

STATE OF CALIFORNIA
Budget Change Proposal - Cover Sheet
 DF-46 (REV 08/15)

Fiscal Year 2016-17	Business Unit 4260	Department Health Care Services	Priority No.
Budget Request Name 4260-014-BCP-DP-2016-GB		Program 3960010	Subprogram

Budget Request Description
 Family Planning Contract Conversion

Budget Request Summary

The DHCS, Office of Family Planning (OFP), requests ten (10.0) permanent, state civil service positions and expenditure authority of \$1,458,000 (\$637,000 General Fund/\$821,000 Federal Fund) for FY 2016-17 and \$1,368,000 (\$596,000 General Fund/\$772,000 Federal Fund) on-going. The state staff will replace existing contracted staff. The requested positions will ensure adequate staffing levels to meet state OFP requirements and comply with Government Code Section 19130, which prohibits contracting out for services that can be performed by state civil servants.

The current contract funding is built within the Medi-Cal Local Assistance Estimate. DHCS proposes to discontinue the policy change in order to build the expenditure authority in the State Operations budget.

Requires Legislation <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Code Section(s) to be Added/Amended/Repealed
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Does this BCP contain information technology (IT) components? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, departmental Chief Information Officer must sign.</i>	Department CIO <i>Bonnie Gray</i>	Date <i>11/5/16</i>
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For IT requests, specify the date a Special Project Report (SPR) or Feasibility Study Report (FSR) was approved by the Department of Technology, or previously by the Department of Finance.

FSR SPR Project No. Date:

If proposal affects another department, does other department concur with proposal? Yes No
Attach comments of affected department, signed and dated by the department director or designee.

Prepared By <i>[Signature]</i>	Date <i>1-5-16</i>	Reviewed By <i>[Signature]</i>	Date <i>1/6/16</i>
Department Director <i>[Signature]</i>	Date <i>1/6/16</i>	Agency Secretary <i>[Signature]</i>	Date <i>1/7/16</i>

Department of Finance Use Only

Additional Review: Capital Outlay ITCU FSCU OSAE CALSTARS Dept. of Technology

BCP Type: Policy Workload Budget per Government Code 13308.05

PPBA <i>Maicis B. Azm</i>	Date submitted to the Legislature <i>1/8/16</i>
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BCP Fiscal Detail Sheet

BCP Title: Family Planning Contract Conversion

DP Name: 4260-014-BCP-DP-2016-GB

Budget Request Summary

	FY16					
	CY	BY	BY+1	BY+2	BY+3	BY+4
Positions - Permanent	0.0	10.0	10.0	10.0	10.0	10.0
Total Positions	0.0	10.0	10.0	10.0	10.0	10.0
Salaries and Wages						
Earnings - Permanent	0	788	788	788	788	788
Total Salaries and Wages	\$0	\$788	\$788	\$788	\$788	\$788
Total Staff Benefits	0	381	381	381	381	381
Total Personal Services	\$0	\$1,169	\$1,169	\$1,169	\$1,169	\$1,169
Operating Expenses and Equipment						
5301 - General Expense	0	60	40	40	40	40
5302 - Printing	0	20	20	20	20	20
5304 - Communications	0	20	20	20	20	20
5320 - Travel: In-State	0	9	9	9	9	9
5322 - Training	0	10	10	10	10	10
5324 - Facilities Operation	0	90	90	90	90	90
5344 - Consolidated Data Centers	0	10	10	10	10	10
539X - Other	0	70	0	0	0	0
Total Operating Expenses and Equipment	\$0	\$289	\$199	\$199	\$199	\$199
Total Budget Request	\$0	\$1,458	\$1,368	\$1,368	\$1,368	\$1,368
Fund Summary						
Fund Source - State Operations						
0001 - General Fund	0	637	596	596	596	596
0890 - Federal Trust Fund	0	821	772	772	772	772
Total State Operations Expenditures	\$0	\$1,458	\$1,368	\$1,368	\$1,368	\$1,368
Total All Funds	\$0	\$1,458	\$1,368	\$1,368	\$1,368	\$1,368
Program Summary						
Program Funding						
3960010 - Medical Care Services (Medi-Cal)	0	1,458	1,368	1,368	1,368	1,368
Total All Programs	\$0	\$1,458	\$1,368	\$1,368	\$1,368	\$1,368

