER COMPLAINT	31006			2014 Federal Grant 100% Wrkld	418.44	26.00	14,544.71	12.50%	1,818.09	0.21%	
	LIFE SAFETY CODE	31008			2014 Federal Grant 100% Wrkld	87.52	55.00	6,435.29	12.50%	804.41	0.10%	
	LIFE SAFETY CODE FOLLOWUP	31008			2014 Federal Grant 100% Wrkld	15.78	2.00	42.19	12.50%	5.27	0.00%	
	TARGETED ADD'L SAMPLE	31006			2014 Federal Grant 100% Wrkld	418.44	3.00	1,678.24	12.50%	209.78	0.02%	
	COMPLAINTS	31154			2014 Federal Grant 100% Wrkld	10.59	751.00	10,632.47	12.50%	1,329.06	0.16%	
	COMPLAINT SURVEYS EMTALA (ACCREDITED)	31154			2014 Federal Grant 100% Wrkld	74.84	17.00	1,700.91	12.50%	212.61	0.02%	
	Non-Deemed											
	COMPLAINT SURVEYS	31154			2014 Federal Grant 100% Wrkld	10.59	539.00	7,631.03	12.50%	953.88	0.11%	
	5-YEAR MAX INTERVAL	31006			2014 Federal Grant 100% Wrkld	418.44	7.00	3,915.88	12.50%	489.49	0.06%	
	TARGETED SAMPLE	31006			2014 Federal Grant 100% Wrkld	418.44	3.00	1,678.24	12.50%	209.78	0.02%	
	FOLLOW UP / REVISITS	31006			2014 Federal Grant 100% Wrkld	158.67	13.00	2,757.63	12.50%	344.70	0.04%	
	COMPLAINT INVESTIGATIONS - NLTC (EMTALA)	31154			2014 Federal Grant 100% Wrkld	74.84	2.00	200.11	12.50%	25.01	0.00%	
	INITIAL CERTIFICATION FOLLOW UP	31006			2014 Federal Grant 100% Wrkld	20.57	9.00	247.50	12.50%	30.94	0.00%	
	LIFE SAFETY CODE	31008			2014 Federal Grant 100% Wrkld	87.52	21.00	2,457.11	12.50%	307.14	0.04%	
	LIFE SAFETY CODE - FOLLOW UP	31008			2014 Federal Grant 100% Wrkld	15.78	3.00	63.29	12.50%	7.91	0.00%	
	RECERTIFICATION 4 YEAR INTERVAL	31006			2014 Federal Grant 100% Wrkld	418.44	9.00	5,034.71	12.50%	629.34	0.07%	
	IPPS EXCLUSION VERIFICATION	31006			2014 Federal Grant 100% Wrkld	418.44	2.00	1,118.82	12.50%	139.85	0.02%	
	3.0-YEAR AVG> 33.33-25=8.33	31006			2014 Federal Grant 100% Wrkld	418.44	3.00	1,678.24	12.50%	209.78	0.02%	
	RECERTS-NEW CAHS	31006			2014 Federal Grant 100% Wrkld	418.44	2.00	1,118.82	12.50%	139.85	0.02%	
	Organ Transplant Centers											
	INITIAL CERTIFICATION	31006			2014 Federal Grant 100% Wrkld	38.65	1.00	51.67	12.50%	6.46	0.00%	
	RECERTIFICATION	31006			2014 Federal Grant 100% Wrkld	418.44	7.00	3,915.88	12.50%	489.49	0.06%	
	5-YEAR MAX. INTERVAL	31006			2014 Federal Grant 100% Wrkld	418.44	5.00	2,797.06	12.50%	349.63	0.04%	
	Subtotal						**15,785.67**	**293,044.55**		**232,057.22**	**27.22%**	

Source: BFSU/FY 2015-16 November Estimate

CALIFORNIA DEPARTMENT OF PUBLIC HEALTH
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STATE WORKLOAD PERCENTAGES FY 2015-16

FACILITY TYPES	ACTIVITIES	PCA	LICENSED FACILITY COUNT	LICENSING SURVEY FREQUENCY RATE	SURVEY AUTHORITY/WORKLOAD DATA SOURCE	STANDARD AVERAGE HOURS	WORKLOAD SURVEY	ANNUALIZED SURVEY HOURS	STATE MATCH	STATE WORKLOAD HOURS	STATE PERCENTAGES BY ACTIVITIES*	STATE PERCENTAGES BY FACILITY TYPE
10 HOME HEALTH AGENCIES	RE-LICENSURE	31045	243	100%	HSC 1733 1 YEAR EXCEPT MC CERTIFIED	21.84	243.00	7,095.08	100%	7,095.08	0.83%	**2.88%**
	RE-LICENSURE FOLLOW UP	31045			2014-15 Licensing Wrkld Estimate	92.85	1.00	124.13	100%	124.13	0.02%	
	INITIAL LICENSURE	31045			2014-15 Licensing Wrkld Estimate	19.34	84.00	2,171.87	100%	2,171.87	0.25%	
	INITIAL LICENSURE FOLLOW UP	31045			2014-15 Licensing Wrkld Estimate	13.25	1.00	17.71	100%	17.71	0.00%	
	COMPLAINT / ERI INVESTIGATION	31045			Report of Monthly Complaint	15.71	290.00	6,090.78	100%	6,090.78	0.71%	
	AGED COMPLAINTS	31045			Report of Monthly Complaint	12.84	145.67	2,500.48	100%	2,500.48	0.29%	
	FIELD VISIT	31045			2014-15 Licensing Wrkld Estimate	10.28	8.00	109.95	100%	109.95	0.01%	
	Non-Deemed											
	RECERTIFICATION (SURVEY)	31047			2014 Federal Grant 100% Wrkld	114.77	203.00	31,147.47	12.50%	3,893.43	0.46%	
	RECERTIFICATION FOLLOW UP / REVISITS	31047			2014 Federal Grant 100% Wrkld	48.71	93.00	6,056.19	12.50%	757.02	0.09%	
	COMPLAINT INVESTIGATION - NLTC NON-DEEMED	31175			2014 Federal Grant 100% Wrkld	12.84	97.00	1,665.08	12.50%	208.14	0.02%	
	2.0-YEAR AVG. (50%-33%)	31047			2014 Federal Grant 100% Wrkld	114.77	71.00	10,893.94	12.50%	1,361.74	0.16%	
	INITITAL SURVEY	31047			2014 Federal Grant 100% Wrkld	63.89	4.00	341.66	12.50%	42.71	0.01%	
	INITIAL SURVEY FOLLOW UP	31047			2014 Federal Grant 100% Wrkld	44.16	1.00	59.04	12.50%	7.38	0.00%	
	Deemed				2014 Federal Grant 100% Wrkld							
	FULL VALIDATION AFTER COMPLAINT	31047			2014 Federal Grant 100% Wrkld	114.77	6.00	920.61	12.50%	115.08	0.01%	
	COMPLAINT	31175			2014 Federal Grant 100% Wrkld	12.84	38.00	652.30	12.50%	81.54	0.01%	
	Subtotal						**1,285.67**	**69,846.30**		**24,577.04**	**2.88%**	
11 HOSPICES	RE-LICENSURE	31069	707	0%	HSC 1752 PERIODIC FIELD OPS ESTIMATE ONLY	22.61	-	-	100%	-	0.00%	**0.85%**
	INITIAL LICENSURE	31069			2014-15 Licensing Wrkld Estimate	11.74	90.00	1,412.57	100%	1,412.57	0.17%	
	INITIAL LICENSURE FOLLOW UP	31069			2014-15 Licensing Wrkld Estimate	8.74	1.00	11.68	100%	11.68	0.00%	
	COMPLAINT / ERI INVESTIGATION	31069			Report of Monthly Complaint	16.52	113.00	2,495.67	100%	2,495.67	0.29%	
	AGED COMPLAINTS	31069			Report of Monthly Complaint	16.52	57.33	1,266.24	100%	1,266.24	0.15%	
	FIELD VISIT	31069			2014-15 Licensing Wrkld Estimate	7.87	3.00	31.56	100%	31.56	0.00%	
	Non-Deemed										0.00%	
	INITIAL SURVEY	31070			2014 Federal Grant 100% Wrkld	50.27	4.00	268.82	12.50%	33.60	0.00%	
	INITIAL SURVEY - FOLLOW UP	31070			2014 Federal Grant 100% Wrkld	0.00	2.00	-	12.50%	-	0.00%	
	LIFE SAFETY CODE	31201			2014 Federal Grant 100% Wrkld	14.39	18.00	346.28	12.50%	43.29	0.01%	
	LIFE SAFETY CODE - FOLLOW UP	31201			2014 Federal Grant 100% Wrkld	10.00	9.00	120.32	12.50%	15.04	0.00%	
	RECERTIFICATION	31070			2014 Federal Grant 100% Wrkld	111.27	22.00	3,272.65	12.50%	409.08	0.05%	
	TARGETED SURVEYS	31070			2014 Federal Grant 100% Wrkld	111.27	46.00	6,842.81	12.50%	855.35	0.10%	
	6.0 YEAR AVG> (16.7%-14.3)	31070			2014 Federal Grant 100% Wrkld	111.27	4.00	595.03	12.50%	74.38	0.01%	
	RECERTIFICATION FOLLOW UP / REVISITS	31070			2014 Federal Grant 100% Wrkld	45.46	23.00	1,397.83	12.50%	174.73	0.02%	
	Deemed										0.00%	
	FULL VALIDATION AFTER COMPLAINT	31070			2014 Federal Grant 100% Wrkld	111.27	6.00	892.54	12.50%	111.57	0.01%	
	COMPLAINT - NLTC	31197			2014 Federal Grant 100% Wrkld	16.52	100.00	2,208.56	12.50%	276.07	0.03%	
	Subtotal						**498.33**	**21,162.56**		**7,210.83**	**0.85%**	

