



## Agency Glossary of Terms and Acronyms

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

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

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

**ADT (Adult Day Training):** Services for adults with developmental disabilities that support their participation in community activities, including volunteering, job exploration, accessing community resources, and self-advocacy. Individuals attend ADT in facilities that are age and culturally appropriate.

**AHCA:** Agency for Health Care Administration

**APD:** Agency for Persons with Disabilities

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

**APS:** Adult Protective Services

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

**AST:** Agency for State Technology

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

**Baseline Data:** Indicators of a state agency's current performance level, pursuant to guidelines established by the Executive Office of the Governor (EOG) in consultation with the Florida Legislature.

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

**CARES Program:** Comprehensive Assessment and Review for Long-Term Care Services.

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

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

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

**CP (Cerebral Palsy):** A group of disabling symptoms of extended duration which results from damage to the developing brain that may occur before, during or after birth and that results in the loss or impairment of control over voluntary muscles. For the purposes of this definition, cerebral palsy does not include those symptoms or impairments resulting solely from a stroke.

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

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

**CMS (Centers for Medicare and Medicaid Services):** The federal agency with oversight of Medicaid State Plan and Medicaid Waiver services.

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

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

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

**Contractual Service:** Refers to a vendor’s time and effort rather than the furnishing of specific commodities. The term applies only to those services rendered by individuals and firms who are contractors. Services may include, but are not limited to, evaluations, consultations, maintenance services, accounting, security, management systems, management consulting, educational training programs, research and development studies or reports, and professional, technical, and social services. Contractual service does not include any contract for the furnishing of labor or materials for the construction, renovation, repair, modification, or demolition of any facility, building, portion of building, utility, park, parking lot, or structure or other

improvement to real property, entered into pursuant to Chapter 255, F.S. and Rule 60D:5, F.A.C. Commodities, which are acquired incidental to the acquisition of a contractual service, are considered to be part of the acquisition or purchase of the contractual service.

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

**DCF:** Florida Department of Children and Families

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

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

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

**DD Month (Developmental Disabilities Awareness Month):** March is national Developmental Disabilities Awareness Month to help raise awareness and advocate for people with intellectual and developmental disabilities.

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

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

**DEAM (Disability Employment Awareness Month):** October is Disability Employment Awareness Month that raises awareness about disability employment issues and

celebrates the many contributions of exceptional employers and workers with disabilities.

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

**DEO (Department of Economic Opportunity):** The state agency that collects data and information from employers of agency clients.

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

**DOEA:** Department of Elder Affairs

**DOH:** Department of Health

**DOH, Bureau of Vital Statistics:** A state office within the Department of Health that is responsible for the uniform and efficient registration, compilation, storage, and preservation of all vital records in the state (Chapter 282, Florida Statutes). Vital records mean certificates or reports of birth, death, fetal death, marriage, dissolution of marriage, name change filed pursuant to Section 68.07, Florida Statutes, and data related thereto.

**Down Syndrome:** A genetic disorder caused when abnormal cell division results in extra genetic material from chromosome 21. This genetic disorder, also known as trisomy 21, varies in severity, causes lifelong intellectual disability and developmental delays, and, in some people, causes health problems.

**EEP (Employment Enhancement Program):** The EEP is a program funded by the Florida Legislature to provide opportunities and supports to clients on the agency's Waiting List who want to work, obtain, and maintain competitive employment or internships. The Florida Legislature has funded this program since Fiscal Year (FY) 2013-14. Job seekers must be 18-years-of-age or older and on the agency's Waiting List to qualify.

**EOG:** Executive Office of the Governor

**Estimated Expenditures:** Refers to amounts likely to be spent during the current fiscal year. These amounts will be computer generated, based on current year appropriations, adjusted for vetoes, and special appropriations.

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

**Expenses:** The usual, ordinary, and incidental expenditures by an agency or the judicial branch, including, but not limited to, such items as commodities and supplies of a

consumable nature, current obligations, and fixed charges, and excluding expenditures classified as operating capital outlay. Payments to other funds or local, state, or federal agencies are included in this budget classification of expenditures.

**Extraordinary Needs:** Pursuant to Section 393.0662(1)(b), F.S., needs that would place the health and safety of the client, the client's caregiver, or the public in immediate, serious jeopardy unless an increased amount of funds allocated to a client's iBudget, beyond those determined by the algorithm, are approved.

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

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

**FCCs (Family Care Councils):** Groups of volunteers appointed by the Governor to advise APD. Council members also provide outreach and information to families in their local communities. Each FCC consists of individuals with developmental disabilities, as well as parents, siblings, grandparents, and guardians of people with developmental disabilities who qualify for APD services.

**FCCF (Family Care Council Florida):** The organization that functions as a statewide board of the FCCs. Its membership includes the chairperson or representative of each Family Care Council.