Analysis of Problem

A. Budget Request Summary

The Department of Health Care Services (DHCS), Office of Family Planning (OFP), requests ten (10.0) permanent, full-time state civil service positions and \$1,458,000 (\$637,000 General Fund/\$821,000 Federal Fund) for FY 2016-17 and \$1,368,000 (\$596,000 General Fund/\$772,000 Federal Fund) on-going to replace existing contracted staff. The requested positions will ensure adequate staffing levels to meet state OFP requirements and comply with Government Code Section 19130, which prohibits contracting out for services that can be performed by state civil servants.

The current contract funding is built within the Medi-Cal Local Assistance Estimate. DHCS proposes to discontinue the policy change in order to build the expenditure authority in the State Operations budget. The current contract is annually budgeted at \$2,861,000 (\$1,430,000 General Fund/\$1,431,000 Federal Fund). With the contract conversion to state civil service positions, there is an anticipated cost savings of approximately \$1,403,000 (\$793,000 General Fund/\$610,000 Federal Fund) in Year 1 and \$1,493,000 (\$834,000 General Fund/\$659,000 Federal Fund) in Year 2 and on-going.

B. Background/History

The OFP was established by the California State Legislature through California Welfare and Institutions (W&I) Code §14500-14512. OFP is charged "to make available to all citizens of the state, who are of childbearing age, comprehensive medical knowledge, assistance, and services relating to the planning of families". The Family Planning, Access, Care and Treatment (Family PACT) program is administered by OFP and has been operating since 1997 to provide family planning and reproductive health services at no cost to California's low-income residents of reproductive age. Family PACT serves 1.8 million income-eligible men and women of childbearing age through a network of 2,300 public and private providers. Per W&I Code §14501, other OFP functions and duties charged by the California legislature include, but are not limited to:

- Establishing goals and priorities for all state agencies providing or administering family planning services.
- Coordinating all family planning services and related programs conducted or administered by state agencies with the federal government so as to maximize the availability of these services by utilizing all available federal funds.
- Evaluating existing programs and establishing in each county a viable program for the dispensation of family planning.
- Developing and administering evaluation of existing and new family planning and birth control techniques.

W&I Code §14501 requires OFP to conduct ongoing monitoring and evaluation of family planning services. OFP has historically used a personal services contract to hire staff to meet this mandate and to assist with the administration of the Family PACT program. Family PACT was previously operated under the authority of a Section 1115 demonstration waiver with a requirement to have an independent evaluation of the waiver's impact on reproductive health outcomes, utilization and costs, and access. The Centers for Medicare and Medicaid Services (CMS) required the waiver's impact to be monitored and evaluated to measure the program's goals. State Plan Amendment 10-014, approved by CMS in 2011 transitioned the Family PACT program into the Medicaid State Plan. The transition from a

Analysis of Problem

waiver program to a program under the Medicaid State Plan eliminated the requirements to have an independent evaluator provide monitoring and evaluation of the program's goals. However, the W&I Code §14501 mandate remains, which requires OFP to conduct ongoing monitoring and evaluation of family planning services.

Since 1997, the Bixby Center for Global Reproductive Health at the University of California, San Francisco (UCSF) has had business agreements with OFP to provide data for policy and programmatic decisions through a multi-method approach that includes analysis of administrative data; assessment of provider and client perspectives; and medical record reviews. The UCSF business agreement includes a medical consultant who advises OFP regarding evidenced-based and clinical practice guidelines published by professional organizations with respect to reproductive health services.