Source: BFSU/FY 2015-16 November Estimate

CALIFORNIA DEPARTMENT OF PUBLIC HEALTH
CENTER FOR HEALTH CARE QUALITY - LICENSING AND CERTIFICATION PROGRAM
STATE WORKLOAD PERCENTAGES FY 2015-16

FACILITY TYPES	ACTIVITIES	PCA	LICENSED FACILITY COUNT	LICENSING SURVEY FREQUENCY RATE	SURVEY AUTHORITY/WORKLOAD DATA SOURCE	STANDARD AVERAGE HOURS	WORKLOAD SURVEY	ANNUALIZED SURVEY HOURS	STATE MATCH	STATE WORKLOAD HOURS	STATE PERCENTAGES BY ACTIVITIES*	STATE PERCENTAGES BY FACILITY TYPE
12 HOSPICE FACILITIES	RE-LICENSURE	31204	8	50%		22.29	4.00	119.20	100%	119.20	0.01%	**0.09%**
	INITIAL LICENSURE	31204			2014-15 Licensing Wrkld Estimate	54.74	8.00	585.45	100%	585.45	0.07%	
	COMPLAINT / ERI INVESTIGATION	31205			Report of Monthly Complaint	16.52	2.00	44.17	100%	44.17	0.01%	
	AGED COMPLAINTS	31205			Report of Monthly Complaint	16.52	1.00	22.09	100%	22.09	0.00%	
	Subtotal						**15.00**	**770.91**		**770.91**	**0.09%**	
13 INTERMEDIATE CARE FACILITY	RELICENSURE	31029	5	50%	HSC 1422 1 OR 2 YEARS	459.69	2.50	1,536.40	100%	1,536.40	0.18%	**2.05%**
	COMPLAINT / ERI INVESTIGATION	31029			Report of Monthly Complaint	10.20	983.00	13,404.55	100%	13,404.55	1.57%	
	FIELD VISIT	31029			2014-15 Licensing Wrkld Estimate	7.26	2.00	19.41	100%	19.41	0.00%	
	AGED COMPLAINTS	31029			Report of Monthly Complaint	10.20	187.00	2,550.00	100%	2,550.00	0.30%	
	Subtotal						**1,174.50**	**17,510.36**		**17,510.36**	**2.05%**	
14 ICF - DD; DDH; DDN	RELICENSURE (SURVEY)	31030	1187	50%	HSC 1422 1 OR 2 YEARS	85.00	593.50	67,443.18	100%	67,443.18	7.91%	**16.67%**
	INITIAL LICENSURE	31030			2014-15 Licensing Wrkld Estimate	23.17	8.00	247.81	100%	247.81	0.03%	
	COMPLAINT / ERI INVESTIGATION	31035			Report of Monthly Complaint	7.80	4,398.00	45,861.50	100%	45,861.50	5.38%	
	AGED COMPLAINTS	31035			Report of Monthly Complaint	7.80	664.67	6,931.02	100%	6,931.02	0.81%	
	FIELD VISIT	31030			2014-15 Licensing Wrkld Estimate	7.70	17.00	175.00	100%	175.00	0.02%	
	RECERTIFICATION	31031		100%	2014 Federal Grant 100% Wrkld	46.33	942.00	58,346.07	25%	14,586.52	1.71%	
	RECERTIFICATION FOLLOW UP / REVISITS	31031			2014 Federal Grant 100% Wrkld	24.58	47.00	1,544.47	25%	386.12	0.05%	
	COMPLAINT INVESTIGATIONS	31168			2014 Federal Grant 100% Wrkld	8.27	1,491.00	16,484.72	25%	4,121.18	0.48%	
	LIFE SAFETY CODE	31032		4%	2014 Federal Grant 100% Wrkld	6.25	942.00	7,870.99	25%	1,967.75	0.23%	
	LIFE SAFETY CODE - FOLLOW UP	31032			2014 Federal Grant 100% Wrkld	3.69	47.00	231.86	25%	57.96	0.01%	
	INITIAL CERTIFICATION	31031		100%	2014 Federal Grant 100% Wrkld	51.34	14.00	960.91	25%	240.23	0.03%	
	INITIAL CERTIFICATION FOLLOW UP	31031		100%	2014 Federal Grant 100% Wrkld	38.58	7.00	361.04	25%	90.26	0.01%	
	Subtotal						**9,171.17**	**206,458.57**		**142,108.53**	**16.67%**	
15 PEDIATRIC DAY HEALTH RESPITE CARE	RELICENSURE	31066	16	50%	HSC 1422 1 OR 2 YEARS	76.68	8.00	820.11	100%	820.11	0.10%	**0.11%**
	INITIAL LICENSURE	31066	-		2014-15 Licensing Wrkld Estimate	46.59	1.00	62.29	100%	62.29	0.00%	
	COMPLAINT / ERI INVESTIGATION	31066	-		Report of Monthly Complaint	15.55	4.00	83.16	100%	83.16	0.01%	
	AGED COMPLAINTS	31066			Report of Monthly Complaint	15.55	0.33	6.93	100%	6.93	0.00%	
	Subtotal						**13.33**	**972.49**		**972.49**	**0.11%**	
16 PSYCHOLOGY CLINIC	RELICENSURE	31054	22	33%	HSC 1228 (C) Once every 3 yrs.	48.82	7.33	478.63	100%	478.63	0.06%	**0.06%**
	INITIAL LICENSURE	31054	-		2014-15 Licensing Wrkld Estimate	7.00	1.00	9.36	100%	9.36	0.00%	
	Subtotal						**8.33**	**487.99**		**487.99**	**0.06%**	
17 REFERRAL AGENCIES	AGED COMPLAINTS	31050			Report of Monthly Complaint	12.50	0.33	5.75	100%	5.75	0.00%	**0.00%**
	Licensing Subtotal						**0.33**	**5.75**		**5.75**	**0.00%**	

