



Health & Human Services

Section E

Sutter County Health and Human Services staff teamed up with staff from Yuba County to jointly operate a large emergency shelter for victims of the Camp Fire in Butte County at the Yuba-Sutter Fairgrounds in November of 2018.

COUNTY OF SUTTER EXECUTIVE SUMMARY Fiscal Year 2019-2020					
Fund: 0012 - HEALTH					
Unit Title: HUMAN SERVICES ADMINISTRATION					
					Dept: 4120
	2017-2018 Actual Expenditure	2018-2019 YTD as of 05/28/2019	2018-2019 Adopted Budget	2019-2020 CAO Recommended	2018-2019 % Change Over
EXPENDITURES					
SALARIES AND EMPLOYEE BENEFITS	824,064	1,358,384	1,557,581	2,083,131	33.7
SERVICES AND SUPPLIES	132,859	81,168	125,166	146,976	17.4
OTHER CHARGES	922	153	23,242	355,895	1,431.3
INTRAFUND TRANSFERS	0	0	-148,194	-239,521	61.6
OTHER FINANCING USES	1,859	0	6,273	3,121	-50.2
NET BUDGET	<u>959,704</u>	<u>1,439,705</u>	<u>1,564,068</u>	<u>2,349,602</u>	<u>50.2</u>
REVENUE					
INTERGOVERNMENTAL REVENUES	10,000	0	0	0	0.0
CHARGES FOR SERVICES	369,680	0	1,537,260	2,349,602	52.8
MISCELLANEOUS REVENUES	39	0	0	0	0.0
TOTAL OTHER REVENUE	<u>379,719</u>	<u>0</u>	<u>1,537,260</u>	<u>2,349,602</u>	<u>52.8</u>
UNREIMBURSED COSTS	579,985	1,439,705	26,808	0	-100.0
ALLOCATED POSITIONS	9.00	9.00	9.00	13.00	44.4

Purpose

The Health and Human Services-Administration budget contains the salary, benefits, and related support costs of the Director of Health and Human Services and support staff. The Director provides executive leadership for the Department of 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.

Major Budget Changes

Salaries & Benefits

- \$72,251 General increase in negotiated salaries and benefits
- \$264,566 Increase related to transferring three (3.0 FTE) Executive Secretary I positions into this budget unit, effective July 1, 2019
- \$183,820 Increase related to transferring one (1.0 FTE) Deputy Director Health and Human Services position into this budget unit, effective July 1, 2019

Services & Supplies

- \$19,248 Increase in ISF IT Services charges as provided by the General Services Department
- \$1,513 Increase in ISF Liability Premium charges as provided by the Human Resources Department
- \$3,009 Increase in ISF Workers' Compensation Premium as provided by the Human Resources Department

Other Charges

- \$4,708 Increase in IF General Insurance & Bond charges as provided by the Human Resources Department
- \$117,118 Increase related to the addition of one (1.0 FTE) HR Analyst II position in Human Resources Budget that is charged back to HHS
- \$233,845 Increase in OH Cost Plan charges as calculated by the Auditor-Controller's Office

Intrafund Transfer

- (\$91,327) Increase in Intrafund Administration Services revenue (shown as a negative expenditure)

Revenues

- \$812,342 Increase in Interfund Charge for Services revenues

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.

FY 2019-20 will be the seventh year of the Department's involvement in the implementation of the Affordable Care Act (ACA). The five other branches of the Health and Human Services Department are each affected differently by the ACA. The Employment and Eligibility branch has had the primary responsibility of enrolling beneficiaries in the expanded Medi-Cal system. Adult's, Children's, and the Acute Psychiatric and Forensic Services branches which include behavioral health, adult protective services, child welfare services, and emergency services have experienced an expanded population to service while at the same time working with the Medi-Cal managed care plans to coordinate services. The Public Health branch also works with the Medi-

Cal managed care plans and the providers to coordinate services for this population. Continual changes at the State and Federal level will likely require ongoing adjustments in the Department's operations.

Recommended Budget

This budget is recommended at \$2,349,602, which is an increase of \$785,534 (50.2%) over FY 2018-19. This increase is primarily due to Health and Human Services Department's organizational changes. Four existing support and administration staff positions are transferred from branch budgets to HHS Administration budget. An addition of one Human Resources Analyst II position is recommended to the Human Resources Department budget (1-401) to provide professional human resources support for the Health and Human Services Department. This position will be physically located in the Human Resources Department but fully paid for by the Health and Human Services Administration budget unit.

The increase costs due to the organizational changes, are allocated back to the HHS branches/programs, which increase Administration Services revenues by \$903,669. Public Health's share of allocation is increased by \$91,327. This increase is offset by \$85,035 decrease in the Public Health's budget due to a position transferred from Public Health to HHS Administration, which leaves a net increase of \$6,239 to the General Fund. In addition, the General Fund pays for the Public Guardian's share of administration costs in the amount of \$24,829, which is related to a change in cost allocation to more accurately reflect the budget unit's costs.

The following changed positions are recommended to be effective with budget adoption:

- Transfer one (1.0 FTE) Executive Secretary I position from the Public Health (4-103) budget unit and change the position to a flexibly Executive Secretary I/II position
- Transfer one (1.0 FTE) Executive Secretary I position from the Behavioral Health (4-102) budget unit and change the position to a flexibly Executive Secretary I/II position
- Transfer one (1.0 FTE) Executive Secretary I position from the Welfare Administration (5-101) budget unit and change the position to a flexibly Executive Secretary I/II position
- Transfer one (1.0 FTE) Deputy Director Health and Human Services from the Welfare Administration (5-101) budget unit

Use of Fund Balance

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

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**Health and Human Services
FY 2019-2020**

Recommended

**Director of Health and Human
Services
Nancy O'Hara**

Health Officer

**Public Health
Epidemiologist**

**Executive
Secretary I/II
(4)**

**Senior Human Resources
Analyst**

**Assistant Director of Health and
Human Services**

Medical Director

Staff Analyst

**Quality Assurance
Review Nurse**

**Mental Health
Therapist I/II/III
(2)**

Medical Clerk II

**Quality Assurance
Officer**

**Psychiatrist –
Contract
(7.63)**

**Psychiatrist –
Contract
(PHF Clinical Director)**

Supervising Nurse

**Psychiatric LVN/Tech
(10)**

**Sutter County Children &
Families Commission
Program Manager**

**Administration and
Finance Manager - HHS**

**Branch Director of Health
& Human Services – Public
Health**

**Branch Director of Health
& Human Services –
Employment and
Eligibility**

**Branch Director of Health
& Human Services – Acute
Psychiatric and Forensic
Services**

**Branch Director of Health
& Human Services –
Adult's Services**

**Branch Director of Health
& Human Services –
Children's Services**

County of Sutter

E-5

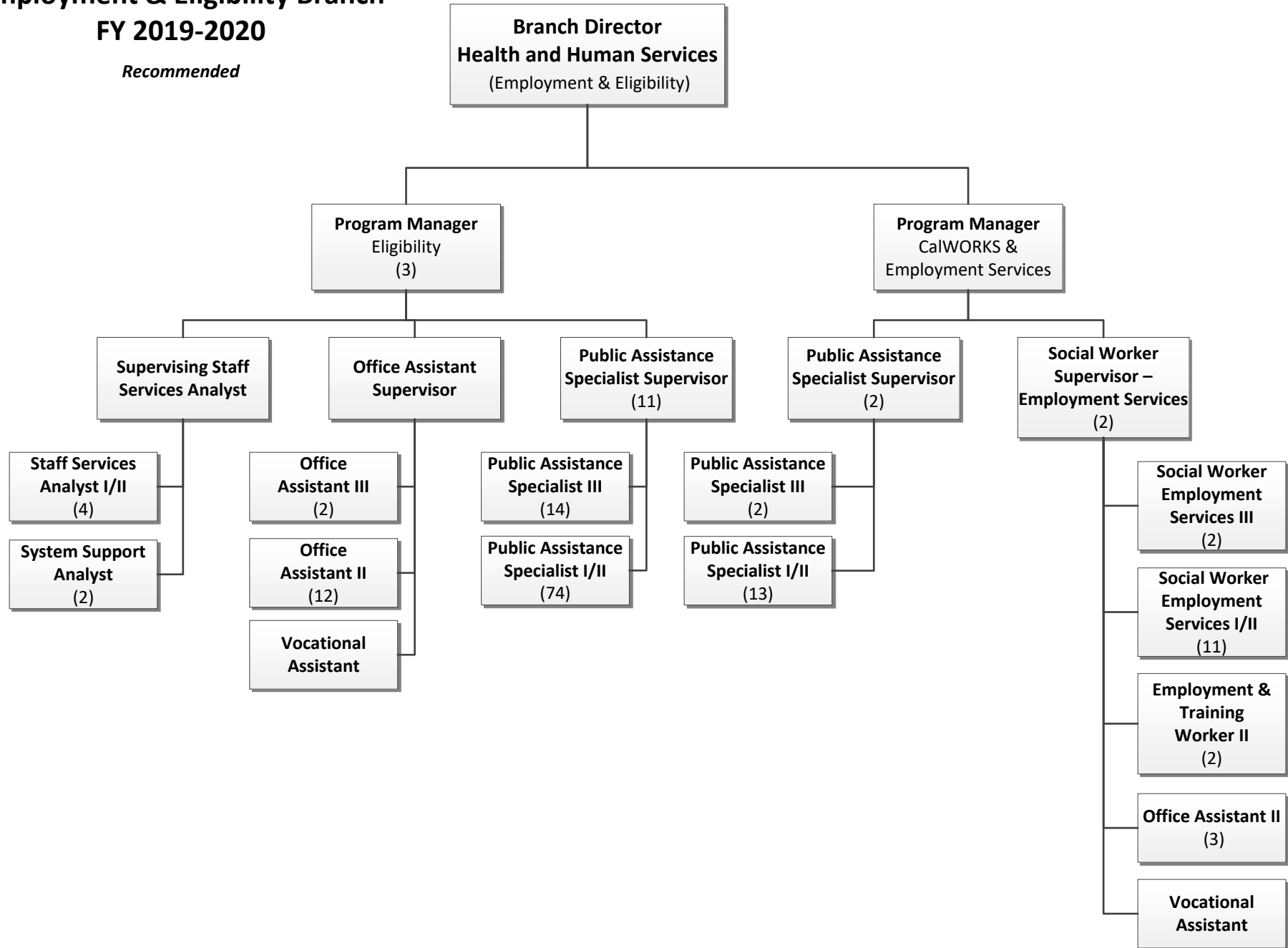
2019-2020 Recommended Budget

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**Health and Human Services –
Employment & Eligibility Branch
FY 2019-2020**

