

Health & Human Services

Section E

Public Health is one division within the Health and Human Services Department. Yuba-Sutter Health Officer Dr. Phuong Luu leads a Bi-County Public Health response to the COVID-19 pandemic with the support of elected representatives in both Sutter and Yuba counties.

Health and Human Services Administration (4-120)

COUNTY OF SUTTER EXECUTIVE SUMMARY Fiscal Year 2020-2021								
Fund: 0012 - HEALTH Unit Title: HUMAN SERVICES ADMINISTRATION Dept: 4120								
	2018-2019	2019-2020	2019-2020	2020-2021	2019-2020			
	Actual	YTD as of	Adopted	CAO	% Change			
	Expenditure	05/29/2020	Budget	Recommended	Over			
EXPENDITURES SALARIES AND EMPLOYEE BENEFITS SERVICES AND SUPPLIES OTHER CHARGES INTRAFUND TRANSFERS	1,525,139	1,713,398	1,899,311	2,396,611	26.2			
	104,427	78,276	146,976	148,251	0.9			
	235,763	238,754	355,895	309,461	-13.0			
	-195,715	0	-239,521	-206,323	-13.9			
OTHER FINANCING USES NET BUDGET	542	1,300	3,121	3,158	1.2			
	1,670,156	2,031,728	2,165,782	2,651,158	22.4			
REVENUE CHARGES FOR SERVICES MISCELLANEOUS REVENUES OTHER FINANCING SOURCES TOTAL OTHER REVENUE	1,670,516	0	2,165,782	2,571,158	18.7			
	0	48	0	0	0.0			
	0	0	0	80,000	100.0			
	1,670,516	48	2,165,782	2,651,158	22.4			
UNREIMBURSED COSTS	-360	2,031,680	0	0	0.0			
ALLOCATED POSITIONS	9.00	17.00	13.00	17.00	30.8			

Mission Statement

The Sutter County Health and Human Services Department promotes health, safety, economic stability, and quality of life for our community.

Department Goals and Objectives:

- 1. Develop and implement a strategic plan for HHS
- 2. Develop 3-year HHS fiscal sustainability plan
- 3. Implement performance measures for HHS programs and contracts using results based accountability

Major Budget Changes

Salaries & Benefits

- \$21,176 Increase due to step increases and higher benefits cost
- (\$72,335) Decrease due to leaving the Administrative & Finance Manager HHS position vacant for part of the fiscal year

Health and Human Services Administration (4-120)

- \$3,825 Increase related to changing one (1) Executive Secretary I position into a Flexibly staffed Executive Secretary I/II and funding at the II level, effective July 1, 2020
- \$544,634 Increase related to adding Children and Families Commission staff positions as County Employees per MOU executed in FY 2019-20. Expenses will be charged back to Children and Families Commission

Other Charges

• \$38,658 Decrease in OH Cost Plan charges as provided by the Auditor-Controller's Office

Intrafund Transfers

• (\$33,198) Decrease in Intrafund Administration Services revenue shown as increase of Intrafund expenditure

Revenues

- \$522,958 Increased Charge for Services to Children & Families
- (\$117,582) Net increase in other Charges for Services Interfund revenues
- \$80,000 Increase in Operating Transfer-In Non-Major from SB910 Medi-Cal for MAA/TCM LGA program administration

Program Discussion

This budget funds the Director, Assistant Director, two Branch Directors, a Deputy Director and support staff that provides leadership, financial, and administrative support functions for the Department of Health and Human Services.

The Health and Human Services Administration's office oversees five branches of the Health and Human Services Department including Adult's, Children's, and the Acute Psychiatric Services branches which include behavioral health, adult protective services, child welfare services, and emergency services, Employment and Eligibility, and Public Health. Continual changes at the State and Federal level will likely require ongoing adjustments in the Department's operations.

Recommended Budget

Total appropriations are recommended at \$2,651,158, an increase of \$485,376 (22.4%) over the FY 2019-20 Adopted Budget. This increase is primarily due to Health and Human Services Department's continued organizational changes including Children and Families Commission positions transferred into the HHS Administration budget making the positions County Employees

Health and Human Services Administration (4-120)

per MOU executed in 2019-20. This budget unit allocates all its costs to other programs/budget units that are under its support and administration. There is no Net County Cost in this budget unit.

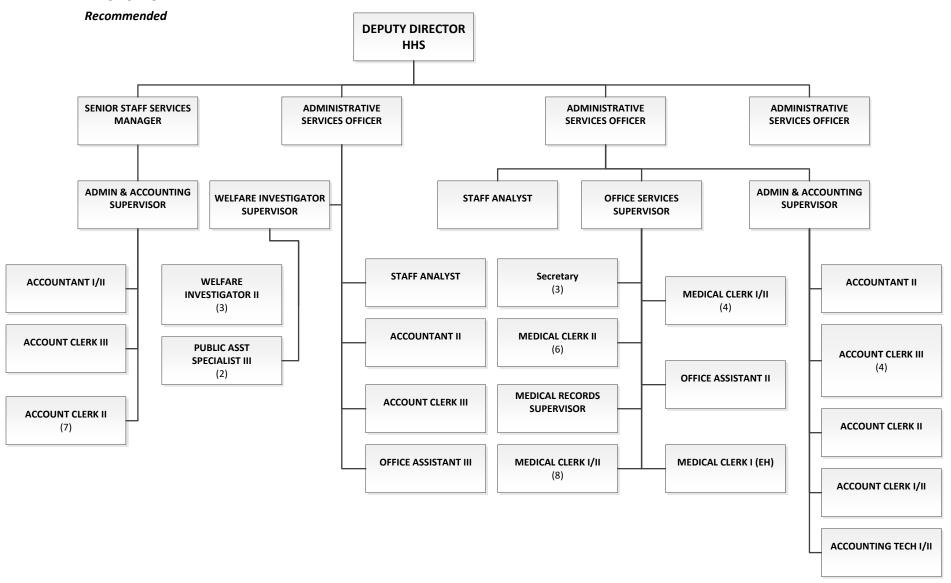
The following position change is recommended:

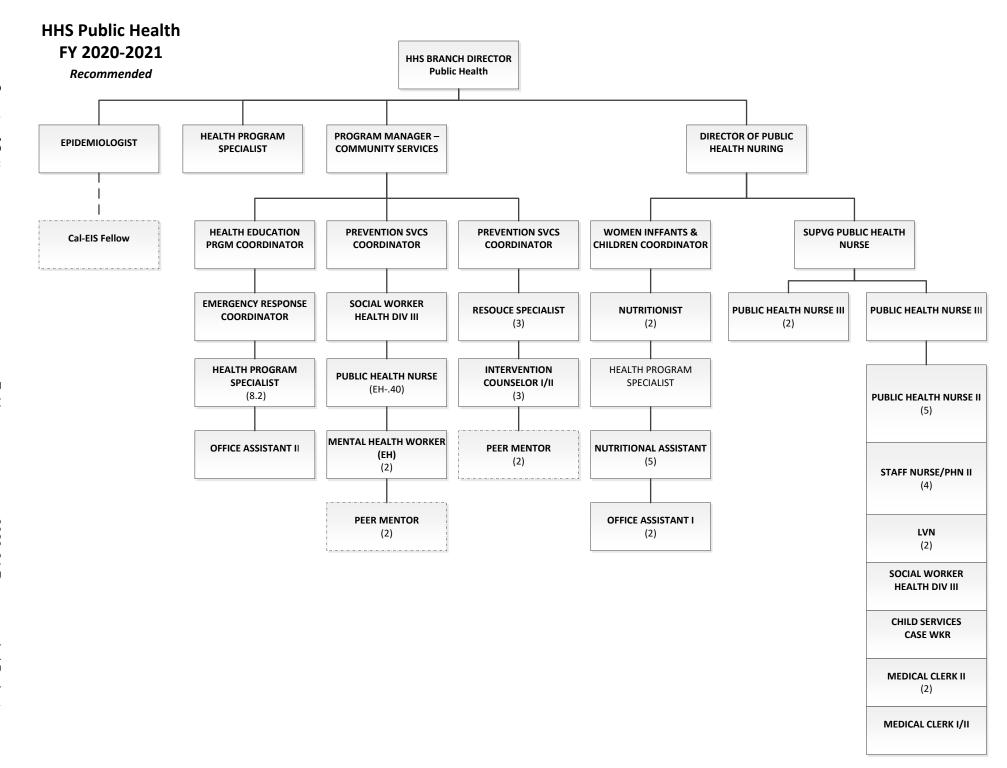
• Change one (1.0 FTE) Executive Secretary I position to a Flexibly Staffed Executive Secretary I/II position and fill with the incumbent at the II level

Use of Fund Balance

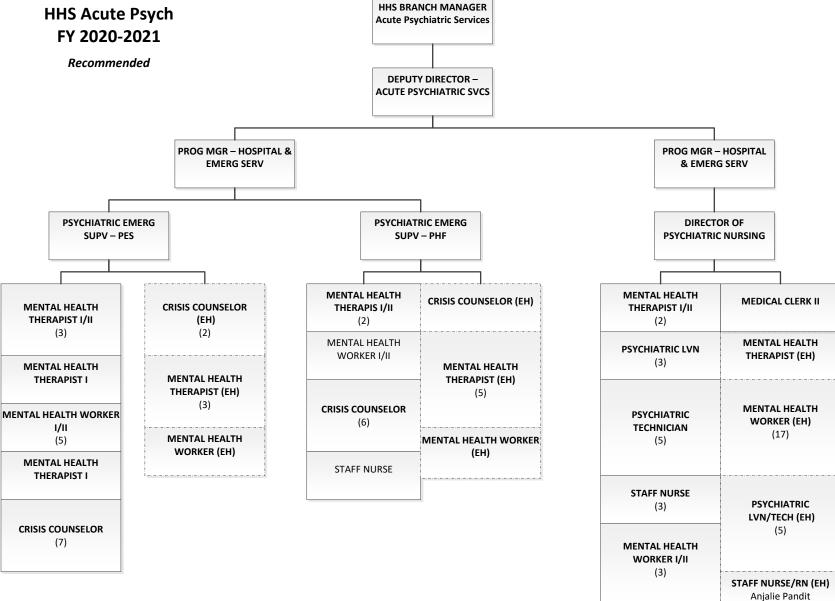
This budget unit is within the Health Fund and does not include use of any specific fund balance.