Source: BFSU/FY 2015-16 November Estimate

CALIFORNIA DEPARTMENT OF PUBLIC HEALTH

CENTER FOR HEALTH CARE QUALITY - LICENSING AND CERTIFICATION PROGRAM

STATE WORKLOAD PERCENTAGES FY 2015-16

FACILITY TYPES	ACTIVITIES	PCA	LICENSED FACILITY COUNT	LICENSING SURVEY FREQUENCY RATE	SURVEY AUTHORITY/WORKLOAD DATA SOURCE	STANDARD AVERAGE HOURS	WORKLOAD SURVEY	ANNUALIZED SURVEY HOURS	STATE MATCH	STATE WORKLOAD HOURS	STATE PERCENTAGES BY ACTIVITIES*	STATE PERCENTAGES BY FACILITY TYPE
18 REHAB CLINIC	RELICENSURE	31058	12	33%	HSC 1228 (c) ONCE EVERY 3 YEARS EXCEPT MC CERTIFIED	32.00	4.00	171.12	100%	171.12	0.02%	**0.13%**
	COMPLAINT / ERI INVESTIGATION	31058			Report of Monthly Complaint	4.22	1.00	5.64	100%	5.64	0.00%	
	AGED COMPLAINTS	31058			Report of Monthly Complaint	4.22	0.67	3.76	100%	3.76	0.00%	
	Outpatient Physical Therapy Providers											
	RECERTIFICATION	31057			2014 Federal Grant 100% Wrkld	86.52	16.00	1,850.70	12.50%	231.34	0.03%	
	RECERTIFICATION FOLLOW UP	31057			2014 Federal Grant 100% Wrkld	39.23	33.00	1,730.74	12.50%	216.34	0.02%	
	TARGET SURVEYS	31057			2014 Federal Grant 100% Wrkld	86.52	29.00	3,354.39	12.50%	419.30	0.05%	
	6.0 YEAR AVG. (16.7%-14.3%)	31057			2014 Federal Grant 100% Wrkld	86.52	3.00	347.01	12.50%	43.38	0.01%	
	COMPLAINT INVESTIGATIONS	31183			2014 Federal Grant 100% Wrkld	34.60	2.00	92.51	12.50%	11.56	0.00%	
	Comprehensive Outpatient Rehab Facilities											
	RECERTIFICATION	31130			2014 Federal Grant 100% Wrkld	61.95	1.00	82.82	12.50%	10.35	0.00%	
	5% TARGETED SURVEYS	31130			2014 Federal Grant 100% Wrkld	61.95	1.00	82.82	12.50%	10.35	0.00%	
	Subtotal						**90.67**	**7,721.51**		**1,123.14**	**0.13%**	
19 SURGICAL CLINIC	RELICENSURE (SURVEY)	31059	4	33%	HSC 1228 (c) ONCE EVERY 3 YEARS EXCEPT ASC	3.61	133.00	6.43	100%	6.43	0.00%	**0.65%**
	COMPLAINT / ERI INVESTIGATION	31059			Report of Monthly Complaint	9.73	51.00	663.41	100%	663.41	0.08%	
	AGED COMPLAINTS	31059			Report of Monthly Complaint	9.73	32.33	420.59	100%	420.59	0.05%	
	Ambulatory Surgical Clinic											
	FULL VALIDATION AFTER COMPLAINT	31061			2014 Federal Grant 100% Wrkld	104.89	2.00	280.45	12.50%	35.06	0.00%	
	LIFE SAFETY CODE	31060			2014 Federal Grant 100% Wrkld	12.78	186.00	3,177.91	12.50%	397.24	0.05%	
	LIFE SAFETY CODE - FOLLOW UP	31060			2014 Federal Grant 100% Wrkld	5.49	47.00	344.96	12.50%	43.12	0.01%	
	TARGETED SURVEYS	31061			2014 Federal Grant 100% Wrkld	104.89	112.00	15,705.45	12.50%	1,963.18	0.23%	
	RECERTIFICATION FOLLOW UP / REVISITS	31061			2014 Federal Grant 100% Wrkld	29.39	110.00	4,322.06	12.50%	540.26	0.06%	
	COMPLAINT INVESTIGATIONS - NLTC	31188			2014 Federal Grant 100% Wrkld	16.18	27.00	584.04	12.50%	73.00	0.01%	
	RECERTIFICATION 6 YEAR INTERVAL	31061			2014 Federal Grant 100% Wrkld	104.89	75.00	10,517.05	12.50%	1,314.63	0.15%	
	INITIAL SURVEY	31061			2014 Federal Grant 100% Wrkld	90.48	3.00	362.89	12.50%	45.36	0.01%	
	INITIAL SURVEY FOLLOW UP	31061			2014 Federal Grant 100% Wrkld	9.02	2.00	24.12	12.50%	3.01	0.00%	
	Subtotal						**780.33**	**36,409.36**		**5,505.29**	**0.65%**	

Source: BFSU/FY 2015-16 November Estimate

CALIFORNIA DEPARTMENT OF PUBLIC HEALTH

CENTER FOR HEALTH CARE QUALITY - LICENSING AND CERTIFICATION PROGRAM

STATE WORKLOAD PERCENTAGES FOR FISCAL YEAR 2015-16

FACILITY TYPES	ACTIVITIES	PCA	LICENSED FACILITY COUNT	LICENSING SURVEY FREQUENCY RATE	SURVEY AUTHORITY/WORKLOAD DATA SOURCE	STANDARD AVERAGE HOURS	WORKLOAD SURVEY	ANNUALIZED SURVEY HOURS	STATE MATCH	STATE WORKLOAD HOURS	STATE PERCENTAGES BY ACTIVITIES*	STATE PERCENTAGES BY FACILITY TYPE
20 SKILLED NURSING	RE-LICENSURE	31019	1263	50%	HSC 1422 1 OR 2 YEARS	63.12	631.50	53,289.14	100%	53,289.14	6.25%	**41.67%**
	RE-LICENSURE FOLLOW UP	31019			2014-15 Licensing Wrkld Estimate	1.67	1.00	2.23	100%	2.23	0.00%	
	INITIAL LICENSURE	31019			2014-15 Licensing Wrkld Estimate	88.90	5.00	594.25	100%	594.25	0.07%	
	COMPLAINT / ERI INVESTIGATION	31160			Report of Monthly Complaint	12.32	11,610.00	191,223.53	100%	191,223.53	22.43%	
	AGED COMPLAINTS	31160			Report of Monthly Complaint	12.32	2,560.67	42,175.69	100%	42,175.69	4.95%	
	FIELD VISIT	31019			2014-15 Licensing Wrkld Estimate	25.73	49.00	1,685.52	100%	1,685.52	0.20%	
	COMPLAINT FOLLOW UP	31060			2014-15 Licensing Wrkld Estimate	-	-	-	100%	-	0.00%	
	Title 19						-					
	RECERTIFICATION	31023			2014 Federal Grant 100% Wrkld	188.55	53.00	13,359.83	25%	3,339.96	0.39%	
	RECERTIFICATION FOLLOW UP	31023			2014 Federal Grant 100% Wrkld	39.36	6.00	315.72	25%	78.93	0.01%	
	LIFE SAFETY CODE	31024			2014 Federal Grant 100% Wrkld	16.32	53.00	1,156.36	25%	289.09	0.04%	
	LIFE SAFETY CODE - FOLLOW UP	31024			2014 Federal Grant 100% Wrkld	6.54	2.00	17.49	25%	4.37	0.00%	
	COMPLAINT INVESTIGATION - LTC	31163			2014 Federal Grant 100% Wrkld	12.32	948.00	15,614.12	25%	3,903.53	0.46%	
	INFORMAL DISPUTE RESOLUTION	31023			2014 Federal Grant 100% Wrkld	4.00	19.00	101.60	25%	25.40	0.00%	
	FEDERAL HEARING	31023			2014 Federal Grant 100% Wrkld	500.00	4.00	2,673.80	25%	668.45	0.08%	
	PRE-REFERRAL HEARING	31023			2014 Federal Grant 100% Wrkld	2.00	4.00	10.70	25%	2.67	0.00%	
	MONITORING VISITS	31023			2014 Federal Grant 100% Wrkld	5.00	4.00	26.74	25%	6.68	0.00%	
	Title 18 & 19											
	RECERTIFICATION	31021			2014 Federal Grant 100% Wrkld	188.55	1,035.00	260,894.72	12.50%	32,611.84	3.83%	
	RECERTIFICATION FOLLOW UP	31021			2014 Federal Grant 100% Wrkld	39.36	122.00	6,419.68	12.50%	802.46	0.10%	
	INITIAL CERTIFICATION (Title 18 & 19)	31021			2014 Federal Grant 100% Wrkld	116.38	2.00	311.18	12.50%	38.90	0.00%	
	INITIAL CERTIFICATION - FOLLOW UP (Title 18 & 19)	31021			2014 Federal Grant 100% Wrkld	2.51	12.00	40.27	12.50%	5.03	0.00%	
	LIFE SAFETY CODE	31022			2014 Federal Grant 100% Wrkld	16.32	1,035.00	22,581.82	12.50%	2,822.73	0.33%	
	LIFE SAFETY CODE - FOLLOW UP	31022			2014 Federal Grant 100% Wrkld	6.54	33.00	288.53	12.50%	36.07	0.00%	
	COMPLAINT INVESTIGATION - LTC	31162			2014 Federal Grant 100% Wrkld	12.32	6,658.00	109,661.18	12.50%	13,707.65	1.61%	
	INFORMAL DISPUTE RESOLUTION	31021			2014 Federal Grant 100% Wrkld	4.00	367.00	1,962.57	12.50%	245.32	0.03%	
	FEDERAL HEARING	31021			2014 Federal Grant 100% Wrkld	500.00	78.00	52,139.04	12.50%	6,517.38	0.76%	
	PRE-REFERRAL HEARING	31021			2014 Federal Grant 100% Wrkld	2.00	78.00	208.56	12.50%	26.07	0.00%	
	MONITORING VISITS	31021			2014 Federal Grant 100% Wrkld	5.00	78.00	521.39	12.50%	65.17	0.01%	
	OTHER MISC ACTIVITIES (APPEALS, HEARING, ETC)	31021			2014 Federal Grant 100% Wrkld	2.50	365.00	1,219.92	12.50%	152.49	0.02%	
	Special Focus Facilities											
	RECERTIFICATON - 7 year interval	31021			2014 Federal Grant 100% Wrkld	188.55	24.00	6,049.73	12.50%	756.22	0.09%	
	LIFE SAFETY CODE	31021			2014 Federal Grant 100% Wrkld	16.32	24.00	523.64	12.50%	65.45	0.01%	
	RECERTIFICATION FOLLOW UP	31021			2014 Federal Grant 100% Wrkld	39.36	5.00	263.10	12.50%	32.89	0.00%	
	COMPLAINT INVESTIGATIONS	31162			2014 Federal Grant 100% Wrkld	12.32	9.00	148.24	12.50%	18.53	0.00%	
	Subtotal						**25,875.17**	**785,480.29**		**355,193.64**	**41.67%**	
	Total						**58,155.98**	**1,555,060.01**		**852,419.22**	**100.00%**	