The enacted 2012 Budget Act transferred OFP/Family PACT from the California Department of Public Health (CDPH) to DHCS, effective July 1, 2012. In response to OFP's transition from the CDPH to DHCS, OFP and UCSF executed a contract amendment that changed the scope of services for years 4 and 5 of the UCSF 2010-2015 business agreement. The scope of services was expanded from evaluation and monitoring of Family PACT to the evaluation and monitoring of Medi-Cal family planning services. OFP has a longstanding commitment to evidence-driven policies and to quality improvement/utilization management (QI/UM) activities with respect to family planning and family planning-related services. Recently, OFP renewed its business agreement with UCSF for three years (Fiscal Years 2015-2016 through 2017-2018) to continue to perform on-going assistance in monitoring and evaluating the State's family planning programs to fulfill OFP's statutory requirement.

Resource History
(Dollars in thousands)

Office of Family Planning					
Program Budget	2010-11	2011-12	2012-13	2013-14	2014-15
Authorized Expenditures	N/A	N/A	1,505	1,609	1,715
Actual Expenditures	N/A	N/A	1,360	1,535	1,384
Revenues	N/A	N/A	N/A	N/A	N/A
Authorized Positions	N/A	N/A	13.8	13.8	13.8
Filled Positions	N/A	N/A	11.5	12.4	9.0
Vacancies	N/A	N/A	2.3	1.4	4.8
<i>Office of Family Planning transitioned from CDPH eff. FY 2012-13</i>					

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Workload History

Workload Measure	2010-11	2011-12	2012-13	2013-14	2014-15
Generate Minimum Data Elements (MDE) [number of records]	47,027,311	50,385,406	53,983,294	57,838,098	61,968,163
Claims data import and processing (number of imports)	19,618,311	18,240,853	17,043,936	39,875,180	348,817,656
Client Eligibility data import and processing (number of imports)	27,892,499	29,592,500	31,815,606	38,394,401	54,985,904
Provider Enrollment data import and processing (number of imports)	515,711	523,710	528,015	530,112	538,469
Conduct record linkages (number of records submitted)	28,108,663	29,995,488	31,816,417	34,138,145	38,518,217
Data import monitoring and troubleshooting (number of imports)	146	146	150	164	175
Data cleaning and monitoring (number of data tables in system/number of records in system)	547/ 403,348,421	575/ 432,169,829	603/ 463,050,680	631/ 496,138,134	659/ 531,589,864
Standardization and documentation of data analysis procedures (number of procedures)	4,222	4,445	4,679	5,198	5,776
Analyze service delivery and cost-benefit studies (number of claims)	0	1,058,381	1,750,000	6,710	0
Survey respondents (number of persons)	0	654	21	0	727
Review charts (number of charts)	0	5,035	0	0	0
Program monitoring and evaluation analyses reports, briefs, clinical practice alerts (number of pages/number of tables and figures, including attachments)	154/228	111/197	118/230	152/225	520/350
Prepare bi-annual core program performance indicators reporting and monitoring (number of providers/number of indicators)	2,534/9	2,393/9	2,332/17	2,214/17	2,196/17
Present educational offerings (number of presentations)	4	7	3	7	1

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Workload Measure	2010-11	2011-12	2012-13	2013-14	2014-15
Conduct program and policy analysis (number of analyses/number of claims records)	10/ 15,150,813	27/ 15,325,935	19/ 15,316,834	14/ 14,933,365	25/ 12,685,742
Respond to both internal and external data requests/disclosures (number of ad hoc reports)	95	100	166	156	161
Maintain physical and electronic library (number of documents)	115	172	179	197	207
Convert documents for posting to Family PACT Website per 508 requirements (number of pages/number of figures/tables)	210/0	154/0	193/0	156/0	405/301
Propose family planning-related questions for statewide surveys (number of questions)	13	26	28	11	11
Policy and benefits review and recommendations (number of documents)	Ave. 8 per mo./96 per year				
Convene and participate in Clinical Practice Committee and Stakeholder Meetings	2	2	0	5	8
Open Access Data Portal (number of tables & figures/number of claim lines)	0	0	0	0	3/ 73,412,689