HHS Admin. & Finance FY 2020-2021

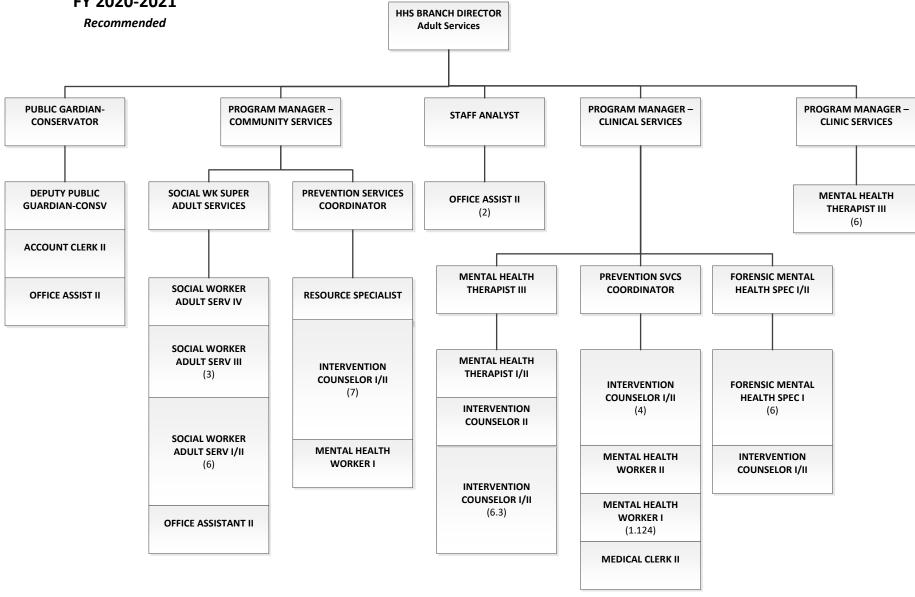








HHS Adult Services FY 2020-2021



COUNTY OF SUTTER EXECUTIVE SUMMARY Fiscal Year 2020-2021							
Fund: 0007 - BI-COUNTY BEHAVIORA Unit Title: BEHAVIORAL HEALTH	AL HEALTH				Dept: 4102		
	2018-2019 Actual Expenditure	2019-2020 YTD as of 06/08/2020	2019-2020 Adopted Budget	2020-2021 CAO Recommended	2019-2020 % Change Over		
EXPENDITURES							
SALARIES AND EMPLOYEE BENEFITS	22,218,450	20,601,680	27,268,077	27,950,859	2.5		
SERVICES AND SUPPLIES	10,486,075	10,661,003	12,135,221	13,514,679	11.4		
OTHER CHARGES	10,662,926	7,568,806	7,046,807	7,429,273	5.4		
CAPITAL ASSETS	111,488	71,750	475,600	393,500	-17.3		
INCREASES IN RESERVES	0	0	0	22,666	100.0		
OTHER FINANCING USES	559,276	434,379	2,936,892	1,884,778	-35.8 2.7		
NET BUDGET	44,038,215	39,337,618	49,862,597	51,195,755	2.1		
REVENUE							
REVENUE USE MONEY PROPERTY	330,475	49,408	155,000	40,000	-74.2		
INTERGOVERNMENTAL REVENUES	15,952,009	7,444,124	13,742,690	14,230,036	3.5		
CHARGES FOR SERVICES	1,148,113	1,056,676	1,551,614	1,722,357	11.0		
MISCELLANEOUS REVENUES	822,194	7,220,401	86,200	71,100	-17.5		
OTHER FINANCING SOURCES	30,767,408	11,821,599	30,158,004	28,108,625	-6.8		
CANCELLATION OF OBLIGATED FB	0	0	4,169,089	7,023,637	68.5		
TOTAL OTHER REVENUE	49,020,199	27,592,208	49,862,597	51,195,755	2.7		
UNREIMBURSED COSTS	-4,981,984	11,745,410	0	0	0.0		
ALLOCATED POSITIONS	207.55	231.18	224.55	231.18	3.0		

Purpose/Mission

Sutter County Health and Human Services Department promotes health, safety, economic stability, and quality of life for our community.

Sutter-Yuba Behavioral Health (SYBH), under a Joint Powers Agreement entered into by the counties of Sutter and Yuba in 1969, provides the full-range of specialty mental health and substance use disorder services to eligible Sutter and Yuba County Medi-Cal beneficiaries; provides crisis and specialty mental health services for all Sutter and Yuba County residents regardless of payer status; administers managed-care contracts for mental health services with private for-profit and non-profit agencies; and provides a comprehensive system of care for the seriously mentally ill, to the extent resources are available.

The Mental Health Services Act (MHSA) addresses a broad continuum of prevention, early intervention, and service needs and the necessary infrastructure, technology, and training elements that support this system for both counties.

Beginning in FY 2018-19 Health and Human Services integrated the operating budgets of the traditional mental health services and the Mental Health Services Act (4-104) budget units. In practice, Sutter-Yuba Behavioral Health has always been an integrated operation.

Major Budget Changes

Salaries & Benefits

• \$682,782 General increase due to step increases and increased benefits cost

Services & Supplies

- \$219,969 Increase in Software License & Maintenance related to a more accurate accounting of the Electronic Health Record System
- (\$91,000) Decrease in Computer Hardware based on Behavioral Health's plan to update all computer Systems that are greater than 4 years old
- \$1,199,866 Increase in Professional and Specialized Services based on contract costs for programs
- (\$454,000) Decrease in Employment Training based on a more accurate accounting of training needs for Behavioral Health staff
- \$118,877 Increase in ISF Liability Premium charges as provided by the Risk Management
- \$203,694 Increase in ISF Worker's Comp Premium charges as provided by the Risk Management

Other Charges

- \$159,500 Increase in Support and Care of Persons based on actuals and historic costs
- \$254,618 Increase in IF Cost Plan charges as provided by the Auditor-Controller's Office

Capital Assets

- \$75,000 Replacement two vehicles, Full-Size Passengers Vans
- \$35,500 New vehicle, Mid-Size SUV
- \$33,000 New vehicle, Minivan
- \$250,000 Replacement the Passpoint system at 1965 Live Oak Blvd

Other Financing Uses

- (\$499,869) Decrease in Operating Transfer-Out Capital Projects due to temporally hold off the Parking Lot project
- \$1,623,754 Increase in Operating Transfer-Out Capital Projects for utilizing Realignments funding for Health & Human Services Building project

• (\$2,273,307) Decrease in Operating Transfer-Out in reimbursing advance from MHSA

Revenues

- \$102,469 Increase in Mental Health Grant Revenue
- \$412,211 Increase in Federal Mental Health Medi-Cal based on increased billing rate
- \$83,000 Increase in Other Current Services Charges related to Transport Billing with Managed Care
- (\$100,000) Decrease in Interfund Transfer from Social Services for Wrap Around Services. This will now be provided by a contractor
- \$92,535 Increase in Interfund Transfer In due to services provided to other HHS Branches
- (\$2,211,286) Decrease in Operating Transfer-In from MHSA
- \$147,904 Increase in Operating Transfer-In from Realignment

Program Discussion

Sutter-Yuba Behavioral Health (SYBH) has served between 5,500 and 6,000 unique mental health clients each year, for numerous years. Over the past decade, there has been an increase in demand for behavioral health services for a variety of reasons in both counties, including, but not limited to, Medi-Cal consolidation, expanded children's services, growth in population, and 1991 and 2011 Realignment.

In 1991, responsibility for funding Specialty Mental Health Services was realigned from the state to counties. Revenue to fund these services came from dedicated shares of Vehicle License Fees (VLF) and sales taxes. During FY 2011-12, the State realigned responsibility for additional mental health and Substance Use Disorder (SUD) services to counties along with an additional dedicated portion of sales taxes to fund them.

The areas realigned are: EPSDT, Mental Health Managed Care, Drug Courts, Drug Medi-Cal and Non-Drug Medi-Cal Treatment Services. These services, previously funded by State General Fund monies, are now funded through VLF and sales tax.

SYBH has a contract with Youth for Change to provide community-based services to youth. SYBH provides substance use disorder treatment services to residents of Sutter and Yuba Counties under contracts with the California Department of Health Care Services (DHCS), which include significant funding from federal Substance Abuse Prevention and Treatment (SAPT) block grants. SYBH provides several judicially-linked programs. During FY 2011-12, Public Safety Realignment shifted responsibility for certain offenders from the state to counties and funding became available to continue and expand services in collaboration with the Probation Department.

SYBH has staff that are integrated with Yuba and Sutter County Probation to provide services related to Public Safety Realignment.

SYBH also provides an intensive day treatment program to pregnant women and women with small children under its First Steps program. First Steps is widely recognized to be a very effective substance use disorder treatment program with many successful graduates in our communities.

Although responsibility for Drug Medi-Cal (DMC) services has been realigned to counties, local DMC providers are currently contracted directly with DHCS. There are presently two of these agencies in our community. Beginning FY 2019-20, SYBH assumed responsibility for oversight of these contractor-provided services.

SYBH, under funding agreements with Sutter and Yuba Counties' Social Services agencies, provides additional treatment services in the Child Protective Services and the California Work Opportunity and Responsibility to Kids (CalWORKs) programs of both counties.

During FY 2016-17, SYBH entered into a relationship with Rideout Memorial Hospital. Psychiatric Emergency Services (PES) Crisis Counselors are embedded 24/7 at Adventist Health-Rideout Emergency Department (ED). Individuals placed on an involuntary hold under Welfare and Institutions Code §5150 are now taken directly to the Adventist Health-Rideout ED for assessment. This arrangement has proven to be beneficial for SYBH, Adventist Health-Rideout, and the community. Crisis services are still available for voluntary clients at the main SYBH facility on Live Oak Boulevard.

Mental Health Services Act

The Mental Health Services Act (MHSA), also known as Proposition 63, was passed by the voters in November 2004. The passage of Proposition 63, provided the first opportunity in many years for Sutter-Yuba Behavioral Health (SYBH) to provide increased funding, personnel, and other resources to support county mental health programs and monitor progress toward statewide goals for children, transition age youth, adults, older adults, and families. MHSA funds for counties are used to expand and transform mental health services.

The MHSA has five components: Community Services and Support, Prevention & Early Intervention, Innovation, Capital Facilities & Technology Needs and Workforce Education and Training. SYBH has had approved programs in four out of the five MHSA components. These components and programs can be found in Sutter Yuba Behavioral Health MHSA Plan.

FY 2019-20 Accomplishments

- The Second Step Bullying Prevention is a whole-school bullying prevention program designed for grades K-5. A 30-minute interactive lesson plan is implemented each week over five lessons covering topics such as recognizing and reporting bullying, as well as bystander intervention.
- Psychiatric Emergency Services (PES) co-located with Adventist Health + Rideout (AHRO) in the Emergency Room and through our Crisis Clinic located at 1965 Live Oak Blvd, provided over 2,500 community residents with Crisis Services

- Extensive collaborative worked with Yuba County, with other Sutter County departments, and within the department to address homelessness
- Implemented an Open Access Clinic re-design for our Youth Services Triage. This hybrid model includes walk in days, Monday & Thursday 8-10 and appointments. This change has improved client service access, timeliness and efficiency in serving the community.
- Implementation of State Plan Drug Medi-Cal for Sutter-Yuba. In FY 19-20, SYBH became State Plan Drug Medi-Cal certified and can now receive Drug Medi-Cal reimbursement for all DMC services that they provide. In the past, local DMC providers were contracted directly with DHCS and SYBH had a portion of their realignment funds allocated for payment. Now, SYBH contracts directly for DMC services and assumes responsibility for oversight of these contractor-provided services. There are presently two of these agencies in our community, as well as other contractors out of county.

FY 2020-21 Budget Discussion

Sutter Yuba Behavioral Health's rates are required by federal law to be based on actual costs. Medi-Cal is billed using interim rates, estimated based on costs from a prior year, and these rates are then reconciled to actual costs at the end of each fiscal year through a mandated cost report process. For FY 2020-21, the interim rates are based on the FY 2016-17 Cost Report.

