Mission

The County of El Dorado Health Services Department – Mental Health Division (MHD) strives to alleviate the suffering of mental illness by providing recovery-oriented, client-centered, culturally competent treatment services in collaboration with clients, families, and community partners. The Division seeks to eliminate disparities in service access and to reduce the stigma associated with mental illness while offering the highest quality behavioral healthcare to improve the community's health and safety, to strengthen individuals' resilience, and to promote restoration of healthy families.

Program Summaries

Traditional Programs	Total Appropriations: \$9,788,913
Positions: 48.41 FTE	Total Revenues: \$9,788,913
Extra Help: \$364,774	General Fund Contributions: \$16,510

The Mental Health Division's traditional programs include mandated and/or core programs that existed prior to the passage of the Mental Health Services Act (MHSA) in November 2004. The County General Fund contributions represent a required General Fund cash match to support mandated services. The majority of the services provided are Medi-Cal eligible services provided to predominantly Medi-Cal eligible clients. Therefore, much revenue is received from Medi-Cal and Early & Periodic Screening, Diagnosis and Treatment (EPSDT), nearly \$5.3M.

Primary traditional programs include:

- Outpatient Mental Health Services for Children provides a variety of therapeutic interventions for severely emotionally disturbed children, including assessments, treatment at the County's juvenile detention facilities, and consultation with schools, other community partners, and families. Mental Health services required to enable a child to benefit from a free and appropriate public education have historically been mandated by AB 3632, Government Code Chapter 26.5. Although the Governor declared the mandate to be suspended in October 2010, the Mental Health Division's FY 2011-12 budget assumes like services will be required per a contract with the Special Education Local Plan Areas (SELPAs), with funding presently anticipated to be provided to the Division by the State (MHSA funding diverted for this specific purpose per AB 100) and the SELPAs. Other services to seriously emotionally disturbed children are mandated under provisions of the State and Federal (EPSDT) program.
- Psychiatric Health Facility (PHF) located in Placerville, this PHF operates as a licensed, ten-bed, 24-hour, adult residential treatment facility providing inpatient services for persons requiring intensive psychiatric care, many of whom are involuntarily hospitalized. Although the County of El Dorado's residents receive first priority for required admissions, the Division contracts with several other counties to provide their residents with inpatient care on an as needed, as available, basis.
- Institutional and Residential Care involves appropriate placement and care of seriously mentally ill adults and seriously emotionally disturbed children when required based on the level of severity of their illness/disturbance.

- Outpatient Mental Health Services for Adults provides initial mental health assessments for new clients, as well as mental health services for a limited number of severely mentally ill adults who are not enrolled in our MHSA Wellness and Recovery programs.
- Psychiatric Emergency Services (PES) ensures 24/7/365 on-call services provided predominantly at hospitals on both slopes of the County to respond to psychiatric crises, provide referrals for follow-up services and, when necessary, detain and admit individuals to a psychiatric hospital.
- Utilization Review/Quality Improvement ensures timely and appropriate access to services and compliance with Federal and State regulations, as well as quality improvement efforts, staff development programs, and clinical program evaluation.

Extra help staff and overtime is in support of traditional programs primarily to ensure mandatory levels of services at the PHF, as well as to ensure availability of after-hours and on-call psychiatric emergency services. Extra help staff is sometimes used as a more cost effective way to provide other intermittent, mental health services, often when after-hours or weekend work is necessary.

<u>MHSA Programs</u> Positions: 53.02 FTE Extra Help: \$424,674

Total Appropriations: \$11,093,727 Total Revenues: \$11,093,727 General Fund Contributions: \$0

In November 2004, California voters passed Proposition 63, now known as the Mental Health Services Act (MHSA). MHSA is funded by a 1% tax on California residents with annual income greater than \$1M. The Division's MHSA programs are designed to reduce disparity in service access and promote mental health wellness and recovery by providing effective mental health interventions and critical supportive services to seriously mentally ill individuals, often those client populations previously underserved or un-served. MHSA programs are designed to engage clients, and sometimes other supportive individuals, in playing a significant role in formulating client recovery plans. Community participation is also a key element of creating and monitoring our MHSA programs. MHSA funds cannot be used to supplant other funds, specifically realignment, for programs that were in existence in 2004 when the Act was passed; however, MHSA funds can be used for expansion of traditional programs beyond the 2004 base service level.

MHSA is comprised of the following five components:

- 1) Community Services & Supports (CSS)
- 2) Workforce Education and Training (WET)
- 3) Prevention & Early Intervention (PEI)
- 4) Innovation
- 5) Capital Facilities and Technology (CFT)

MHD has had approved plans for CCS, WET, and PEI. Plans for the Innovation and Capital Facilities and Technology were reviewed/approved by the Board of Supervisors in May 2011. (Recent legislation, AB 100, transferred the responsibility for approving future MHSA plans to the County Board of Supervisors). Funding for each component is provided through county allocations. The funding for each

component must be expended within a certain period of time or the funding reverts back to the State for redistribution. The CSS, PEI and Innovation components have a three-year reversion policy; the CFT and WET components have a ten-year reversion policy.

Primary MHSA programs include the following:

1) Community Services & Supports (CSS)

Adult Wellness and Recovery Services

Integrates a variety of available services and supports for seriously mentally ill adults, based on the type and level of service required for each individual. Services range from outreach and engagement (to reach homeless individuals and other high-risk populations), to diversified wellness and recovery strategies (including life skills training, groups, medication management, etc.), to full service partnerships (client-driven, recovery-oriented service plans offering a range of services and supports). Full service partnership clients may be eligible for limited transitional housing beds and/or housing subsidies. The Wellness Center also provides supportive services, such as linkage to primary healthcare and peer support services. Some adults served may be Behavioral Health Court clients.

Crisis Residential Treatment (CRT) Facility

Operates as a licensed, six-bed, 24-hour, adult residential treatment facility providing brief (normally less than 30 days) crisis stabilization or resolution services on a voluntary basis. Services may include assessment, medication stabilization, individual, family, and group counseling, life skills training, and community integration activities, while under 24/7 clinical supervision.