Recommended

County of Sutter



E-7

2019-20 Budget Recommended

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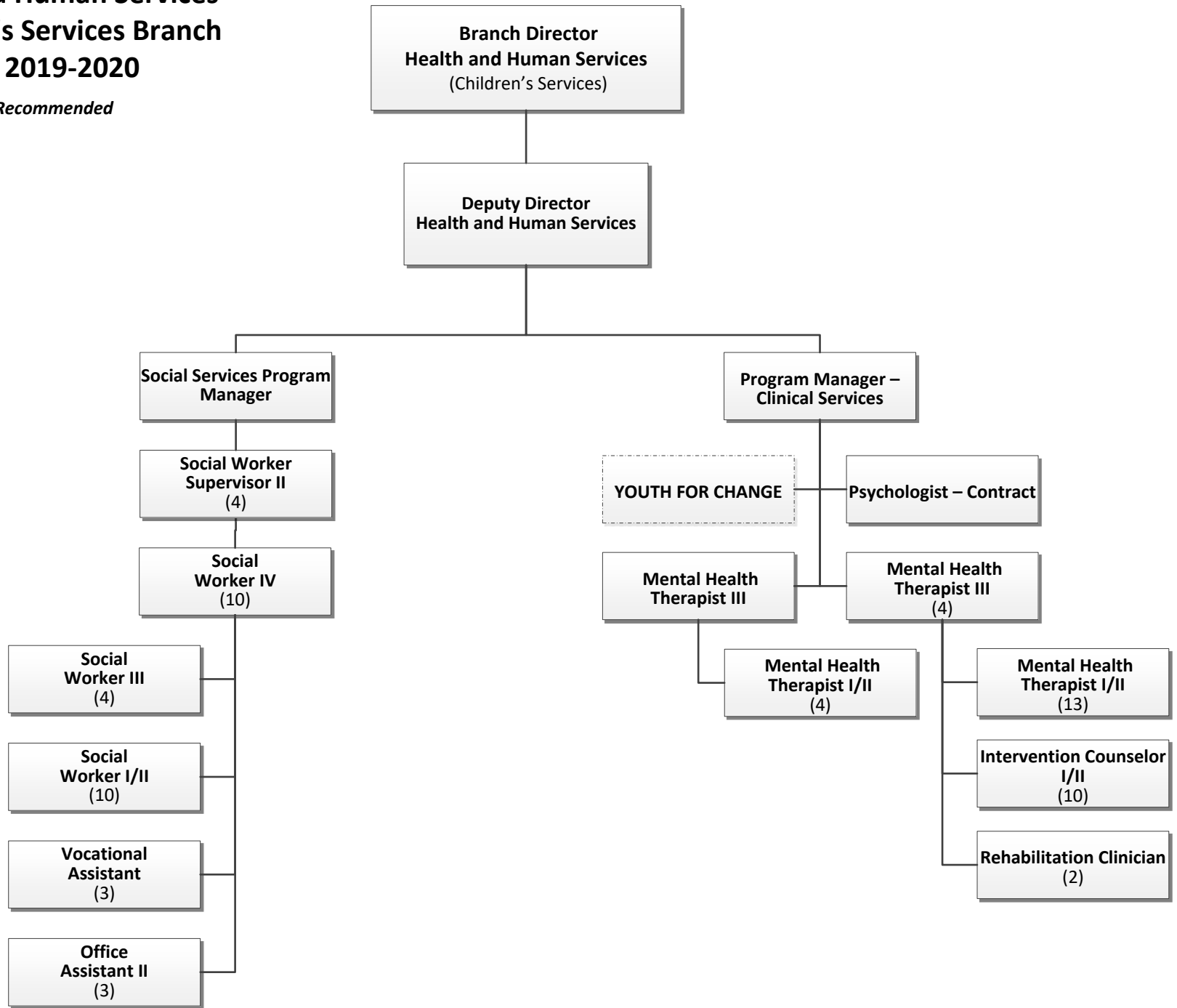
**Health and Human Services –
Children’s Services Branch
FY 2019-2020**

Recommended

County of Sutter

E-9

2019-2020 Recommended Budget

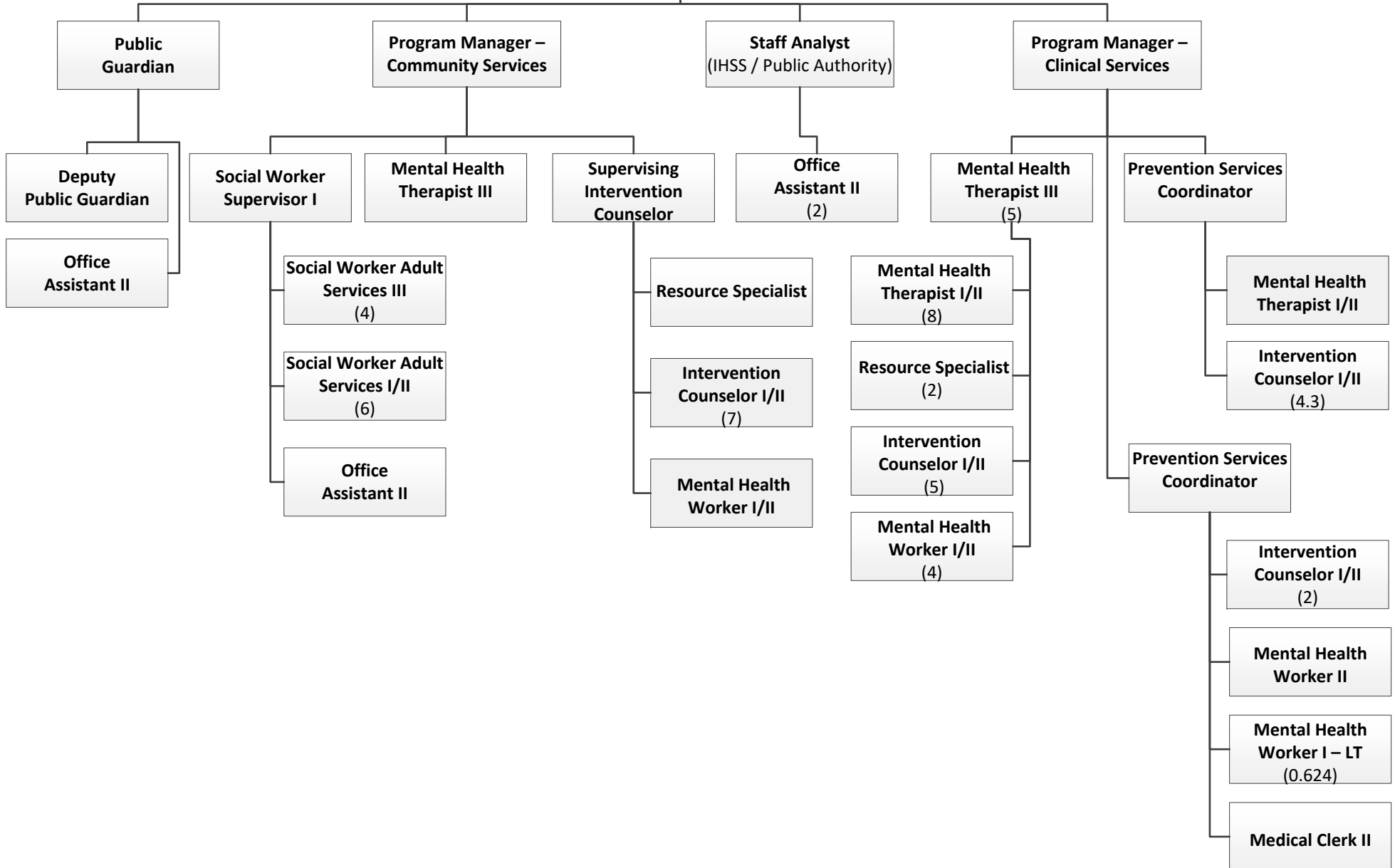


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**Health and Human Services –
Adult Services Branch
FY 2019-2020**

Recommended

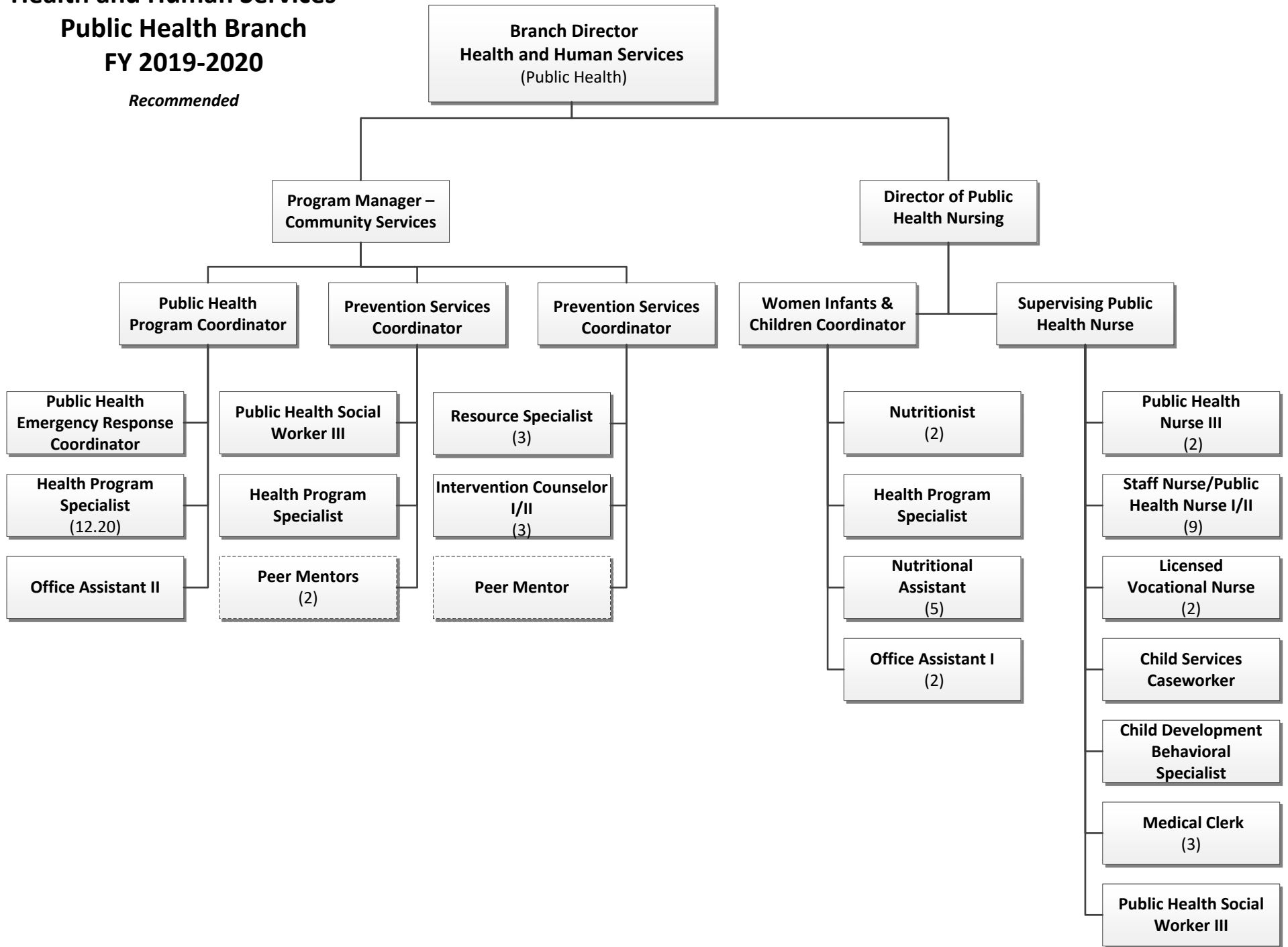
**Branch Director
Health and Human Services
(Adult Services)**