Several factors are affecting the FY 2020-21 Behavioral Health budget:

- In FY 2019-20, the world was dealing with a major health pandemic, COVID-19. This pandemic shut down counties, cities and states across the world. For California, this created an immediate reduction of sales tax and personal income revenue. Therefore, projections of reduced Mental Health Realignment (1991 and 2011) had to be applied. It is anticipated that the negative financial effects of COVID-19 will continue through FY 20-20-21 with reduced Realignment revenue.
- Mental Health Realignment (1991) revenue originally based on portions of sales taxes and motor vehicle license fees is now based only on an increased portion of sales tax revenue due to 2011 Realignment.
- Statewide growth in Realignment funding paid for increasing caseloads in Child Welfare Services, Foster Care, and/or In Home Supportive Services (IHSS) programs, by statute, have first draw on Realignment growth dollars. Realignment funding is used as a match to draw down the Federal share of Medi-Cal revenue.
- Untimely and inconsistent audits conducted by the Department of Health Care Services audits can be four to five years in arrears.
- No Place Like Home Initiative (NPLHI), passed in 2016, will divert a portion of MHSA funds to provide bond funds for affordable housing to a target population of individuals, who are living with serious mental illness and who are homeless or at risk of homelessness. Some

of the funding will be in the form of grants for which counties, or groups of counties, will have to compete for.

The complexity of mental health and SUDS funding and programs has increased for a variety of reasons, including 2011 Realignment and major changes to MHSA's payment methodology. This increased complexity along with other state regulations has required additional administrative staffing hours in Administration and Finance and in Quality Assurance.

Goals in FY 2020-21

- Maintain financial performance necessary for the continuing provision of quality services. This includes increasing billable services for services provided in the Psychiatric Health Facility.
- Seek additional federal, state and local funding to support the expansion of services to individuals served by Sutter-Yuba Behavioral Health. This includes applying for state grants to support our homeless population who are suffering from mental illness.

Recommended Budget

Total appropriations are recommended at \$51,195,755 an increase of \$1,333,158 (2.7%) over the FY 2019-20 Adopted Budget. This budget is within the Behavioral Health Fund and there is no Net County Cost.

The following Capital Assets are recommended:

- \$75,000 Replacement two vehicles, Full-Size Passengers Vans
- \$35,500 New vehicle, Mid-Size SUV
- \$33,000 New vehicle, Minivan
- \$250,000 Replacing the Passpoint system at 1965 Live Oak Blvd

Capital Project for 850 Gray Ave Human Services Building has been budgeted in the Human Services Building budget unit 1-806:

• \$1,623,754 of Behavioral Health Realignments funding is transferred to 1-806 for the project

Use of Fund Balance

The Behavioral Health Fund contained a Restricted Fund Balance in the amount of \$7,198,698 as of July 1, 2019. It is estimated the Restricted Fund Balance will equal \$10,874,755 at July 1, 2020. It is recommended to cancel \$7,023,637 of Restricted Fund Balance in FY 2020-21.

COUNTY OF SUTTER EXECUTIVE SUMMARY Fiscal Year 2020-2021							
Fund: 0012 - HEALTH Unit Title: COUNTY HEALTH					Dept: 4103		
	2018-2019 Actual Expenditure	2019-2020 YTD as of 05/29/2020	2019-2020 Adopted Budget	2020-2021 CAO Recommended	2019-2020 % Change Over		
EXPENDITURES							
SALARIES AND EMPLOYEE BENEFITS	4,630,572	4,188,869	6,003,565	5,929,382	-1.2		
SERVICES AND SUPPLIES	1,155,469	983,522	1,306,643	1,356,369	3.8		
OTHER CHARGES	321,543	546,657	585,890	734,930	25.4		
CAPITAL ASSETS	7,615	54,602	0	34,500	100.0		
INTRAFUND TRANSFERS	195,715	0	239,521	206,323	-13.9		
OTHER FINANCING USES	79,637	86,272	87,269	392,355	349.6		
NET BUDGET	6,390,551	5,859,922	8,222,888	8,653,859	5.2		
REVENUE							
FINES, FORFEITURES, PENALTIES	102	170	0	0	0.0		
INTERGOVERNMENTAL REVENUES	2,224,235	1,484,738	3,241,187	3,937,399	21.5		
CHARGES FOR SERVICES	182,819	74,291	202,383	88,888	-56.1		
MISCELLANEOUS REVENUES	0	3,860	0	0	0.0		
OTHER FINANCING SOURCES	446,065	56,292	797,385	879,458	10.3		
TOTAL OTHER REVENUE	2,853,221	1,619,351	4,240,955	4,905,745	15.7		
UNREIMBURSED COSTS	3,537,330	4,240,571	3,981,933	3,748,114	-5.9		
ALLOCATED POSITIONS	61.20	60.95	60.20	60.95	1.2		

Purpose/Mission

Sutter County Health and Human Services Department promotes health, safety, economic stability, and quality of life for our community. Public Health Branch includes three distinct service areas: Public Health Programs, Indigent Care Services, and Jail Medical Services.

Public Health programs are responsible for providing basic preventive health services to the residents of Sutter County to improve the health and wellness of the individual in accordance with the mandates of the Health and Safety Code, the California Code of Regulations, Title 17 and Title 22. The Indigent Care component of the Branch addresses the non-emergency and emergency medical care to Sutter County indigent residents. Jail Medical Services provides healthcare to individuals incarcerated in the County Jail. The Jail Medical Services budget unit (4-134) is discussed in its own narrative.

Major Budget Changes

Salaries & Benefits

• (\$106,173)Decrease related to transferring one (1.0 FTE) Child Development Behavioral Specialist into the Health and Human Services Administration (4-120) budget unit, effective during FY 19-20

- (\$238,654)Decrease related to contracting out Health Officer with Yuba County, effective during FY 2019-20
- \$125,644 General increase due to step increases and increases in benefit costs
- \$145,000 Increase in Extra Help for Staffing the Better Way Shelter

Services & Supplies

- \$303,179 Increase in Professional and Specialized Services primarily related to the approval contract Public Health Officer with Yuba County, Security and portable toilets at Better Way Homeless Shelter, and Hands of Hope Homeless Coordinated Entry Contract
- (\$204,542) Decrease in Rents/Leases Structures/Ground related to final payment of 2009 Refunding Lease Purchase for 1445 Veterans Memorial Circle on January 1, 2020
- (\$19,867) Decrease in ISF Workers' Compensation Premium charges as provided by the Human Resources Department

Other Charges

- (\$50,000) Decrease in Homeless Pilot Program due to Better Way Shelter opening
- \$213,914 Increase in Interfund Cost Plan charges as provided by the Auditor-Controller's Office

Capital Assets

• \$34,500 Replacement one vehicle -Mid-Size SUV

Intrafund Transfers

• (\$33,198) Decrease in Intrafund Human Services Administration related to staffing and organizational changes

Revenues

- \$827,064 Increase in State Grants relating to Homeless Housing, Assistance and Prevention Grant (\$247,380), Community Development Block Grant (\$139,592), and Department of Health Care Service Navigator Grant (\$440,019)
- \$68,204 Increase in CalWorks-Home Visiting Initiative
- (\$47,596) Decrease in State Pre-Natal Grant

- \$10,366 Increase in State Foster Care Grant
- (\$176,614) Decrease in State CCS Administration Grant
- (\$72,000) Decrease in Federal WIC Funding
- (\$72,428) Decrease in Children & Families revenue due to transfer of Child Development Behavioral Specialist position to Children & Families Budget
- (\$40,741) Decrease in Interfund Miscellaneous Transfer from Welfare for Child Development Behavioral Specialist position that was transferred to Children & Families Budget

Program Discussion

This budget funds the Public Health Branch that staffs and operates the County's Public Health programs and oversees the provision of services to medically indigent Sutter County residents.

The goal of the Public Health services and programs is to optimize health and well-being of the people in Sutter County, primarily through population-based programs, strategies, and initiatives.

Historically, the top priorities of the Public Health Branch have included communicable disease control and child health programs. In recent years the priorities have included the provision of a number of special programs for community and individual wellness and improvement of lifestyle, with the goal of reducing chronic disease incidence. This branch is also responsible for preparing for and responding to public health emergencies, including natural disasters, acts of terrorism, and pandemic diseases.

Indigent Health Care and County Medical Services Program (CMSP)

Welfare and Institutions Code §17000 requires counties to provide healthcare to indigent adults. Medi-Cal expansion, through the Affordable Care Act (ACA), passed by Congress in March 2010, covers adults up to 138% of Federal Poverty Level (FPL) which has provided expanded coverage for indigent adults. All counties have retained responsibilities for public health and health care services for indigent adults. Funding for these services was addressed through AB85.

In 2013, in anticipation of the implementation of the federal Affordable Care Act (ACA) and the expansion of Medi-Cal to cover low income uninsured adults, the provisions of Health Realignment were substantially revised and most revenue previously dedicated to indigent health care was redirected to the State of California. Counties participating in CMSP retained only a portion of the revenue for continued provision of health care services to the remaining uninsured left uncovered by the ACA. Today, CMSP is funded exclusively by this revenue.

Since the implementation of the ACA, the Public Health Branch has implemented innovative public health programs and services, including outreach to vulnerable populations and targeted health promotion and chronic disease prevention campaigns through CMSP.

Repeal of the ACA would increase the number of uninsured through loss of Medi-Cal or Covered California coverage, which causes an increased use of emergency rooms. The repeal of the ACA without a comprehensive and simultaneous replacement may lead to the Public Health program to rapidly reconstitute indigent health care systems in an uncertain marketplace and fundamentally reduce the capacity to continue prevention strategies.

Jail Medical Services

Effective May 1, 2017, the County began contracting with California Forensic Medical Group (CFMG) for Jail medical and behavioral health services. The Public Health Branch assists with oversight of the jail medical services at the Sutter County Jail. The jail medical costs and program description are reflected in the Jail Medical Services (4-134) budget unit.

Homelessness

Health and Human Services - Public Health Branch, and all of Sutter County, is seeing a crisis playing out on the streets of our county's communities. These are the homeless men and women, some living with disabling conditions. It is a common goal of many of our community leaders and residents to end homelessness in general for those homeless community members who share this goal. To achieve this goal, attention must be given to useful interventions. Interventions that are data driven, are research informed, and prioritizes more immediate access, for example, to permanent housing. Intervention strategies that work have to be reinforced and attention to applying for governmental or private grants to address those strategies is crucial.

As part of this effort to reduce homelessness, the County opened up the Better Way Shelter in September 2019. The amount of homeless individuals has doubled to 721 since 2007. In order to participate in the program, clients must be 18 years of age, resident of Sutter County, and registered in Coordinated Entry, operated by Hands of Hope. The housing assistance program seeks to guide eligible applicants to permanent housing. The program provides temporary on-site stay and the opportunity for individual case management – in other words, client-centered care.

Accreditation

The Public Health Branch is preparing to become an accredited "Public Health Department." Public Health Accreditation is the measurement of health department performance against a set of nationally recognized, practice-focused and evidenced-based standards.

The goal of the voluntary national accreditation program is to improve and protect the health of the public by advancing the quality and performance of the Public Health Branch as well as to improve service, value, and accountability to stakeholders. The Accreditation Coordinator is responsible for managing and coordinating the accreditation process within the Public Health Branch Accreditation Team. It is anticipated that the Community Health Assessment and an associated Community Health Improvement Plan will be developed in the coming year.

Funding of the Public Health Branch

Overall, the FY 2020-21 Public Health Branch budget reflects an attempt to maintain programs at a consistent level along with increased services to protect the public health of the community, with consideration given to current funding and actual needs of the community. Public Health Branch services are financed through a combination of County General Fund dollars, State grants, and 1991 Realignment funds.