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C. State Level Considerations

Emerging challenges for DHCS abound due to the many provisions under the Affordable Care Act (ACA) requiring DHCS to adopt quality measure reporting and use of evidence-based data for quality improvement projects. The anticipated transition of Family PACT clients into the Medi-Cal expansion or California's Health Insurance Exchange, Covered California, adds a new dimension of access of services into new systems of care. As such, to ensure a continuum of access to quality of care afforded to Family PACT clients, DHCS needs to implement innovative and sustainable activities to maintain and improve the quality and value of health care for Californians under ACA. DHCS' Strategic Plan and Strategy for Quality Improvement lay out the roadmap for improving and protecting the health of all Californians in achieving the goals of ACA.

The mission of the OFP is to make available to Californians of childbearing age comprehensive medical knowledge, assistance, and services relating to the planning of families. With the advent of ACA, OFP's goals are as follows:

1. Continue administration of the Family PACT Program to provide family planning and reproductive health care services to low income Californians.
2. Help eligible individuals transition from Family PACT to comprehensive health coverage now available through the ACA.
3. Represent the family planning and reproductive health needs of low-income reproductive-age Californians within DHCS.
4. Develop and implement family planning quality indicators and QI/UM initiatives across all Medi-Cal family planning and reproductive health programs.
5. Ensure program integrity of the Family PACT and other Medi-Cal family planning programs.
6. Participate in broader DHCS quality initiatives that involve other programs.

This proposal seeks to provide the necessary staffing to meet statutory mandates and OFP's mission and goals. In addition, this proposal strategically aligns with DHCS' Three Linked goals:

- Improve the health of all Californians;
- Enhance quality, including patients' care experience;
- Reduce DHCS' per capita health care program costs; and

Seven Quality Strategy Priorities:

- Improve patient safety;
- Deliver effective, efficient, affordable care;
- Engage persons and families in their health;
- Enhance communication and coordination of care;
- Advance prevention;
- Foster healthy communities; and
- Eliminate health disparities.

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D. Justification

The existing personal services contract does not meet the Government Code Section 19130 exemption requirements.

Below, lists the requested 10.0 permanent positions, which are necessary to perform critical functions for OFP, such as data programming, data collection and management activities to monitor the State's family planning programs:

- Medical Consultant I
- Pharmacy Consultant I
- Staff Services Manager II (Managerial)
- Research Scientist Supervisor I
- Research Scientist III
- Research Scientist II
- Staff Programmer Analyst
- Research Analyst II
- Research Analyst I (Demography)
- Research Analyst I (Geographic Information Systems)

The Medical Consultant I will research, identify, evaluate, and make recommendations on reproductive health clinical services, and diagnosis based treatment options for beneficiaries. The Pharmacy Consultant I will research, identify, evaluate, and make recommendations on appropriate drug/device treatment for beneficiaries once the Medical Consultant has performed the clinical evaluation and recommended a particular course of treatment.

The additional staffing pattern is necessary to accomplish the projected outcomes noted in Section E. Outcomes and Accountability. These varied classifications will provide the necessary and desirable knowledge, skills, and abilities necessary to provide the needed program support and implement monitoring, evaluation, and research activities.

Additionally, the existing contracted staff assist OFP in meeting the statutorily mandated requirement to annually update and analyze family planning data and submit biennial reports to the State Legislature as well as provide estimates for the state's budget. Approval of the permanent position authority is needed to ensure continuity of providing accurate data collection and analysis and meeting all state reporting requirements. The consequence of not performing the aforementioned tasks could be an inability to meet statutory requirement which could also result in loss of state funding for the program.

