

# HEALTH AND HUMAN SERVICES AGENCY

## Health and Human Services Agency- Behavioral Health Division

### Mission

The County of El Dorado Health and Human Services Agency, Health Services Department, Behavioral Health Division 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. The Division also provides substance-use programs to address alcohol and other drug related issues affecting the community.

### Behavioral Health Financial Summary

	14/15 Actuals	15/16 Budget	16/17 Dept Requested	16/17 CAO Recommend	Change from Budget to Recommend	% Change
Fines, Forfeiture & Penalties	72,790	89,000	75,000	75,000	(14,000)	-16%
Use of Money	29,604	25,700	32,000	32,000	6,300	25%
State	7,035,053	6,430,622	6,430,622	6,430,622	-	0%
Federal	7,818,980	7,410,176	7,849,941	7,849,941	439,765	6%
Charges for Service	519,434	1,217,950	603,900	603,900	(614,050)	-50%
Misc.	46,803	158,400	158,400	158,400	-	0%
Other Financing Sources	8,570,934	9,253,017	8,854,356	8,854,356	(398,661)	-4%
Use of Fund Balance	-	12,739,109	10,212,899	10,212,899	(2,526,210)	-20%
<b>Total Revenue</b>	<b>24,093,598</b>	<b>37,323,974</b>	<b>34,217,118</b>	<b>34,217,118</b>	<b>(3,092,856)</b>	<b>-8%</b>
Salaries and Benefits	7,742,426	8,551,007	9,593,485	9,593,485	1,042,478	12%
Services & Supplies	3,506,605	8,444,309	7,832,798	7,832,798	(611,511)	-7%
Other Charges	10,717,153	12,866,931	13,147,375	13,147,375	280,444	2%
Fixed Assets	28,225	18,000	10,000	10,000	(8,000)	-44%
Operating Transfers	29,829	-	500,000	500,000	500,000	
Intrafund Transfers	5,094,012	5,643,405	5,708,874	5,708,874	65,469	1%
Intrafund Abatements	(5,123,841)	(5,643,405)	(5,708,874)	(5,708,874)	(65,469)	1%
Contingencies (MHSA)	-	7,443,727	3,133,460	3,133,460	(4,310,267)	-58%
<b>Total Appropriations</b>	<b>21,994,409</b>	<b>37,323,974</b>	<b>34,217,118</b>	<b>34,217,118</b>	<b>(3,106,856)</b>	<b>-8%</b>
<b>General Fund Contribution</b>	<b>16,510</b>	<b>16,510</b>	<b>16,510</b>	<b>16,510</b>	<b>-</b>	<b>0%</b>
<b>FTE's</b>	<b>87</b>	<b>87</b>	<b>93</b>	<b>93</b>	<b>6</b>	<b>7%</b>
<b>Fund Balance</b>						
Behavioral Health Traditional	1,503,574	-	-	-	-	
MHSA	12,488,860	-	-	-	-	
Alcohol / Drug	118,227	-	-	-	-	

### Source of Funds

Fine, Forfeiture, and Penalties (\$75,000):  
Court fines from Alcohol & Drug Programs (ADP).

Use of Money and Property (\$32,000):  
Interest

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Revenue from State Inter-governmental (\$6,430,622): Mental Health Services Act (MHSA) Proposition 63 (\$6,113,955) and MIOCR Grant (\$316,667).

Federal Intergovernmental (\$7,849,941): Medi-Cal: Mental Health (MH) (\$6,519,098), Block Grant Revenues, ADP (\$958,253), Substance Abuse and Mental Health Services Administration: Mental Health (SAMHSA) (\$337,518) and Projects for Assistance in Transition from Homelessness (PATH) fund: MH (\$35,072).

Charges for Services (\$603,900): Insurance and private payers: MH (\$97,900), collections (\$15,000), other county revenues from Psychiatric Health Facility (PHF) (\$400,000), other Psychiatric Facility (PHF) revenue (\$35,000), Supplemental Security Insurance (SSI) payments for client placements at Institutions for Mental Disease (\$56,000),

Miscellaneous Revenue (\$158,400): DUI and P.C. 1000 Fines: ADP (\$24,000) and transitional housing reimbursements (\$134,400).

Other Financing Sources (\$8,854,356): Public Safety Realignment 2011 - Community Corrections Partnership (\$937,380), General Fund State Local Program Realignment (SLPR) match (\$16,510), Vehicle License Fee (VLF) Realignment (\$100,764), 2011 Realignment (\$4,042,950) and Sales Tax Realignment (\$3,756,752).