Public Health Pandemic – COVID-19

In FY 2019-20, the world was dealing with a major health pandemic, COVID-19. This pandemic shut down counties, cities and states across the world. Public Health operations are greatly impact by this pandemic. While the costs to deal with this public Health emergency increased, loss of sales tax and realignment revenues post negative financial impact for the County's budget. A large percentage of Public Health staff participated in the local COVID-19 response, providing epidemiological service, contact tracing, public information dissemination and other public health services as part of the bi-county department operations center (DOC).

Goals for FY 2020-21

- Standardize program data collection and improve data utilization in setting public health program goals and evaluating program effectiveness.
- Seek additional federal, state and local funding to support the expansion of Public Health services to improve community health outcomes, including Public Health priorities such as reducing homelessness reducing sexually transmitted diseases and other core activities.

Recommended Budget

Total appropriations are recommended at \$8,653,859, an increase of \$430,971 (5.2%) over the FY 2019-20 Adopted Budget. The General Fund provides 42.2% of the funding for the Public Health budget units and Net County Cost is decreased by \$208,429 compared to the FY 2019-20.

The County has a required contribution of \$674,240 to satisfy the County's AB8 required match. The County's contribution is reflected in the Health Care General (4-110) budget unit and the Health-County Share (4-112) budget unit. The balance of cost for the Health budget unit is covered by 1991 Health Realignment revenue.

35.28 FTE of the 60.95 FTE positions contained in the Public Health budget, are grant funded.

Use of Fund Balance

This budget unit is within the Health Fund and does not include the use of any specific fund balance.

COUNTY OF SUTTER EXECUTIVE SUMMARY Fiscal Year 2020-2021							
Fund: 0012 - HEALTH Unit Title: JAIL MEDICAL SERVICES					Dept: 4134		
	2018-2019 Actual Expenditure	2019-2020 YTD as of 05/29/2020	2019-2020 Adopted Budget	2020-2021 CAO Recommended	2019-2020 % Change Over		
EXPENDITURES							
SALARIES AND EMPLOYEE BENEFITS	124,764	80,759	148,344	149,037	0.5		
SERVICES AND SUPPLIES	2,946,011	2,761,185	3,076,610	3,476,716	13.0		
OTHER CHARGES	6,613	1,293	138,286	138,261	0.0		
OTHER FINANCING USES	93	0	0	53	100.0		
NET BUDGET	3,077,481	2,843,237	3,363,240	3,764,067	11.9		
REVENUE							
FINES, FORFEITURES, PENALTIES	1,440	3,697	0	0	0.0		
INTERGOVERNMENTAL REVENUES	0	0	0	889	100.0		
MISCELLANEOUS REVENUES	1,036	94	0	0	0.0		
OTHER FINANCING SOURCES	323,734	150,470	364,941	362,462	-0.7		
TOTAL OTHER REVENUE	326,210	154,261	364,941	363,351	-0.4		
UNREIMBURSED COSTS	2,751,271	2,688,976	2,998,299	3,400,716	13.4		
ALLOCATED POSITIONS	0.00	0.00	1.00	0.00	0.0		

Purpose/Mission

The operation of the Jail Medical Services program is administered by the Sutter County Health and Human Services – Public Health Branch. The Director of Sutter County Health and Human Services or his/her designee is the Health Authority responsible for the arrangement of all levels of healthcare, including medical and nursing coverage.

Jail Medical Services are provided to inmates in conformance with an Amended Settlement Agreement the County entered into in 1994 with the United States District Court for the Eastern District of California, and in accordance with the minimum standards of the California Board of Corrections and Title 15 of the California Code of Regulations.

Major Budget Changes

Services & Supplies

• \$413,177 Increase in Professional and Specialized Services related to the jail medical contract with California Forensic Medical Group, Inc. (WellPath)

Program Discussion

The Jail Medical Services budget represents the costs of providing nursing and psychiatry coverage in the jail seven days per week, 24 hours per day; sick-call coverage by Physicians and/or Nurse Practitioners; medical supplies including pharmaceuticals; emergency room care; inpatient hospital care; referrals to medical specialty providers; and dental care.

A contract with California Forensic Medical Group, Inc. (CFMG) (WellPath) was approved to provide Medical and Behavioral Health Services at the Sutter County Jail beginning May 1, 2017.

Continued Impacts of 2011 Realignment & Proposition 47

According to the Board of State and Community Corrections, the average length of stay, in days, for sentenced inmates has increased by ten percent since implementation of AB109. In addition, there has been a gradual increase in average length of stay prior to release for all sentenced and non-sentenced inmates. Demand on jail medical services continues as the overall complexity and serious nature of inmate healthcare needs remain high.

On November 4, 2014, California voters approved Proposition 47, which makes significant changes to the state's criminal justice system. Specifically, it reduces the penalties for certain non-violent, non-serious drug and property crimes. This will reduce the short-term incarcerations, but could ultimately result in a higher population in County jails as space is made available for those with longer sentences.

The severity of inmate health, mental health, and substance use disorders and the problems presented upon booking continue to result in high utilization of inpatient hospital days, emergency room visits, pharmaceutical costs, and Jail Medical Service staff time. Specialty medical services such as kidney dialysis, orthopedic surgeries, and high medication costs associated with HIV infections, diabetes, as well as liver and kidney diseases have jointly contributed to an increase in medical supply costs and expenses related to the support and care of inmates.

Recommended Budget

Total appropriations are recommended at \$3,764,067, an increase of \$400,943 (11.9%) compared to FY 2019-20. Costs related to the provision of health care to individuals held at or incarcerated in the County Jail, including administration costs, that are not funded by AB109 Public Safety Realignment funds are funded by a combination of 1991 Realignment funding and General Fund. A onetime transfer in the amount of \$250,000 from the SB910 Medical Special Revenue Fund to Health Care -General budget unit 4-110, is used to cover part of this increase. The General Fund provides the remaining 83.7% of the funding for this budget. Net County Cost is increased by \$152,417 for FY 2020-21.

The total cost of Jail Medical Services is cost-applied back to the Jail budget through a separate transfer between the Jail (2-301) budget unit and the General Revenues (1-209) budget unit. This transfer is for presentation purposes and does not result in any increased cost or revenue in the overall budget.

Use of Fund Balance

This budget unit is within the Health Fund and does not include the use of any specific fund balance.

COUNTY OF SUTTER EXECUTIVE SUMMARY Fiscal Year 2020-2021							
Fund: 0012 - HEALTH Unit Title: NON-COUNTY PROVIDERS					Dept: 4201		
	2018-2019 Actual Expenditure	2019-2020 YTD as of 05/29/2020	2019-2020 Adopted Budget	2020-2021 CAO Recommended	2019-2020 % Change Over		
EXPENDITURES							
SERVICES AND SUPPLIES OTHER CHARGES	26,400 452,402	22,000 325,932	26,400 762,797	26,400 702,378	0.0 - 7 .9		
NET BUDGET	478,802	347,932	789,197	728,778	-7.7		
REVENUE							
OTHER FINANCING SOURCES	19,824	0	25,000	77,608	210.4		
TOTAL OTHER REVENUE	19,824	0	25,000	77,608	210.4		
UNREIMBURSED COSTS	458,978	347,932	764,197	651,170	-14.8		
ALLOCATED POSITIONS	0.00	0.00	0.00	0.00	0.0		

Purpose/Mission

Sutter County Health and Human Services Department promotes health, safety, economic stability, and quality of life for our community. Sutter County Health and Human Services – Public Health Branch administers this budget unit, which includes the County's share of the cost of health programs that are provided to County residents by County Departments outside of the Health Fund or by health related non-County agencies.

Major Budget Changes

Other Charges

• (\$60,419) Decrease in Interfund Environmental Health as provided by the Development Services

Revenues

• \$52,608 Increase in Operating Transfer-In from EMS Fund

Program Discussion

Emergency Medical Services

This budget unit appropriates Sutter County's cost for participation in the Joint Powers Agreement for the Sierra Sacramento Valley Emergency Medical Services (S-SV EMS) Agency. Sutter County's share in the EMS Agency is based on the per capita population rate of forty-one cents (\$0.41), plus a

Health and Human Services Non County Providers (4-201)

\$10,000 base, for a total of \$51,208. The calculated cost for participation in this joint powers agreement is based on California State Department of Finance projections for the population of Sutter County. It is anticipated additional funds may be required should the Department of Finance population projections for Sutter County differ from those used by Public Health or if the per capita rate of \$0.41 changes. A portion of this fee is offset by the use of Emergency Medical Services Fund (Maddy Act) (0-252).

The S-SV EMS Agency performs the duties of qualification, accreditation, and authorization of all prehospital care personnel, EMS system design, and compliance with related local and state regulations.

County Medical Services Program

Sutter County has participated in the CMSP since 1983. Sutter County participates in the County Medical Services Program (CMSP) through an agreement between the County and Governing Board of the CMSP. CMSP provides limited-term health coverage for uninsured low-income, indigent adults that are not otherwise eligible for other publicly funded health programs, in 35 rural and semi-rural counties. CMSP and its authority are established in California Welfare and Institutions Code §16809 et seq. This budget contains the CMSP Participation Fee of \$188,781, an amount set by legislation for the County to participate in the CMSP. The County's required CMSP Participation Fee, which pursuant to WIC §16809.3(d) may not be paid with Health Realignment funds, and pursuant to WIC §16990(e) may not be included in determining compliance with any other statutory Maintenance of Effort provisions, is paid for with a General Fund contribution (reflected as revenue in the Health – General budget unit). This participation fee was not eliminated with Health Realignment and AB 85. However, in FY 2014-15 through FY 2018-19, actual expenses decreased by \$188,781 due to a waiver of the CMSP Participation Fee. It is not known if this fee waiver will be applied in subsequent years.

The Governing Board has received funding from counties participating in CMSP and funds allocated to CMSP from State Health Realignment revenues. As a part of the FY 2013-14 State Budget, changes were enacted that reduced Health Realignment funding provided to counties and the CMSP Governing Board for the delivery of healthcare services through CMSP. The changes pertaining to CMSP counties and the Governing Board were a part of a set of changes that redirected Health Realignment funding from all counties to the State beginning in January 2014.

Welfare and Institutions Code §17600.50(a) was enacted as part of the Realignment Trailer Bills to the FY 2013-14 State Budget and reduced overall funding for CMSP beginning January 2014. A redirection of 60% of the Health Realignment revenues that would otherwise be provided to CMSP counties and the Governing Board now goes to the new State Account, the Family Support Services Subaccount. Importantly, the new law limits the amount of Health Realignment funds that will be redirected from each CMSP county in any year to the amount each county would otherwise pay to the CMSP Governing Board to participate in CMSP. WIC §17600.50(a) effectively protects County Health Realignment funding for local purposes and limits each CMSP County's Health Realignment contribution to the State, and provides funding to CMSP to assist in providing services for the remaining uninsured.

The expansion of the Medi-Cal program due to the implementation of the Affordable Care Act (ACA) has resulted in a significant reduction in the number CMSP enrollees throughout the counties including

Health and Human Services Non County Providers (4-201)

Sutter County. The Governing Board, since FY 2016-17, has been proposing revisions to its mission to include developing pilot projects and alternatives that support improved delivery of health care services.

Environmental Health

In FY 1993-94, the Board of Supervisors transferred Environmental Health Services from Public Health to the Development Services Department (Community Services at that time). Since that time, the unreimbursed cost of the Environmental Health program has been reflected in the Non-County Providers budget unit.