Youth and Family Strengthening

Provides wraparound services for youth at risk for out-of-home placement plus a variety of programs and services employing evidence-based practices, such as Incredible Years, Aggression Replacement Treatment, and Trauma-Focused Cognitive Behavioral Therapy. High-risk youth about to be released from the County's juvenile detention facilities (and their families) may also be offered mental health, addiction, and other specialized transition services to reduce recidivism and promote family reunification.

Housing Program

The housing program offers funds for the development of permanent supportive housing and services for persons with serious mental illness who are homeless or at risk of homelessness and eligible to participate in the MHSA full service program. The housing program is jointly administered by the California Department of Mental Health (DMH) and the California Housing Finance Agency (CalHFA). Housing development funds allocated to the County have been assigned to CalHFA who is now responsible to review and oversee housing developments.

2) Workforce Education and Training (WET)

Supports activities intended to remedy the shortage of qualified individuals to provide mental health services, as well as activities designed to assist in the transformation of current service delivery.

3) Prevention and Early Intervention (PEI)

Promotes services aimed at preventing mental illness from becoming severe and debilitating. PEI programs also address health disparities, including culturally-specific outreach and engagement services, through contract providers, to the Latino and Native American populations. Our current health disparities program also addresses improved linkage between behavioral health, primary care, and natural community supports. Funding for training and technical assistance is also available locally on a limited basis. Statewide PEI programs, such as a statewide suicide hotline, are being addressed through the County's membership in CaIMHSA – a multi-county Joint Powers Authority.

4) Innovation

Consists of program(s) that test a new or adapted mental health practice or approach for the purpose of learning new practices supporting the delivery of mental health services and supports. The MHD Innovation Plan was approved by the Board of Supervisors in May 2011. The plan addresses closing mental health service gaps through community capacity building.

5) Capital Facilities and Technology

Supports capital facilities and/or technology projects. MHD has developed its initial plan, within which it intends to address the following: development of an integrated information system infrastructure which includes the establishment of an Electronic Health Record (EHR) system, electronic clinical assessment and outcome measurement tools for children and adults, an electronic care pathways system to facilitate linkage between behavioral health and primary health care providers, improvement of telepsychiatry and videoconferencing capabilities to reach and serve underserved communities, related training and administrative/technical support, as well as updated technological hardware equipment and software. The plan was reviewed by the Board of Supervisors in May 2011 and the Division was authorized to request its funding allocation from the State for this plan.

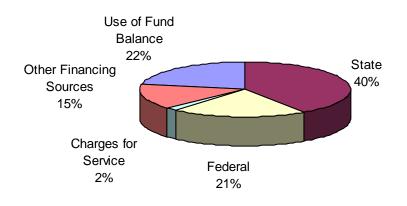
Extra help staff and overtime is in support of MHSA programs primarily to ensure mandatory levels of services at the Crisis Residential Treatment (CRT) Facility. Extra help staff is sometimes used to provide other intermittent, mental health services, often when after-hours or weekend work is necessary.

Financial Charts

Source of Funds

Revenue from State Intergovernmental (\$8,436,585) comprised of the following Public Assistance Programs sources:

- Mental Health Services Act (MHSA) (\$5,441,180)
- Early and Periodic Screening, Diagnosis and Treatment (EPSDT) (\$1,552,543)
- State Managed Care (\$560,000)
- AB 3632 from State MHSA funds (\$200,000)



• FY 08-09 Cost Report Settlement Due from the State (\$682,862)

Federal Intergovernmental (\$4,344,362) comprised of the following Public Assistance Programs sources:

- Medi-Cal (\$3,470,557)
- Medi-Cal Administration (\$520,582)
- Utilization Review (\$194,000)
- Healthy Families (\$168,352)
- Substance Abuse and Mental Health Services Administration (SAMHSA) (\$135,802)
- Individuals with Disabilities Education Act (IDEA) (\$78,388)
- Projects for Assistance in Transition from Homelessness (PATH) fund (\$36,651)
- Medi-Cal/Medicare reduction (-\$259,971)

Effective in FY 09-10, the Centers for Medicare and Medicaid Services (CMS) began enforcing the requirement that Medicare be the primary payer and billed prior to Medi-Cal for services provided to dual eligible beneficiaries. The MHD is currently preparing an application to become a Medi-Care provider. However if the Division is not approved, the denial letter will enable the Division to continue billing Medi-Cal for the dual Medicare/Medi-Cal eligible beneficiaries' services. Until a determination is made, the Division cannot bill Medi-Cal for these services; however, as most Medicare/Medi-cal clients are enrolled in MHSA programs, the costs of providing such services will be largely funded with MHSA revenue (the realignment impact is no more than approximately \$23K).

The Federal Stimulus Package's enhanced Medi-Cal Federal Financial Participation rate of 61.59% has gradually decreased and will sunset effective July 1, 2011. Therefore,

effective July 1st the Medi-Cal rate reverts to the prior rate of 50% which is reflected in this Recommended Budget.

Charges for Services (\$403,204) comprised of:

- Mental Health Services (\$310,054): Includes revenues from the Psychiatric Health Facility (PHF) (\$224,900) and Insurance and Private Payers (\$85,154).
- Interfund Revenue (\$50,000): Transfer from the Probation Department in support of mental health services provided at the Juvenile Hall and Juvenile Treatment Center.
- Supplemental Security Insurance (SSI) payments for client placements at Institutions for Mental Disease (\$36,000).
- Other Charges for Services (\$7,150): Includes PHF transportation (\$3,000), Black Oak Mine Union School District (\$4,000) and copy fees (\$150).

Other Financing Sources (\$3,147,254) comprised of:

- Realignment sales tax (\$2,177,909)
- Realignment Vehicle License Fee (VLF) (\$871,301)
- VLF Collections (\$66,134)
- General Fund State Local Program Realignment (SLPR) match (\$16,510)
- Interest on fund balance, mostly due to the MHSA prudent reserve (\$14,000)
- Realignment fund interest (\$1,400)

Fund Balance (\$4,551,235) comprised of:

- Estimated FYE fund balance (\$4,076,235) in the Traditional Program sub fund (\$462,835) and MHSA sub fund (\$3,613,400).
- Use of MHSA prudent reserve funds (\$475,000) for continued MHSA Community Services and Supports (CSS). The Division anticipates that the CSS allocation for FY 2012-13 and subsequent fiscal years will increase over the FY 2011-12 allocation.