Fund Balance (\$10,212,899): MH Traditional Fund Balance (\$2,281,398), MHSA Programs Fund Balances: Community Services & Support (\$3,417,370), Prevention & Early Intervention (\$2,190,789), Workforce Education & Training (\$158,002), Innovation (\$1,438,874), Capital Facilities and Tech Needs (\$250,022), MIOCR Grant (Transfer from CSS) (\$131,444), ADP Programs Fund

Balances: AB 2086 Drunk Driver SRF (\$128,000), Drug Fines SRF (\$92,000), and Alcohol Education & Prevention SRF (\$125,000).

### Use of Funds

Salaries & Benefits (\$9,593,485): Regular salaries (\$6,181,911), temporary Help (\$178,499), overtime (\$62,242), retirement (\$1,385,597), health insurance (\$1,220,262) and ther payroll costs (\$564,974).

Services & Supplies (\$7,832,798): Payments to contract providers for services and supports (\$4,959,728), facility rents, utilities, janitorial and refuse disposal costs (\$549,065), special departmental expenses (\$33,383) memberships (\$18,762), staff training (\$109,270), travel/fuel costs (\$219,529), liability insurance (\$62,761), computer minor equipment (\$54,775), educational materials (\$2,519), special projects (\$1,137,571), software and licensing (\$283,126), medical, household, laundry and food expenses (\$176,606) and general office expenses (\$225,703).

Other Charges (\$13,147,375): Primarily comprised of inpatient and residential placement costs (\$2,421,070), housing and ancillary supports (\$8,056,418), interfund transfers (\$2,669,887), cost applied charges and charges from other departments (\$59,526), A-87 costs (\$731,623) and HHSA Administration costs (\$1,878,738).

Fixed Assets (\$10,000): Appliance and furniture replacement for Wellness Center.

Operating Transfers Out (\$500,000): Transfer of MHSA innovation funds to Public Health for Community Hub Program.

Intrafund transfers (\$5,708,874): Transfer of the Indirect, MH Plan Admin, and MHSA Admin costs to the programs.

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Intrafund abatements (-\$5,708,874):  
Transfers out the Indirect, MH Plan Admin,  
and MHSA Admin costs from the Traditional  
and MHSA.

Appropriation for Contingencies and  
Reserves (\$3,133,460)

### Staffing Trend

Staffing for the Behavioral Health programs  
over the past ten years has varied due to  
program requirements and funding  
changes. Staffing levels 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 behavioral health program areas.  
Following the significant downsizing in FY  
2008-09, staffing stabilized and then  
gradually increased, as MHSA programs  
were more fully implemented and financial  
systems were developed to support  
accurate cost accounting and billing. The  
staff allocation for FY 2016-17 is 92.8 FTEs,  
the increase of 5.9 FTEs is due to program  
needs, additional services and service  
expansions. A total of 71.20 FTEs are  
located on the West Slope and 21.60 FTEs  
in South Lake Tahoe. There are 29.59  
FTEs in Behavioral Health Traditional  
programs, 45.41 FTEs in MHSA programs,  
and 17.80 FTEs in Alcohol and Drug  
Programs.



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2016-17 Summary of Department Programs				
	Appropriations	Revenues	Net County Cost GF Contribution	Staffing
Alcohol & Drug Programs	4,285,199	4,285,199	-	17.80
MHSA Programs	17,359,667	17,359,667	-	45.41
Traditional Programs	12,572,252	12,572,252	16,510	29.59
<b>TOTAL</b>	<b>34,217,118</b>	<b>34,217,118</b>	<b>16,510</b>	<b>92.80</b>

### Program Summaries

#### *Traditional Behavioral Health Programs*

The Behavioral 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 contribution 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.

Primary traditional programs in order of relative magnitude include:

- Outpatient Mental Health Services for Children – these programs are primarily provided through contracted resources that provide 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 State declared the mandate to be suspended in October 2010, the Federal Individuals with

Disabilities Act (IDEA) mandates that the schools provide these services. The local Special Education Local Planning Agencies (SELPA) contracts with the Division to provide these services.

- Psychiatric Health Facility (PHF) – located in Placerville, El Dorado County contracts with Telecare Corporation to operate the PHF, a licensed, sixteen-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 the MHSA Wellness and Recovery programs.
- Psychiatric Emergency Services (PES) – ensures 24/7/365 on-call services provided predominantly at hospitals on

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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.