Therefore, this budget unit includes an amount to be transferred to the Environmental Health (2-725) budget unit, a division of the Development Services Department. Environmental Health services is part of the County's required healthcare programs following 1991 Realignment. As long as Sutter County continues to meet its overall expenditure level for healthcare, for the receipt of 1991 Realignment dollars within the Health Fund, a reduction in the transfer to Environmental Health will ultimately reduce the amount of General Fund dollars that need to be transferred to the Health Fund to support public health activities.

Recommended Budget

Total appropriations are recommended at \$728,778, a decrease of \$60,419 (-7.7%) over the FY 2019-20 Adopted Budget. The General Fund provides 89.4% of the financing for this budget unit and Net County Cost is decreased by \$113,027 (14.8%) over the FY 2019-20 Adopted Budget. The County is currently in a multi-year contract with Bi-County Ambulance Services for indigent medical transportation. The annual cost for these services is \$26,400.

The County share for participation in the EMS Agency is recommended at \$51,208. The anticipated cost for participation in this joint powers agreement is based on California State Department of Finance projections for the population of Sutter County. The total budget is partially offset with a transfer in from the Emergency Medical Services Special Revenue Fund (0-252), in the amount of \$77,608.

This budget continues to reflect the CMSP Participation Fee of \$188,781, as set by statute, for the County to participate in the CMSP.

The budget also includes \$462,389 to be transferred to the Environmental Health (2-725) budget unit.

Use of Fund Balance

This budget unit is within the Health Fund and does not include the use of any specific fund balance.

Health and Human Services California Children's Services (CCS) (4-301)

COUNTY OF SUTTER EXECUTIVE SUMMARY Fiscal Year 2020-2021						
Fund: 0012 - HEALTH Unit Title: CALIFORNIA CHILDREN S		2020-2021			Dept: 4301	
	2018-2019 Actual Expenditure	2019-2020 YTD as of 05/29/2020	2019-2020 Adopted Budget	2020-2021 CAO Recommended	2019-2020 % Change Over	
EXPENDITURES						
SERVICES AND SUPPLIES	0	0	70,480	70,480	0.0	
OTHER CHARGES NET BUDGET	59,159 59,159	151,711 151,711	210,368 280,848	210,368 280,848	0.0	
REVENUE						
OTHER FINANCING SOURCES	141,150	0	141,150	141,150	0.0	
TOTAL OTHER REVENUE	141,150	0	141,150	141,150	0.0	
UNREIMBURSED COSTS	-81,991	151,711	139,698	139,698	0.0	
ALLOCATED POSITIONS	0.00	0.00	0.00	0.00	0.0	

Mission

Sutter County Health and Human Services Department promotes health, safety, economic stability, and quality of life for our community. The California Children's Services (CCS) Program is a State mandated program to the County under Article 2, Section 248 of the Health and Safety Code.

Major Budget Changes

There are no major budget changes for FY 2020-21.

Program Discussion

The California Children's Services (CCS) program has been in continuous operation since it was established in 1927 by the State Legislature. CCS is a statewide tax-supported program of specialized medical care and rehabilitation for eligible children. It is a program that is administered as a partnership between local health departments and the California Department of Health Care Services (DHCS). The program provides diagnostic and treatment services, medical case management, and physical and occupational therapy services to children under the age of 21 with a CCS-eligible medical condition for which families cannot afford wholly, or in part, to pay. Examples of CCS-eligible conditions include, but are not limited to, chronic medical conditions such as cystic fibrosis, hemophilia, cerebral palsy, heart disease, cancer, traumatic injuries, and infectious diseases producing major injury or disability.

For counties with populations under 200,000 (dependent counties), the Children's Medical Services (CMS) Branch provides medical case management and eligibility and benefits

Health and Human Services California Children's Services (CCS) (4-301)

determination through its regional offices located in Sacramento, San Francisco, and Los Angeles. Dependent counties interact directly with families and make decisions on financial and residential eligibility. Some dependent counties have opted to participate in the Case Management Improvement Project (CMIP) to partner with regional offices in determining medical eligibility and service authorization. The regional offices also provide consultation, technical assistance, and oversight to independent counties, individual CCS paneled providers, hospitals, and the Special Care Centers within their region. DHCS and Sutter County professional medical staff work in partnership to manage the caseload of children enrolled in this program. Sutter County CCS program has been considered a CMIP Level II program, which includes additional roles such as Durable Medical Equipment authorization, extension of treatment authorization, and annual medical review.

In an effort to provide timely services to children, in FY 2017-18 Sutter County voluntarily applied for and was approved to change from a CMIP Level II to Level III with the understanding that the DHCS will be available to review cases and provide assistance. Sutter County can request a change in CMIP status back to a Level II at any time.

Prior to FY 1991-92, the cost of services provided under the CCS program was shared between the State and the County on a 75/25 percent basis, respectively. The State's "realignment" of health, mental health, and social services programs, which was enacted in 1991, shifted a higher percentage of the costs to counties. The cost-sharing ratio is now 50/50. The additional 25% of cost shift to Sutter County is offset from the 1991 Realignment funds shifted to the County from the State. CCS Realignment funds are, per statute, placed in the Social Services Trust Account. The assumption made in placing CCS funds in the Social Services Trust Account was that it would assure funding of caseload growth every year. The 25% realigned amount that is transferred from the Social Services Trust Account is the only amount within the Health Division that is subject to the Realignment growth allocation.

State statute requires a minimum county share of cost for the CCS program equal to at least 50% of the total actual expenditures for the CCS program in FY 1990-91, unless the State certifies that a smaller amount is required. Sutter County's share of cost is established at \$154,465, with the State then matching that amount on a dollar-for-dollar basis. Historically, Sutter County's policy had been to budget an "overmatch" to the State's contribution of \$154,465, with the understanding that the State would contribute additional matching funds as needed. The county share of cost is met with Realignment revenues.

CCS and Managed Care

CCS caseloads and program costs have steadily increased over time. This increase places demands both on the service delivery side and on the financing of the program. As fiscal pressures have increased on the California State Budget, the State CCS program is now limiting the state's financial participation in the program, which is further de-stabilizing the program.

DHCS has developed a proposed "Whole-Child Model" (WCM) to be implemented in specified counties only. This model is described as an organized delivery system that will assure

Health and Human Services California Children's Services (CCS) (4-301)

comprehensive, coordinated services through enhanced partnerships among Medi-Cal managed care plans, children's hospitals, specialty care providers, and counties.

In 2016, SB 586 (Chapter 625, Statutes of 2016) was enacted, which transitions the care coordination and service authorization functions for Medi-Cal beneficiaries from the county, to the managed care plan in 21 County Organized Health System (COHS) counties. Counties will continue to assume these functions for non-Medi-Cal CCS beneficiaries. Further, counties will continue to make initial and periodic financial, residential and medical eligibility determinations for all CCS beneficiaries. The Medical Therapy Program will also remain the county's responsibility. There are 33 counties where the WCM is not offered, Sutter County, being in this group of counties. The non-COHS counties remain carved out of managed care until 2022 and until an evaluation of the WCM has been completed.

Recommended Budget

This budget is recommended at \$280,848, the same as the FY 2019-20 Adopted Budget. Net County Cost of \$139,698 is the same as FY 2019-20. At this time, the State has not determined the amount of its contribution to the Sutter County CCS Program for FY 2020-21. As mentioned in the program discussion, in the past, as a policy item, the County has budgeted an amount in excess of the county share of cost in order to meet the potential demand for service, which can be very volatile. The budget recommendation is consistent with the Board of Supervisors' past policy in this area and is the same as the prior year's Adopted Budget. However, the Board could opt to reduce this budget request to the minimum county share of cost of \$154,465, to match a potential reduced State contribution. At this time, it is not known whether the State contribution would match the amount appropriated. There is no General Fund impact in adopting a consistent overmatch methodology.

Use of Fund Balance

This budget unit is within the Health Fund and does not include the use of any specific fund balance.

Health and Human Services Emergency Medical Services Fund (0-252)

COUNTY OF SUTTER EXECUTIVE SUMMARY Fiscal Year 2020-2021								
Fund: 0252 - EMERGENCY MEDICA Unit Title: EMERGENCY MEDICAL SER					Dept: 0252			
	2018-2019 Actual Expenditure	2019-2020 YTD as of 05/29/2020	2019-2020 Adopted Budget	2020-2021 CAO Recommended	2019-2020 % Change Over			
EXPENDITURES								
SERVICES AND SUPPLIES	152,413	58,789	132,499	162,849	22.9			
OTHER CHARGES	770	648	785	875	11.5			
OTHER FINANCING USES	32,781	0	38,100	90,708	138.1 48.5			
NET BUDGET	185,964	59,437	171,384	254,432	48.5			
REVENUE								
FINES, FORFEITURES, PENALTIES	111,073	87,069	81,784	103,961	27.1			
REVENUE USE MONEY PROPERTY	18,930	7,720	5,500	10,471	90.4			
CANCELLATION OF OBLIGATED FB	0	0	84,100	140,000	66.5			
TOTAL OTHER REVENUE	130,003	94,789	171,384	254,432	48.5			
UNREIMBURSED COSTS	55,961	-35,352	0	0	0.0			
ALLOCATED POSITIONS	0.00	0.00	0.00	0.00	0.0			

Purpose/Mission Statement

The Sutter County Health and Human Services Department promotes health, safety, economic stability, and quality of life for our community.

Established by the Board of Supervisors in 1990 through Resolution 90-22, Sutter County Health and Human Services – Public Health Branch administers the Emergency Medical Services (EMS) Fund, referred to as Maddy Funds. Counties must use Maddy Fund revenues for purposes established in the statute.

Major Budget Changes

Services & Supplies

• \$30,350 Increase in Physicians Expense

Other Financing Uses

• \$52,608 Increase in Operating Transfer Out to Non-County Provider budget

Revenues

• \$19,696 Increase in Other Court Fines

Health and Human Services Emergency Medical Services Fund (0-252)

Program Discussion

The EMS Fund ('Maddy Fund') reimburses physicians and medical facilities for emergency services provided to patients who are unable to pay for the cost of their medical care. Even though more patients are covered through Medi-Cal via Medi-Cal expansion because of the Affordable Care Act (ACA) or other insurance through Covered California, there has been an increase in expenses for patients who are unable to pay for the cost of their medical care. Maddy Fund revenues are derived from penalty assessments on various criminal offenses, motor vehicle violations, traffic violator school fees, and revenues from taxes and on tobacco products under Proposition 99 (the Tobacco Tax and Health Protection Act of 1988).

Recommended Budget

Total appropriations are recommended at \$254,432, an increase of \$83,048 (48.5%) over the FY 2019-20 Adopted Budget. All appropriations are financed through special revenue. There is no Net County Cost in this budget.

Use of Fund Balance

The EMS fund contains Restricted Fund Balance accounts for each type of expenditure, as established by statute. Allocated funds that are not spent within the fiscal year are placed in the respective Obligated Fund Balance accounts.

The fund also includes a Restricted Fund Balance account for EMS funds collected prior to 2002. Monies held within these accounts may be used, with Board approval, in the event collections in the EMS fund decrease below current levels to pay EMS expenses. The Recommended Budget includes a cancellation of \$140,000 from the Restricted Fund Balance EMS 2002 account (#31108) to offset a portion of the County's share of cost in the Sierra Sacramento Valley Emergency Medical Services (S-SV EMS) Agency and Restricted Fund Balance Physicians account (#31113) to augment Physicians Expenses, which exceed revenues from Other Court Fines.