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**Health and Human Services –
Public Health Branch
FY 2019-2020**

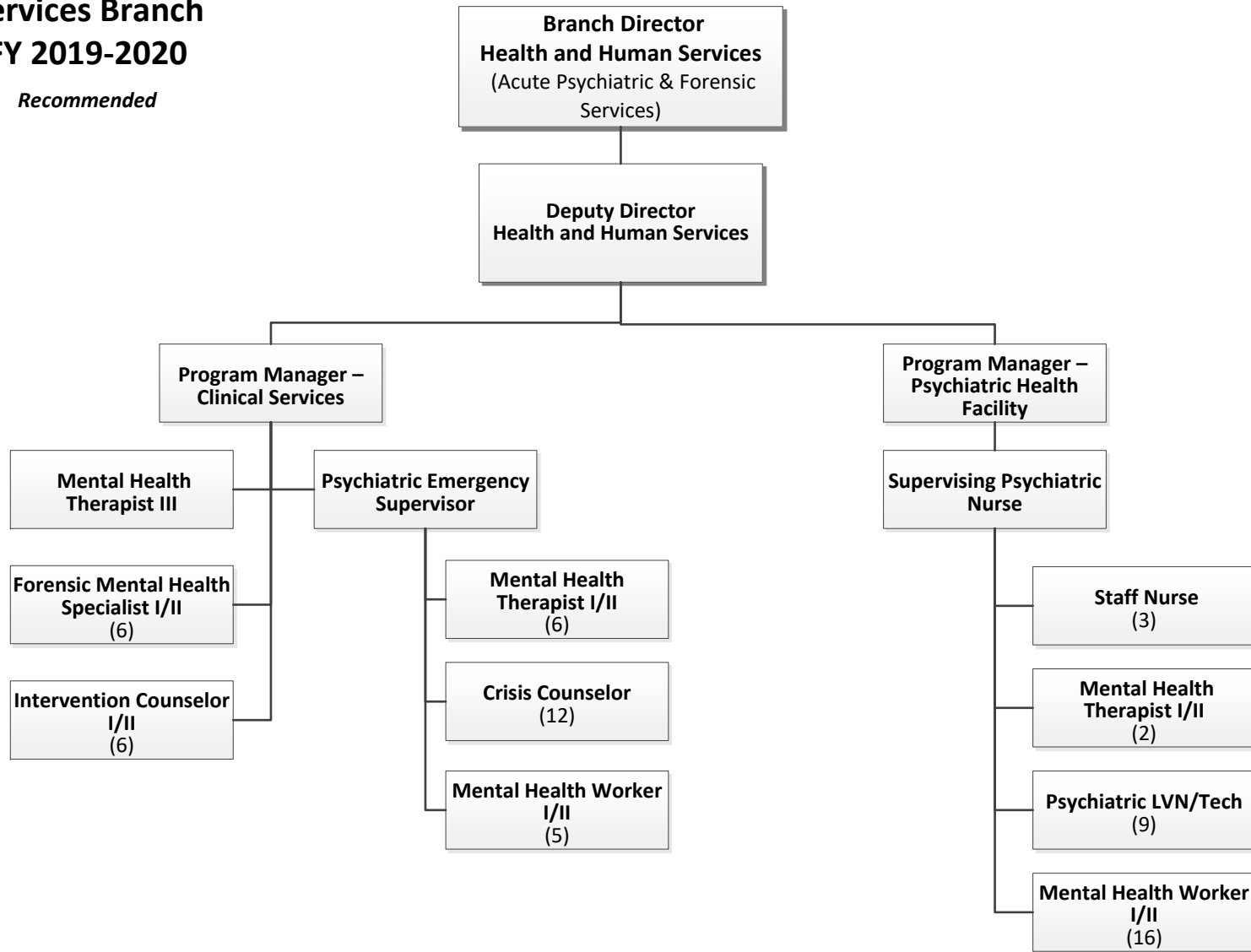
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**Health and Human Services –
Acute Psychiatric & Forensic
Services Branch
FY 2019-2020**

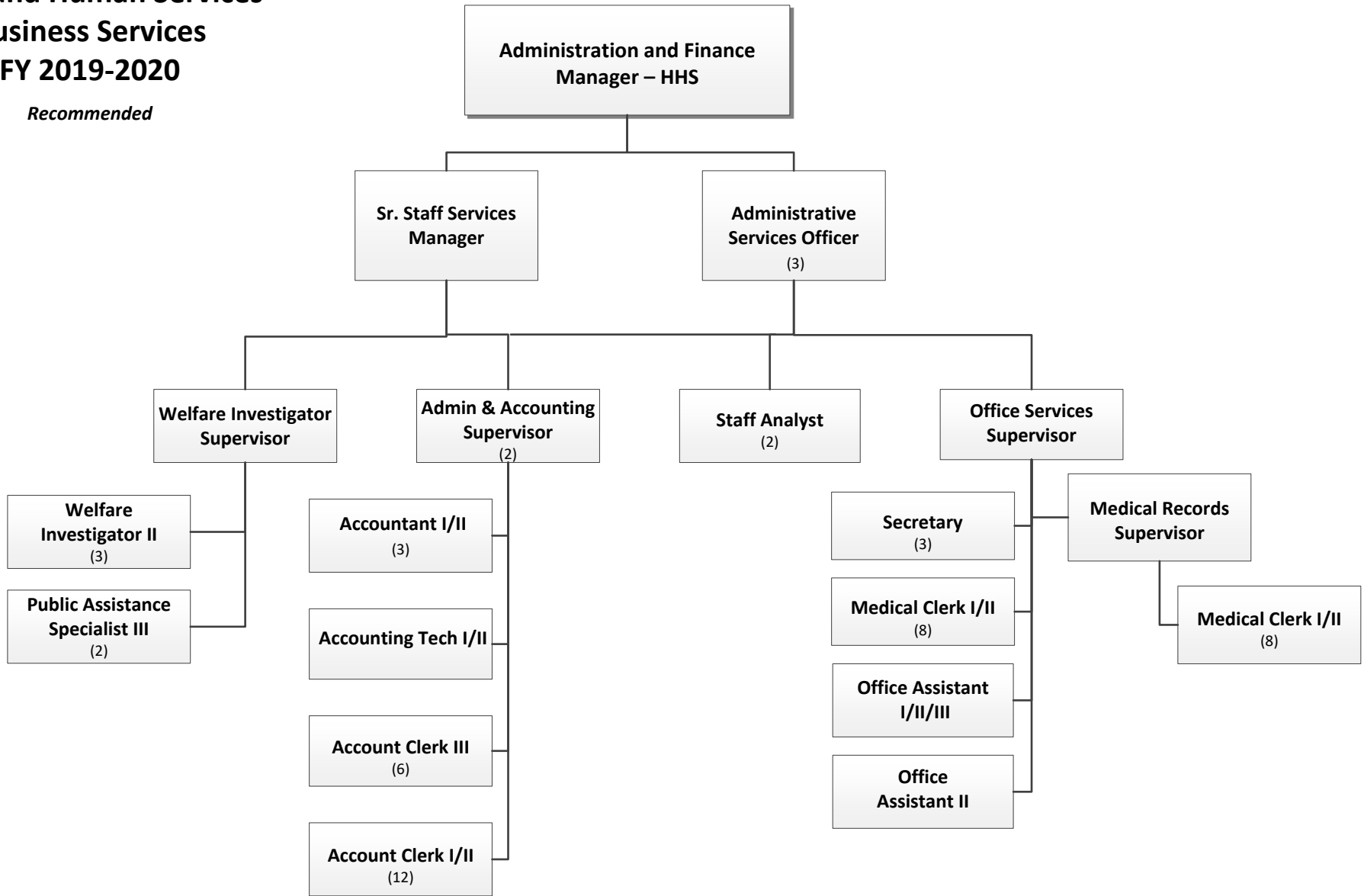
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**Health and Human Services –
Business Services
FY 2019-2020**

Recommended



Health and Human Services Behavioral Health (4-102)

Nancy O'Hara, Director

COUNTY OF SUTTER EXECUTIVE SUMMARY Fiscal Year 2019-2020					
Fund: 0007 - BI-COUNTY BEHAVIORAL HEALTH					
Unit Title: BEHAVIORAL HEALTH					Dept: 4102
	2017-2018 Actual Expenditure	2018-2019 YTD as of 06/08/2019	2018-2019 Adopted Budget	2019-2020 CAO Recommended	2018-2019 % Change Over
EXPENDITURES					
SALARIES AND EMPLOYEE BENEFITS	14,659,484	17,864,614	24,487,546	26,827,738	9.6
SERVICES AND SUPPLIES	6,493,564	8,535,116	7,906,984	11,184,671	41.5
OTHER CHARGES	6,759,266	6,583,141	5,273,880	7,123,951	35.1
CAPITAL ASSETS	134,952	33,800	111,450	215,000	92.9
INTRAFUND TRANSFERS	0	25	0	0	0.0
OTHER FINANCING USES	112,370	95,521	990,455	2,936,892	196.5
NET BUDGET	<u>28,159,636</u>	<u>33,112,217</u>	<u>38,770,315</u>	<u>48,288,252</u>	<u>24.5</u>
REVENUE					
REVENUE USE MONEY PROPERTY	-134,809	221,075	0	155,000	100.0
INTERGOVERNMENTAL REVENUES	12,522,071	13,291,066	10,690,268	13,454,495	25.9
CHARGES FOR SERVICES	18,456,659	3,177,101	1,450,000	1,551,614	7.0
MISCELLANEOUS REVENUES	100,150	139,713	65,504	86,200	31.6
OTHER FINANCING SOURCES	2,683,754	8,919,053	26,402,690	28,871,854	9.4
CANCELLATION OF OBLIGATED FB	0	0	161,853	4,169,089	2,475.8
TOTAL OTHER REVENUE	<u>33,627,825</u>	<u>25,748,008</u>	<u>38,770,315</u>	<u>48,288,252</u>	<u>24.5</u>
UNREIMBURSED COSTS	-5,468,189	7,364,209	0	0	0.0
ALLOCATED POSITIONS	135.57	207.55	205.56	224.55	9.2

Purpose

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 Fiscal Year 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

- \$953,558 General increase due to negotiated salaries and benefits
- (\$86,464) Decrease related to the transfer of one (1.0 FTE) Executive Secretary position to the Health and Human Services Administration (4-120) budget unit, effective July 1, 2019
- \$67,643 Increase related to the addition of one (1.0 FTE) flexibly-staffed Medical Clerk I/II position, effective July 1, 2019
- \$86,298 Increase related to the addition of one (1.0 FTE) flexibly-staffed Intervention Counselor I/II position, effective July 1, 2019
- \$123,278 Increase related to the addition of one (1.0 FTE) Staff Nurse position, effective July 1, 2019
- \$210,370 Increase related to the addition of two (2.0 FTE) flexibly-staffed Mental Health Therapist I/II/III positions, effective July 1, 2019
- \$208,520 Increase related to the addition of two (2.0 FTE) flexibly-staffed Psychiatric Technician/LVN positions, effective July 1, 2019
- \$291,669 Increase related to the addition of three (3.0 FTE) Crisis Counselor positions, effective July 1, 2019
- \$764,720 Increase related to the addition of ten (10.0 FTE) flexibly-staffed Mental Health Worker I/II positions, effective July 1, 2019
- (\$250,000) Decrease in Extra Help related to the increase in permanent staffing
- (\$29,400) Decrease in Overtime related to the increase in permanent staffing