### *MHSA Programs*

In November 2004, California voters passed Proposition 63, known as the Mental Health Services Act (MHSA). The MHSA is funded by a one percent (1%) tax on personal income in excess of \$1,000,000 for California residents. The Division's MHSA programs are designed to reduce disparity in service access and to promote mental health wellness and recovery by providing effective mental health interventions and critical supportive services to seriously mentally ill individuals, often to those client populations that were 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 base 2004 service level.

MHSA is composed of the following five components:

- Community Services and Supports (CSS)
- Workforce Education and Training (WET)

- Prevention and Early Intervention (PEI)
- Innovation
- Capital Facilities and Technological Needs (CFTN)
- Mentally Ill Offender Crime Reduction Grant (MIOCR)

The Behavioral Health Division currently has approved plans for all components except Innovation. Funding for each of these components is provided through state 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 Innovations components have a three-year reversion policy and continue to receive allocations on an annual basis; CFTN and WET have a ten-year reversion policy and are operating from fund balances as these components are no longer allocated MHSA funds.

Primary MHSA programs include the following components:

### Community Services and 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.

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*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) will also be offered mental health, addiction and other specialized transition services to reduce recidivism and promote family reunification.

*Housing* 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 Health Care Services (DHCS) 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, approve and oversee housing developments after initial approval by the Board of Supervisors for the use of MHSA funds for the development.

Additional programs and/or services may be added as a result of community input into the FY 15-16 MHSA planning process.

- 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.
- 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 are being addressed through the County's membership in CalMHSA, - a multi-county Joint Powers Authority.

- 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.
- Capital Facilities and Technological Needs (CFTN) – supports capital facilities and/or technology projects. This program includes the development and implementation 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 tele-psychiatry and videoconferencing capabilities to reach and serve underserved communities, related training and administrative/technical support, as well as updated technological hardware equipment and software.

### *Alcohol and Drug Programs*

These programs implement strategies designed to address alcohol and other drug related issues affecting communities,

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criminal justice and child welfare systems, and schools. Activities include education, raising public awareness of issues, promoting drug-free alternatives for youth and adults, drug-free workplace programs, activities to reunite families, where appropriate, and related services. Also included are drug court activities.

### **Chief Administrative Office Recommendation**

The total Recommended Budget represents a decrease in revenues and appropriations of \$3,106,856 or 8% when compared to the FY 2015-16 adopted budget. There is a General Fund contribution of \$16,510 for County match requirements. This represents a status quo budget.

The decrease in revenues and appropriations is mainly due to lower fund balance for the MHSA program. The program has less fund balance because it is catching up on approved past spending plans.

The Behavioral Health Division is focusing on shifting client services to Mental Health Services Act (MHSA) programs for expanded service delivery which could decrease expenditures in Traditional programs. The shift to MHSA focused programs is in correlation to the approved plan and allows the Behavioral Health Division to develop more comprehensive recovery-oriented programs for the underserved target populations.

The Behavioral Health Division is submitting an Innovation Plan to fund the Community Hub Program. This plan will need the Board of Supervisors' approval and State approval prior to implementing the project. For more information on the Community Hub Program please visit the budget page for the Public Health Division.

### Staffing Changes

The Behavioral Health Division is requesting an increase of 5.9 FTEs that will help better align personnel allocations with the current funding, administrative and programmatic requirements of the division's programs. The positions are paid with special revenue, so there are no General Fund dollars allocated for the positions. The department is requesting two new Mental Health Workers in South Lake Tahoe for the Traditional Behavioral Health Programs, which are funded with federal revenues, realignment/state revenues, and charges for services. The positions will be part of the Intensive Case Management Team that serves the Adult Full Service Partnership clients (highest acuity clients) by providing them the services they need to stabilize and gain skills to better manage their symptoms while living in the community rather than being placed in a more costly and restrictive higher level of care.

In the FY 2016-17 Budget, the Behavioral Health Division has 1.03 unfunded positions: Senior Department Analyst (1.0 FTE) and Medical Records Technician (.03 FTE). Both positions are located in the Traditional Behavioral Health programs.

### Traditional Behavioral Health Programs

The Recommended Budget for the Traditional Behavioral Health Programs is \$12,572,252, which represents an increase of approximately \$338,800 or 3% when compared to the FY 2015-16 adopted budget. The Traditional programs are primarily funded by federal revenues, realignment/state revenues, and charges for services to other counties and private payers. The increase to the traditional programs can largely be attributed to the program budgeting for more psychiatric beds for out of County patients.