The cost of the Sierra Sacramento Valley Emergency Medical Services (S-SV EMS) Agency is currently recommended at \$51,208, in the Non-County Provider (4-201) budget unit. Projected Physician Revenue for FY 2020-21 is less than projected Physician Expenses; therefore, the Recommended Budget includes a Cancellation of Obligated Fund Balance from the Restricted Fund Balance Physician account (#31113) in the amount of \$88,792 to fund anticipated Physician Expense claims for FY 2020-21.

COUNTY OF SUTTER EXECUTIVE SUMMARY Fiscal Year 2020-2021								
Fund: 0013 - WELFARE/SOCIAL SERV Unit Title: WELFARE ADMINISTRATION	/ICES				Dept: 5101			
	2018-2019 Actual Expenditure	2019-2020 YTD as of 05/29/2020	2019-2020 Adopted Budget	2020-2021 CAO Recommended	2019-2020 % Change Over			
EXPENDITURES								
SALARIES AND EMPLOYEE BENEFITS	18,115,972	15,978,481	21,009,898	21,496,736	2.3			
SERVICES AND SUPPLIES	3,416,873	2,584,618	3,757,421	4,365,479	16.2			
OTHER CHARGES	4,830,820	3,761,556	5,901,455	6,538,253	10.8			
CAPITAL ASSETS	135,400	0	33,000	197,600	498.8			
OTHER FINANCING USES	339,528	58,942	480,787	272,406	-43.3			
NET BUDGET	26,838,593	22,383,597	31,182,561	32,870,474	5.4			
REVENUE								
INTERGOVERNMENTAL REVENUES	21,517,433	4,367,488	20,958,738	22,245,540	6.1			
CHARGES FOR SERVICES	180,527	0	180,000	180,000	0.0			
MISCELLANEOUS REVENUES	100,441	2,906	19,000	20,500	7.9			
OTHER FINANCING SOURCES	2,873,067	464,995	2,858,390	3,890,655	36.1			
TOTAL OTHER REVENUE	24,671,468	4,835,389	24,016,128	26,336,695	9.7			
UNREIMBURSED COSTS	2,167,125	17,548,208	7,166,433	6,533,779	-8.8			
ALLOCATED POSITIONS	232.00	233.00	231.00	233.00	0.9			

Purpose/Mission

The Sutter County Health and Human Services Department promotes health, safety, economic stability, and quality of life for our community.

The Welfare and Social Services budget unit is operated by the Health and Human Services Department. Health and Human Services, Sutter County's largest department, which is organized into six branches: Administration and Finance, Adult Services, Children's Services, Acute Psychiatric and Forensic Services, Public Health, and Employment and Eligibility.

This budget unit finances personnel and operational costs for a portion of the identified Administration and Finance Branch, Adult Services Branch, Children's Services Branch, and 100% of the Employment and Eligibility Services Branch.

Major Budget Changes

Salaries & Benefits

• \$486,838 General increase due to step increases and increased benefits cost

Services & Supplies

- (\$40,510) Decrease in Office Supplies
- \$ 48,280 Increase in Postage primarily due to increase in mail notifications
- \$411,148 Increase in Professional/Specialized Services primarily related to Wraparound program contract of \$434,778 with Youth for Change
- \$ 46,167 Increase in Data Processing related to CIV maintenance and operation charges
- \$ 49,369 Increase in Rents related to the month to month lease on Holly Oaks offices
- \$125,855 Increase in Worker's Comp. as provided by Risk Management

Other Charges

- \$102,925 Increase in Support and Care of Persons primarily due to anticipated expenses on Bringing Families Home program
- (152,218) Decrease in Support and Care of Persons-CTEC primarily due to anticipated expenses on Bringing Families Home program
- \$370,214 Increase in Temp Aid Needy Family Child Care which aligns to the actual expenditures
- \$412,000 Increase in Housing Support to reflect increase in program allocation
- (\$166,727) Decrease in Interfund Human Services Admin allocated charges
- \$ 91,654 Increase in Mental Health Services Blended Fund charges related to increase in caseload
- (\$59,525) Decrease in Cost Plan charges as provided by the Auditor-Controller's Office

Capital Assets

- \$ 47,600 Addition of two (2) mid-size vehicles
- \$150,000 CWS/CMS computers conversion

Other Financing Uses

• (\$249,980) Decrease in Operating Transfer Out – Capital Projects related to the completion of the parking lot project

Revenues

- \$110.613 Increase in State PA Staff Cost Reimbursement
- \$146,268 Increase in State Grant due to the Bringing Families Home allocation
- \$73,304 Increase in Federal FEMA reimbursement from Camp Fire
- \$960,802 Increase in Intergovernmental Revenues Federal & State primarily due to an increase in Welfare program funding
- \$298,478 Increase in Operating Transfer-In from Health for Health Education State Grant
- \$431,564 Increase in Operating Transfer-In from Social Services Special Revenues Funds
- \$305,003 Increase in Operating Transfer-In from Realignments

Program Discussion

The responsibilities of the Employment and Eligibility Services, Adult Services, and Children's Services Branches within this budget unit include eligibility determinations for assistance programs, CalWORKs Employment Services, Child Welfare Services, Adult Services, and other related activities as mandated by Federal and State law. The Welfare Administration budget unit does not include the direct cost of aid payments (for example TANF or Adoptions Assistance Program payments) to recipients. These costs are reflected in their own budget units.

During FY 2011-12, Public Safety Realignment was implemented, which realigned the funding responsibility for many programs from the State to counties. Because of this shift in funding, Sutter County was mandated to establish the County Local Revenue Fund 2011 (0-140). Beginning in FY 2012-13, the Social Services Realignment Fund 2011 (0-245) was established to transfer funds from the County Local Revenue Fund 2011 to the operating budgets of the Welfare and Social Services Operations. The shift in funding simply changed the flow of funding from the State to the County without affecting the overall amount of funding for programs. The County Local Revenue Fund 2011 is discussed in greater detail in its own budget narrative.

The FY 2011-12 State budget permanently shifted 1.06% of existing State Sales Taxes from the State General Fund to a Special Local Revenue fund for counties to fund "public safety" programs, which include Child Welfare Services, Foster Care, Adoptions (administration of services and assistance payments), and Adult Protective Services. The State budget also included the shift of Adoption services to the County, with the option for the County to contract back with the State for those services. The Department has chosen to contract with the State to provide adoption services for the County and use the designated Realignment funding to pay for the service.

CalWORKs/Employment Services provides financial assistance for basic needs and a wide array of services and supports for families to enter and remain in the workforce.

Family Stabilization services provides intensive case management and crisis intervention services to address homelessness, mental health, substance abuse, transportation, and domestic violence, related needs to ensure a basic level of stability in combination with existing barrier removal services to ensure progress towards job readiness.

HSP services uses a Rapid-Rehousing model to assist families in quickly obtaining permanent housing by offering emergency and permanent housing assistance in combination with wraparound services to foster housing retention and stability.

The Children and Adult Protective Services branches continue to work collaboratively with Behavioral Health, Public Health, Probation, the Courts, and other public service agencies by using a multidisciplinary team approach to address the problems of families and adults.

Counties have experienced a dramatic increase in demand for Medi-Cal and the CalFresh programs over the last 10 years due to regulatory changes, the recession, and subsequent job loss or reduction in work hours.

In Sutter County, the Medi-Cal caseload, number of households, grew approximately 103% from October 2010, at 8,166 cases, to December 2019, at 16,597 cases. Approximately 38,000 individuals in Sutter County are receiving Medi-Cal benefits. The Affordable Care Act has significantly expanded the scope of the Medi-Cal program resulting in programmatic changes that require additional on-going analytical work.

The CalFresh caseload has grown approximately 28% from October 2010 at 4,258 cases to December 2019 at 5,457 cases. Beginning in June 2019 the CalFresh program has been expanded to SSI program recipients in California.

Recommended Budget

Total appropriations are recommended at \$32,870,474, an increase of \$1,687,913 (5.4%) over the FY 2019-20 Adopted Budget. The Welfare and Social Services fund has a Net County Cost of \$449,000 to meet the County General Fund's Maintenance of Effort (MOE) for receipt of CalWORKs and related Realignment funding.

The Following Capital Assets are recommended:

- \$47,600 for the purchase of two mid-size sedan vehicles
- \$150,000 for the CWS/CMS computers conversion

Use of Fund Balance

This budget unit is within the Welfare and Social Services Fund and does not include use of any specific fund balance.

Health and Human Services Public Guardian (2-709)

COUNTY OF SUTTER EXECUTIVE SUMMARY Fiscal Year 2020-2021							
Fund: 0001 - GENERAL Unit Title: PUBLIC GUARDIAN & CONSE	RVATOR				Dept: 2709		
	2018-2019 Actual Expenditure	2019-2020 YTD as of 05/29/2020	2019-2020 Adopted Budget	2020-2021 CAO Recommended	2019-2020 % Change Over		
EXPENDITURES							
SALARIES AND EMPLOYEE BENEFITS	341,691	314,282	363,712	371,083	2.0		
SERVICES AND SUPPLIES	32,641	31,850	44,185	44,627	1.0		
OTHER CHARGES	20,557	34,175	65,772	16,126	-75.5		
CAPITAL ASSETS	22,437	0	25,000	0	-100.0		
INTRAFUND TRANSFERS	155	142	190	125	-34.2		
OTHER FINANCING USES	510	401	1,224	524	-57.2		
NET BUDGET	417,991	380,850	500,083	432,485	-13.5		
REVENUE							
CHARGES FOR SERVICES	283,613	20,149	332,100	315,029	-5.1		
TOTAL OTHER REVENUE	283,613	20,149	332,100	315,029	-5.1		
UNREIMBURSED COSTS	134,378	360,701	167,983	117,456	-30.1		
ALLOCATED POSITIONS	3.00	3.00	3.00	3.00	0.0		

Purpose/Mission

Sutter County Health and Human Services Department promotes health, safety, economic stability, and quality of life for our community.

The Public Guardian acts as the legally appointed conservator for persons found by the Superior Court to be unable to properly care for themselves or their finances or who can't resist undue influence or fraud. The main responsibility of the conservator is to provide each conservatee with the best and most independent living arrangement as possible, within their abilities and resources. The conservator assures that all personal, financial, and medical care and services needed to maintain a safe and comfortable living environment are provided for the conservatee.

Major Budget Changes

Other Charges

• (\$45,000) Decrease in Contribution to Others due to SSI charges paid in full

Program Discussion

The two types of conservatorships, Lanterman-Petris-Short (LPS) and probate, can only be established by order of the superior court.

Health and Human Services Public Guardian (2-709)

Lanterman-Petris-Short Act (Welfare and Institutions Code §5000, et seq.), conservatorships are established to arrange mental health treatment and placement for people who are unable to provide for their food, clothing, shelter, and treatment needs, because of a mental disorder. LPS Conservatorship provides a legal framework for the delivery of services to individuals needing psychiatric treatment, but who are unwilling or unable to accept it.

Probate Conservatorships are primarily established for adults who cannot care for themselves or manage their own finances. This type of conservatorship is often used for older adults with severe limitations and for younger people who have serious cognitive impairments. The Public Guardian-Conservator is involved in all aspects of their clients' lives, including fiscal management, housing, medical care and placement, and advocacy.

Since a conservatorship is an action of the "last resort," the Public Guardian program is administered with the highest ethical regard for the conservatee's best interests. Currently, the Public Guardian's office has ninety (90) Conservatees, forty-one (41) of which are probate cases and forty-nine (49) of which are LPS cases.