Services & Supplies

- \$60,000 Increase in Maintenance Structure & Improvements due to deferred facility maintenance and space needs
- \$902,525 Increase in Software License & Maintenance related to a more accurate accounting of the Electronic Health Record System
- \$2,058,134 Net Increase in Professional and Specialized Services based on actual contract costs

Health and Human Services Behavioral Health (4-102)

Nancy O'Hara, Director

- \$292,000 Increase in Employment Training related to a more accurate accounting of Relias Training
- \$20,000 Increase in Other Equipment due to Psychiatric Health Facility Small Equipment needs
- \$22,290 Increase in ISF Liability Premium charges as provided by the Human Resources Department
- \$40,733 Increase in ISF Worker's Comp Premium charges as provided by the Human Resources Department
- (\$151,897) Decrease in ISF Wellness Services due to close of the Wellness center

Other Charges

- \$1,396,500 Increase in Support and Care of Persons based on actuals and historic costs
- (\$450,000) Decrease in Contribution to IMD Facilities based on increased PHF bed census
- \$138,500 Increase in Residential Care costs based on actuals
- \$469,852 Increase in Interfund Human Services Admin related to additional staffing and organizational changes
- \$87,339 Increase in Interfund Conservator Services related to Public Guardian costs and allocation of LPS cases
- (\$51,700) Decrease in Interfund Maintenance/Improvements related to Improvements at 1965 Live Oak Blvd – Psychiatric Health Facility as provided by the General Services Department
- \$279,066 Increase in Interfund Overhead Cost Plan charges as provided by the Auditor-Controller's Office

Capital Assets

- \$31,500 Replacement vehicle, Passenger Van
- \$68,000 Replacement two vehicles, Caged Cars
- \$41,500 New 4x4 ¾ Ton Crew Cab Pickup with grant funding for Homeless program

- \$15,000 All-Terrain, Off Road Vehicle and Trailer with grant funding for Homeless program
- \$25,000 CSOC phone system
- \$12,000 First Step phone system
- \$22,000 Latino Outreach phone system

Other Financing Uses

- \$2,273,307 Increase in Operating Transfer Out to reimburse an advance from MHSA

Revenues

- \$155,000 Increase in Interest Revenue based on actuals
- \$1,000,000 Increase in Federal Drug Medi-Cal based on implementation of program
- \$2,415,851 Increase in Federal Mental Health Medi-Cal based on increased billing rate
- (\$500,000) Decrease in Federal Drug and Alcohol Program based on implementation of Drug Medi-Cal
- \$257,544 Increase in Yuba County Blended Funding based on contract increases
- \$2,469,164 Increase in Operating Transfer-In related to Realignment increases and the integration of MHSA to the Behavioral Health operating budget

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, funding for local Specialty Mental Health Services was realigned from the state to counties, and revenue to fund the services came from dedicated shares of Vehicle License Fees (VLF) and sales tax. During FY 2011-12, the State realigned funding 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:

- Early and Periodic Screening Diagnosis and Treatment (EPSDT)
- Mental Health Managed Care
- Drug Courts
- Drug Medi-Cal
- 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. These include drug diversion services authorized under §1000 of the California Penal Code; services to individuals referred by the courts in both counties for mental health treatment and substance use disorder counseling; psychiatric services to youth in juvenile hall and the Maxine Singer Youth Guidance Center; and services to individuals involved in drug courts in both counties.

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. It is anticipated that SYBH will assume responsibility for oversight of these contractor-provided services in the near future.

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.

Currently extra help personnel are essential to the operation of Behavioral Health's Psychiatric Health Facility (PHF), which provides inpatient treatment, and to Psychiatric Emergency Services (PES), which provides crisis services, both of which operate on a 24 hour per day, 7 days per week basis. This budget recommends a significant increase in permanent staffing and a decrease in extra

help and overtime staffing to assist with scheduling and help reduce the risk associated with extra help and overtime.

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.

Work has continued on the 850 Gray Ave project which will eventually move many of the Health and Human Services staff to one facility. This will empty the modular building at the Live Oak Boulevard site, which has exceeded its useful life span. Following the move, the modular building will be removed and returned to its owner.

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
- Workforce Education and Training

SYBH has had approved programs in all five MHSA components. These components and programs can be found in the Sutter Yuba Behavioral Health MHSA Plan.

FY 2019-20 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 2019-20, SYBH will charge \$1,212.35 per day on the Inpatient Unit. Other services are charged by the minute: \$9.38 per minute for Medication Support, \$3.90 per minute for Case Management/Brokerage, \$5.04 per minute for Mental Health Services, and \$7.50 per minute for Crisis Intervention. These interim rates are based on the FY 2016-17 Cost Report.

In addition to the above, the rate for the First Steps perinatal substance abuse treatment program is \$118.94 per day. Clients are charged for these and for other substance use disorder treatment services on a sliding fee schedule based on ability to pay.

From a financial perspective, several factors are affecting the FY 2019-20 Behavioral Health budget.

- 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, can be four to five years in arrears.
- The 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.

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.

Recommended Budget

This budget is recommended at \$48,288,252 which is an increase of \$9,517,937 (24.5%) over FY 2018-19. The increase is primarily due to the following reasons:

- Negotiated salaries and benefits increase (Approximately \$0.95 million increase)
- Positions changes (Approximately \$1.38 million increase)
- Additional needs in Professional and Specialized Services (Approximately \$2.96 million increase)
- Additional needs in Employment Training (Approximately \$0.29 million increase)
- Additional costs in Support and Care of Persons (Approximately \$1.40 million increase)
- Reimburse an advance from MHSA (Approximately \$2.27 million increase)

Health and Human Services Behavioral Health (4-102)

Nancy O'Hara, Director

The following changed positions are recommended to be effective July 1, 2019:

- Addition of one (1.0 FTE) flexibly-staffed Medical Clerk I/II position
- Addition of one (1.0 FTE) flexibly-staffed Intervention Counselor I/II position
- Addition of one (1.0 FTE) Staff Nurse position
- Addition of two (2.0 FTE) flexibly-staffed Mental Health Therapist I/II/III positions
- Addition of two (2.0 FTE) flexibly-staffed Psychiatric Technician/LVN positions
- Addition of three (3.0 FTE) Crisis Counselor positions
- Addition of ten (10.0 FTE) flexibly-staffed Mental Health Worker I/II positions
- Transfer of one (1.0 FTE) Executive Secretary position to the Health and Human Services Administration (4-120) budget unit

Capital Assets are recommended at \$207,405 for the purchase of the following, effective July 1, 2019:

- \$31,500 Replacement vehicle, Passenger Van
- \$68,000 Replacement two vehicles, Caged Cars
- \$41,500 New 4x4 ¾ Ton Crew Cab Pickup with grant funding
- \$15,000 All-Terrain, Off Road Vehicle and Trailer with grant funding
- \$59,000 Phone System Upgrade

Capital improvement projects related 1965 Live Oak Blvd have been budgeted in the Capital Improvement Projects (1-800) budget unit:

- \$226,326 for fire sprinkler and window replacement in the Psychiatric Health Facility
- \$273,543 for proportional share of cost for construction and paving of parking lot

Interior and exterior maintenance and improvements for the facility at 1965 Live Oak Blvd have been budgeted in the Building Maintenance (1-700) budget unit. The General Services Department is responsible for these maintenance projects.

It remains SYBH's objective to keep Behavioral Health programs in balance and to fully use all available funding most advantageous to our counties. By creating Bi-county Behavioral Health through a Joint Powers Agreement, our two counties have provided more resources and a greater array of services for those with serious mental illness or substance use disorders than our two counties would be able to provide separately. The staff of Sutter-Yuba Behavioral Health is proud of the services provided for the citizens of Sutter and Yuba Counties for almost 50 years.

Use of Fund Balance

The Behavioral Health fund contained a Restricted Fund Balance in the amount of \$2,279,406 as of July 1, 2018. It is estimated that the Restricted Fund Balance will equal \$6,330,825 at July 1, 2019. It is recommended to cancel \$4,169,089 of Restricted Fund Balance in FY 2019-20.

The Behavioral Health fund also contains a Restricted Fund Balance for Sutter County use in the amount of \$51,419. These funds will be used for the facility improvements in the SYBH Psychiatric Health Facility.

COUNTY OF SUTTER EXECUTIVE SUMMARY Fiscal Year 2019-2020					
Fund: 0012 - HEALTH					Dept: 4103
Unit Title: COUNTY HEALTH					
	2017-2018 Actual Expenditure	2018-2019 YTD as of 05/28/2019	2018-2019 Adopted Budget	2019-2020 CAO Recommended	2018-2019 % Change Over
EXPENDITURES					
SALARIES AND EMPLOYEE BENEFITS	5,173,995	4,191,477	6,176,859	6,003,565	-2.8
SERVICES AND SUPPLIES	977,967	973,458	1,159,523	1,306,643	12.7
OTHER CHARGES	331,865	66,362	304,896	585,890	92.2
CAPITAL ASSETS	7,160	7,615	8,000	0	-100.0
INTRAFUND TRANSFERS	0	0	148,194	239,521	61.6
OTHER FINANCING USES	76,528	0	214,146	87,269	-59.2
NET BUDGET	6,567,515	5,238,912	8,011,618	8,222,888	2.6
REVENUE					
FINES, FORFEITURES, PENALTIES	21	84	0	0	0.0
INTERGOVERNMENTAL REVENUES	2,532,661	1,795,727	3,067,755	3,241,187	5.7
CHARGES FOR SERVICES	473,115	134,346	414,707	202,383	-51.2
MISCELLANEOUS REVENUES	232	0	0	0	0.0
OTHER FINANCING SOURCES	0	3,523	593,757	797,385	34.3
TOTAL OTHER REVENUE	3,006,029	1,933,680	4,076,219	4,240,955	4.0
UNREIMBURSED COSTS	3,561,486	3,305,232	3,935,399	3,981,933	1.2
ALLOCATED POSITIONS	57.20	61.20	57.20	60.20	5.2

Purpose

The Sutter County Health and Human Services – Public Health Branch serves to protect, promote, and improve the health of all residents of Sutter County. This Branch accomplishes this through the operation of 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. Under Health and Safety Code §101025, counties have a broad mandate to preserve and protect the public health of their communities. Traditional public health functions focus on the overall health of our communities in ways that are usually beyond the scope of health insurance, such as monitoring, investigating, and containing communicable and food-borne disease outbreaks; planning for and responding to local disasters; educating the public about emerging health risks and prevention measures; and tracking the health status of our communities in order to develop community-based responses.

The Indigent Care component of the Branch addresses the non-emergency and emergency medical care to Sutter County indigent residents. The County Medical Services Program (CMSP) fulfills the County Welfare and Institutions Code §17000 requirement to provide medical care to residents who are indigent. An Emergency Medical Services (EMS) Fund, established as required by law, reimburses

physicians and medical facilities for emergency services provided to patients who do not pay for the cost of their medical care. These services are addressed in their own narratives.