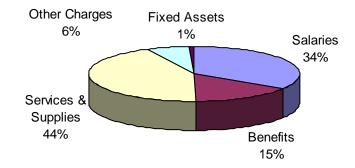
Use of Funds

Salaries & Benefits (\$10,369,392) comprised of:

- Regular staff \$9,262,822
- Extra help \$789,449
- Overtime \$154,600
- Other compensation \$117,121
- Stand-by pay \$45,400

Services & Supplies (\$9,023,002) comprised of:

• Payments to contract providers for services and supports to the MHD (\$4,309,256)



- Special department expenses (\$2,882,154) including the following:
 - Expenditures in FY 11-12 for the MHSA programs that are not yet fully identified (\$1,559,592); such expenditures are anticipated in Innovation (\$683,041), WET (\$382,083), IT (\$300,000), PEI (\$180,628), and CSS (\$13,840).
 - Cost report settlements due to the State for FY 07-08, FY 09-10 and FY 10-11 (\$1,009,039). This is a preliminary estimate. The actual settlement amounts will be updated in the addenda budget submission.
 - Expenditures in FY 11-12 for the traditional programs that are not yet fully identified (\$312,559).
- Facility rents, utilities, janitorial and refuse disposal costs (\$621,852)
- Special project expenses, yet to be fully defined within the MHSA PEI Component (\$300,000).
- Software licensing (\$238,407)
- Medical/household/food expenses primarily for the Psychiatric Health and Crisis Residential Treatment Facilities (\$204,051)
- General office support and phone costs (\$124,192)
- Liability insurance (\$96,786)
- Computers (\$73,854)
- Vehicle and fuel costs (\$58,265)
- Educational materials and staff development mainly MHSA funded (\$47,960)
- Travel and employee mileage (\$38,800)
- Memberships (\$27,425)

Other Charges (\$1,335,252) comprised of:

- Includes Support and Care of Persons (\$686,200) comprised of payments to contract providers for institutional and residential housing and supports (\$652,775) and ancillary services and expenses (\$33,425).
- Interfund Transfers (\$649,052):
 - Cost applied charges from other departments (\$286,380) for telephone costs, mail service, stores support, central duplicating; IT charges for mainframe, and network support.
 - A-87 costs (\$271,322)
 - Cost applied charges from the IT Department for requested services and supervision support (\$45,750)
 - Cost applied charges from the Chief Administrative Office for the Internal Auditor's services (\$45,600)

Fixed Assets (\$154,994) comprised of:

- Conference Room and telepsychiatry polycoms (video equipment, \$123,700)
- Security system replacement at multiple office locations (\$21,200)
- Blood pressure machines (\$5,000)
- Professional recumbent exercise bicycle for use in the PHF (\$2,500)
- Batch scanner necessary for processing Medi-Cal bills in-house (currently they are outsourced, \$2,594)

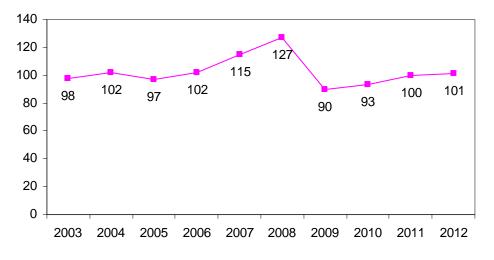
Intrafund Transfers and Abatements (offsetting to \$0):

• Intrafund transfers (\$12,465,413) that distributes the fully burdened labor expenditures to the traditional and MHSA programs.

• Intrafund abatements (-\$12,465,413) that transfers out the fully burdened labor expenditures from the employee's home resource center (Index Code).

Staffing Trend

Staffing for the mental health programs over the past ten years has varied due to program requirements and fundina changes. Staffing levels were at 98 FTEs in FY 2002-03 and increased to a high of 127 FTEs in FY 2007-08, primarily due to new MHSA revenues and programs. During the



next fiscal year, staffing was significantly reduced due to funding constraints in the traditional mental health program areas. Following the significant downsizing in FY 08-09, staffing was stable and has gradually increased as MHSA programs were more fully implemented and financial systems were developed to support accurate cost accounting and billing. The recommended staff allocation for FY 2011-12 reflects an increase to 101.43 FTEs due to additional MHSA services and funding that support additional staff. The increase in staffing in the Mental Health Division reflects reassignment of staff from the Public Health Division (which has correspondingly experienced declines in program services and funding). A total of 88.73 FTEs are located on the West Slope and 12.7 FTEs are located in South Lake Tahoe; 48.41 FTEs are in Traditional Mental Health programs and 53.02 FTEs are in MHSA programs.

Chief Administrative Office Comments

The total Recommended Budget for the Mental Health Division is \$20,882,640, an increase of \$1,253,747 or 6% when compared to the FY 2010-11 adopted budget. There is a General Fund contribution of \$16,510 for County match requirements (no change from prior year).

Traditional Mental Health Programs

The Recommended Budget for Traditional Mental Health programs is \$9,788,913 and represents an overall increase of \$93K or 1% when compared to the FY 2010-11 adopted budget. Traditional Mental Health programs are primarily funded by federal and state revenues (\$5.8M), realignment revenues (\$3.1M) and charges for services to other counties and private payers (\$398K). The Division is projecting \$463K in FY 2010-11 fund balance at year end as a result of prior year Medi-Cal billings. These funds will be used in FY 2011-12 to fund one-time expenditures and prior year cost settlements.