For FY 2019-20, the Public Guardian's Office has accomplished the following:

- Piloted a new software system called *Panoramic* to prepare for full implementation;
- Added an Account Clerk II to the Public Guardian Office to complete all accounting functions in the office and ensure all internal controls are met;
- Public Guardian has increased financial oversight with the Auditor Controllers Office

Goals in FY2020-21

- To meet current increasing caseload demands without a reduction in the quality of client care and without significant added fiscal burden, and
- To improve efficiency and overall client care through full implementation of the Panoramic software system for information management. It is the goal of the Public Guardian-Conservator to treat all persons fairly and equitably while protecting the fiduciary interests of the estate managed by his staff

Recommended Budget

Total appropriations are recommended at \$432,485, a decrease of \$67,598 (13.5%) over FY 2019-20. The General Fund provide 27.2% of the financing for this budget unit, and Net County Cost is decreased by \$50,527 (30.1%) compared to the FY 2019-20 Adopted Budget.

Use of Fund Balance

This budget unit is within the General Fund and does not include use of any specific fund balance.

Health and Human Services IHSS (5-201)

COUNTY OF SUTTER EXECUTIVE SUMMARY Fiscal Year 2020-2021							
Fund: 0013 - WELFARE/SOCIAL S Unit Title: IN-HOME SUPPORTIVE SR					Dept: 5201		
	2018-2019 Actual Expenditure	2019-2020 YTD as of 05/29/2020	2019-2020 Adopted Budget	2020-2021 CAO Recommended	2019-2020 % Change Over		
EXPENDITURES	2.461.821	2.266.070	2 (70 042	2 765 765	41.0		
OTHER CHARGES NET BUDGET	2,461,821 2,461,821	2,266,878 2,266,878	2,670,042 2,670,042	3,765,765 3,765,765	41.0 41.0		
REVENUE							
OTHER FINANCING SOURCES	2,338,533	2,461,357	2,670,042	3,765,765	41.0		
TOTAL OTHER REVENUE	2,338,533	2,461,357	2,670,042	3,765,765	41.0		
UNREIMBURSED COSTS	123,288	-194,479	0	0	0.0		
ALLOCATED POSITIONS	0.00	0.00	0.00	0.00	0.0		

Purpose/Mission

The Sutter County Health and Human Services Department promotes health, safety, economic stability, and quality of life for our community.

The Sutter County IHSS Public Authority has established goals that align with the County-wide goals of providing responsive and cost-effective social services (with measurable results) to an increasingly diverse and complex society, and operating County government in a fiscally and managerially responsible manner to ensure Sutter County remains a viable and sustainable community to live, work, recreate, and raise a family. These goals are: 1) to increase the number of registered IHSS providers by 10% and comply with the State's backup registry requirement without an increase in costs for administrative oversight of the program, and 2) to achieve 100% provider enrollment in the Electronic Visit Verification (EVV) program by July 1, 2020. Further background on these goals can be found below in the Program Discussion.

Major Budget Changes

Other Charges

• \$1,095,723 Increase in IHSS-County Share related to the increase in negotiated provider wages, increase in minimum state wage and increase in projected caseload

Health and Human Services IHSS (5-201)

Revenues

• \$1,095,723 Increase in Operating Transfer-In from 1991 Realignment Revenue based on increase of cost

Program Discussion

In-Home Supportive Services (IHSS) is a statewide program under the direction of the California Department of Social Services (CDSS). The IHSS program uses State, Federal and County funds to pay providers to care for qualified aged, blind and disabled individuals who require personal care and/or domestic assistance to continue living in their homes. The IHSS Social Workers utilize the State Hourly Task Guideline to determine authorized service hours each qualified recipient will receive. CDSS makes the payments to the providers, and then invoices the County for its share of the costs.

The Sutter County IHSS Public Authority (PA) Governing Board was established in 2002 in response to Assembly Bill 1682 (Chapter 90, Statutes of 1999), to act as the employer of record for Sutter County IHSS providers for the purposes of negotiating salary, benefits, and work-related issues. The IHSS PA maintains a Registry of qualified providers, refers providers to eligible recipients when requested, ensures all IHSS providers meet the State IHSS Provider orientation eligibility requirements and monitors Department of Justice background reports on IHSS Providers.

Commencing July 1, 2017, the State discontinued the Coordinated Care Initiative which ended the County Maintenance of Effort and reinstated a 35% county share of all non-federal program costs.

This budget unit funds the County share of both the provider payments and the IHSS Public Authority administration costs.

Appropriations in this budget provide for payment of the County's share of provider wages, which are paid to the State, as well as for the transfer of operating funds to the IHSS Public Authority. Funding for this budget unit has historically come from a combination of State Social Services Realignment Sales Tax revenue, and Realignment funds which are transferred into this budget unit from the Welfare and Social Services Realignment Trust Fund (0-248).

Per an agreement between the Sutter County Public Authority Governing Board and the IHSS Providers, the hourly wage for providers increased to \$13.00 per hour in January 2020 to align with state minimum wage increases.

In FY 2018-19 the PA enrolled 471 new IHSS Providers and held 41 State Mandated Provider Orientations. There are currently 1,350 paid IHSS Providers in Sutter County. The average caseload hours are 101 hours per month per paid Provider. There are currently 821 IHSS Consumers using the PA Registry to hire Providers. The PA Registry provided 398 lists to IHSS Consumers needing to hire an IHSS Provider.

Health and Human Services IHSS (5-201)

The PA continues to look for new ways to increase the Registry with qualified and reliable providers. As technology progresses, so does the increase of medically fragile individuals seeking an independent lifestyle and moving into the community from skilled facilities. These individuals require a high level of personal and domestic care. The PA has had an increasing demand of requests from recipients who are seeking to hire highly qualified providers who are willing to work flexible schedules that include evenings and weekends.

In July 2018, IHSS providers became eligible for eight hours of sick leave per year after working 100 hours of providing authorized IHSS services for an IHSS recipient. The State is now requiring the PA to maintain a backup Registry of providers who can fill in when the recipients regularly scheduled provider calls in sick.

The PA will be implementing Electronic Visit Verification (EVV) starting July 1, 2020. EVV is a telephone- and computer-based system that electronically verifies that in-home service visits occurred and replaces the existing timecards. California is currently in the process of rolling out EVV in counties through a phase-in process. The PA will be offering training and assistance to providers in signing up and utilizing the EVV system. The PA is reviewing the possibility of a kiosk and/or computer access in the lobby to ensure availability to those providers and consumers who do not have access to the internet or a telephone. As of February 2020, in Sutter County 38 percent of the IHSS consumer/providers have signed up for EVV with the goal of 100 percent by July 1, 2020.

Recommended Budget

Total appropriations are recommended at \$3,765,765, an increase of \$1,095,723 (41.0%) compared to the FY 2019-20 Adopted Budget. This increase is primarily related to the negotiated provider wage increase and the increase in minimum wage to \$14.00 in January 2021.

There is no Net County Cost in this budget. The County's share of cost is met with Welfare and Social Services 1991 Realignment funds (Fund 0-248).

Use of Fund Balance

This budget unit is within the Welfare and Social Services Fund and does not include the use of any specific fund balance.

Health and Human Services Temporary Aid for Needy Families (5-204)

COUNTY OF SUTTER EXECUTIVE SUMMARY Fiscal Year 2020-2021							
Fund: 0013 - WELFARE/SOCIAL SI Unit Title: TANF-FAMILY GROUP	ERVICES				Dept: 5204		
	2018-2019 Actual Expenditure	2019-2020 YTD as of 05/29/2020	2019-2020 Adopted Budget	2020-2021 CAO Recommended	2019-2020 % Change Over		
EXPENDITURES							
OTHER CHARGES NET BUDGET	8,720,466 8,720,466	9,387,914 9,387,914	10,354,984 10,354,984	11,108,978 11,108,978	7.3 7.3		
REVENUE							
INTERGOVERNMENTAL REVENUES	3,021,977	1,597,397	4,936,650	5,961,269	20.8		
OTHER FINANCING SOURCES	5,261,820	2,481,943	5,134,180	4,982,446	-3.0		
TOTAL OTHER REVENUE	8,283,797	4,079,340	10,070,830	10,943,715	8.7		
UNREIMBURSED COSTS	436,669	5,308,574	284,154	165,263	-41.8		
ALLOCATED POSITIONS	0.00	0.00	0.00	0.00	0.0		

Purpose/Mission

The Sutter County Health and Human Services Department promotes health, safety, economic stability, and quality of life for our community.

Major Budget Changes

Other Charges

• \$753,994 Increase in Support and Care of Persons due to increase in projected caseload and costs

Revenues

• \$678,758 Increase in Federal/State TANF due to increase in projected caseload and costs

Other Financing Sources

• (\$118,891) Decrease in Operating Transfers-In due to loss of Realignment revenue

Program Discussion

This budget unit finances the Temporary Assistance to Needy Families (TANF) cash assistance program. The TANF program assists eligible families and/or children who meet specific income,

Health and Human Services Temporary Aid for Needy Families (5-204)

property, and other regulatory requirements. This budget unit is primarily financed with Federal and State funding.

TANF is a public assistance program that provides for children who are deprived of the care and support of one or both of their parents. In most cases it also provides for the child's caretaker(s). A child is considered to be deprived of care and support if one of the following situations exists:

- Either parent is physically or mentally incapacitated
- Either parent is deceased
- The parent who is the primary wage earner is unemployed
- Either parent is continually absent from the home in which the child resides.

If any of the above circumstances exists, and the child plus his/her caretaker meet the property and income tests, a TANF case including the child, his/her caretaker, and other related children living in the home, if eligible, may be established. Most qualified persons also receive Medi-Cal and CalFresh Supplemental Nutrition Assistance.

All able-bodied adults receiving TANF are required to participate in the CalWORKs Employment Services program. The program requires recipients to participate in a work training or job search activity for a minimum number of hours each week in order to remain eligible for assistance. In addition to participation requirements, there is a time limit for adults on cash assistance.

Recommended Budget

Total appropriations are recommended at \$11,108,978, an increase of \$753,994 (7.3%) compared to FY 2019-20. There is no Net County Cost to this budget unit. The County's share of cost is met with Welfare and Social Services 1991 Realignment (0-248) funds.

The State's share of TANF costs, which is realized as revenue by the County, flows through the County Local Revenue Fund 2011 (0-140), the County Local Revenue Fund 2011 is discussed in greater detail in its own budget narrative.

Use of Fund Balance

This budget unit is within the Welfare and Social Services Fund and does not include the use of any specific fund balance.

Health and Human Services Foster Care (5-206)

COUNTY OF SUTTER EXECUTIVE SUMMARY Fiscal Year 2020-2021								
Fund: 0013 - WELFARE/SOCIAL SE Unit Title: FOSTER CARE	RVICES				Dept: 5206			
	2018-2019 Actual Expenditure	2019-2020 YTD as of 05/29/2020	2019-2020 Adopted Budget	2020-2021 CAO Recommended	2019-2020 % Change Over			
EXPENDITURES								
SERVICES AND SUPPLIES	0	1,032	0	0	0.0			
OTHER CHARGES NET BUDGET	5,103,778 5,103,778	4,930,428 4,931,460	5,023,780 5,023,780	6,777,010 6,777,010	34.9 34.9			
REVENUE								
INTERGOVERNMENTAL REVENUES	2,066,263	608,085	1,953,890	1,821,965	-6.8			
OTHER FINANCING SOURCES	1,408,452	554,870	1,354,260	2,251,479	66.3			
TOTAL OTHER REVENUE	3,474,715	1,162,955	3,308,150	4,073,444	23.1			
UNREIMBURSED COSTS	1,629,063	3,768,505	1,715,630	2,703,566	57.6			
ALLOCATED POSITIONS	0.00	0.00	0.00	0.00	0.0			

Purpose/Mission

The Sutter County Health and Human Services Department promotes health, safety, economic stability, and quality of life for our community.