The Traditional Behavioral Health Program funding continues to present a challenge

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since the majority of traditional funds are spent on out of county placements and placements in the Psychiatric Health Facility. Currently, two clients are placed in the state hospitals with an estimated cost of \$475,000 per year.

Finding local alternatives remains a challenge as demand for bed space is increasing statewide. El Dorado County does not have the provider capacity and while HHSA recently posted an RFI relative to local Mental Health Rehabilitation Center services, one-time startup costs will likely be a challenge.

### **Mental Health Services Act (MHSA) Program**

The Recommended Budget for the MHSA Programs is \$17,359,667 and represents an overall decrease of approximately \$3,010,200 or 15% when compared to the FY 2015-16 adopted budget. The decrease in the budget is primarily due to less fund balance available for the MHSA program. In prior years, the MHSA program would not have an adopted plan until later in the fiscal year. Spending could not happen until the plan was adopted resulting in savings that would roll into the program's fund balance at the end of each fiscal year. Now the plans are being adopted earlier in the fiscal year and the MHSA program is catching up on its past planned spending as MHSA services and expenditures have increased as follows:

Fiscal Year 2012-13: \$3.6 million  
Fiscal Year 2013-14: \$4.7 million  
Fiscal Year 2014-15: \$8.7 million  
Fiscal Year 2015-16: \$11.6 million

The Fiscal Year 2016-17 MHSA plan update is anticipated to be adopted in June 2016. MHSA programs are reviewed on an annual basis to determine which programs are successful (many of the programs are relatively new) in meeting program outcomes. The Behavioral Health Division

has been reassessing MHSA services and reviewing outcomes to ensure sufficient appropriations are available in future years to continue with the current staffing levels and contract expenditures.

### **Alcohol and Drug Programs**

The Recommended Budget for Alcohol and Drug Programs is \$4,285,199, which represents an overall decrease of approximately \$435,500 or 9% when compared to the FY 2015-16 adopted budget. Alcohol and Drug Programs are funded primarily by realignment funds and federal revenues. The decrease is primarily due to Public Health funds being transferred to the Traditional Behavioral Health programs for state hospital beds instead of the Alcohol and Drug programs.

### **Pending Issues and Policy Considerations**

#### **AB 403 (Stone)/Continuum of Care Reform**

AB 403 is a comprehensive reform effort to make sure that youth in foster care have their day-to-day physical, mental, and emotional needs met; that they have the greatest chance to grow up in permanent and supportive homes; and they have the opportunity to grow into self-sufficient, successful adults. The full impact of AB 403 is unknown, but all indications are there will not be sufficient funding from the State to meet the new mandates. A fiscal analysis conducted by the State of California Legislative Analysis Office concluded that AB 403 would have a major fiscal impact on mental health services in the tens of millions of dollars statewide, and that due to 1991 Realignment, the responsibility of providing services rests on the counties. However, on behalf of counties, the California Behavioral Health Director's Association submitted a request for \$370 million in additional funding statewide to offset the impact of AB 403 on



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local behavioral health departments. At this time the State has not responded to this request.

### Services for Children's Welfare Services Clients

Alcohol and Drug Programs will be providing a clinician to Children's Welfare Services clients. This position is funded with the 10% 1991 Realignment transfer authority to Behavioral Health from Public Health.

### American Society of Addiction Medicine Criteria

The Alcohol and Drug Program is pursuing training in the American Society of Addiction Medicine (ASAM) Criteria which is the most widely used and comprehensive set of guidelines for placement, continued stay and transfer/discharge of patients with addiction and co-occurring conditions. The ASAM criteria is a required element of the proposed Organized Delivery Service (ODS) for Alcohol and Drug Program Medi-Cal waiver that is in the pilot stage with the State. The ODS waiver brings additional ADP services to Medi-Cal beneficiaries through the State medi-cal plan update. The County has not yet opted into the program and is currently reviewing the feasibility of participating in the ODS medi-cal waiver program.