Attachment 2: Annual Health Care Facility Licensing Fees FY 2015-16

CALIFORNIA DEPARTMENT OF PUBLIC HEALTH

CENTER FOR HEALTH CARE QUALITY - LICENSING AND CERTIFICATION PROGRAM

ANNUAL HEALTH FACILITY LICENSING FEES FY 2015-16

	FACILITY TYPE	STATE FUNDED WKLD RATE	BEGINNING BUDGET FY 14/15 FUND 3098	14/15 BASELINE BUDGET COST ADJUSTMENTS						TOTAL BASELINE BUDGET	BCPs * FINANCE LTRs * NOV ESTIMATE			SFL*MAY REVISE ESTIMATE	MAY REVISE ESTIMATE	PROGRAM COST TOTAL	CREDITS * PROGRAM RESERVE USED			PROPOSED SPECIAL FUND GRAND TOTAL	FACILITY (F) / BED COUNTS (B)					PROPOSED FEES		
				$ 912,000	$ 333,000	$ (123,000)	$ 702,794	$ (36,000)	$ 1,446,000		$ 9,537,000	$ 378,000	$ 19,764,000	$ 5,300,000	$ 400,000		$ (3,912,551)		$ (42,832,164)		NON-STATE OPERATED		STATE OPERATED					$ 3,700,000
			TOTAL L&C BUDGET	SALARY ADJUSTMENTS	BENEFIT ADJUSTMENTS	CONTINOUSLY VACANT POSITION	PRO-RATA 15/16 ASSESSMENT	LIMITED TERMS/FULL YEAR PROGRAM INCREASE	SEC 3.60 PENSION CONRIBUTION ADJUSTMENT		HQ - 01 LA COUNTY	HQ - 02 LAC MONITORING	HQ - 04 L&C WORKLOAD	SFL 2 LAC CONTRACT ADJUSTMENT	SNF LTC OMBUDSMAN PROGRAM PER HSC 1266 (c)		MISC. REVENUE CREDIT	PROPOSED SPECIAL FUND SUBTOTAL	PROGRAM RESERVED USED		F	B	F	B	TOTAL COUNT	FACILITY FEE RATES	STATE OPERATED FACILITY	LEGISLATIVE APPROVED GF TRANSFER FOR STATE OPERATED FACILITIES
1	ALTERNATIVE BIRTHING CENTERS	0.01%	$ 9,624	$ 91	$ 33	$ (12)	$ 70	$ (4)	$ 145	9,947	$ 954	$ 38	$ 1,976	$ 530		$ 13,445	$ (11,532)	$ 1,913	$ 14,748	$ 16,661	7	-	-	-	7	$2,380.19		
2	ADULT DAY HEALTH CENTERS	2.21%	$ 2,128,741	$ 20,173	$ 7,366	$ (2,721)	$ 15,546	$ (796)	$ 31,986	2,200,295	$ 210,958	$ 8,361	$ 437,180	$ 117,236		$ 2,974,030	$ (53,650)	$ 2,920,380	$ (1,565,948)	$ 1,354,432	271	-	-	-	271	$4,997.90		
3	CHRONIC DIALYSIS CLINIC	1.18%	$ 1,135,585	$ 10,762	$ 3,929	$ (1,451)	$ 8,293	$ (425)	$ 17,063	1,173,756	$ 112,537	$ 4,460	$ 233,215	$ 62,540		$ 1,586,508	$ (119,046)	$ 1,467,462	$ 10,464	$ 1,477,926	515	-	4	-	519	$2,862.63	$ 917.73	$ 3,671
4	CHEMICAL DEPENDENCY RECOVERY HOSPITALS	0.12%	$ 115,483	$ 1,094	$ 400	$ (148)	$ 843	$ (43)	$ 1,735	119,365	$ 11,444	$ 454	$ 23,717	$ 6,360		$ 161,340	$ (5,815)	$ 155,525	$ (70,831)	$ 84,694	-	369	-	-	369	$ 229.52		
5	COMMUNITY CLINIC/FREE CLINIC	1.13%	$ 1,087,467	$ 10,306	$ 3,763	$ (1,390)	$ 7,942	$ (407)	$ 16,340	1,124,020	$ 107,768	$ 4,271	$ 223,333	$ 59,890		$ 1,519,283	$ (87,762)	$ 1,431,521	$ (373,808)	$ 1,057,713	1,227	-	-	-	1,227	$ 862.03		
6	CORRECTIONAL TREATMENT CENTERS	1.02%	$ 981,608	$ 9,302	$ 3,397	$ (1,255)	$ 7,168	$ (367)	$ 14,749	1,014,602	$ 97,277	$ 3,856	$ 201,593	$ 54,060		$ 1,371,388	$ -	$ 1,371,388	$ (863,948)	$ 507,440	-	196	-	1,862	2,058	$ 688.44	$ 200.06	$ 372,506
7	HOME HEALTH AGENCIES	2.88%	$ 2,773,522	$ 26,284	$ 9,597	$ (3,545)	$ 20,255	$ (1,038)	$ 41,674	2,866,749	$ 274,856	$ 10,894	$ 569,598	$ 152,746		$ 3,874,844	$ (678,032)	$ 3,196,812	$ 968,133	$ 4,164,945	1,508	-	-	-	1,508	$2,761.90		
8	HOSPICE	0.85%	$ 818,006	$ 7,752	$ 2,831	$ (1,046)	$ 5,974	$ (306)	$ 12,291	845,502	$ 81,065	$ 3,213	$ 167,994	$ 45,050		$ 1,142,824	$ (915,763)	$ 227,060	$ 822,138	$ 1,049,199	706	-	1	-	707	$1,485.43	$ 485.29	$ 485
9	HOSPICE FACILITY	0.09%	$ 86,612	$ 821	$ 300	$ (111)	$ 633	$ (32)	$ 1,301	89,524	$ 8,583	$ 340	$ 17,788	$ 4,770		$ 121,005	$ (11,003)	$ 110,002	$ (81,548)	$ 28,454	-	76	-	-	76	$ 374.40		
10	PEDIACTRIC DAY HEALTH/RESPITE CARE	0.11%	$ 105,860	$ 1,003	$ 366	$ (135)	$ 773	$ (40)	$ 1,591	109,418	$ 10,491	$ 416	$ 21,740	$ 5,830		$ 147,895	$ (944)	$ 146,951	$ (99,301)	$ 47,650	-	264	-	-	264	$ 180.49		
11	PSYCHOLOGY CLINIC	0.06%	$ 57,742	$ 547	$ 200	$ (74)	$ 422	$ (22)	$ 868	59,682	$ 5,722	$ 227	$ 11,858	$ 3,180		$ 80,670	$ (4,087)	$ 76,583	$ (37,599)	$ 38,984	22	-	-	-	22	$1,771.99		
12	REFERRAL AGENCIES	0.00%	$ -	$ -	$ -	$ -	$ -	$ -	$ -	-	$ -	$ -	$ -	$ -		$ -	$ (3,320)	$ (3,320)	$ 14,502	$ 11,182	4	-	-	-	4	$2,795.53		
13	REHAB CLINIC	0.13%	$ 125,107	$ 1,186	$ 433	$ (160)	$ 914	$ (47)	$ 1,880	129,312	$ 12,398	$ 491	$ 25,693	$ 6,890		$ 174,785	$ (172)	$ 174,612	$ (170,878)	$ 3,735	12	-	-	-	12	$ 311.22		
14	SURGICAL CLINIC	0.65%	$ 625,534	$ 5,928	$ 2,165	$ (800)	$ 4,568	$ (234)	$ 9,399	646,560	$ 61,991	$ 2,457	$ 128,466	$ 34,450		$ 873,924	$ (7,797)	$ 866,127	$ (764,658)	$ 101,470	34	-	-	-	34	$2,984.40		
15	ACUTE PSYCHIATRIC HOSPITALS	1.65%	$ 1,587,895	$ 15,048	$ 5,495	$ (2,030)	$ 11,596	$ (594)	$ 23,859	1,641,269	$ 157,361	$ 6,237	$ 326,106	$ 87,450		$ 2,218,422	$ (61,869)	$ 2,156,553	$ (13,942,071)	$ 26,362,416	-	6,071	-	2,240	83,742	$ 319.90	$ 146.20	$ 359,654
16	GENERAL ACUTE CARE HOSPITALS	27.22%	$ 28,159,744	$ 248,265	$ 90,649	$ (33,483)	$ 191,315	$ (9,800)	$ 393,630	29,040,320	$ 2,596,162	$ 102,899	$ 5,380,156	$ 1,442,766		$ 38,562,303	$ (414,369)	$ 38,147,934			-	75,211	-	220				
17	CONGREGATE LIVING HEALTH FACILITY	0.29%	$ 279,084	$ 2,645	$ 966	$ (357)	$ 2,038	$ (104)	$ 4,193	288,465	$ 27,657	$ 1,096	$ 57,316	$ 15,370		$ 389,905	$ (81,665)	$ 308,240	$ (12,018,762)	$ 45,765,291	-	577	-	-		$ 374.40		
18	INTERMEDIATE CARE FACILITY	2.05%	$ 1,974,763	$ 18,714	$ 6,833	$ (2,524)	$ 14,421	$ (739)	$ 29,672	2,041,141	$ 195,699	$ 7,757	$ 405,557	$ 108,756		$ 2,758,910	$ (24,601)	$ 2,734,309			-	419	-	4,986	126,767		$ 140.14	$ 1,014,756
19	SKILLED NURSING FACILTY *	41.67%	$ 40,101,555	$ 380,030	$ 138,761	$ (51,254)	$ 292,854	$ (15,001)	$ 602,548	41,449,494	$ 3,974,068	$ 157,513	$ 8,235,659	$ 2,208,510	$ 400,000	$ 56,425,243	$ (1,283,740)	$ 55,141,503		$ 400,000	-	118,530	-	2,255		377.77		
20	ICF-DD, DDH, DDN	16.67%	$ 16,044,472	$ 152,049	$ 55,518	$ (20,507)	$ 117,170	$ (6,002)	$ 241,077	16,583,776	$ 1,590,009	$ 63,020	$ 3,295,054	$ 883,616		$ 22,415,475	$ (147,384)	$ 22,268,091	$ (14,672,800)	$ 7,595,291	-	8,107	-	3,305	11,412	$ 696.48	$ 589.69	$ 1,948,928
	NURSING HOME ADMINISTRATOR PROGRAM **		$ -															-			-	-	-	-				
		100.00%	$ 98,198,405	$ 912,000	$ 333,000	$ (123,000)	$ 702,794	$ (36,000)	$ 1,446,000	$ 101,433,199	$ 9,537,000	$ 378,000	$ 19,764,000	$ 5,300,000	$ 400,000	$ 136,812,199	$ (3,912,551)	$ 132,899,648	$ (42,832,164)	$ 90,067,484	4,306	209,820	5	14,868	228,999			$ 3,700,000