Further, it costs the state more to contract out than to establish full-time state civil service positions. Equivalent contractor classifications are paid a higher salary than state staff and the contractor provides annual increases in salaries for merit, cost of living, and benefits. In addition, the contractor is paid for operating expenses and indirect costs. While merit increases and possible cost of living increases for state civil servants may occur over the course of time, savings from this proposal will offset any increases for state salaries and benefits and will contain costs. Converting contract positions to state civil service positions would contain costs and result in cost savings.

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E. Outcomes and Accountability

Projected Outcomes

Workload Measure	2015-16	2016-17	2017-18	2018-19	2019-20	2020-21
Generate Minimum Data Elements (MDE) [number of records]	66M	70M	71M	72M	73M	74M
Claims data import and processing (number of imports)	384M	403M	423M	444M	466M	489M
Client Eligibility data import and processing (number of imports)	58M	61M	63M	65M	67M	69M
Provider Enrollment data import and processing (number of imports)	547,000	556,000	565,000	574,000	583,000	592,000
Conduct record linkages (number of records submitted)	39M	40M	41M	42M	43M	44M
Data import monitoring and trouble-shooting (number of imports)	187	199	213	227	242	258
Data cleaning and monitoring (number of data tables in system/number of records in system)	688/ 545M	719/ 559M	751/ 573M	784/ 587M	819/ 602M	855/ 617M
Standardization and documentation of data analysis procedures (number of procedures)	5,834	5,863	5,892	5,922	5,951	5,981
Analyze service delivery and cost-benefit studies (number of claims)	1,867,000	2,333,750	2,917,188	3,000,000	3,000,000	3,000,000
Survey respondents (number of persons)	750	0	1,000	1,500	0	1,000
Review charts (number of charts)	0	300	300	300	300	300
Program monitoring and evaluation analyses reports, briefs, clinical practice alerts (number of pages/number of tables and figures, including attachments)	155/135	300/220	150/150	300/220	150/150	300/220
Prepare bi-annual core program performance indicators reporting and monitoring (number of providers/number of indicators)	2,300/17	2,500/17	2,700/20	2,900/20	3,100/20	3,300/20
Conduct program and policy analysis (number of analyses/number of claims records)	25/ 11M	25/ 11M	25/ 12M	25/ 13M	25/ 14M	25/ 15M

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Workload Measure	2015-16	2016-17	2017-18	2018-19	2019-20	2020-21
Respond to both internal and external data requests/disclosures (number of ad hoc reports)	160	170	170	170	170	170
Maintain physical and electronic library (number of documents)	215	220	225	230	235	240
Convert documents for posting to Family PACT Website per 508 requirements (number of pages/number of figures/tables)	200/150	200/150	200/150	200/150	200/150	200/150
Propose family planning-related questions for statewide surveys (number of questions)	11	12	12	12	12	12
Policy and benefits review and recommendations (number of documents)	Ave. 8 per mo./96 per year					
Convene and participate in Clinical Practice Committee and Stakeholder Meetings	6	6	6	6	6	6
Perform selected fiscal estimations analyses (number of analyses)	36	38	40	42	44	46

Analysis of Problem

F. Analysis of All Feasible Alternatives

Alternative 1: Approve request for 10.0 permanent, full-time state civil service positions and \$1,458,000 (\$637,000 General Fund/\$821,000 Federal Fund) in 2016-17 and \$1,368,000 (\$596,000 General Fund/\$772,000 Federal Fund) on-going.

Pros:

- Cost containment and cost avoidance.
- Converting contract positions to state civil service positions will allow OFP to comply with Government Code Section 19130.
- Stabilizes the DHCS workforce to meet required state mandates.
- DHCS would continue to meet state mandates for OFP.

Cons:

- May exceed deadlines for state mandates in year 1 due to time necessary to hire and orient new staff.
- Growth in State staff.