**FCO (Fixed Capital Outlay):** Real property (land, buildings, fixtures, etc.) including additions, replacements, major repairs, and renovations which extend useful life, materially improve or change its functional use. Furniture and equipment necessary to furnish and operate a new or improved facility are included in the definition.

**FFMIS:** Florida Financial Management Information System

**FLAIR:** Florida Accounting Information Resource system

**FLAIR RECON:** Florida Accounting Information Resource system, reconciles invoices between ABC and FAS.

**Florida Whistleblowers Act:** Section 112.3187, F.S. creates a procedure for complainants to follow and provides a civil right of action against retaliation for some complainants.

**FMMIS:** Florida Medicaid Management Information System

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

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

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

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

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

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

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

**iBudget (Individual Budgeting):** A term associated with the agency's Home and Community-Based Program that is used to describe both an electronic system and a method for determining a person's allocation of funds for services. iBudget considers the legislative appropriation for the fiscal year and individual characteristics correlated with costs to generate a base budget amount for each person. iBudget also is known as the Developmental Disabilities Individual Budgeting waiver, an approved HCBS Medicaid waiver also used by participants in the CDC+ program.

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

**iConnect (a.k.a. Client Data Management System—CDMS):** A centralized consumer record system that upon implementation will collect key data at the client specific and provider specific level so that analysis, tracking, and reporting processes can be improved.

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

**Incident Management:** A process for tracking and resolving an event which could potentially impact the health, safety and well-being of agency clients. Providers must take immediate action in the situation to resolve the emergency and ensure the individual's health and safety and that of all other clients. Providers must complete and submit all incident reports and follow-up reports on the agency's Incident Reporting Form. The timely reporting and submission of incident reports to the agency, as well as the appropriate management of incidents, is vitally important in ensuring the health, safety and well-being of agency clients.

**Indicator:** A marker or sign expressed in a quantitative or qualitative statement used to gauge the nature, presence, or progress of a condition, entity, or activity. Another term for the word "measure."

**Input:** See Performance Measure.

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



**Intellectual Disability:** A term used when a person has certain limitations in both mental functioning and in adaptive skills such as communicating, taking care of him or herself, and social skills. These limitations will cause a person to learn and develop more slowly. People with intellectual disabilities may take longer to learn to speak, walk, and take care of their personal needs such as dressing or eating. They are likely to have trouble learning in school. They will learn, but it will take them longer. As defined in Chapter 393 F.S., an intellectual disability means significantly subaverage general intellectual functioning existing concurrently with deficits in adaptive behavior which manifests before the age of 18 and can reasonably be expected to continue indefinitely. Adaptive behavior means the effectiveness or degree with which an individual meets the standards of personal independence and social responsibility expected of his or her age, cultural group, and community. Significantly subaverage general intellectual functioning means performance that is two or more standard deviations from the mean score on a standardized intelligence test specified in the rules of the agency.

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

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

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

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

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

**LBR (Legislative Budget Request):** A request to the Legislature, filed pursuant to s. 216.023, F. S., or supplemental detailed requests filed with the Legislature for the amounts of money an agency or branch of government believes will be needed to

perform the functions that it is authorized, or it is requesting authorization by law, to perform.

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

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

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

**Medicaid Waiver:** See Waiver

**MSP:** Medicaid State Plan

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

**NASBO:** National Association of State Budget Officers

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

**NCI (National Core Indicators):** Nationally standardized performance indicators that include approximately 100 outcomes related to consumer, family, systemic, cost, and health and safety – outcomes that are important to understanding the overall health of public developmental disabilities agencies. Associated with each core indicator is a source from which the data is collected in collaboration with the Human Services Research Institute (HSRI). Sources of information include consumer survey (e.g., empowerment and choice issues), family surveys (e.g., satisfaction

with supports), provider survey (e.g., staff turnover), and state systems data (e.g., expenditures, mortality, etc.). National Core Indicators provide Florida a way to compare its performance against other states.

**NF (Nursing Facility):** Medicaid-certified nursing facility.

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

**OCO (Operating Capital Outlay):** Equipment, fixtures, and other tangible personal property of a nonconsumable and nonexpendable nature. OCO applies to items valued at \$1,000 or more that have an expected life of one year or more. This may include hardback-covered bound books circulated to students or the public, the value or cost of which is \$25 or more, and hardback-covered bound books the value or cost of which is \$250 or more.

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

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

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

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

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

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

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

**Performance Ledger:** The official compilation of information about state agency performance-based programs and measures, including approved programs, approved outputs and outcomes, baseline data, approved standards for each performance measure and any approved adjustments thereto, as well as actual agency performance for each measure.