The Division has continued to focus on mandated and contractually obligated services, set service priorities to fit within available revenues, and transition services from a medical/institutional model to a wellness and recovery-oriented model in its MHSA programs. As a result, the Recommended Budget for Traditional Mental Health programs no longer includes transfers of realignment revenue or tobacco settlement funds from Public Health as in the prior two fiscal years. In FY 2011-12 the budget for Traditional programs is nearly structurally balanced; however, there is approximately \$340K in fund balance that is needed to fill the funding gap in institutional/residential care and the cost of operating the County's PHF. The Division is reviewing options to address this structural budget deficit and achieve a balanced operational budget for Traditional Mental Health programs.

Services to Juvenile Hall and the Juvenile Treatment Center - Funding for mental health services provided to the Juvenile Hall in Placerville and the Juvenile Treatment Center in South Lake Tahoe is changing in FY 2011-12. The Juvenile Hall is currently assigned a 0.75 FTE Mental Health Clinician to serve minors in the facility. The JTC is currently allocated a 0.4 FTE Mental Health Clinician and has additional outside contract services for drug and alcohol counseling. The Division also provides limited mental health psychiatric services to minors in both facilities. In previous years, mental health services were funded from a combination of state funds, grant funds, General Fund support passed through the Probation Department and mental health realignment funds. General funds were eliminated in FY 2008-09, realignment revenues have declined significantly and some prior state grant funds will not be available in FY 2011-12. The Probation Department has included \$50,000 in their FY 2011-12 budget to partially fund mental health services. However, a funding gap of approximately \$141K still remains and represents a portion of the structural shortfall in Mental Health noted above. Additionally, the Probation Department is recommending that mental health staffing at the Juvenile Hall be increased to a 1.0 FTE Clinician in order to better meet the needs of the minors for mental health services, treatment facility transfers, psychotropic medications, and suicide prevention. A similar situation exists at the JTC in South Lake Tahoe. The JTC facility is also in need of supplementary mental health and treatment services for juveniles. Probation and Mental Health are developing an MOU that will provide services within available funding sources to include supplemental services provided by contracting with a non-profit provider. Should additional fund balance be available from the General Fund, it is recommended that funding be appropriated in the Addenda process to enable Probation to receive additional services from Mental Health.

Ancillary Medical Costs – A potential issue for the Health Services Department in FY 2011-12 is the payment of ancillary mental health and medical services received by patients within Institutions for Mental Diseases (IMDs). In FY 2009-10 the California Department of Health Care Services (DHCS) and the DMH issued written documentation announcing a shift in financial responsibility for those ancillary services from the State to the counties. These ancillary services may include the cost of prescribed medications, off-site x-rays, lab, or hospital services, etc. The State is indicating its intent to bill the counties for any such services that may have been provided and billed to Medi-Cal. Counties do not yet have information relative to the amounts in question. Some counties have filed a petition to the State Office of Administrative Law requesting a determination that the DHCS and DMH communication be declared as invalid, underground regulations. The Division will work with County Counsel to monitor this situation and provide further information relative to legal and fiscal impacts as it becomes available.

New Legislation – AB100 was signed by the Governor in March 2011. The most significant change in this bill is that approximately \$860M of state-level MHSA funds are being redirected

for FY 2011-12 only to other programs (EPSDT, AB 3632 and mental health managed care) that were previously funded with State General Funds. The Division is estimating that EPSDT funding will remain at the current level of approximately \$1.5M; managed care funding will increase by approximately \$190K for a total of \$560K; and AB3632 will be funded in the amount of approximately \$200K (replacing the prior SB90 claim process). The Recommended Budget includes these amounts; however, once the Division receives notification from the state of the actual amounts, any necessary adjustments will be made during the Addenda process.

Mental Health Services Act (MHSA) Programs

The Recommended Budget for MHSA Programs is \$11,093,727 and represents an overall increase of \$1,160,581 or 11.7% when compared to the FY 2010-11 adopted budget. MHSA programs are funded primarily by MHSA funds (\$9.1M) but also include federal and state revenues (\$1.6M) for MHSA clients who are eligible under Medi-Cal and EPSDT programs. The budget includes the use of \$475K from the MHSA Prudent Reserve to fund programs in the Community Services and Supports (CSS) programs in FY 2011-12. This will leave a balance of approximately \$1.5M in the MHSA Prudent Reserve.

The overall increase in MHSA Programs is primarily associated with estimated carryover fund balance from FY 2010-11 of approximately \$1.8M (\$970K for PEI, \$475K planned use of prudent reserve funds for CSS programs, \$327K for WET programs, \$56K for PEI Technical Assistance & Training, and \$6K for Innovation Planning programs). This increase is offset by a decrease of approximately \$348K in MHSA allocations for FY 2011-12 and roughly \$337K in decreased Medi-Cal revenue primarily related to a change in the Federal share of reimbursement of Medi-Cal services from 61.59% to 50%.

MHSA Programs are also affected by new legislation (AB100) which eliminated the MHSA plan review and approval responsibilities from the State Department of Mental Health and the Mental Health Oversight and Accountability Commission. MHSA plan approval will now be at the county Board of Supervisors' discretion.

Fixed Assets:

The Division has requested a number of fixed asset items totaling \$154,994. The items are detailed in the Uses of Funds section above. The majority of fixed asset funding (\$123,700) is for video conferencing equipment for telemedicine programs included in and funded by the MHSA Capital Facilities and Technologies (CFT) component.

Recommended Staffing Changes:

The Health Services Department is requesting a number of position additions/deletions that better align personnel allocations with the current funding, administrative and programmatic requirements of the Department. The changes to personnel allocations result in no net change to the overall total FTEs for the Department but shift 1.43 FTEs to funded programs within the Mental Health Division. Position changes are detailed on the Personnel Allocation table.