Alternative 2: Continue the personal services contract.

Pros:

- Would not require DHCS to hire 10.0 permanent, full time state civil service positions to maintain the workload of current contract staff.
- Contract staff skills would remain available to DHCS.
- DHCS would continue to meet state mandates for OFP.

Cons:

- Contract costs cannot be controlled; duplicate expenses are incurred and the cost for contracted staff ultimately exceeds the cost of state staff.
- If a contract is suspended, denied, delayed or voided, DHCS programs cannot carry out their responsibilities and complete their mandated activities.
- This approach does not ensure continuity for maintenance and operations.
- The contracting process itself is labor intensive, directing staff efforts from working on program activities.

Alternative 3: Approve 5.0 permanent, full-time state civil service positions to be funded by partial conversion of the current personal services contract positions and execute a scaled back personal services contract.

Pros:

- Allows for some cost containment.
- Would provide some assistance to existing workload demands.

Cons:

- Contract costs cannot be controlled; duplicate expenses are incurred and the cost for contracted staff ultimately exceeds the cost of state staff.
- UC may opt out of contract due to contract terms leaving DHCS with inadequate staffing to perform state mandates for OFP.

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G. Implementation Plan

If position authority is approved, DHCS will initiate the competitive recruitment and hiring process as soon as possible. Below is a comparison chart to reflect the slight lag in reporting as we recruit/train for State staff. Once on-board, the reporting will go back to the mandated schedule.

Status Quo Reporting (Contractor)	Staffing Timeline
1/1/16 – 6/29/16 Data extraction and report writing	7/1/16 – 9/1/16 Start recruitment
6/30/16 Submit report to DHCS for review	10/1/16 – 12/31/16 Training
1/1/17 Submit report to Legislature (mandated)	1/1/17 – 5/31/17 Data extraction and report writing
	6/1/17 Submit report for review
	8/1/17 Submit report to Legislature

H. Supplemental Information

FY 2016-17 (one-time): Cubicle build-outs including cabling for the new positions (\$70,000)

I. Recommendation

Alternative 1. Provide authority for 10.0 permanent, full-time state civil service positions, thereby ensuring adequate staffing is available to meet the state requirements while continuing to serve low-income Californians of childbearing age.

WORKLOAD STANDARDS
Division: Office of Family Planning
1.0 Medical Consultant I (805-680-7787-xxx)
Permanent

Activities	Number of Items Weekly, Monthly, Etc.	Hours per Item	Total Hours
Provides advice and consultation on clinical best practices in family planning for physicians and/or other practitioners who provide family planning services.	130	3	390
Ensures timely consideration and integration of evidence-based updates applicable to the clinical evaluation, diagnosis, and treatment options available in the field of family planning	260	3	780
Participates in DHCS quality improvement activities; assists OFP in ensuring that Medi-Cal clients receive high quality family planning services	52	2	104
General advisory consultation to OFP clinical staff	42	2	84
Assists in developing policies, standards, and guides on administration of the clinical services aspects of family planning programs to assure compliance with State and Federal regulations	102	3	306
Conducts studies; assists in the analyses and preparation of reports; and legislative analysis	52	2	104
Consults with statewide professional organizations, community groups, stakeholders, Department staff, and others on the medical aspects of the program	16	2	32
Total hours worked			1,800
1,800 hours = 1 Position			
Actual number of Positions requested			1.0

WORKLOAD STANDARDS
Division: Office of Family Planning
1.0 Pharmaceutical Consultant I (805-680-7975-xxx)
Permanent