The Foster Care budget unit contains six programs that provide financial aid on behalf of children who are living in out-of- home placements or are at risk of being removed from their home. The funds are provided on behalf of children whose families are unable or unwilling to care for them and who need temporary or long-term substitute parenting or assisted parenting.

Major Budget Changes

Other Charges

• \$1,753,230 Increase in Support and Care due to increase in projected caseload and cost

Revenues

- (\$105,112) Decrease in Federal TANF Foster Care due to decrease in projected caseload
- \$897,219 Increase in Operating Transfer In-Realignment due to increase in projected caseload

Program Discussion

Caseloads within each of the six programs listed fluctuate from year to year.

- 1. <u>Welfare Department Institutional Placements</u> fund payments for the placement costs of Sutter County Dependents who are placed in a group home.
- 2. <u>Welfare Department Foster Home Placements</u> fund payments for the placement costs of children who require out of home care due to the removal from their parents' care.
- 3. <u>Probation Department Institutional Placements</u> fund payments for the placement costs of Juvenile Court Wards who are placed in a group home.
- 4. <u>Kinship Guardianship Assistance Payment Program</u> funds the cost of children that are living with relatives other than their parents.
- 5. <u>Transitional Housing Program-PLUS</u> is a comprehensive housing and support program for youth ages 18-24 that have emancipated from foster care.
- 6. <u>Wrap-Around</u> is a family-centered, strength-based process that is designed to promote reestablishment of youth and families into community support systems.

Goals for the program

- To decrease placement changes and increase placement stability, which aligns with CWS
 System Improvement Plan goals for outcome measures related to Placement Stability
- To decrease need for placement in higher levels of care (congregate care) which aligns with statewide goals as part of Continuum of Care Reform (CCR) AB403
- To increase services to family maintenance cases which could lead to increase need for intensive home-based services

Recommended Budget

Total appropriations are recommended at \$6,777,010, an increase of \$1,753,230 (34.9%) compared to FY 2019-20. This increase is primarily related to projected caseload changes. The General Fund does not provide any financing to this budget unit. The County's share of cost is met with Welfare and Social Services 1991 Realignment (0-248) funds.

The State's share of Foster Care costs, which is realized as revenue by the County, flows from the County Local Revenue Fund 2011 (0-140) through the Social Services Realignment Fund 2011 (0-245) as opposed to being directly received by the Division through the Welfare and Social Services Fund as had occurred in the past. The County Local Revenue Fund 2011 is discussed in greater detail in its own budget narrative.

Use of Fund Balance

This budget unit is within the Welfare and Social Services Fund and does not include the use of any specific fund balance.

Health and Human Services Refugee Cash Assistance (5-207)

COUNTY OF SUTTER EXECUTIVE SUMMARY Fiscal Year 2020-2021							
Fund: 0013 - WELFARE/SOCIAL SER Unit Title: REFUGEE CASH ASSISTANCI					Dept: 5207		
	2018-2019 Actual Expenditure	2019-2020 YTD as of 05/29/2020	2019-2020 Adopted Budget	2020-2021 CAO Recommended	2019-2020 % Change Over		
EXPENDITURES OTHER CHARGES	1,664	9,969	14,800	12,480	15.7		
NET BUDGET	1,664	9,969	14,800	12,480	-15.7 -15.7		
REVENUE INTERGOVERNMENTAL REVENUES	596	0	14,800	12,480	-15.7		
TOTAL OTHER REVENUE	596	0	14,800	12,480	-15.7		
UNREIMBURSED COSTS	1,068	9,969	0	0	0.0		
ALLOCATED POSITIONS	0.00	0.00	0.00	0.00	0.0		

Purpose/Mission

The Sutter County Health and Human Services Department promotes health, safety, economic stability, and quality of life for our community.

The Refugee Cash Assistance Program is a federally mandated and funded program established to assist refugees with resettlement.

Major Budget Changes

There are no major budget changes for FY 2020-21.

Program Discussion

The Refugee Cash Assistance program assists refugees with resettlement and services toward self-support by providing cash assistance, medical assistance, and social services. Refugee Cash Assistance is provided to refugees who have been determined to be ineligible for CalWORKs or SSI/SSP. Eligibility is for an eight-month period, beginning with the month of entry into the United States.

Recommended Budget

Total appropriations are recommended at \$12,480, which is a decrease of \$2,320 (15.7%) compared to FY 2019-20. The General Fund does not provide any financing to this budget unit. This budget unit is 100% federally funded.

Use of Fund Balance

This budget unit is within the Welfare and Social Services Fund. The budget does not include the use of any specific fund balance.

Health and Human Services Aid for Adoption (5-209)

	EXECUTIV	OF SUTTEI E SUMMAR or 2020-2021			
Fund: 0013 - WELFARE/SOCIAL SER Unit Title: AID FOR ADOPTION	VICES				Dept: 520 9
	2018-2019 Actual Expenditure	2019-2020 YTD as of 05/29/2020	2019-2020 Adopted Budget	2020-2021 CAO Recommended	2019-2020 % Change Over
EXPENDITURES	4001.000	4040.544		6 00 4 7 00	• • •
OTHER CHARGES NET BUDGET	4,901,232 4,901,232	4,949,744 4,949,744	5,430,640 5,430,640	6,234,720 6,234,720	14.8 14.8
REVENUE					
INTERGOVERNMENTAL REVENUES	2,129,660	778,213	2,406,670	2,760,540	14.7
OTHER FINANCING SOURCES	2,055,305	711,616	2,267,970	2,605,635	14.9
TOTAL OTHER REVENUE	4,184,965	1,489,829	4,674,640	5,366,175	14.8
UNREIMBURSED COSTS	716,267	3,459,915	756,000	868,545	14.9
ALLOCATED POSITIONS	0.00	0.00	0.00	0.00	0.0

Purpose/Mission

The Sutter County Health and Human Services Department promotes health, safety, economic stability, and quality of life for our community.

The Adoptions Assistance program provides cash payments to parents who have adopted children out of the Child Welfare System in order to provide for the special needs of the child they are adopting.

Major Budget Changes

Other Charges

• \$804,080 Increase in Support & Care of Persons related to an increase in projected caseload

Revenues

- \$353,870 Increase in Federal Aid for Adoptions related to an increase in projected caseload
- \$337,665 Increase in Operating Transfers In related to an increase in projected caseload

Program Discussion

The Adoptions Assistance program provides financial assistance to adoptive parents in cases where children have been relinquished for adoption or parental rights have been terminated. Children eligible for this program are special needs children who were previously dependents of the Juvenile Court. These children often have barriers such as mental, physical, emotional, or medical disabilities. Eligibility and determination of grant amounts are established and administered by the California Department of Social Services, which then provides payment instructions to the County for payment to the adoptive parents.

Goals for the program

- To increase permanency goals for our children/youth who have been freed for adoption. Time to permanency is an outcome goal that is monitored by CWS through Outcomes and Accountability measures.
- To work with CDSS to decrease time to permanency which could be adoption within 12 to 24 months, if the goal is adoption.

Recommended Budget

Total appropriations are recommended at \$6,234,720, an increase of \$804,080 (14.8%) over FY 2019-20.

The General Fund does not provide any financing to this budget unit. The County's share of cost is met with Welfare and Social Services 1991 Realignment (0-248) funds.

The state and federal share of Adoption costs, which are realized as revenue by the County, flows from the County Local Revenue Fund 2011 (0-140) through the Social Services Realignment Fund 2011 (0-245). The County Local Revenue Fund 2011 and the Social Services Realignment Fund 2011 are discussed in greater detail in the budget narratives for those funds.

Use of Fund Balance

This budget unit is within the Welfare and Social Services Fund. The budget does not include the use of any specific fund balance.

Health and Human Services General Relief (5-302)

COUNTY OF SUTTER EXECUTIVE SUMMARY Fiscal Year 2020-2021							
Fund: 0001 - GENERAL Unit Title: GENERAL RELIEF-GENERAL	2018-2019 Actual Expenditure	2019-2020 YTD as of 05/29/2020	2019-2020 Adopted Budget	2020-2021 CAO Recommended	Dept: 5302 2019-2020 % Change Over		
EXPENDITURES SERVICES AND SUPPLIES OTHER CHARGES NET BUDGET	21,245 18,722 39,967	18,669 14,484 33,153	34,170 31,200 65,370	30,204 22,000 52,204	-11.6 -29.5 -20.1		
REVENUE CHARGES FOR SERVICES OTHER FINANCING SOURCES TOTAL OTHER REVENUE	9,479 0 9,479	1,674 0 1,674	7,500 1,403 8,903	5,000 1,406 6,406	-33.3 0.2 -28.0		
UNREIMBURSED COSTS	30,488	31,479	56,467	45,798	-18.9		
ALLOCATED POSITIONS	0.00	0.00	0.00	0.00	0.0		

Purpose/Mission

The Sutter County Health and Human Services Department promotes health, safety, economic stability, and quality of life for our community.

Major Budget Changes

Other Charges

• (\$9,200) Decrease in Support & Care-Regular Cases based on actuals in the last two years

Program Discussion

The Welfare and Institutions Code requires that each county provide relief and support for all incompetent, poor, indigent persons, and those incapacitated by age, disease, or accident, which are lawfully residents in the County, when they are not supported by their friends, relatives, or by their own means. In order to comply with this mandate, Sutter County administers the General Relief, Interim Assistance, and Indigent Burial programs. These programs are financed by County funds except for funds received from burial permits and reimbursement from Interim Assistance payments. All able-bodied persons receiving General Relief must participate in a job search and work project.

Health and Human Services General Relief (5-302)

As stated in the Sutter County Indigent Burial Policy, approved by the Sutter County Board of Supervisors on August 16, 2005, the amount of money authorized to be paid for each individual service or product shall be adjusted every year beginning July 1, 2006 and on July 1 of each year thereafter. The amount will be adjusted to reflect the percentage change in the California Consumer Price Index, (CPI) All Urban Consumers, San Francisco-Oakland-San Jose subset published by the California Department of Industrial Relations, for the period beginning July 1 of the previous year and ending June 30 of the year in which, the calculation is to be made. Based on the 7/1/18 – 6/30/19 CPI, the rate increase for FY 2020-21 is 3.2%.

This budget provides funding for the General Relief Cash Assistance, Interim Assistance, and Indigent Burial programs. The General Relief Cash Assistance program is for indigent persons who do not qualify for any other cash assistance program and who are temporarily unable to finance their own needs. The Interim Assistance program is a program for indigent persons while they are pending Supplemental Security Income/State Supplementary Payment approval. The Indigent Burial program is for the burial of individuals who had no burial coverage and whose families, if known, are financially unable to provide for the burial.

Recommended Budget

Total appropriations are recommended at \$52,204, a decrease of \$13,166 (20.1%) compared to FY 2019-20. The General Fund provides 87.7% of the financing for this budget unit and the Net County Cost decreased by \$10,669 (18.9%) over FY 2019-20.

Use of Fund Balance

This budget unit is within the General Fund and does not include the use of any specific fund balance.