FUND TYPE:11SPECIAL REVENUE FUNDDEPARTMENT:41MENTAL HEALTH

	MID-YEAR PROJECTION	CURRENT YR APPROVED BUDGET	DEPARTMENT REQUEST	CAO RECOMMENDED BUDGET	DIFFERENCE
TYPE: R REVENUE					
SUBOBJ SUBOBJ TITLE					
0400 REV: INTEREST	15,789	7,975	14,000	14,000	6,025
CLASS: 04 REV: USE OF MONEY & PROPERTY	15,789	7,975	14,000	14,000	6,025
0660 ST: MENTAL HEALTH - MANAGED CARE	370,438	370,438	560,000	560,000	189,562
0661 ST: MH SALES TAX REALIGNMENT	0	40,000	0	0	-40,000
0662 ST: MENTAL HEALTH - MEDI CAL EPSDT	1,102,164	1,675,330	2,235,405	2,235,405	560,075
0663 ST: MENTAL HEALTH PROPOSITION 63	6,111,203	5,788,826	5,441,180	5,441,180	-347,646
0664 ST: MENTAL HEALTH - AB3632	0	0	200,000	200,000	200,000
CLASS: 05 REV: STATE INTERGOVERNMENTAL	7,583,805	7,874,594	8,436,585	8,436,585	561,991
1100 FED: OTHER	248,564	248,564	250,841	250,841	2,277
1107 FED: MEDI CAL	4,990,204	5,254,490	3,925,169	3,925,169	-1,329,321
1127 FED: HEALTHY FAMILIES	169,318	139,729	168,352	168,352	28,623
CLASS: 10 REV: FEDERAL INTERGOVERNMENTAL	5,408,086	5,642,783	4,344,362	4,344,362	-1,298,421
1640 MENTAL HEALTH SERVICES: PRIVATE INS	57,054	377,080	64,000	64,000	-313,080
1641 MENTAL HEALTH SERVICES: PRIVATE PAYORS	5,446	2,733	5,000	5,000	2,267
1642 MENTAL HEALTH SERVICES: OTHER COUNTY	218,257	-8,453	224,900	224,900	233,353
1643 MENTAL HEALTH SERVICES: CO COLLECTIONS	5 14,236	15,069	16,154	16,154	1,085
1644 MENTAL HEALTH SERVICES: PUBLIC	28,340	70,000	36,000	36,000	-34,000
1740 CHARGES FOR SERVICES	257,422	10,000	7,000	7,000	-3,000
1742 MISC: COPY FEES	150	52	150	150	98
1819 INTERFND REV: MENTAL HEALTH SERVICES	29,414	29,414	50,000	50,000	20,586
CLASS: 13 REV: CHARGE FOR SERVICES	610,319	495,895	403,204	403,204	-92,691
1942 MISC: REIMBURSEMENT	150	976	0	0	-976
CLASS: 19 REV: MISCELLANEOUS	150	976	0	0	-976
2020 OPERATING TRANSFERS IN	335,698	351,084	17,910	17,910	-333,174
2021 OPERATING TRANSFERS IN: VEHICLE LICENSE	938,574	964,383	937,435	937,435	-26,948
2027 OPERATING TRSNF IN: SALES TAX	2,229,990	2,135,205	2,177,909	2,177,909	42,704
CLASS: 20 REV: OTHER FINANCING SOURCES	3,504,262	3,450,672	3,133,254	3,133,254	-317,418
0001 FUND BALANCE	0	2,155,997	4,076,235	4,076,235	1,920,238
0002 FROM RESERVES	0	0	475,000	475,000	475,000
CLASS: 22 FUND BALANCE	0	2,155,997	4,551,235	4,551,235	2,395,238
TYPE: R SUBTOTAL	17,122,411	19,628,892	20,882,640	20,882,640	1,253,748

FUND TYPE:11SPECIAL REVENUE FUNDDEPARTMENT:41MENTAL HEALTH

		MID-YEAR PROJECTION	CURRENT YR APPROVED BUDGET	DEPARTMENT REQUEST	CAO RECOMMENDED BUDGET	DIFFERENCE
	EXPENDITURE					
	J SUBOBJ TITLE					
3000	PERMANENT EMPLOYEES / ELECTED	5,025,420	5,655,505	5,991,853	5,991,853	336,348
3001	TEMPORARY EMPLOYEES	568,274	521,921	789,449	789,449	267,528
3002	OVERTIME	157,096	114,659	154,600	154,600	39,941
3003	STANDBY PAY	44,032	89,649	45,400	45,400	-44,249
3004	OTHER COMPENSATION	149,684	73,627	117,121	117,121	43,494
3005	TAHOE DIFFERENTIAL	26,131	28,800	32,400	32,400	3,600
3006	BILINGUAL PAY	6,560	9,360	9,360	9,360	0
3020	RETIREMENT EMPLOYER SHARE	1,015,175	1,094,447	1,214,115	1,214,115	119,668
3022	MEDI CARE EMPLOYER SHARE	80,731	79,441	86,996	86,996	7,555
3040	HEALTH INSURANCE EMPLOYER SHARE	1,117,994	1,258,161	1,581,179	1,581,179	323,018
3041	UNEMPLOYMENT INSURANCE EMPLOYER	77,237	77,237	81,060	81,060	3,823
3042	LONG TERM DISABILITY EMPLOYER SHARE	21,122	21,122	21,600	21,600	478
3043	DEFERRED COMPENSATION EMPLOYER	15,580	12,834	16,305	16,305	3,471
3046	RETIREE HEALTH: DEFINED CONTRIBUTIONS	93,387	93,387	93,389	93,389	2
3060	WORKERS' COMPENSATION EMPLOYER	122,704	122,704	68,492	68,492	-54,212
3080	FLEXIBLE BENEFITS	6,854	46,500	66,073	66,073	19,573
CLASS:	30 SALARY & EMPLOYEE BENEFITS	8,527,981	9,299,355	10,369,392	10,369,392	1,070,037
4040	TELEPHONE COMPANY VENDOR PAYMENTS	2,453	2,453	9,261	9,261	6,808
4041	COUNTY PASS THRU TELEPHONE CHARGES	5,803	4,647	5,600	5,600	953
4060	FOOD AND FOOD PRODUCTS	49,005	49,005	61,850	61,850	12,845
4080	HOUSEHOLD EXPENSE	15,110	15,110	17,051	17,051	1,941
4083	LAUNDRY	7,000	7,000	7,500	7,500	500
4085	REFUSE DISPOSAL	12,152	12,152	10,483	10,483	-1,669
4086	JANITORIAL / CUSTODIAL SERVICES	64,151	65,300	60,135	60,135	-5,165
4100	INSURANCE: PREMIUM	76,524	76,524	96,786	96,786	20,262
4140	MAINT: EQUIPMENT	981	981	500	500	-481
4143	MAINT: SERVICE CONTRACT	0	0	8,043	8,043	8,043
4144	MAINT: COMPUTER	0	1,371	8,308	8,308	6,937
4160	VEH MAINT: SERVICE CONTRACT	1,877	1,877	0	0	-1,877
4180	MAINT: BUILDING & IMPROVEMENTS	1,693	1,693	2,825	2,825	1,132
4200	MEDICAL, DENTAL & LABORATORY SUPPLIES	24,934	13,290	50,100	50,100	36,810
4220	MEMBERSHIPS	12,171	450	20,625	20,625	20,175
4221	MEMBERSHIPS: LEGISLATIVE ADVOCACY	6,014	7,000	6,800	6,800	-200
4260	OFFICE EXPENSE	25,438	19,796	39,762	39,762	19,966
4261	POSTAGE	2,393	2,393	2,000	2,000	-393
4263	SUBSCRIPTION / NEWSPAPER / JOURNALS	5,000	5,000	600	600	-4,400
4264	BOOKS / MANUALS	4,169	2,102	10,500	10,500	8,398
4266	PRINTING / DUPLICATING SERVICES	534	292	700	700	408
4300	PROFESSIONAL & SPECIALIZED SERVICES	1,344,957	624,604	1,298,081	1,298,081	673,477
4318	INTERPRETER	374	374	400	400	26
4323	PSYCHIATRIC MEDICAL SERVICES	2,446,382	3,122,374	3,010,775	3,010,775	-111,599