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

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

**Phelan-McDermid Syndrome:** A rare condition due to a chromosomal abnormality. Symptoms vary in range and severity, but often include low muscle tone, difficulty moving, absent –to- severely delayed speech, autistic features, moderate –to- profound intellectual disability, and epilepsy.

**PMDS:** Payroll Management Data System

**Policy Area:** A grouping of related activities that reflect major statewide priorities. Policy areas summarize data at a statewide level by using the first two digits of the 10-

digit LAS/PBS program component code. Data collection will sum across state agencies when using this statewide code.

**Prader-Willi Syndrome:** A complex genetic condition that affects many parts of the body. In infancy, this condition is characterized by weak muscle tone, feeding difficulties, poor growth, and delayed development. Beginning in childhood, affected individuals develop an insatiable appetite and chronic overeating. As a result, most experience rapid weight gain leading to obesity. People with Prader-Willi syndrome, typically have an intellectual disability, or learning disabilities and behavioral problems.

**Primary Service Outcome Measure:** A legislatively approved performance measure that best reflects or quantifies the intended outcome of a service. Generally, there is only one primary service outcome measure for each agency service.

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

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

**Program:** A set of services and activities undertaken in accordance with a plan of action organized to achieve agency mission, goals, and objectives based on legislative authorization. In some instances, a program consists of several services, or in other cases, the program represents one service. The LAS/PBS code is used for both program identification and service identification. Service is a budget entity for purposes of the LRPP.

**Program Component:** An aggregation of related objectives. Because of their special character, related workload, and interrelated output, these objectives could logically be considered an entity for purposes of organization, management, accounting, reporting, and budgeting.

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

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

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

remediation. Qlarant's number one goal in Florida is to improve the quality of supports for Florida citizens with developmental disabilities.

**QSI (Questionnaire for Situational Information):** The agency approved assessment for determining a person's level of need and support in areas of community living, functional, behavioral, and physical health. The QSI is administered by trained and certified agency staff.

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

**Reliability:** The extent to which the procedure used for measurement yields the same results on repeated trials, and data are complete and sufficiently error free for the intended use.

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

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

**SAN (Significant Additional Needs):** A term associated with a request for additional funding that if not provided could jeopardize the health and safety of the individual, the individual's caregiver, or public. As authorized under Section 393.0662(1)(b), F.S., a SAN is categorized as extraordinary need, significant need for one-time or temporary support or services, or significant increase in the need for services after the beginning of the service plan year.

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

**Secure Web for Consultants:** An application to view only the monthly reporting statements.

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

**Service:** See Budget Entity and Program

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

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

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

**Spina Bifida:** A birth defect (a congenital malformation) in the vertebral column in which part of the spinal cord, which is normally protected within the vertebral column, is exposed. Spina bifida is caused by the failure of the neural tube to close during embryonic development. The neural tube is the embryonic structure that gives rise to the brain and spinal cord. People with spina bifida can have difficulty with bladder and bowel incontinence, cognitive (learning) problems, and limited mobility.

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

**Standard:** A level of performance, a measure of outcome or output.

**SWOT:** Strengths, Weaknesses, Opportunities, and Threats.

**Unit Cost:** The average total cost of producing a single component, item, service, or output for a specific agency activity.

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

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

**Waiting List:** A registration of persons who meet the agency's eligibility criteria as defined in Section 393.063, F.S. and level-of-care criteria for the iBudget waiver, waiting for waiver services in one of seven (7) priority categories. There is not an actual timeframe for the length of waiting. Each year, the number of individuals

who can be added to the waiver is contingent upon the availability of funds, level of need, and waiting list category.

**Waiting List Priority Categories:** Section 393.065(5), Florida Statutes describes the waiting list priority categories. There are seven categories described as follows:

- Category 1: Individuals in crisis.
- Category 2: Individuals who are transitioning out of the child welfare system at the time of adoption, reunification, permanent placement with a relative, guardian, or non-relative, and individuals in the child welfare system who turn 18-years old.
- Category 3: Individuals whose caregiver has a documented condition that will render the caregiver unable to provide care in the near future, those with no caregiver, those at a substantial risk for incarceration, and those with intense physical or behavioral needs.
- Category 4: Individuals with caregivers 70 years of age or older.
- Category 5 Youth leaving secondary school within the next 12 months.
- Category 6 Individuals ages 21 or older.
- Category 7 Individuals less than 21 years older

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

**WSC (Waiver Support Coordinator):** A person who is selected by the individual to assist the individual and family in identifying a consumer's capacities, needs, and resources; finding and gaining access to necessary supports and services; coordinating the delivery of supports and services; advocating on behalf of the individual and family; maintaining relevant records; and monitoring and evaluating the delivery of supports and services to determine the extent to which they meet the needs and expectations identified by the individual, family and others who participated in the development of the support plan.