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## Financial Information by Fund Type

FUND TYPE: 11 SPECIAL REVENUE FUND  
 DEPARTMENT: 41 MENTAL HEALTH

	MID-YEAR PROJECTION	CURRENT YR APPROVED BUDGET	DEPARTMENT REQUEST	CAO RECOMMENDED BUDGET	DIFFERENCE CURR YR CAO RECMD
<b>TYPE: R REVENUE</b>					
<b>SUBOBJ SUBOBJ TITLE</b>					
0320 COURT FINE: OTHER	68,803	89,000	75,000	75,000	-14,000
<b>CLASS: 03 REV: FINE, FORFEITURE &amp;</b>	68,803	89,000	75,000	75,000	-14,000
0400 REV: INTEREST	25,700	25,700	32,000	32,000	6,300
<b>CLASS: 04 REV: USE OF MONEY &amp; PROPERTY</b>	25,700	25,700	32,000	32,000	6,300
0663 ST: MENTAL HEALTH PROPOSITION 63	4,921,053	6,113,955	6,113,955	6,113,955	0
0880 ST: OTHER	316,667	316,667	316,667	316,667	0
<b>CLASS: 05 REV: STATE INTERGOVERNMENTAL</b>	5,237,720	6,430,622	6,430,622	6,430,622	0
1100 FED: OTHER	320,390	320,390	372,590	372,590	52,200
1101 FED: BLOCK GRANT REVENUES	634,006	718,743	958,253	902,253	183,510
1107 FED: MEDI CAL	6,082,655	6,082,655	6,430,710	6,430,710	348,055
1108 FED: PERINATAL MEDI CAL	288,388	288,388	88,388	88,388	-200,000
<b>CLASS: 10 REV: FEDERAL</b>	7,325,439	7,410,176	7,849,941	7,793,941	383,765
1640 MENTAL HEALTH SERVICES: PRIVATE INS	227,400	227,400	87,400	87,400	-140,000
1641 MENTAL HEALTH SERVICES: PRIVATE	10,500	10,500	10,500	10,500	0
1642 MENTAL HEALTH SERVICES: OTHER	471,756	821,250	400,000	400,000	-421,250
1643 MENTAL HEALTH SERVICES: CO	15,000	15,000	15,000	15,000	0
1644 MENTAL HEALTH SERVICES: PUBLIC	86,000	86,000	86,000	86,000	0
1740 CHARGES FOR SERVICES	5,000	5,000	5,000	5,000	0
1819 INTERFND REV: MENTAL HEALTH	52,800	52,800	0	0	-52,800
<b>CLASS: 13 REV: CHARGE FOR SERVICES</b>	868,456	1,217,950	603,900	603,900	-614,050
1940 MISC: REVENUE	158,400	158,400	158,400	158,400	0
<b>CLASS: 19 REV: MISCELLANEOUS</b>	158,400	158,400	158,400	158,400	0
2020 OPERATING TRANSFERS IN	1,187,382	1,187,382	953,890	1,009,890	-177,492
2021 OPERATING TRANSFERS IN: VEHICLE	100,764	100,764	100,764	100,764	0
2026 OPERATING TRANSFERS IN: PHD SRF	4,057,194	4,342,950	4,042,950	4,042,950	-300,000
2027 OPERATING TRSNF IN: SALES TAX	3,621,921	3,621,921	3,756,752	3,756,752	134,831
<b>CLASS: 20 REV: OTHER FINANCING SOURCES</b>	8,967,261	9,253,017	8,854,356	8,910,356	-342,661
0001 FUND BALANCE	3,320,607	12,739,109	10,212,899	10,212,899	-2,526,210
<b>CLASS: 22 FUND BALANCE</b>	3,320,607	12,739,109	10,212,899	10,212,899	-2,526,210
<b>TYPE: R SUBTOTAL</b>	25,972,386	37,323,974	34,217,118	34,217,118	-3,106,856

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## Financial Information by Fund Type