FUND TYPE: 11 SPECIAL REVENUE FUND

DEPA	RIMENI: 41 MENIAL HEALTH					
			CURRENT YR		CAO	
		MID-YEAR	APPROVED	DEPARTMENT	RECOMMENDED	
		PROJECTION	BUDGET	REQUEST	BUDGET	DIFFERENCE
4324	MEDICAL, DENTAL, LAB & AMBULANCE SRV	32,888	14,817	67,550	67,550	52,733
4337	OTHER GOVERNMENTAL AGENCIES	0	25,000	0	0	-25,000
4400	PUBLICATION & LEGAL NOTICES	2,430	2,430	2,500	2,500	70
4420	RENT & LEASE: EQUIPMENT	26,755	26,755	27,176	27,176	421
4440	RENT & LEASE: BUILDING & IMPROVEMENTS	432,450	449,245	430,682	430,682	-18,563
4460	EQUIP: SMALL TOOLS & INSTRUMENTS	161	161	150	150	-11
4461	EQUIP: MINOR	6,923	6,923	27,900	27,900	20,977
4462	EQUIP: COMPUTER	49,692	49,692	65,546	65,546	15,854
4500	SPECIAL DEPT EXPENSE	1,091,674	2,814,792	2,882,154	2,882,154	67,362
4501	SPECIAL PROJECTS	0	0	300,000	300,000	300,000
4502	EDUCATIONAL MATERIALS	22,188	22,188	10,300	10,300	-11,888
4503	STAFF DEVELOPMENT	11,860	11,860	25,560	25,560	13,700
4529	SOFTWARE LICENSE	187,060	215,448	238,407	238,407	22,959
4540	STAFF DEVELOPMENT (NOT 1099)	3,620	3,620	1,600	1,600	-2,020
4600	TRANSPORTATION & TRAVEL	6,244	6,244	11,850	11,850	5,606
4602	MILEAGE: EMPLOYEE PRIVATE AUTO	39,317	39,317	26,950	26,950	-12,367
4605	RENT & LEASE: VEHICLE	38,000	38,000	38,265	38,265	265
4606	FUEL PURCHASES	25,671	25,671	20,000	20,000	-5,671
4620	UTILITIES	94,296	90,613	117,727	117,727	27,114
CLASS:	40 SERVICE & SUPPLIES	6,180,344	7,878,564	9,023,002	9,023,002	1,144,438
5002	INSTITUTE MENTAL DISEASE MENTAL HEALTH	623,346	525,000	632.775	632,775	107,775
5003	MEDI CAL MANAGED CARE MENTAL	2,869	40,000	0	0	-40,000
5009	HOUSING	81,739	35.000	20.000	20.000	-15.000
5010	TRANSPORTATION SERVICES	0	600	0	0	-600
5011	TRANSPORTATION EXPENSES	180	10.200	10,125	10,125	-75
5012	ANCILLARY SERVICES	65,000	68,061	5.000	5,000	-63,061
5013	ANCILLARY EXPENSES	74,846	73,300	18,300	18,300	-55,000
5300	INTERFND: SERVICE BETWEEN FUND TYPES	534,010	491.656	346,872	346,872	-144,784
5301	INTERFND: TELEPHONE EQUIPMENT &	79,597	71,078	76,800	76,800	5.722
5304	INTERFND: MAIL SERVICE	4,183	4,183	4,123	4,123	-60
5305	INTERFND: STORES SUPPORT	9,205	9,205	8,189	8,189	-1,016
5306	INTERFND: CENTRAL DUPLICATING	5,000	788	5,500	5,500	4,712
5308	INTERFND: MAINFRAME SUPPORT	63,797	63.797	38,213	38,213	-25.584
5314	INTERFND: PC SUPPORT	5,000	5,000	3,700	3,700	-1,300
5316	INTERFND: IS PROGRAMMING SUPPORT	62,100	54,100	45,750	45,750	-8,350
5318	INTERFND: MAINTENANCE BLDG & IMPRV	22,000	22,000	22,000	22,000	0
5320	INTERFND: NETWORK SUPPORT	138,327	138,327	95,805	95,805	-42,522
5321	INTERFND: COLLECTIONS	1,959	1,959	2,100	2,100	141
CLASS:		1,773,158	1,614,254	1,335,252	1,335,252	-279,002
6020	FIXED ASSET: BUILDING & IMPROVEMENTS	0	0	21,200	21,200	21,200
6025	LEASEHOLD IMPROVEMENTS	122,735	122,735	0	0	-122,735
6040	FIXED ASSET: EQUIPMENT	0	0	131,200	131,200	131,200
6042	FIXED ASSET: COMPUTER SYSTEM EQUIP	0	0	2,594	2,594	2,594
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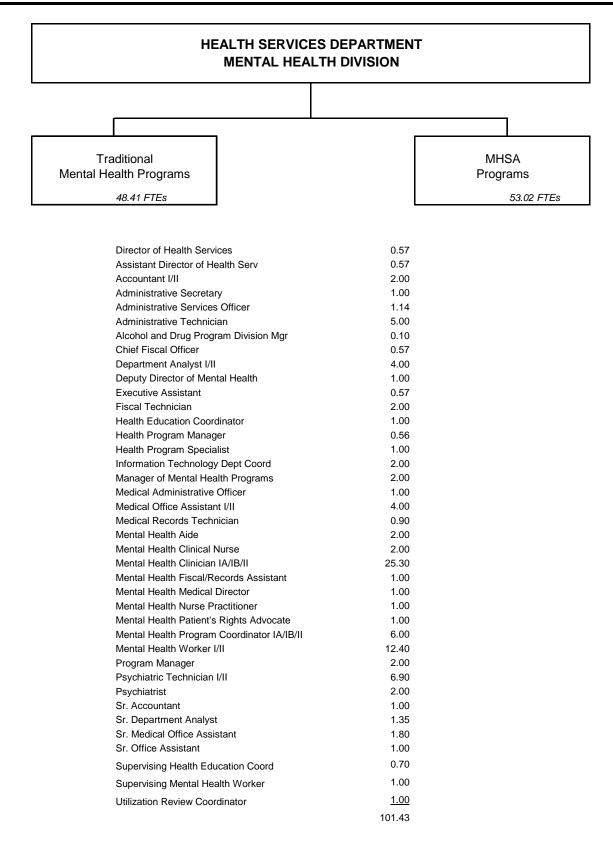
FUND TYPE:11SPECIAL REVENUE FUNDDEPARTMENT:41MENTAL HEALTH