Activities	Number of Items Weekly, Monthly, Etc.	Hours per Item	Total Hours
Provides advice and consultation on pharmaceutical benefits and consultation/recommendations on legislative issues involving the Medi-Cal drug/pharmacy benefits	130	3	390
Ensures timely consideration and integration of evidence based recommendations pertaining to the safety, effectiveness, misuse potential, and cost-effectiveness of all drugs and medical devices used in the provision of reproductive health treatments available in the field of family planning	260	3	780
Participates in DHCS quality improvement activities; assists OFP in ensuring that Medi-Cal clients receive high quality family planning pharmaceutical services	52	2	104
General advisory consultation to OFP clinical staff	42	2	84
Assists in developing policies, standards, and guides on administration of drug/pharmacy benefits to assure compliance with State and Federal regulations	52	2	104
Reviews and monitors drug utilization of the program; assists in the analyses and preparation of reports	102	3	306
Consults with statewide professional organizations, community groups, stakeholders, Department staff, and others on the pharmaceutical aspects of the program	16	2	32
Total hours worked			1,800
1,800 hours = 1 Position			
Actual number of Positions requested			1.0

WORKLOAD STANDARDS

Division: Office of Family Planning

1.0 Staff Services Manager II (Managerial) (805-680-4969-xxx)
Permanent

Activities	Number of Items Weekly, Monthly, Etc.	Hours per Item	Total Hours
Section Management: responsible for the management, and prioritizing of section activities; prioritize and monitor section projects; operationalize policies and operational procedures	260	3	780
Provides leadership, direction, technical consultation, planning, organization, and evaluation of program	52	2	104
Developing and implementing program policy, priorities, and short and long-term strategies	130	3	390
Drafts and edits reports, evaluation documents; develop briefing documents; formulate policies and operational procedures	52	2	104
Facilitate meetings; participates in workgroups as needed	16	2	32
Supervises the design, analyses, and write-up of rapid response assessments	130	3	390
Total hours worked			1,800
1,800 hours = 1 Position			
Actual number of Positions requested			1.0

WORKLOAD STANDARDS
Division: Office of Family Planning
1.0 Research Scientist Supervisor I (805-680-5647-xxx)
Permanent

Activities	Number of Items Weekly, Monthly, Etc.	Hours per Item	Total Hours
Unit Management: responsible for the management, and prioritizing of unit activities; prioritize and monitor Unit projects; plans evaluation methodologies and applies appropriate statistical analyses for various Unit projects	260	3	780
Unit staff supervision and personnel management: responsible for the supervision of unit staff; enhance staff capacity and program infrastructure to meet program requirements efficiently; organization structure; duty statements; recruitment/retention; selection/hiring; training/staff development; perform evaluation; supervision; state disciplinary process	260	3	780
Provides leadership, direction, technical consultation, planning, organization, and evaluation of program	52	2	104
Document and analyze continuous process improvement strategies	52	1	52
Directs the preparation of progress and final reports; convenes workgroups as needed	52	1	52
Facilitate meetings; develop briefing documents; formulate policies and operational procedures	16	2	32
Total hours worked			1,800
1,800 hours = 1 Position			
Actual number of Positions requested			1.0

WORKLOAD STANDARDS
Division: Office of Family Planning
1.0 Research Scientist III (805-680-5605-xxx)
Permanent

Activities	Number of Items Weekly, Monthly, Etc.	Hours per Item	Total Hours
Develop routine and ad hoc reports to identify, monitor, and document program monitoring and evaluation analyses	9	10	90
Plan, develop, and interpret complex analyses of program and program-related data for program evaluation and research	200	2	400
Plan, organize, and direct the complex scientific research and methodology implementation of family planning benefits and services.	60	7	420
Collect, analyze, and interpret vital statistics and census data specifically as they relate to family planning	10	20	200
Respond to both internal and external data requests/disclosures	20	8	160
Perform selected fiscal estimation analyses	2	10	20
Program monitoring and evaluation analyses; use standard principles, procedures and techniques to sort, manipulate, analyze, and interpret data using various statistical software	25	20	500
Serve as a scientific advisor to other lower level scientists or research analysts.	1	10	10
Total hours worked			1,800
1,800 hours = 1 Position			
Actual number of Positions requested			1.0