FUND TYPE: 11 SPECIAL REVENUE FUND  
 DEPARTMENT: 41 MENTAL HEALTH

		MID-YEAR PROJECTION	CURRENT YR APPROVED BUDGET	DEPARTMENT REQUEST	CAO RECOMMENDED BUDGET	DIFFERENCE CURR YR CAO RECMD
<b>TYPE: E EXPENDITURE</b>						
<b>SUBOBJ</b>	<b>SUBOBJ TITLE</b>					
3000	PERMANENT EMPLOYEES / ELECTED	5,127,223	5,497,337	6,181,911	6,181,911	684,574
3001	TEMPORARY EMPLOYEES	173,426	173,426	178,499	178,499	5,073
3002	OVERTIME	102,400	102,400	62,242	62,242	-40,158
3003	STANDBY PAY	11,200	11,200	69,100	69,100	57,900
3004	OTHER COMPENSATION	89,158	109,050	95,050	95,050	-14,000
3005	TAHOE DIFFERENTIAL	26,209	26,209	51,600	51,600	25,391
3006	BILINGUAL PAY	14,435	14,435	22,880	22,880	8,445
3020	RETIREMENT EMPLOYER SHARE	1,206,394	1,206,394	1,385,597	1,385,597	179,203
3022	MEDI CARE EMPLOYER SHARE	82,815	82,815	93,307	93,307	10,492
3040	HEALTH INSURANCE EMPLOYER	1,119,412	1,119,412	1,220,262	1,220,262	100,850
3042	LONG TERM DISABILITY EMPLOYER	14,175	14,175	15,907	15,907	1,732
3043	DEFERRED COMPENSATION EMPLOYER	12,262	12,262	13,019	13,019	757
3046	RETIREE HEALTH: DEFINED	68,454	68,454	91,435	91,435	22,981
3060	WORKERS' COMPENSATION EMPLOYER	75,359	75,359	67,976	67,976	-7,383
3080	FLEXIBLE BENEFITS	38,079	38,079	44,700	44,700	6,621
<b>CLASS: 30</b>	<b>SALARY &amp; EMPLOYEE BENEFITS</b>	<b>8,161,001</b>	<b>8,551,007</b>	<b>9,593,485</b>	<b>9,593,485</b>	<b>1,042,478</b>
4040	TELEPHONE COMPANY VENDOR	14,550	14,550	11,750	11,750	-2,800
4041	COUNTY PASS THRU TELEPHONE CHARGES	10,900	10,900	12,900	12,900	2,000
4060	FOOD AND FOOD PRODUCTS	33,650	34,150	81,000	81,000	46,850
4080	HOUSEHOLD EXPENSE	6,350	6,350	40,606	40,606	34,256
4083	LAUNDRY	0	0	3,000	3,000	3,000
4085	REFUSE DISPOSAL	6,895	6,895	6,000	6,000	-895
4086	JANITORIAL / CUSTODIAL SERVICES	35,747	35,747	32,700	32,700	-3,047
4100	INSURANCE: PREMIUM	59,811	59,811	62,761	62,761	2,950
4101	INSURANCE: ADDITIONAL LIABILITY	53,983	53,983	53,983	53,983	0
4143	MAINT: SERVICE CONTRACT	17,560	17,560	31,000	31,000	13,440
4144	MAINT: COMPUTER	31,820	31,820	21,820	21,820	-10,000
4160	VEH MAINT: SERVICE CONTRACT	400	400	400	400	0
4180	MAINT: BUILDING & IMPROVEMENTS	5,100	5,100	5,100	5,100	0
4192	MAINTENANCE: LIGHTING	1,100	1,100	1,100	1,100	0
4200	MEDICAL, DENTAL & LABORATORY	15,000	15,000	52,000	52,000	37,000
4220	MEMBERSHIPS	5,187	5,187	5,187	5,187	0
4221	MEMBERSHIPS: LEGISLATIVE ADVOCACY	13,368	13,368	13,575	13,575	207
4260	OFFICE EXPENSE	7,050	7,050	7,050	7,050	0
4261	POSTAGE	2,765	2,815	2,815	2,815	0
4262	SOFTWARE	4,975	4,975	10,050	10,050	5,075
4264	BOOKS / MANUALS	3,060	3,060	17,560	17,560	14,500
4266	PRINTING / DUPLICATING SERVICES	3,600	3,600	3,050	3,050	-550
4300	PROFESSIONAL & SPECIALIZED SERVICES	1,096,492	1,096,492	707,000	707,000	-389,492
4313	LEGAL SERVICES	2,500	2,500	2,500	2,500	0
4318	INTERPRETER	1,100	1,100	1,100	1,100	0
4323	PSYCHIATRIC MEDICAL SERVICES	3,996,339	4,249,728	4,249,728	4,249,728	0
4324	MEDICAL, DENTAL, LAB & AMBULANCE SRV	3,000	3,000	3,000	3,000	0
4341	SERVICE CONNECT EXPENSE	150	150	150	150	0
4400	PUBLICATION & LEGAL NOTICES	16,000	16,000	5,000	5,000	-11,000
4420	RENT & LEASE: EQUIPMENT	17,630	17,630	12,650	12,650	-4,980
4421	RENT & LEASE: SECURITY SYSTEM	6,050	6,050	6,050	6,050	0
4440	RENT & LEASE: BUILDING &	351,042	351,042	360,865	360,865	9,823
4460	EQUIP: SMALL TOOLS & INSTRUMENTS	50	50	50	50	0
4461	EQUIP: MINOR	12,900	12,900	2,775	2,775	-10,125
4462	EQUIP: COMPUTER	67,607	67,607	54,775	54,775	-12,832
4463	EQUIP: TELEPHONE & RADIO	50	50	50	50	0