Jail Medical Services provides healthcare to individuals incarcerated in the Sutter County Jail. The Jail Medical Services budget unit (4-134) is also discussed in its own narrative.

Major Budget Changes

Salaries & Benefits

- (\$185,677) Decrease due to 3% position vacancy factor applied to departments with greater than 5% average annual vacancy
- \$97,418 General increase due to negotiated Salaries and Benefits
- (\$85,035) Decrease related to transferring one (1.0 FTE) Executive Secretary I position into the Health and Human Services Administration (4-120) budget unit, effective July 1, 2019

Services & Supplies

- \$36,334 Increase in multiple Service and Supplies accounts related to the addition of the Home Visiting Initiative and an increase in grant and Tobacco funding primarily in Other Equipment, Employee Training, and Memberships
- \$14,200 Increase in Outside Printing related to an increase of printing educational and promotional materials
- \$70,796 Increase in Professional and Specialized Services primarily related to the approval for participation in the CAL EIS Fellowship program.
- \$17,000 Increase in Software License & Maintenance related to the increased user licenses for several software programs throughout the HHS Department
- \$12,842 Increase in ISF Liability Premium charges as provided by the Human Resources Department
- \$35,687 Increase in ISF Workers' Compensation Premium charges as provided by the Human Resources Department
- (\$50,931) Decrease in ISF Wellness Services due to decrease in budget for the Employee Wellness Clinic

Other Charges

- \$237,280 Increase in Interfund Cost Plan charges due to change of Indirect Overhead cost charges for Public Health (Only building maintenance related overhead costs were charged to this budget unit in prior years; this year the entire share of Overhead costs for this budget unit is charged)

Intrafund Transfers

- \$91,327 Increase in Intrafund Human Services Administration related to additional staffing and organizational changes

Other Financing Uses

- (\$126,877) Decrease related to completion of capital projects

Revenues

- \$197,728 Increase in Medi-Cal due to the Home Visiting Initiative Program
- \$102,237 Increase in State Tobacco Control Funding
- \$38,331 Increase in State Pre-Natal Programs Funding
- \$93,412 Increase in State Foster Care Funding
- (\$10,000) Decrease in St CMSP Funding
- (\$175,000) Decrease in State SNAP Ed Funding
- (\$51,385) Decrease in Federal WIC Funding
- (\$20,000) Decrease in Private Pay revenue based on actual services provided

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 Public Health services and programs are dedicated to promotion, protection, and improvement of the health of Sutter County residents. The goal of the services and programs is to optimize the 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 40% 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 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 that are data driven, research informed, and prioritize 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 the County's effort to reduce homelessness, a Homeless Services Team based in the Public Health Branch has provided outreach services to the homeless population and gathered statistical information to assist in determining the best way to serve this population. This team includes staff from Behavioral Health, Substance Use Disorders Services, Social Services & Welfare, and Public Health. The team is focused on homeless clients and provides evaluations and referrals to appropriate services and ultimately into stable housing.

The Homeless to Housed Motel Project (H2H), established in January 2017 with 1.4 FTE, provides temporary emergency shelter at local motels paired with barrier reducing case management to participants. Staff conducts weekly home visits and sets goals with clients to attain employment, income and permanent housing.

Since, the H2H Project began, 98 participants received services and 37 were transitioned into permanent housing. Of the 37 participants that were permanently housed, 31 continue to be housed (84% housing retention rate) after one year.

In Federal Fiscal Year 2018-19, the H2H Project provided services to 20 participants.

- 7 participants transitioned into permanent housing (110 days, average time to find permanent housing)
- Average age of the participants is 56 years old
- 10 have pets
- 7 have been homeless more than 1 year
- 2 obtained income from Social Security Disability
- 3 saw an increase in their income
- 5 were connected to primary care
- 3 obtained health insurance
- 2 received assistance with legal issues
- 1 obtained I.D.

The Homeless Services Team partners with the City of Yuba City to conduct the Open Doors events. This is a monthly outreach event to connect individuals experiencing homelessness to services such as CalFresh, I. D vouchers, Coordinated Entry shelter list, Behavioral Health, animal licensing and vaccines and Public Health Services such as HIV testing and Hepatitis A and Flu immunizations.

Sutter County took the lead in the 2019 Point in Time (PIT) count on the behalf of the Homeless Consortium. The PIT is conducted biannually and is a requirement to receive homeless assistance

funding from the U.S. Department of Housing and Urban Development (HUD). The PIT Count uses HUD's definition of homelessness, which includes persons living in shelters and places not meant for human habitation but excludes persons at risk of homelessness who are living temporarily with friends or in motel rooms, as well as those incarcerated or in treatment facilities with no residence upon release. Overall, 466 people in Sutter County were identified during the PIT count as either homeless per the HUD definition or precariously sheltered and at risk of becoming homeless.

The 2019 Point-In-Time Count was conducted as an emergency exercise with the Sutter County Epidemiologist as the incident commander for this bi-county event and the Sutter County Prevention Services Coordinator as the lead for Sutter County.

In order to move individuals into stable housing it is necessary to provide an assessment of each individual's ability to maintain housing and meet the necessities of daily living. Having staff focused on this task will provide appropriate, targeted assistance and improve the opportunities for success to homeless individuals.

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. It is the issuance of recognition of achievement of accreditation within a specified time frame by a nationally recognized entity.

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 2019-20 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.

Recommended Budget

This budget is recommended at \$8,222,888 which is an increase of \$211,270 (2.6%) over FY 2018-19. The General Fund provides 48.4% of the funding for the Public Health budget unit and is increased by \$46,534 (1.0%) for FY 2019-20. This increase is primarily due to the change in the County Overhead Cost Plan Charges now being budgeted in Public Health, at \$427,099. Historically, only Building Maintenance charges were budgeted. This change creates a more accurate reflection of the true operating cost for the Public Health budget.

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.

The following changed position is recommended to be effective with budget adoption:

- Transfer one (1.0 FTE) Executive Secretary I position from the Public Health (4-103) budget unit to the Health and Human Services Administration (4-120) budget unit and change the position to a flexibly staffed Executive Secretary I/II position

Interior and exterior maintenance and improvements for the facility at 1445 Veterans Memorial Circle have been budgeted in the Building Maintenance (1-700) budget unit. The General Services Department is responsible for these maintenance projects.

Of the 60.20 FTE positions in the Public Health budget, 34.51 FTE positions are directly grant funded.

Use of Fund Balance

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

Health and Human Services Jail Medical Services (4-134)

Nancy O'Hara, Director

COUNTY OF SUTTER EXECUTIVE SUMMARY Fiscal Year 2019-2020					
Fund: 0012 - HEALTH				Dept: 4134	
Unit Title: JAIL MEDICAL SERVICES					
	2017-2018 Actual Expenditure	2018-2019 YTD as of 05/30/2019	2018-2019 Adopted Budget	2019-2020 CAO Recommended	2018-2019 % Change Over
EXPENDITURES					
SALARIES AND EMPLOYEE BENEFITS	120,921	111,619	156,443	148,344	-5.2
SERVICES AND SUPPLIES	2,880,736	2,200,582	3,110,930	3,076,610	-1.1
OTHER CHARGES	17,959	1,996	138,293	138,286	0.0
OTHER FINANCING USES	157	0	13,007	0	-100.0
NET BUDGET	3,019,773	2,314,197	3,418,673	3,363,240	-1.6
REVENUE					
FINES, FORFEITURES, PENALTIES	1,486	1,037	0	0	0.0
CHARGES FOR SERVICES	18,152	0	0	0	0.0
MISCELLANEOUS REVENUES	0	1,036	0	0	0.0
OTHER FINANCING SOURCES	269,726	239,403	365,355	364,941	-0.1
TOTAL OTHER REVENUE	289,364	241,476	365,355	364,941	-0.1
UNREIMBURSED COSTS	2,730,409	2,072,721	3,053,318	2,998,299	-1.8
ALLOCATED POSITIONS	1.00	0.00	1.00	1.00	0.0

Purpose

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

There are no major budget changes for FY 2019-20.

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.

Health and Human Services

Jail Medical Services (4-134)

Nancy O'Hara, Director

On February 28, 2017 a contract with California Forensic Medical Group, Inc. (CFMG) 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 use of inpatient hospital days, emergency room visits, pharmaceutical costs, and 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

This budget is recommended at \$3,363,240, which is a decrease of \$55,433 (1.6%) compared to FY 2018-19. The General Fund provides 89.1% of the funding for this budget and is decreased by \$55,019 (1.8%) for 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 contributions (prior to the State's implementation of 1991 Realignment, services were funded through a combination of general revenues and AB8 funding).

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. It should be noted that 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. The budget does not include the use of any specific fund balance.

COUNTY OF SUTTER EXECUTIVE SUMMARY Fiscal Year 2019-2020					
Fund: 0012 - HEALTH					
Unit Title: NON-COUNTY PROVIDERS					Dept: 4201
	2017-2018 Actual Expenditure	2018-2019 YTD as of 05/28/2019	2018-2019 Adopted Budget	2019-2020 CAO Recommended	2018-2019 % Change Over
EXPENDITURES					
SERVICES AND SUPPLIES	26,400	19,800	26,400	26,400	0.0
OTHER CHARGES	427,233	262,210	736,924	762,797	3.5
NET BUDGET	453,633	282,010	763,324	789,197	3.4
REVENUE					
CHARGES FOR SERVICES	16,203	0	0	0	0.0
OTHER FINANCING SOURCES	0	0	25,000	25,000	0.0
TOTAL OTHER REVENUE	16,203	0	25,000	25,000	0.0
UNREIMBURSED COSTS	437,430	282,010	738,324	764,197	3.5
ALLOCATED POSITIONS	0.00	0.00	0.00	0.00	0.0

Purpose

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

- \$25,873 Increase in Interfund Environmental Health as provided by the Development Services Department

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. S-SV EMS is a ten county Joint Powers Agency that is designated as the local EMS agency for Butte, Colusa, Glenn, Nevada, Placer, Shasta, Siskiyou, Sutter, Tehama, and Yuba Counties under the authority of the Government Code, State of California (§6500, et seq.). Sutter County’s share in the EMS Agency is based on the per capita population rate of forty-one cents (\$0.41), plus a \$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 that

Health and Human Services

Non County Providers (4-201)

Nancy O'Hara, Director

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) funds.

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

County Medical Services Program (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. Sutter County has participated in the CMSP since 1983 through an agreement between the County and Governing Board of the CMSP. 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 2017-18, 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 future 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) resulted in a significant reduction in the number CMSP enrollees throughout the counties including 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.

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

Nancy O'Hara, Director

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

This budget is recommended at \$789,197, which is an increase of \$25,873 (3.4%) over FY 2018-19. The General Fund provides 96.8% of the financing for this budget unit and is increased by \$25,873 (3.5%) over FY 2018-19. 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. This cost is partially offset with a transfer in from the Emergency Medical Services Special Revenue Fund (0-252), in the amount of \$25,000.

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 \$522,808 to be transferred to the Environmental Health (2-725) budget unit.