WORKLOAD STANDARDS
Division: Office of Family Planning
1.0 Research Scientist II (805-680-5590-xxx)
Permanent

Activities	Number of Items Weekly, Monthly, Etc.	Hours per Item	Total Hours
Core program performance indicators reporting and monitoring	9	10	90
Data cleaning and monitoring	200	2	400
Construct and coordinate data tables on Medi-Cal reproductive health services to support program service delivery and integrity	60	7	420
Utilize deductive and inductive processes to monitor cost and utilization trends of family planning services	10	20	200
Respond to both internal and external data requests/disclosures	20	8	160
Perform selected fiscal estimation analyses	1	10	10
Plan, develop, and interpret moderate analyses of policy and program-related data for program evaluation and research	25	20	500
Standardization and documentation of Unit's data analysis procedures	2	10	20
Total hours worked			1,800
1,800 hours = 1 Position			
Actual number of Positions requested			1.0

WORKLOAD STANDARDS
Division: Office of Family Planning
1.0 Staff Programmer Analyst (805-680-1581-xxx)
Permanent

Activities	Number of Items Weekly, Monthly, Etc.	Hours per Item	Total Hours
Generate Minimum Data Elements	2	40	80
Claims data import and processing	260	1	260
Technical report writing	4	15	60
Data import monitoring and troubleshooting	200	2	400
Conduct information technology systems study, design, and programming; write complex programs and develop detailed program specifications	200	4	800
Create and export databases/tables	25	8	200
Total hours worked			1,800
1,800 hours = 1 Position			
Actual number of Positions requested			1.0

WORKLOAD STANDARDS
Division: Office of Family Planning
1.0 Research Analyst II (805-680-5731-xxx)
Permanent

Activities	Number of Items Weekly, Monthly, Etc.	Hours per Item	Total Hours
Prepare various routine and ad-hoc reports, scientific publications, tables/graphs, data set documentation, data dictionaries, and annual reports of research findings and quality improvement measures	25	8	200
Create and export databases/tables; claims data import and processing	260	1	260
Conduct record linkages	4	15	60
Conduct data collection, data processing, data system linkages, data archiving, statistical sampling and analysis	200	4	800
Conduct descriptive and inferential statistical analyses to evaluate Medi-Cal reproductive health services and other relevant metrics	200	2	400
Serve as a lead to other lower level research analyst and/or projects; convert documents for posting	2	40	80
Total hours worked			1,800
1,800 hours = 1 Position			
Actual number of Positions requested			1.0

WORKLOAD STANDARDS

Division: Office of Family Planning

1.0 Research Analyst I (Demography) (805-680-5807-xxx)
Permanent

Activities	Number of Items Weekly, Monthly, Etc.	Hours per Item	Total Hours
Generate Minimum Data Elements	2	40	80
Claims data import and processing	260	1	260
Conduct record linkages	4	15	60
Data import monitoring and troubleshooting	200	2	400
Data cleaning and monitoring	200	4	800
Conduct demographic research, trend analysis, and assess demographic patterns; serve as Demography subject matter expert	25	8	200
Total hours worked			1,800
1,800 hours = 1 Position			
Actual number of Positions requested			1.0

WORKLOAD STANDARDS

Division: Office of Family Planning

1.0 Research Analyst I (Geographic Information Systems) (805-680-7416-xxx)
Permanent

Activities	Number of Items Weekly, Monthly, Etc.	Hours per Item	Total Hours
Generate Minimum Data Elements	2	40	80
Claims data import and processing	260	1	260
Conduct record linkages	4	15	60
Data import monitoring and troubleshooting	200	2	400
Data cleaning and monitoring	200	4	800
Perform spatial analyses, use map overlays and proximity analysis; serve as GIS subject matter expert	25	8	200
Total hours worked			1,800
1,800 hours = 1 Position			
Actual number of Positions requested			1.0