# HEALTH AND HUMAN SERVICES AGENCY

## Financial Information by Fund Type

FUND TYPE: 11 SPECIAL REVENUE FUND  
 DEPARTMENT: 41 MENTAL HEALTH

	MID-YEAR PROJECTION	CURRENT YR APPROVED BUDGET	DEPARTMENT REQUEST	CAO RECOMMENDED BUDGET	DIFFERENCE CURR YR CAO RECMD
4500 SPECIAL DEPT EXPENSE	83,438	83,438	33,383	33,383	-50,055
4501 SPECIAL PROJECTS	822,658	1,558,037	1,137,571	1,137,571	-420,466
4502 EDUCATIONAL MATERIALS	18,883	19,483	2,519	2,519	-16,964
4503 STAFF DEVELOPMENT	94,630	94,630	109,270	109,270	14,640
4529 SOFTWARE LICENSE	228,126	228,126	283,126	283,126	55,000
4532 CLIENT PROGRAM SERVICES	1,500	1,500	16,000	16,000	14,500
4540 STAFF DEVELOPMENT (NOT 1099)	800	800	800	800	0
4600 TRANSPORTATION & TRAVEL	28,560	28,560	43,948	43,948	15,388
4602 MILEAGE: EMPLOYEE PRIVATE AUTO	26,015	26,015	26,631	26,631	616
4605 RENT & LEASE: VEHICLE	69,000	69,000	80,200	80,200	11,200
4606 FUEL PURCHASES	41,650	41,650	41,950	41,950	300
4608 HOTEL ACCOMMODATIONS	14,600	14,600	26,800	26,800	12,200
4620 UTILITIES	120,750	120,750	149,500	149,500	28,750
<b>CLASS: 40 SERVICE &amp; SUPPLIES</b>	<b>7,454,391</b>	<b>8,444,309</b>	<b>7,832,798</b>	<b>7,832,798</b>	<b>-611,511</b>
5000 SUPPORT & CARE OF PERSONS	1,313,675	1,931,894	441,749	441,749	-1,490,145
5002 INSTITUTE MENTAL DISEASE MENTAL	2,063,000	2,063,000	2,421,070	2,421,070	358,070
5009 HOUSING	388,058	388,058	486,858	486,858	98,800
5010 TRANSPORTATION SERVICES	2,500	2,500	2,500	2,500	0
5011 TRANSPORTATION EXPENSES	19,900	19,900	20,900	20,900	1,000
5012 ANCILLARY SERVICES	212,697	212,697	544,023	544,023	331,326
5013 ANCILLARY EXPENSES	48,500	48,500	22,500	22,500	-26,000
5014 HEALTH SERVICES	3,476,577	5,407,296	6,537,888	6,537,888	1,130,592
5300 INTERFND: SERVICE BETWEEN FUND	2,742,864	2,742,864	2,620,361	2,620,361	-122,503
5304 INTERFND: MAIL SERVICE	4,234	4,234	4,060	4,060	-174
5305 INTERFND: STORES SUPPORT	3,330	3,330	2,808	2,808	-522
5316 INTERFND: IS PROGRAMMING SUPPORT	20,000	20,000	20,000	20,000	0
5318 INTERFND: MAINTENANCE BLDG & IMPRV	22,658	22,658	22,658	22,658	0
<b>CLASS: 50 OTHER CHARGES</b>	<b>10,317,993</b>	<b>12,866,931</b>	<b>13,147,375</b>	<b>13,147,375</b>	<b>280,444</b>
6040 FIXED ASSET: EQUIPMENT	18,000	18,000	10,000	10,000	-8,000
<b>CLASS: 60 FIXED ASSETS</b>	<b>18,000</b>	<b>18,000</b>	<b>10,000</b>	<b>10,000</b>	<b>-8,000</b>
7000 OPERATING TRANSFERS OUT	0	0	500,000	500,000	500,000
<b>CLASS: 70 OTHER FINANCING USES</b>	<b>0</b>	<b>0</b>	<b>500,000</b>	<b>500,000</b>	<b>500,000</b>
7250 INTRAFND: NOT GEN FUND / SAME FUND	5,643,405	5,643,405	5,708,874	5,708,874	65,469
<b>CLASS: 72 INTRAFUND TRANSFERS</b>	<b>5,643,405</b>	<b>5,643,405</b>	<b>5,708,874</b>	<b>5,708,874</b>	<b>65,469</b>
7380 INTRFND ABATEMENTS: NOT GENERAL	-6,400,228	-5,643,405	-5,708,874	-5,708,874	-65,469
<b>CLASS: 73 INTRAFUND ABATEMENT</b>	<b>-6,400,228</b>	<b>-5,643,405</b>	<b>-5,708,874</b>	<b>-5,708,874</b>	<b>-65,469</b>
7700 APPROPRIATION FOR CONTINGENCIES	0	7,443,727	3,133,460	3,133,460	-4,310,267
<b>CLASS: 77 APPROPRIATION FOR</b>	<b>0</b>	<b>7,443,727</b>	<b>3,133,460</b>	<b>3,133,460</b>	<b>-4,310,267</b>
<b>TYPE: E SUBTOTAL</b>	<b>25,194,562</b>	<b>37,323,974</b>	<b>34,217,118</b>	<b>34,217,118</b>	<b>-3,106,856</b>
<b>FUND TYPE: 11 SUBTOTAL</b>	<b>-777,824</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>DEPARTMENT: 41 SUBTOTAL</b>	<b>-777,824</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