Use of Fund Balance

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

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

Nancy O'Hara, Director

COUNTY OF SUTTER EXECUTIVE SUMMARY Fiscal Year 2019-2020					
Fund: 0012 - HEALTH					
Unit Title: CALIFORNIA CHILDREN SERVICES					
					Dept: 4301
	2017-2018 Actual Expenditure	2018-2019 YTD as of 05/28/2019	2018-2019 Adopted Budget	2019-2020 CAO Recommended	2018-2019 % Change Over
EXPENDITURES					
SERVICES AND SUPPLIES	0	0	70,480	70,480	0.0
OTHER CHARGES	83,234	26,738	210,368	210,368	0.0
NET BUDGET	<u>83,234</u>	<u>26,738</u>	<u>280,848</u>	<u>280,848</u>	<u>0.0</u>
REVENUE					
INTERGOVERNMENTAL REVENUES	6,021	0	0	0	0.0
CHARGES FOR SERVICES	141,150	0	0	0	0.0
OTHER FINANCING SOURCES	0	0	141,150	141,150	0.0
TOTAL OTHER REVENUE	<u>147,171</u>	<u>0</u>	<u>141,150</u>	<u>141,150</u>	<u>0.0</u>
UNREIMBURSED COSTS	-63,937	26,738	139,698	139,698	0.0
ALLOCATED POSITIONS	0.00	0.00	0.00	0.00	0.0

Purpose

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 2019-20.

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 county 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 sequelae.

For counties with populations under 200,000 (dependent counties), the Children's Medical Services (CMS) Branch provides medical case management and eligibility and benefits determination through its regional offices located in Sacramento, San Francisco, and Los Angeles.

Health and Human Services

California Children's Services (CCS) (4-301)

Nancy O'Hara, Director

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

The growth in CCS caseloads and program costs has 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)

Nancy O'Hara, Director

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, which is the same as FY 2018-19. At this time, the State has not determined the amount of its contribution to the Sutter County CCS Program for FY 2019-20. As mentioned above, 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.

Use of Fund Balance

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

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

Nancy O'Hara, Director

COUNTY OF SUTTER EXECUTIVE SUMMARY Fiscal Year 2019-2020					
Fund: 0252 - EMERGENCY MEDICAL SERVICES				Dept: 0252	
Unit Title: EMERGENCY MEDICAL SERVICES					
	2017-2018 Actual Expenditure	2018-2019 YTD as of 05/28/2019	2018-2019 Adopted Budget	2019-2020 CAO Recommended	2018-2019 % Change Over
EXPENDITURES					
SERVICES AND SUPPLIES	41,148	122,940	131,000	132,499	1.1
OTHER CHARGES	27,529	607	500	785	57.0
OTHER FINANCING USES	0	0	38,100	38,100	0.0
NET BUDGET	68,677	123,547	169,600	171,384	1.1
REVENUE					
FINES, FORFEITURES, PENALTIES	99,048	93,034	80,000	81,784	2.2
REVENUE USE MONEY PROPERTY	2,363	6,856	5,500	5,500	0.0
CANCELLATION OF OBLIGATED FB	0	0	84,100	84,100	0.0
TOTAL OTHER REVENUE	101,411	99,890	169,600	171,384	1.1
UNREIMBURSED COSTS	-32,734	23,657	0	0	0.0
ALLOCATED POSITIONS	0.00	0.00	0.00	0.00	0.0

Purpose

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

There are no major budget changes for FY 2019-20.

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. With more patients covered through Medi-Cal because of Medi-Cal expansion because of Affordable Care Act (ACA) or other insurance through Covered California, there have been fewer 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 on tobacco products under Proposition 99 (the Tobacco Tax and Health Protection Act of 1988).

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

Nancy O'Hara, Director

Recommended Budget

This budget is recommended at \$171,384, which is an increase of \$1,784 (1.1%) over FY 2018-19. This budget does not receive funding from the General Fund.

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 account.

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. The Recommended Budget includes a cancellation of \$69,100 from the Restricted Fund Balance 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 to offset the reduction of revenues. This total 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 2019-20 is less than projected Physician Expenses; therefore, the Recommended Budget includes a Cancellation of Obligated Fund Balance from the Restricted Fund Balance Physicians account (#31113) in the amount of \$15,000, the same as FY 2018-19, to fund anticipated Physician Expense claims for FY 2019-20.

COUNTY OF SUTTER EXECUTIVE SUMMARY Fiscal Year 2019-2020					
Fund: 0013 - WELFARE/SOCIAL SERVICES				Dept: 5101	
Unit Title: WELFARE ADMINISTRATION					
	2017-2018 Actual Expenditure	2018-2019 YTD as of 05/28/2019	2018-2019 Adopted Budget	2019-2020 CAO Recommended	2018-2019 % Change Over
EXPENDITURES					
SALARIES AND EMPLOYEE BENEFITS	17,682,399	16,272,036	20,502,280	20,790,380	1.4
SERVICES AND SUPPLIES	3,383,437	2,557,536	3,894,926	3,757,421	-3.5
OTHER CHARGES	4,125,318	3,390,661	5,474,547	5,965,017	9.0
CAPITAL ASSETS	25,999	67,645	66,000	33,000	-50.0
OTHER FINANCING USES	1,424,466	0	493,210	480,787	-2.5
NET BUDGET	26,641,619	22,287,878	30,430,963	31,026,605	2.0
REVENUE					
INTERGOVERNMENTAL REVENUES	20,427,553	10,250,703	24,962,352	20,802,782	-16.7
CHARGES FOR SERVICES	4,584,252	410,570	3,290,015	180,000	-94.5
MISCELLANEOUS REVENUES	2,228	1,686	17,000	19,000	11.8
OTHER FINANCING SOURCES	0	2,184	0	2,858,390	100.0
TOTAL OTHER REVENUE	25,014,033	10,665,143	28,269,367	23,860,172	-15.6
UNREIMBURSED COSTS	1,627,586	11,622,735	2,161,596	7,166,433	231.5
ALLOCATED POSITIONS	225.00	232.00	232.00	231.00	-0.4

Purpose

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

- \$435,125 General increase due to negotiated salaries and benefits
- (\$72,717) Decrease due to the elimination of one (1.0 FTE) vacant Account Clerk II position, effective July 1, 2019
- (\$183,820) Decrease related to transferring one (1.0 FTE) Deputy Director Health and Human Services position into the Health and Human Services Administration budget unit (4-120), effective July 1, 2019

Health and Human Services Welfare Administration (5-101)

Nancy O'Hara, Director

- (\$93,067) Decrease related to transferring one (1.0 FTE) Executive Secretary I position into the Health and Human Services Administration budget unit (4-120), effective July 1, 2019
- \$105,324 Increase related to the addition of one (1.0 FTE) Social Worker Adult Services III, effective July 1, 2019
- \$97,255 Increase related to the addition of one (1.0 FTE) flexibly-staffed Social Worker Adult Services I/II, effective July 1, 2019

Services & Supplies

- (\$186,313) Decrease in ISF Wellness Services due to close of the Wellness center

Other Charges

- (\$327,365) Decrease in Temporary Aid Needy Family Child care primarily due to decrease in caseload
- \$41,620 Increase in Support and Care of Persons accounts primarily due to anticipated increase in the extended subsidized employment program
- \$288,000 Increase in Housing Support to reflect anticipated program allocation
- \$288,954 Increase in Interfund Human Services Admin related to additional staffing and organizational changes
- (\$28,882) Decrease in Mental Health Services Blended Fund charges related to decrease in caseload
- \$481,806 Increase in Cost Plan charges as calculated by the Auditor-Controller's Office
- (\$128,872) Decrease in IF Transfer Out related to the reclassification of Interfund account
- (\$140,818) Decrease in Interfund Maintenance/Improvements as provided by the General Services Department

Capital Assets

- \$33,000 Replacement of one (1) mid-size vehicle

Other Financing Uses

- \$134,280 Increase in Operating Transfer Out related to the reclassification of Interfund accounts

Health and Human Services Welfare Administration (5-101)

Nancy O'Hara, Director

- (\$151,615) Decrease in Operating Transfer Out – Capital Projects related to the completion of the parking lot project at 190 Garden Hwy
- \$51,909 Increase in Operating Transfer Out – Debt Services related to lease payment for the Chevron solar project

Revenues

- (\$4,159,570) Decrease in Intergovernmental Revenues from State and Federal primarily due to a decrease in Welfare Administration funding
- (\$3,110,015) Decrease in Charges for Services related to the reclassification and the elimination of several Interfund accounts
- \$2,000 Increase in Other Revenue related to adoption fees more accurately being recorded
- \$2,853,390 Increase in Operating Transfer In related to the reclassification of several Interfund accounts

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 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. Parents are required to participate in Welfare to Work (WTW) activities as a condition of receiving cash aid. WTW activities include unsubsidized and subsidized employment, self-employment, community service, adult basic education, job skills training, vocational education, job search/job readiness assistance, mental health counseling, substance abuse treatment, domestic abuse services, homeless/housing support services, and other activities necessary to assist recipients in obtaining employment.

CalWORKs/Employment Services continues to administer early engagement strategies per AB74, by providing expanded WTW services which included the implementation of the Subsidized Employment program on July 1, 2014, the Family Stabilization program on May 1, 2014, the Online CalWORKs Appraisal Tool (OCAT) on October 1, 2015, and the Housing Support Program (HSP) on November 1, 2016.

Caseworkers complete the OCAT for each participant, which is an in-depth assessment that identifies client strengths and barriers by gathering and providing information about employment and educational history, housing stability, physical and behavioral health, and domestic abuse. This assessment is used to develop an individualized welfare-to-work plan immediately upon entry into the program.

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 wrap-around services to foster housing retention and stability.

CalWORKs/Employment Services continues to administer the Subsidized Employment program in partnership with Sutter County One Stop and in collaboration with Employers, nonprofits, and local public agencies to match parents with jobs and providing a connection to the labor force. Participants develop employment skills leading to job retention and more employable candidates transitioning to self-sufficiency. Wages are fully or partially subsidized with jobs in many industries. Participants build job skills, employment history, and stability to transition into permanent unsubsidized employment.