* The proposed Skilled Nursing Facility per bed fees includes the basic licence fee of $ 374.40 plus an additional $ 3.37 per bed to fund the approved $ 400,000 legislative allocation for fiscal year 2015-16 in support of the Long Term Care Ombudsman Program.

** The Nursing Home Administrator Program is a separate program administered by Licensing & Certification program with different set of fees calculated based in accordance with the Health and Safety Code section 1416.36 (b)(1).

Attachment 3: Glossary

Acute Psychiatric Hospital
Is a health facility having a duly constituted governing body with overall administrative and professional responsibility and an organized medical staff that provides 24-hour inpatient care for mentally disordered, incompetent, or other patients referred to in Division 5 (commencing with section 5000) or Division 6 (commencing with section 6000) of the Welfare and Institutions Code, including the following basic services: medical, nursing, rehabilitative, pharmacy, and dietary services. (Ref: Health and Safety Code 1250(b)).

Administrative Law Judge
Administrative Law Judge means an official appointed by the Chief State Administrative Law Judge, and includes any other person appointed to preside over a hearing. Whenever the department is authorized or required by statute, regulation, due process (Fourteenth Amendment to the U. S. Constitution; subdivision (a) of section 7 of Article I of the California Constitution), or a contract, to conduct an adjudicative hearing leading to a final decision of the director or the department, the hearing shall be conducted before an administrative law judge selected by the department and assigned to a hearing office that complies with the procedural requirements of Chapter 4.5 (commencing with section 11400) of Part 1 of Division 3 of Title 2 of the Government Code. (Ref: Health and Safety Code 100171(b)).

Administrative Penalty
Per Health and Safety Code section 1280.1 and 1280.3, an administrative penalty is a civil monetary penalty in an amount up to $125,000 per violation or deficiency constituting an immediate jeopardy to the health and safety of a patient.

Administrator-in-Training Program
A program that is approved by the Nursing Home Administrator Program in which qualified persons participate under the coordination, supervision, and teaching of a preceptor, as described in section 1416.57, who has obtained approval from the Nursing Home Administrator Program . (Ref: Health and Safety Code 1416.2.(6)).

Adult Day Health Care
Per Health and Safety Code 1570.7(a), an organized day program of therapeutic, social, and skilled nursing health activities and services provided pursuant to this chapter to elderly persons or adults with disabilities with functional impairments, either physical or mental, for the purpose of restoring or maintaining optimal capacity for self-care. Provided on a short-term basis, adult day health care serves as a transition from a health facility or home health program to personal independence. Provided on a long-term basis, it serves as an alternative to institutionalization in a long-term health care facility when 24-hour skilled nursing care is not medically necessary or viewed as desirable by the recipient or his or her family.

Adverse Event

Per Health and Safety Code 1279.1(b), an adverse event includes any of the following:
(1) Surgical events, including the following: (A) Surgery performed on a wrong body part that is inconsistent with the documented informed consent for that patient. A reportable event under this subparagraph does not include a situation requiring prompt action that occurs in the course of surgery or a situation that is so urgent as to preclude obtaining informed consent. (B) Surgery performed on the wrong patient. (C) The wrong surgical procedure performed on a patient, which is a surgical procedure performed on a patient that is inconsistent with the documented informed consent for that patient. A reportable event under this subparagraph does not include a situation requiring prompt action that occurs in the course of surgery, or a situation that is so urgent as to preclude the obtaining of informed consent. (D) Retention of a foreign object in a patient after surgery or other procedure, excluding objects intentionally implanted as part of a planned intervention and objects present prior to surgery that are intentionally retained. (E) Death during or up to 24 hours after induction of anesthesia after surgery of a normal, healthy patient who has no organic, physiologic, biochemical, or psychiatric disturbance and for whom the pathologic processes for which the operation is to be performed are localized and do not entail a systemic disturbance.
(2) Product or device events, including the following: (A) Patient death or serious disability associated with the use of a contaminated drug, device, or biologic provided by the health facility when the contamination is the result of generally detectable contaminants in the drug, device, or biologic, regardless of the source of the contamination or the product. (B) Patient death or serious disability associated with the use or function of a device in patient care in which the device is used or functions other than as intended. For purposes of this subparagraph, "device" includes, but is not limited to, a catheter, drain, or other specialized tube, infusion pump, or ventilator. (C) Patient death or serious disability associated with intravascular air embolism that occurs while being cared for in a facility, excluding deaths associated with neurosurgical procedures known to present a high risk of intravascular air embolism.
(3) Patient protection events, including the following: (A) An infant discharged to the wrong person. (B) Patient death or serious disability associated with patient disappearance for more than four hours, excluding events involving adults who have competency or decision making capacity. (C) A patient suicide or attempted suicide resulting in serious disability while being cared for in a health facility due to patient actions after admission to the health facility, excluding deaths resulting from self-inflicted injuries that were the reason for admission to the health facility.
(4) Care management events, including the following: (A) A patient death or serious disability associated with a medication error, including, but not limited to, an error involving the wrong drug, the wrong dose, the wrong patient, the wrong time, the wrong rate, the wrong preparation, or the wrong route of administration, excluding reasonable differences in clinical judgment on drug selection and dose. (B) A patient death or serious disability associated with a hemolytic reaction due to the administration of ABO-incompatible blood or blood products. (C) Maternal death or serious disability associated with labor or delivery in a low-risk pregnancy while being cared for in a facility, including events that occur within 42 days post-delivery and excluding deaths

from pulmonary or amniotic fluid embolism, acute fatty liver of pregnancy, or cardiomyopathy. (D) Patient death or serious disability directly related to hypoglycemia, the onset of which occurs while the patient is being cared for in a health facility. (E) Death or serious disability, including kernicterus, associated with failure to identify and treat hyperbilirubinemia in neonates during the first 28 days of life. For purposes of this subparagraph, "hyperbilirubinemia" means bilirubin levels greater than 30 milligrams per deciliter. (F) A Stage 3 or 4 ulcer, acquired after admission to a health facility, excluding progression from Stage 2 to Stage 3 if Stage 2 was recognized upon admission. (G) A patient death or serious disability due to spinal manipulative therapy performed at the health facility.
(5) Environmental events, including the following: (A) A patient death or serious disability associated with an electric shock while being cared for in a health facility, excluding events involving planned treatments, such as electric counter shock. (B) Any incident in which a line designated for oxygen or other gas to be delivered to a patient contains the wrong gas or is contaminated by a toxic substance. (C) A patient death or serious disability associated with a burn incurred from any source while being cared for in a health facility. (D) A patient death associated with a fall while being cared for in a health facility. (E) A patient death or serious disability associated with the use of restraints or bedrails while being cared for in a health facility.
(6) Criminal events, including the following: (A) Any instance of care ordered by or provided by someone impersonating a physician, nurse, pharmacist, or other licensed health care provider. (B) The abduction of a patient of any age. (C) The sexual assault on a patient within or on the grounds of a health facility. (D) The death or significant injury of a patient or staff member resulting from a physical assault that occurs within or on the grounds of a facility.
(7) An adverse event or series of adverse events that cause the death or serious disability of a patient, personnel, or visitor. (c) The facility shall inform the patient or the party responsible for the patient of the adverse event by the time the report is made. (d) "Serious disability" means a physical or mental impairment that substantially limits one or more of the major life activities of an individual, or the loss of bodily function, if the impairment or the loss lasts more than seven days or is still present at the time of discharge from an inpatient health care facility, or the loss of a body part.