# HEALTH AND HUMAN SERVICES AGENCY

<b>Health and Human Services Agency</b>
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<b>Health Services Department</b>
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<b>Behavioral Health Division</b>
<b>92.80</b>

<b>Traditional Behavioral Health Programs</b>	<b>29.59</b>
<b>Traditional Behavioral Health Programs</b>	
<b>Placerville 25.74</b>	
Administrative Secretary	1.00
Administrative Technician	0.80
Assistant Director of Health Services	0.45
Deputy Director	1.00
Manager of Mental Health Programs	1.61
Medical Office Assistant I/II	4.20
Medical Records Technician	0.90
Mental Health Aide	1.71
Mental Health Clinical Nurse	0.41
Mental Health Clinician IA/IB/II	5.54
Mental Health Medical Director	0.71
Mental Health Patient's Rights Advocate	0.40
Mental Health Program Coordinator	1.27
Mental Health Worker I/II	1.61
Program Manager	0.80
Psychiatric Technician I/II	0.60
Psychiatrist I/II	0.41
Public Health Nurse Practitioner	0.32
Sr. Department Analyst	1.00
Sr. Office Assistant	1.00
<b>South Lake Tahoe 3.85</b>	
Administrative Technician	0.95
Manager of Mental Health Programs	0.65
Medical Office Assistant I/II	0.75
Mental Health Clinician IA/IB/II	1.40
Psychiatric Technician I/II	0.10

<b>Mental Health Services Act (MHSA)</b>	<b>45.41</b>
<b>Mental Health Services Act (MHSA) Programs</b>	
<b>Placerville 32.66</b>	
Administrative Technician	1.20
Department Analyst I/II	1.00
Health Education Coordinator	0.10
Manager of Mental Health Programs	0.39
Mental Health Aide	4.54
Mental Health Clinical Nurse	0.59
Mental Health Clinician IA/IB/II	13.96
Mental Health Medical Director	0.29
Mental Health Program Coordinator	2.23
Mental Health Worker I/II	5.39
Program Assistant	0.10
Program Manager	0.20
Psychiatric Technician I/II	1.40
Psychiatrist I/II	0.59
Public Health Nurse Practitioner	0.68
<b>South Lake Tahoe 12.75</b>	
Administrative Technician	0.05
Manager of Mental Health Programs	0.35
Medical Office Assistant I/II	0.25
Mental Health Aide	0.10
Mental Health Clinician IA/IB/II	3.60
Mental Health Program Coordinator	1.00
Psychiatric Technician I/II	0.90
Mental Health Worker I/II	6.50

<b>Alcohol and Drug Programs</b>	<b>17.8</b>
<b>Alcohol &amp; Drug Programs</b>	
<b>Placerville 12.80</b>	
Alcohol and Drug Program Division Mgr	1.00
Disease Investigtn/Contrl Specialist I/II	0.50
Health Education Coordinator	5.40
Health Program Specialist	1.00
Mental Health Clinician IA/IB/II	2.00
Mental Health Program Coordinator	0.50
Office Assistant I/II	0.50
Program Assistant	0.90
Supv Health Education Coordinator	1.00
<b>South Lake Tahoe 5.00</b>	
Health Education Coordinator	3.00
Mental Health Clinician IA/IB/II	1.00
Supv Health Education Coordinator	1.00