CLASS: 60 FIXED ASSETS	MID-YEAR PROJECTION 122,735	CURRENT YR APPROVED BUDGET 122,735	DEPARTMENT REQUEST 154,994	CAO RECOMMENDED BUDGET 154,994	DIFFERENCE 32,259
7100 RESIDUAL EQUITY TRANSFERS OUT	73,109	73,109	0	0	-73,109
CLASS: 71 RESIDUAL EQUITY TRANSFERS	73,109	73,109	0	0	-73,109
7250 INTRAFND: NOT GEN FUND / SAME FUND	10,652,620	11,364,697	12,465,413	12,465,413	1,100,716
CLASS: 72 INTRAFUND TRANSFERS	10,652,620	11,364,697	12,465,413	12,465,413	1,100,716
7380 INTRFND ABATEMENTS: NOT GENERAL FUND	-10,652,622	-11,364,702	-12,465,413	-12,465,413	-1,100,711
CLASS: 73 INTRAFUND ABATEMENT	-10,652,622	-11,364,702	-12,465,413	-12,465,413	-1,100,711
7800 TO RESERVE	0	640,881	0	0	-640,881
CLASS: 78 RESERVES: BUDGETARY ONLY	0	640,881	0	0	-640,881
TYPE: E SUBTOTAL	16,677,325	19,628,893	20,882,640	20,882,640	1,253,747
FUND TYPE: 11 SUBTOTAL	-445,086	1	0	0	-1
DEPARTMENT: 41 SUBTOTAL	-445,086	1	0	0	-1

Personnel Allocations

2010-11 2011-12 2011-12					
Classification Title	Adjusted	Dept	CAO	Diff from	
	Allocation	Request	Recm'd	Adjusted	
Director of Health Services	0.53	0.57	0.57	0.04	
Accountant I/II	2.00	2.00	2.00	-	
Administrative Secretary	1.00	1.00	1.00	-	
Administrative Service Officer	1.41	1.14	1.14	(0.27)	
Administrative Technician	6.00	5.00	5.00	(1.00)	
Alcohol and Drug Program Division Mgr	0.10	0.10	0.10	-	
Assistant Director of Health Services	0.57	0.57	0.57		
Chief Fiscal Officer	0.53	0.57	0.57	0.04	
Department Analyst I/II	3.00	4.00	4.00	1.00	
Deputy Director of Mental Health	1.00	1.00	1.00	-	
Executive Assistant	0.53	0.57	0.57	0.04	
Fiscal Technician	2.00	2.00	2.00	-	
Health Education Coordinator	1.00	1.00	1.00	-	
Health Program Manager	0.53	0.56	0.56	0.03	
Health Program Specialist	1.00	1.00	1.00	-	
Information Technology Department Coordinator	2.00	2.00	2.00	-	
Manager of Mental Health Programs	1.00	2.00	2.00	1.00	
Medical Administrative Officer	1.00	1.00	1.00	-	
Medical Office Assistant I/II	4.80	4.00	4.00	(0.80)	
Medical Records Technician	0.90	0.90	0.90	-	
Mental Health Aide	1.00	2.00	2.00	1.00	
Mental Health Clinical Nurse	1.00	2.00	2.00	1.00	
Mental Health Clinician IA/IB/II	21.30	25.30	25.30	4.00	
Mental Health Fiscal/Records Assistant	1.00	1.00	1.00	-	
Mental Health Medical Director	1.00	1.00	1.00	-	
Mental Health Nurse Practitioner	1.00	1.00	1.00	-	
Mental Health Patient's Rights Advocate	1.00	1.00	1.00	-	
Mental Health Program Coordinator IA/IB/II	7.00	6.00	6.00	(1.00)	
Mental Health Worker I/II	14.40	12.40	12.40	(2.00)	
Program Assistant	1.00	-	-	(1.00)	
Program Manager	1.00	2.00	2.00	1.00	
Psychiatric Technician I/II	7.30	6.90	6.90	(0.40)	
Psychiatrist	2.00	2.00	2.00	-	
Public Health Microbiologist	1.00	-	-	(1.00)	
Public Health Nurse I/II	0.20	-	-	(0.20)	
Sr. Accountant	1.00	1.00	1.00	(0.20)	
Sr. Department Analyst	-	1.35	1.35	1.35	
Sr. Fiscal Assistant	2.60	-	-	(2.60)	
Sr. Medical Office Assistant	0.80	1.80	1.80	(2.00)	
Sr. Office Assistant	1.00	1.00	1.00	-	
Supervising Health Education Coordinator	0.50	0.70	0.70	0.20	
Supervising Mental Health Worker	1.00	1.00	1.00	0.20	
Utilization Review Coordinator	1.00	1.00	1.00	_	
Division Total	100.00	101.43	101.43	- 1.43	