Alternative Birth Center
A clinic that is not part of a hospital and that provides comprehensive perinatal services and delivery care to pregnant women who remain less than 24 hours at the facility. (Ref: Health and Safety Code 1204(b)(4)).

Ambulatory Surgical Center
Any distinct entity that operates exclusively for the purpose of providing surgical services to patients not requiring hospitalization and in which the expected duration of services would not exceed 24 hours following an admission. (Ref: 42 Code of Federal Regulation 416.2).

Appeals
Legal hearing in which a licensee may attempt to refute any citation, including the penalty assessment(s), the determination by the department regarding alleged failure to correct a violation or the reasonableness of the proposed deadline for correction.

Automated Survey Processing Environment (ASPEN)
ASPEN Central Office (ACO) is a Windows®-based program that enables state agencies to implement information-based administration of the health care facilities under their supervision. ACO stores data about certified facilities regulated by CMS and the regulations pertinent to those facilities. ACO includes full survey operations support, which enables agencies to centralize survey event planning, and team assignment in addition to providing access to minimum data set resident and assessment information (historical and current) and regulatory and interpretive guidelines. ACO provides survey performance reporting and integration with Quality Measure/Indicator statistics, which facilitates inclusion of survey findings in the State Standard System.

Binding Arbitration
The voluntary submission of a citation, for final and binding determination, to an impartial arbitrator designated by the American Arbitration Association in which the arbitrator shall determine whether the licensee violated the regulation or regulations cited by California Department of Public Health , and whether the citation meets the criteria established in Health and Safety Code sections 1423 and 1424. (Ref: Health and Safety Code 1428(d)).

California Department of Public Health
California Department of Public Health is the state department responsible for optimizing the health and well-being of the people in California. It was established by Chapter 428, Statutes of 2007 (Senate Bill 162) in July 2007 within the existing Health and Human Services Agency. The goals of the California Department of Public Health are to improve access to quality public health outcomes and to reduce health care costs through prevention by providing services such as disease screenings, vaccinations, and patient safety initiatives.

Chemical Dependency Recovery Hospital
A health facility that provides 24-hour impatient care for persons who have a dependency on alcohol or other drugs, or both alcohol and other drugs. This care includes, but is not limited to, basic services such as patient counseling services, and dietetic services. Each facility shall have a medical director who is a physician and surgeon licensed to practice in this state. (Ref: Health and Safety Code 1250.3(a)).

Chronic Dialysis Clinic
A clinic that provides less than 24-hour care for the treatment of patients with end-stage renal disease, including renal dialysis services. (Ref: Health and Safety Code 1204(b)(2)).

Citation
Civil sanctions against long-term health care facilities in violation of state and federal laws and regulations relating to patient care. (Ref: Health and Safety Code 1423).

Citation Code Issued "AA"
Per Health and Safety Code 1424(c), class "AA" violations are violations that meet the criteria for a class "A" violation and that the state department determines to have been a direct proximate cause of death of a patient or resident of a long-term health care facility. Except as provided in section 1424.5, a class "AA" citation is subject to a civil penalty in the amount of not less than five thousand dollars ($5,000) and not exceeding twenty-five thousand dollars ($25,000) for each citation. In any action to enforce a citation issued under this subdivision, the state department shall prove all of the following: (1) The violation was a direct proximate cause of death of a patient or resident. (2) The death resulted from an occurrence of a nature that the regulation was designed to prevent. (3) The patient or resident suffering the death was among the class of persons for whose protection the regulation was adopted.

Citation Code Issued "A"
Per Health and Safety Code 1424(d), class "A" violations are violations which the state department determines present either (1) imminent danger that death or serious harm to the patients or residents of the long-term health care facility would result therefrom, or (2) substantial probability that death or serious physical harm to patients or residents of the long-term health care facility would result therefrom. A physical condition or one or more practices, means, methods, or operations in use in a long-term health care facility may constitute a class "A" violation. The condition or practice constituting a class "A" violation shall be abated or eliminated immediately, unless a fixed period of time, as determined by the state department, is required for correction. Except as provided in section 1424.5, a class "A" citation is subject to a civil penalty in an amount not less than one thousand dollars ($1,000) and not exceeding ten thousand dollars ($10,000) for each and every citation.

Citation Code Issued "B"
Per Health and Safety Code 1424(e), class "B" violations are violations that the state department determines have a direct or immediate relationship to the health, safety, or security of long-term health care facility patients or residents, other than class "AA" or "A" violations. Unless otherwise determined by the state department to be a class "A" violation pursuant to this chapter and rules and regulations adopted pursuant thereto, any violation of a patient's rights as set forth in sections 72527 and 73523 of Title 22 of the California Code of Regulations, that is determined by the state department to cause or under circumstances likely to cause significant humiliation, indignity, anxiety, or other emotional trauma to a patient is a class "B" violation. Except as provided in paragraph (4) of subsection (a) of section 1424.5, a class "B" citation is subject to a civil penalty in an amount not less than one hundred dollars ($100) and not exceeding one thousand dollars ($1,000) for each and every citation. A class "B" citation shall specify the time within which the violation is required to be corrected. If the state department establishes

that a violation occurred, the licensee shall have the burden of proving that the licensee did what might reasonably be expected of a long-term health care facility licensee, acting under similar circumstances, to comply with the regulation. If the licensee sustains this burden, then the citation shall be dismissed.

Citation Review Conference
The final informal departmental review of "B" citations in which the Citation Review Conference Hearing Officer presides and has the authority to: affirm, modify, or dismiss the citation or proposed assessment of the penalty. The Citation Review Conference was repealed in 2011. If a licensee exercises its right to a citation review conference prior to January 1, 2012, the citation review conference and all notices, reviews, and appeals thereof shall be conducted pursuant to this section as it read on December 31, 2011. (Ref: Health and Safety Code 1428).

Closed (Survey Date)
The date that all activities associated with the complaint investigation are finished. This includes activities conducted at the health facility's site as well as activities conducted in the District Office.

Community Clinic
A clinic operated by a tax-exempt nonprofit corporation that is supported and maintained in whole or in part by donations, bequests, gifts, grants, government funds, or contributions, that may be in the form of money, goods, or services. In a community clinic, any charges to the patient shall be based on the patient's ability to pay, utilizing a sliding fee scale. No corporation other than a nonprofit corporation, exempt from federal income taxation under paragraph (3) of subsection (c) of section 501 of the Internal Revenue Code of 1954 as amended, or a statutory successor thereof, shall operate a community clinic; provided, that the licensee of any community clinic so licensed on the effective date of this section shall not be required to obtain tax-exempt status under either federal or state law in order to be eligible for, or as a condition of, renewal of its license. No natural person or persons shall operate a community clinic. (Ref: Health and Safety Code 1204(a)(1)(A)).

Complaint
A report made to the state agency or regional office by anyone other than the administrator or authorized official for a provider or supplier that alleges noncompliance of federal and/or state laws and regulations. (Ref: Health and Safety Code 1420).

Comprehensive Outpatient Rehabilitation Facility
A health facility that provides coordinated outpatient diagnostic, therapeutic, and restorative services, at a single fixed location, to outpatients for the rehabilitation of injured, disabled or sick individuals. Physical therapy, occupational therapy, and speech-language pathology services may be provided in an off-site location. (Ref: 42 Codes of Federal Regulation sections 485.50-74).

Congregate Living Health Facility
A residential home with a capacity, except as provided in paragraph (4), of no more than 12 beds, that provides inpatient care, including the following basic services: medical supervision, 24-hour skilled nursing and supportive care, pharmacy, dietary, social, recreational, and at least one type of service specified in paragraph (2). The primary need of congregate living health facility residents shall be for availability of skilled nursing care on a recurring, intermittent, extended, or continuous basis. This care is generally less intense than that provided in general acute care hospitals but more intense than that provided in skilled nursing facilities. (Ref: Health and Safety Code 1250(i)(1)).