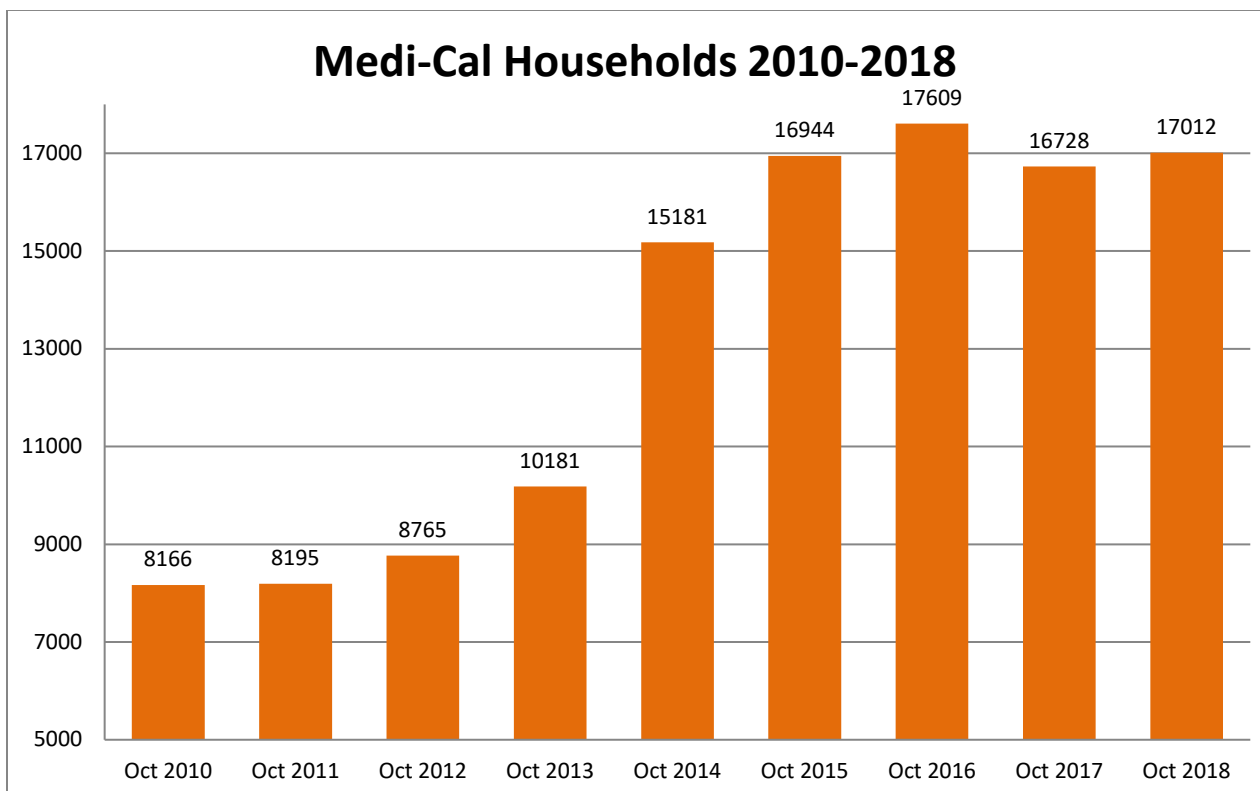
The Child and Adult Protective Services branch continues to work collaboratively with Mental Health, Health, Probation, the Courts, and other public service agencies by using a multidisciplinary team approach to address the problems of families and adults.

One purpose of the Patient Protection and Affordable Care Act (ACA) of 2010 is to provide affordable healthcare for all Americans. Health Care Reform legislation required that County Welfare Departments begin open enrollment on October 1, 2013 for Health coverage to begin January 1, 2014. Sutter County was approved for funding to implement a Customer Service Center

using C-IV Customer Service Center hardware and software technology. A Task Based business model has allowed workers to manage ongoing cases more efficiently by processing specific tasks rather than managing entire caseloads.

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.

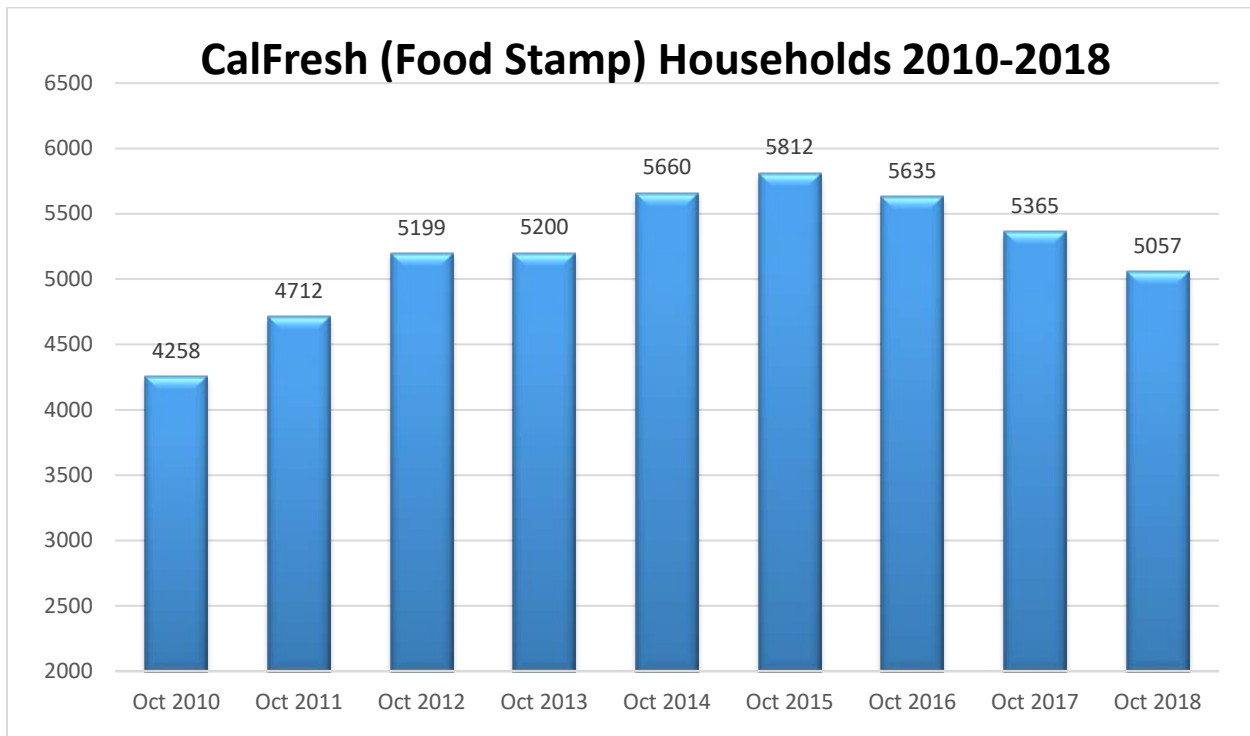
In Sutter County, the Medi-Cal caseload, number of households, grew approximately 108% from October 2010, at 8,166 cases, to October 2018, at 17,012 cases (see Medi-Cal Households 2010-2018 graph).



Approximately 38,000 individuals in Sutter County are receiving Medi-Cal benefits. Sutter County added over 5,000 additional households that qualified for Medi-Cal on January 1, 2014 under the Affordable Care Act's expanded Medicaid eligibility criteria, to Medi-Cal under the Affordable Care Act.

The ACA has significantly expanded the scope of the Medi-Cal program which results in programmatic changes that requires additional on-going analytical work.

The CalFresh caseload has grown approximately 19% from October 2010 at 4,258 cases to October 2018 at 5,057 cases (see CalFresh Households 2010-2018 graph).



Recommended Budget

This budget is recommended at \$31,026,605, which is an increase of \$595,642 (2.0%) over FY 2018-19.

The Welfare and Social Services fund, as a whole, receives \$449,000 in financing from the General Fund in order to meet the County's Maintenance of Effort (MOE) for receipt of CalWORKs and related Realignment funding.

One Capital Asset is recommended at \$33,000 for the purchase of a replacement vehicle, a mid-size sedan, effective July 1, 2019

The following positions changes are recommended to be effective July 1, 2019:

- Eliminate one (1.0 FTE) vacant Account Clerk II position
- Transfer one (1.0 FTE) Deputy Director Health and Human Services to the Health and Human Services Administration (4-120) budget unit
- Transfer one (1.0 FTE) Executive Secretary I position to the Health and Human Services Administration (4-120) budget unit
- Addition of one (1.0 FTE) Social Worker Adult Services III position
- Addition of one (1.0 FTE) flexibly-staffed Social Worker Adult Services I/II position

Health and Human Services Welfare Administration (5-101)

Nancy O'Hara, Director

The Capital improvement project related to 1965 Live Oak Blvd has been budgeted in the Capital Improvement Projects (1-800) budget unit:

- \$249,980 for proportional share of cost for construction and paving of parking lot

Interior and exterior maintenance and improvements for the facility at 190 Garden Hwy have been budgeted in the Building Maintenance (1-700) budget unit. The General Services Department is responsible for these maintenance projects.

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.

COUNTY OF SUTTER EXECUTIVE SUMMARY Fiscal Year 2019-2020					
Fund: 0001 - GENERAL					
Unit Title: PUBLIC GUARDIAN & CONSERVATOR					
					Dept: 2709
	2017-2018 Actual Expenditure	2018-2019 YTD as of 05/28/2019	2018-2019 Adopted Budget	2019-2020 CAO Recommended	2018-2019 % Change Over
EXPENDITURES					
SALARIES AND EMPLOYEE BENEFITS	223,706	303,809	305,662	363,712	19.0
SERVICES AND SUPPLIES	28,689	25,344	43,320	40,128	-7.4
OTHER CHARGES	21,221	3,695	0	69,829	100.0
CAPITAL ASSETS	0	22,437	0	25,000	100.0
INTRAFUND TRANSFERS	1,945	117	156	190	21.8
OTHER FINANCING USES	347	0	4,172	1,224	-70.7
NET BUDGET	275,908	355,402	353,310	500,083	41.5
REVENUE					
CHARGES FOR SERVICES	191,187	11,650	246,761	332,100	34.6
OTHER FINANCING SOURCES	2,184	0	0	0	0.0
TOTAL OTHER REVENUE	193,371	11,650	246,761	332,100	34.6
UNREIMBURSED COSTS	82,537	343,752	106,549	167,983	57.7
ALLOCATED POSITIONS	3.00	3.00	3.00	3.00	0.0

Purpose

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. Such persons may suffer from severe mental illness, dementia or are simply older, frail and vulnerable adults.

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

Salaries & Benefits

- \$58,050 General increases due to negotiated salaries and benefits

Other Charges

- \$45,000 Increase in Contribution to Others related to Social Security overpayments
- \$24,829 Increase in IF Human Services Admin related to more accurately charging this budget unit for its proportionate share of the HHS Admin charges

Capital Assets

- \$25,000 Increase related to public guardian specific case management and accounting software

Revenue

- \$87,339 Increase in Interfund MH Admin Conservator Services related to increased LPS caseload and costs

Program Discussion

The Public Guardian-Conservator serves as conservator of a person and/or estate of individuals needing protective intervention. The two types of conservatorships, Lanterman-Petris-Short (LPS) and probate, can only be established by order of the superior court.

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. The Public Guardian-Conservator is responsible for directing the mental health treatment and placement of their clients. Referrals for LPS conservatorship can only come from a psychiatrist who is authorized to do LPS evaluations.

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. Referrals for probate conservatorship usually come from another community agency, institution, or physician.

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 eighty-four (84) Conservatees, thirty-five (35) of which are probate cases and forty-nine (49) of which are LPS cases.

Recommended Budget

This budget is recommended at \$500,083, which is an increase of \$146,773 (41.5%) over FY 2018-19. The General Fund provide 33.6% of the financing for this budget unit and is increased by \$61,434 (57.7%) over FY 2018-19.

Health and Human Services Public Guardian (2-709)

Nancy O'Hara, Director

Capital Assets are recommended at \$25,000 for the purchase of the public guardian specific case management and accounting software, effective July 1, 2019.