Note: Total Recommended Health Services Department allocation is 184.10 FTE. Public Health Division positions are shown in the Public Health section of the Recommended Budget Book.



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	02/03	03/04	04/05	05/06	06/07
	Actual	Actual	Actual	Actual	Actual
Use of Money	32,417	34,405	68,249	79,997	115,641
State	7,548,883	8,040,704	4,373,110	4,912,804	6,409,030
Federal	101,260	169,936	316,223	310,381	239,923
Charges for Service	1,298,098	760,418	807,862	939,054	1,812,622
Misc.	179	23,984	4,072	1,784	132,650
Other Financing Sources	1,019,623	992,932	2,499,310	4,944,714	3,866,851
Use of Fund Balance	-	-	-	-	-
Total Revenue	10,000,460	10,022,379	8,068,826	11,188,734	12,576,717
Salaries	4,769,829	4,739,695	4,453,291	5,477,674	6,450,486
Benefits	1,194,000	1,702,307	2,016,356	2,382,494	2,482,367
Services & Supplies	2,044,572	1,924,751	2,033,221	2,478,491	3,740,102
Other Charges	856,170	784,368	797,712	1,245,954	1,678,721
Fixed Assets	19,825	11,390	65,437	21,615	39,389
Operating Transfers		-		21,010	25,426
Intrafund Transfers	(168,119)	(295,484)	(166,553)	(286,773)	(140,602)
Contingencies (MHSA)	(100,110)	(200, 101)	(100,000) -	(200,110)	(110,002)
Increase to Reserve (MHSA)	-	-	-		-
Total Appropriations	8,716,277	8,867,027	9,199,464	11,319,455	14,275,889
General Fund Contribution	356,112	117,781	28,608	429,519	23,256
FTE's	98	102	97	102	115
Fund Balance					
Mental Health	2,693,410	3,671,190	3,160,544	3,667,985	1,852,419
MHSA		-,- ,	-,,	-,,	113,975

Ten Year History

	07/08	08/09	09/10	10/11	11/12
	Actual	Actual	Actual	Projected	Budget
Use of Money	(64,414)	135,613	7,306	15,789	14,000
State	10,419,047	13,262,872	6,418,259	7,583,805	8,436,585
Federal	360,221	322,366	3,176,836	5,408,086	4,344,362
Charges for Service	730,213	1,211,844	527,266	610,319	403,204
Misc.	167,515	175,000	30,535	150	-
Other Financing Sources	5,088,438	3,924,507	3,238,531	3,504,262	3,133,254
Use of Fund Balance	-	620,003	-	-	4,551,235
Total Revenue	16,701,020	19,652,205	13,398,733	17,122,411	20,882,640
Salaries	7,454,500	7,280,623	5,963,998	5,977,197	7,140,183
Benefits	2,802,974	2,933,263	2,376,087	2,550,784	3,229,209
Services & Supplies	5,135,088	4,508,204	3,933,828	6,180,344	9,023,002
Other Charges	1,923,373	1,900,691	1,406,217	1,773,158	1,335,252
Fixed Assets	89,190	38,134	3,757	122,735	154,994
Operating Transfers	215,939	30,000	132,126	73,109	-
Intrafund Transfers	(113,248)	(149,697)	(797,237)	(2)	-
Contingencies (MHSA)	-	-	-	-	-
Increase to Reserve (MHSA)	-	-	-	-	-
Total Appropriations	17,507,816	16,541,218	13,018,776	16,677,325	20,882,640
General Fund Contribution	16,510	16,510	16,510	16,510	16,510
FTE's	127	90	93	100	101
Fund Balance					
Mental Health	(1,381,056)	(963,517)	(97,945)	462,835	312,559
MHSA	2,001,060	1,643,913	2,253,942	3,613,400	1,259,592

Ten Year History

10 Year Variance

	\$ Change	% Change
Use of Money	(18,417)	-57%
State	887,702	12%
Federal	4,243,102	4190%
Charges for Service	(894,894)	-69%
Misc.	(179)	-100%
Other Financing Sources	2,113,631	207%
Use of Fund Balance	4,551,235	N/A
Total Revenue	10,882,180	109%
Salaries	2,370,354	50%
Benefits	2,035,209	170%
Services & Supplies	6,978,430	341%
Other Charges	479,082	56%
Fixed Assets	135,169	682%
Intrafund Transfers	168,119	-100%
Total Appropriations	12,166,363	140%
General Fund Contribution	(339,602)	-95%
FTE's	3	3%

Notes

In FY 2002-03 Medi-Cal and EPSDT revenues were reclassified from Charges for Services to State revenues for Mental Health Services.

FY 2004-05 through FY 2007-08 use of Mental Health fund balance was required to meet expenditure needs.

FY 2006-07 was first year for significant MHSA revenues to be received (\$1.2M).

FY 2007-08 General Fund contribution shows as \$0. The year end transfer of \$3.3M was recorded as a loan, not a contribution.

For FY 2008-09 MH received a General Fund contribution of \$3M. The prior year transfer of \$3.3M is still recorded as a loan, not a contribution.