Correctional Treatment Center
A health facility operated by the California Department of Corrections and Rehabilitation, the Division of Juvenile Justice,, or a county, city, or city and county law enforcement agency that, as determined by the state department, provides inpatient health services to that portion of the inmate population who do not require a general acute care level of basic services. This definition shall not apply to those areas of a law enforcement facility that houses inmates or wards that may be receiving outpatient services and are housed separately for reasons of improved access to health care, security, and protection. The health services provided by a correctional treatment center shall include, but are not limited to, all of the following basic services: physician and surgeon, psychiatrist, psychologist, nursing, pharmacy, and dietary. A correctional treatment center may provide the following services: laboratory, radiology, perinatal, and any other services approved by the state department. (Ref: Health and Safety Code 1250(j)(1)).

Deficiencies
Substantiated allegations for violations of federal and/or state laws or regulations receive deficiencies that cite the violations of noncompliance.

Distinct Part
A Distinct Part is an identifiable unit of a hospital or a freestanding facility, as defined in subdivision (c), accommodating beds, and related services, including, but not limited to, contiguous rooms, a wing, a floor, or a building that is approved by the department for a specific purpose. (Ref: Title 22 California Code of Regulations section 70027).

Electronic Licensing Management System
Electronic Licensing Management System is a web-based application that allows Licensing and Certification Program district offices and headquarters personnel to capture potential health service providers' applications, issue licenses, generate license renewal notices, determine license fees, issue and track state enforcement actions, and generate management reports.

End Stage Renal Disease
The federal specification for a Chronic Dialysis Clinic. These facilities treat patients with End Stage Renal Disease and its treatment types are varied and may include the following:

Renal Transplantation Center - A hospital unit that is approved to furnish, directly, transplantation and other medical and surgical specialty services required for the care of ESRD transplant patients, including inpatient dialysis furnished directly or under arrangement. A renal transplantation center may also be a renal dialysis center.

Renal Dialysis Center - A renal dialysis center is a hospital unit that is approved to furnish the full spectrum of diagnostic, therapeutic, and rehabilitative services required for the care of ESRD dialysis patients (including inpatient dialysis furnished directly or under arrangement and outpatient dialysis). A hospital need not provide renal transplantation to qualify as a renal dialysis center.
Renal Dialysis Facility - A renal dialysis facility is a unit that is approved to furnish dialysis service(s) directly to End Stage Renal Disease patients.

Self-Dialysis Unit
A self-dialysis unit is a unit that is part of an approved renal transplantation center, renal dialysis center, or renal dialysis facility, and which furnishes self-dialysis services. (Ref: http://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/CertificationandComplianc/DialysisProviders.html).

Entity Reported Incident
Federal: An official notification to Licensing and Certification Program from a self-reporting facility or healthcare provider (i.e., the administrator or authorized official for the provider).

Entity Reported Incident
State: A facility self-reported incident is any report made to California Department of Public Health by a representative of a health care facility authorized to speak on behalf of the facility. Facilities are required to report unusual occurrences. Unusual occurrences may include epidemics, outbreaks, disasters, fires, disruption of services, major accidents, or unusual occurrences that threaten the health and safety of patients, residents, clients, staff, or visitors.

Exit (Survey Date)
The end date of survey or investigation activities that were performed at the health facility's site.

Failure to Report Medical Information Breaches
Per Health and Safety Code section 1280.15, clinics, health facilities, home health agencies, or hospices are required to report any unlawful or unauthorized access to, use or disclosure of a patient's medical information to the department and the affected patient or the patient's representative, no later than five business days after the access to, use, or disclosure has been detected. If the licensee fails to report the breach, the department may assess a penalty in the amount of $100/day for each day not reported after the initial five-day period.

Federally Qualified Health Center
Federally Qualified Health Center is a federal designation for certified Primary Care Clinics. They are entities that serve a population that is medically underserved, or a population comprised of migratory and seasonal agriculture workers, the homeless, and/or residents of public housing, by providing care, either through the staff and supporting resources of the center or through contracts or cooperative arrangements. Federally Qualified Health Centers provide comprehensive primary care and preventive care, including health, oral, and mental health/substance abuse services to persons of all ages, regardless of their ability to pay or health insurance status. Federally Qualified Health Centers receive grants under section 254b of the Public Health Service Act. (Ref: section 330 of the Public Health Service Act. (Ref: Title 42 United State Code section § 254b)).

Free Clinic
A clinic operated by a tax-exempt, nonprofit corporation supported in whole or in part by voluntary donations, bequests, gifts, grants, government funds, or contributions that may be in the form of money, goods, or services. In a free clinic there shall be no charges directly to the patient for services rendered or for drugs, medicines, appliances, or apparatuses furnished. No corporation other than a nonprofit corporation exempt from federal income taxation under paragraph (3) of subsection (c) of section 501 of the Internal Revenue Code of 1954 as amended, or a statutory successor thereof, shall operate a free clinic; provided, that the licensee of any free clinic so licensed on the effective date of this section shall not be required to obtain tax-exempt status under either federal or state law in order to be eligible for, or as a condition of, renewal of its license. No natural person or persons shall operate a free clinic. (Ref: Health and Safety Code 1204(a)(1)(B)).

General Acute Care Hospital
A health facility having a duly constituted governing body with overall administrative and professional responsibility and an organized medical staff that provides 24-hour inpatient care, including the following basic services: medical, nursing, surgical, anesthesia, laboratory, radiology, pharmacy, and dietary services. (Ref: Health and Safety Code 1250(a)).

Health & Safety Code
The California Health and Safety Code is the code covering the subject areas of health and safety.

Health Facility Consumer Information System
Health Facility Consumer Information System is a web-based application that provides profile information for each facility, such as ownership, certification status, (acceptance of Medicare and/or Medi-Cal), and performance history including complaints, facility self-reported incidents, state enforcement actions, and deficiencies identified by Licensing and Certification Program staff. It also provides an option to submit a complaint regarding a specific facility; complaints are forwarded to the appropriate Licensing and Certification Program District Office for investigation.

Home Health Agency
A private or public organization, including, but not limited to: any partnership, corporation, political subdivision of the state, or other government agency within the state, which provides, or arranges for the provision of, skilled nursing services, to persons in their temporary or permanent place of residence. (Ref: Health and Safety Code 1727(a)).

Hospice
A specialized form of interdisciplinary health care that is designed to provide palliative care, alleviate the physical, emotional, social, and spiritual discomforts of an individual who is experiencing the last phases of life due to the existence of a terminal disease, and provide supportive care to the primary caregiver and the family of the hospice patient, and that meets all of the following criteria:

(1) Considers the patient and the patient's family, in addition to the patient, as the unit of care.
(2) Utilizes an interdisciplinary team to assess the physical, medical, psychological, social, and spiritual needs of the patient and the patient's family.
(3) Requires the interdisciplinary team to develop an overall plan of care and to provide coordinated care that emphasizes supportive services, including, but not limited to: home care, pain control, and limited inpatient services. Limited inpatient services are intended to ensure both continuity of care and appropriateness of services for those patients who cannot be managed at home because of acute complications or the temporary absence of a capable primary caregiver.
(4) Provides for the palliative medical treatment of pain and other symptoms associated with a terminal disease, but does not provide for efforts to cure the disease.
(5) Provides for bereavement services following death to assist the family in coping with social and emotional needs associated with the death of the patient.
(6) Actively utilizes volunteers in the delivery of hospice services.
(7) To the extent appropriate, based on the medical needs of the patient, provides services in the patient's home or primary place of residence. (Ref: Health and Safety Code 1746(d)).

Hospice Facility
A health facility licensed pursuant to this chapter with a capacity of no more than 24 beds that provides hospice services. Hospice services include, but are not limited to, routine care, continuous care, inpatient respite care, and inpatient hospice care as defined in subdivision (d) of section 1339.40, and is operated by a provider of hospice services that is licensed pursuant to section 1751 and certified as a hospice pursuant to Part 418 of Title 42 of the Code of Federal Regulations. (Ref: Health and Safety Code 1250(n)).

Immediate Jeopardy (Federal)
A situation where the noncompliance with federal laws and regulations has caused or is likely to cause serious injury, harm, impairment, or death to residents, patients or clients.

Immediate Jeopardy (State)
Per Health and Safety Code 1280.3(g), a situation in which the licensee's noncompliance with one or more requirements of licensure has caused, or is likely to cause, serious injury or death to the patient.

Intermediate Care Facility (ICF)
A health facility that provides inpatient care to ambulatory or non-ambulatory patients who have recurring need for skilled nursing supervision and need supportive care, but who do not require availability of continuous skilled nursing care. (Ref: Health and Safety Code 1250(d)).

Intermediate Care Facility/Developmentally Disabled (ICFDD)
A facility that provides 24-hour personal care, habilitation, developmental, and supportive health services to developmentally disabled clients whose primary need is for developmental services and who have a recurring but intermittent need for skilled nursing services. (Ref: Health and Safety Code 1250(g)).

Intermediate Care Facility/Developmentally Disabled - Habilitative (ICFDDH)
A health facility that provides inpatient care to ambulatory or non-ambulatory patients who have recurring need for skilled nursing supervision and need supportive care, but who do not require availability of continuous skilled nursing care. (Ref: Health and Safety Code 1250(e)).