Capital improvement projects related to 1965 Live Oak Blvd has been budgeted in the Capital Improvement Projects budget unit (1-800):

- \$790 for proportional share of cost for construction and paving of parking lot

Use of Fund Balance

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

COUNTY OF SUTTER EXECUTIVE SUMMARY Fiscal Year 2019-2020					
Fund: 0013 - WELFARE/SOCIAL SERVICES					
Unit Title: IN-HOME SUPPORTIVE SRVS (IHSS)				Dept: 5201	
	2017-2018 Actual Expenditure	2018-2019 YTD as of 05/28/2019	2018-2019 Adopted Budget	2019-2020 CAO Recommended	2018-2019 % Change Over
EXPENDITURES					
OTHER CHARGES	2,284,563	1,598,279	2,807,639	2,670,042	-4.9
NET BUDGET	<u>2,284,563</u>	<u>1,598,279</u>	<u>2,807,639</u>	<u>2,670,042</u>	<u>-4.9</u>
REVENUE					
CHARGES FOR SERVICES	2,284,563	0	0	0	0.0
OTHER FINANCING SOURCES	0	544,580	2,807,639	2,670,042	-4.9
TOTAL OTHER REVENUE	<u>2,284,563</u>	<u>544,580</u>	<u>2,807,639</u>	<u>2,670,042</u>	<u>-4.9</u>
UNREIMBURSED COSTS	0	1,053,699	0	0	0.0
ALLOCATED POSITIONS	0.00	0.00	0.00	0.00	0.0

Purpose

In-Home Supportive Services (IHSS) is a statewide program under the direction of the California Department of Social Services (CDSS).

The Sutter County IHSS Public Authority 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 program pays providers to care for qualified aged, blind, or disabled individuals who require personal care and/or homemaking assistance in order to continue living in their homes. CDSS makes the payments to the providers, and then invoices the County for its share of the costs.

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.

Major Budget Changes

Other Charges

- (\$147,562) Decrease in IHSS-County Share

- \$ 9,965 Increase in Contribution to Other Agencies related to the reinstatement of funding of the Public Authority (PA) Admin costs

Revenues

- (\$137,597) Decrease in 1991 Realignment Revenue based on budget requirements

Program Discussion

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 was increased to \$12.00 per hour in January 2019 to align with state minimum wage increases.

Recommended Budget

This budget is recommended at \$2,670,042, which is a decrease of \$137,597 (4.9%) compared to FY 2018-19. Caseload growth is anticipated during FY 2019-20 despite the reduction in budget. This is due to actual costs being lower than anticipated in FY 2018-19, and budget being subsequently reduced for 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 funds (0-248).

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

Temporary Aid for Needy Families (5-204)

Nancy O'Hara, Director

COUNTY OF SUTTER EXECUTIVE SUMMARY Fiscal Year 2019-2020					
Fund: 0013 - WELFARE/SOCIAL SERVICES					
Unit Title: TANF-FAMILY GROUP					
					Dept: 5204
	2017-2018 Actual Expenditure	2018-2019 YTD as of 05/28/2019	2018-2019 Adopted Budget	2019-2020 CAO Recommended	2018-2019 % Change Over
EXPENDITURES					
OTHER CHARGES	9,149,212	7,930,301	10,815,108	10,354,984	-4.3
NET BUDGET	9,149,212	7,930,301	10,815,108	10,354,984	-4.3
REVENUE					
INTERGOVERNMENTAL REVENUES	2,359,468	1,930,681	4,086,480	4,936,650	20.8
CHARGES FOR SERVICES	7,756,389	3,023,077	6,478,250	0	-100.0
OTHER FINANCING SOURCES	0	0	0	5,134,180	100.0
TOTAL OTHER REVENUE	10,115,857	4,953,758	10,564,730	10,070,830	-4.7
UNREIMBURSED COSTS	-966,645	2,976,543	250,378	284,154	13.5
ALLOCATED POSITIONS	0.00	0.00	0.00	0.00	0.0

Purpose

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

Major Budget Changes

Other Charges

- (\$460,124) Decrease in Support and Care of Persons related to decrease in projected caseload offset with increase in costs

Revenues

- \$842,170 Increase in Federal/State TANF related to increase in federal projected caseload and costs (caseload decreased but Federal/State funding for each case increased)
- (\$1,181,930) Decrease in Operating Transfers-In related to decrease in need of other funding due to increase in Federal funding

Program Discussion

TANF is a public assistance program which 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).

Health and Human Services

Temporary Aid for Needy Families (5-204)

Nancy O'Hara, Director

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 meets 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

This budget is recommended at \$10,354,984, which is a decrease of \$460,124 (4.3%) compared to FY 2018-19.

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 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. The budget does not include the use of any specific fund balance.

COUNTY OF SUTTER EXECUTIVE SUMMARY Fiscal Year 2019-2020					
Fund: 0013 - WELFARE/SOCIAL SERVICES					
Unit Title: FOSTER CARE					
					Dept: 5206
	2017-2018 Actual Expenditure	2018-2019 YTD as of 05/28/2019	2018-2019 Adopted Budget	2019-2020 CAO Recommended	2018-2019 % Change Over
EXPENDITURES					
OTHER CHARGES	6,473,722	4,660,705	9,124,380	5,023,780	-44.9
NET BUDGET	6,473,722	4,660,705	9,124,380	5,023,780	-44.9
REVENUE					
INTERGOVERNMENTAL REVENUES	2,253,499	904,594	3,529,841	1,953,890	-44.6
CHARGES FOR SERVICES	1,717,444	839,585	2,130,920	0	-100.0
OTHER FINANCING SOURCES	0	0	0	1,354,260	100.0
TOTAL OTHER REVENUE	3,970,943	1,744,179	5,660,761	3,308,150	-41.6
UNREIMBURSED COSTS	2,502,779	2,916,526	3,463,619	1,715,630	-50.5
ALLOCATED POSITIONS	0.00	0.00	0.00	0.00	0.0

Purpose

The Foster Care budget unit contains six programs which 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. These funds are provided on behalf of children whose families are unable or unwilling to care for them and who are in need of temporary or long-term substitute parenting or assisted parenting.

Major Budget Changes

Other Charges

- (\$3,178,820) Decrease in Support and Care Institutional due to decrease in projected caseload
- (\$259,210) Decrease in Support and Care Welfare-Foster Care due to decrease in projected caseload
- (\$244,800) Decrease in Support and Care Probation due to decrease in projected caseload
- (\$414,380) Decrease in Interfund Transfer-Out Wrap Around due to decrease in projected caseload

Revenues

- (\$1,600,801) Decrease in Federal TANF Foster Care due to decrease in projected caseload

- (\$776,660) Decrease Operating Transfer In-Realignment due to decrease in projected caseload

Program Discussion

This budget unit provides Foster Care financing for six programs as follows:

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

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

Recommended Budget

This budget is recommended at \$5,023,780, which is a decrease of \$4,100,600 (44.9%) compared to FY 2018-19. This decrease 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. The budget does not include the use of any specific fund balance.

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

Nancy O'Hara, Director

COUNTY OF SUTTER EXECUTIVE SUMMARY Fiscal Year 2019-2020					
Fund: 0013 - WELFARE/SOCIAL SERVICES					
Unit Title: REFUGEE CASH ASSISTANCE					Dept: 5207
	2017-2018 Actual Expenditure	2018-2019 YTD as of 05/28/2019	2018-2019 Adopted Budget	2019-2020 CAO Recommended	2018-2019 % Change Over
EXPENDITURES					
OTHER CHARGES	5,277	919	14,800	14,800	0.0
NET BUDGET	<u>5,277</u>	<u>919</u>	<u>14,800</u>	<u>14,800</u>	<u>0.0</u>
REVENUE					
INTERGOVERNMENTAL REVENUES	5,277	0	14,800	14,800	0.0
TOTAL OTHER REVENUE	<u>5,277</u>	<u>0</u>	<u>14,800</u>	<u>14,800</u>	<u>0.0</u>
UNREIMBURSED COSTS	0	919	0	0	0.0
ALLOCATED POSITIONS	0.00	0.00	0.00	0.00	0.0

Purpose

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 2019-20.

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

This budget is recommended at \$14,800, which is the same as FY 2018-19. 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.

COUNTY OF SUTTER EXECUTIVE SUMMARY Fiscal Year 2019-2020					
Fund: 0013 - WELFARE/SOCIAL SERVICES					
Unit Title: AID FOR ADOPTION					
					Dept: 5209
	2017-2018 Actual Expenditure	2018-2019 YTD as of 05/28/2019	2018-2019 Adopted Budget	2019-2020 CAO Recommended	2018-2019 % Change Over
EXPENDITURES					
OTHER CHARGES	4,408,582	4,476,128	4,770,000	5,430,640	13.8
NET BUDGET	4,408,582	4,476,128	4,770,000	5,430,640	13.8
REVENUE					
INTERGOVERNMENTAL REVENUES	1,893,693	1,231,790	1,980,000	2,406,670	21.5
CHARGES FOR SERVICES	1,855,168	1,148,279	2,092,500	0	-100.0
OTHER FINANCING SOURCES	0	0	0	2,267,970	100.0
TOTAL OTHER REVENUE	3,748,861	2,380,069	4,072,500	4,674,640	14.8
UNREIMBURSED COSTS	659,721	2,096,059	697,500	756,000	8.4
ALLOCATED POSITIONS	0.00	0.00	0.00	0.00	0.0

Purpose

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

- \$660,640 Increase in Support & Care of Persons related to an increase in projected caseload

Revenues

- \$426,670 Increase in Federal Aid for Adoptions related to an increase in projected caseload
- \$175,470 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

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

Nancy O'Hara, Director

administered by the California Department of Social Services, which then provides payment instructions to the County for payment to the adoptive parents.

Recommended Budget

This budget is recommended at \$5,430,640 which is an increase of \$660,640 (13.8%) over FY 2018-19.

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 Adoption 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). 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.

COUNTY OF SUTTER EXECUTIVE SUMMARY Fiscal Year 2019-2020					
Fund: 0001 - GENERAL				Dept: 5302	
Unit Title: GENERAL RELIEF-GENERAL					
	2017-2018 Actual Expenditure	2018-2019 YTD as of 05/28/2019	2018-2019 Adopted Budget	2019-2020 CAO Recommended	2018-2019 % Change Over
EXPENDITURES					
SERVICES AND SUPPLIES	30,027	19,818	34,900	34,170	-2.1
OTHER CHARGES	15,207	17,385	33,000	31,200	-5.5
NET BUDGET	45,234	37,203	67,900	65,370	-3.7
REVENUE					
CHARGES FOR SERVICES	6,204	8,632	7,400	7,500	1.4
OTHER FINANCING SOURCES	0	0	0	1,403	100.0
TOTAL OTHER REVENUE	6,204	8,632	7,400	8,903	20.3
UNREIMBURSED COSTS	39,030	28,571	60,500	56,467	-6.7
ALLOCATED POSITIONS	0.00	0.00	0.00	0.00	0.0

Purpose

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.

Major Budget Changes

There are no major budget changes for FY 2019-20.

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)

Nancy O'Hara, Director

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 7/1/17 – 6/30/18 CPI, the rate increase for FY 2019-20 is 3.9%.

Recommended Budget

This budget is recommended at \$65,370, which is a decrease of \$2,530 (3.7%) compared to FY 2018-19. The General Fund provides 86.4% of the financing for this budget unit.

Use of Fund Balance

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