Intermediate Care Facility/Developmentally Disabled - Nursing (ICFDDN)
A facility with a capacity of 4 to 15 beds that provides 24-hour personal care, developmental services, and nursing supervision for developmentally disabled persons who have intermittent recurring needs for skilled nursing care but have been certified by a physician and surgeon as not requiring continuous skilled nursing care. The facility shall serve medically fragile persons who have developmental disabilities or demonstrate significant developmental delay that may lead to a developmental disability if not treated. (Ref: Health and Safety Code 1250(h)).

Long Term Care
(a) "Long-Term health care facility" means any facility licensed pursuant to Health and Safety Code Chapter 2 (commencing with section 1250) that is any of the following:
(1) Skilled nursing facility.
(2) Intermediate care facility.
(3) Intermediate care facility/developmentally disabled.
(4) Intermediate care facility /developmentally disabled habilitative.
(5) Intermediate care facility/developmentally disabled nursing.
(6) Congregate living health facility.
(7) Nursing facility.
(8) Intermediate care facility/developmentally disabled-continuous nursing.
(b) “Long-term health care facility” also includes a pediatric day health and respite care facility licensed pursuant to Chapter 8.6 (commencing with section 1760).
(c) “Long-term health care facility” does not include a general acute care hospital or an acute psychiatric hospital, except for that distinct part of the hospital that provides skilled nursing facility, intermediate care facility, intermediate care facility/developmentally disabled, or pediatric day health and respite care facility services.
(d) “Licensee” means the holder of a license issued under Chapter 2 (commencing with section 1250) or Chapter 8.6 (commencing with section 1760) for a long-term health care facility. (Ref: Health and Safety Code 1418(a), (b), (c), and (d)).

Medical Breach
The unlawful or unauthorized access to, and use or disclosure of, a patients' medical information. (Ref: Health and Safety Code 1280.15(a)).

Non-Long Term Care
A health care facility required to be licensed pursuant to state law that is not a Long Term Care Facility (above), which includes a general acute care hospital or an acute psychiatric hospital, except for that distinct part of the hospital that provide skilled nursing facility, intermediate care facility, or pediatric day health and respite care facility services.

Nursing Home Administrator
An individual educated and trained within the field of Nursing Home Administrator that carries out the policies of the licensee of a nursing home and is licensed in accordance with this chapter. The nursing home administrator is charged with the general administration of a nursing home, regardless of whether he or she has an ownership interest, and whether the administrator’s function or duties are shared with one or more other individuals. (Ref: Health and Safety Code 1416.2(a)(5)).

Nursing Hours per Patient Day
Per Health and Safety Code 1276.5, the number of actual nursing hours performed per patient day by nursing staff in skilled nursing facilities and intermediate care facilities.

On the Initial
This term refers to calculating facility fees based solely on allocating the Licensing and Certification Program Fund (Fund 3098) appropriation against each facility type's workload percentage without applying a non-regulated credit and dividing the dollar amount for each facility type by the associated number of facilities or beds within each facility type.

- Determine the adjusted Program Fund (Fund 3098) appropriation, comprised of baseline adjustments and mandated credits.
- Project the state workload percentage for each facility type based on mandated workload.
- Apply the individual workload percentage against the BY adjusted appropriation to determine the total amount of revenue to be generated by each facility type.
- For each facility type, divide the total amount to be generated as revenue against the total number of facilities or beds to determine the fee on the natural.

Outpatient/Speech Pathologist (OPT/SP)
Outpatient physical therapy services under Medicare include services of a physical therapist in independent practice if the services are furnished in the therapist's office or in the Medicare beneficiary's residence. Reimbursement can be made only for treatment on order of a physician, and the services must be furnished under a physician's plan of care. (Ref: http://www.cms.gov/).

Outpatient Therapist Independent Practice
Outpatient physical therapy services under Medicare include services of a physical therapist in independent practice if the services are furnished in the therapist's office or in the Medicare beneficiary's residence. Reimbursement can be made only for treatment on order of a physician, and the services must be furnished under a physician's plan of care. (Ref: http://www.cms.gov/).

Pediatric Day Health & Respite Care Facility
Facility that provides an organized program of therapeutic social and day health activities and services and limited 24-hour inpatient respite care to medically fragile children 21 years of age or younger, including terminally ill and technology dependent children. (Ref: Health and Safety Code 1760.2(a)).

Physical Therapist Independent Practice
A physical therapist in independent practice that provides services in the therapist's office or in the Medicare beneficiary's residence. Reimbursement can be made only for treatment on the order of a physician, and the services must be furnished under a physician's plan of care. (Ref: http://www.cms.gov/).

Psychology Clinic
A clinic that provides psychological advice, services, or treatment to patients, under the direction of a clinical psychologist as defined in Health and Safety Code section 1316.5, and is operated by a tax-exempt nonprofit corporation that is supported and maintained in whole or in part by donations, bequests, gifts, grants, government funds, or contributions, which may be in the form of money, goods, or services. In a psychology clinic, any charges to the patient shall be based on the patient's ability to pay, utilizing a sliding fee scale. No corporation other than a nonprofit corporation, exempt from federal taxation under paragraph (3), subsection (c) of section 501 of the Internal Revenue Code of 1954, as amended, or a statutory successor thereof, shall operate a psychology clinic. (Ref: Health and Safety Code 1204.1).

Referral Agency
A private, profit or non-profit agency, which is engaged in the business of referring persons for remuneration to any extended care, skilled nursing home, or immediate care facility or distinct part of a facility providing extended care, skilled nursing home care, or immediate care, for a fee. The following additional basic services are: patient screening, facility information, counseling procedures, and referral services. (Ref: Health and Safety Code 1401).

Rehabilitation Clinic
A clinic that, in addition to providing medical services directly, also provides physical rehabilitation services for patients who remain less than 24 hours. Rehabilitation clinics shall provide at least two of the following rehabilitation services: physical therapy, occupational therapy, social, speech pathology, and audiology services. A rehabilitation clinic does not include the offices of a private physician in individual or group practice. (Ref: Health and Safety Code 1204(b)(3)).

Retaliation/Discrimination
Retaliation is disparate treatment of a patient in response to the patient exercising his or her rights. The resident has the right to exercise his or her rights as a resident of the facility and as a citizen or resident of the United States, and to be free of interference, coercion, discrimination, and reprisal from the facility in exercising his or her rights. Discrimination is disparate treatment of an individual based on their actual or perceived membership in a certain group or category. Patients have the right to be free from discrimination based on sex, race, color, religion, ancestry, national origin, sexual orientation, disability, medical condition, marital status, or registered domestic partner status.

Rural Health Clinic
An outpatient facility that is primarily engaged in furnishing physicians and other medical and health services, and that meets other requirements designated to ensure the health and safety of individuals served by the clinic. The clinic must be located in a medically under-served area that is not urbanized as defined by the U.S. Bureau of Census. (Ref: http://www.cms.gov/).

Skilled Nursing Facility
A health facility that provides skilled nursing care and supportive care to patients whose primary need is the availability of skilled nursing care on an extended basis (Ref: Health and Safety Code 1250(c).

Special Hospital
A health facility having a duly constituted governing body with overall administrative and professional responsibility and an organized medical or dental staff that provides inpatient or outpatient care in dentistry or maternity. (Ref: Health and Safety Code 1250(f)).

State Fiscal Year (FY)
A 12-month state accounting period that varies from calendar year and federal fiscal year. In California State government, the fiscal year runs from July 1 through the following June 30. (Ref: http://www.dof.ca.gov/).

Surgical Clinic
A clinic that is not part of a hospital and that provides ambulatory surgical care for patients who remain less than 24 hours. A surgical clinic does not include any place or establishment owned or leased and operated as a clinic or office by one or more physicians or dentists in individual or group practice, regardless of the name used publicly to identify the place or establishment, provided, however, that physicians or dentists may, at their option, apply for licensure. (Ref: Health and Safety Code 1204(b)(1)).

Transplant Hospital
A hospital that furnishes organ transplants and other medical and surgical specialty services required for the care of transplant patients. (Ref: Health and Safety Code 7150.10(a)(32)).

Unlicensed Facility
A facility is referred to as "Unlicensed" if it is operating as a health care facility without a license required by various provisions of the Health and Safety Code.

Willful Material Falsification (WMF)
Any entry in the patient health care record pertaining to the administration of medication, or treatments ordered for the patient, or pertaining to services for the prevention or treatment of decubitus ulcers or contractures, or pertaining to tests and measurements of vital signs, or notations of input and output of fluids, that was made with the knowledge that the records falsely reflect the condition of the resident or the care or services provided. (Ref: Health and Safety Code 1424(f)(2)).

Willful Material Omission (WMO)
The willful failure to record any untoward event that has affected the health, safety, or security of the specific patient, and that was omitted with the knowledge that the records

falsely reflect the condition of the resident or the care or services provided. (Ref: Health and Safety Code 1424(f)(3)).