

Reduction Impact Detail

DEPARTMENT OF HEALTH & HUMAN SERVICES

1. Program Title: Office of Finance, Contracts and Administration (7200100)

Program Description: Fiscal, facilities, budgets, contracts, research and quality assurance

	Base	Unfunded	Funded Base	Percentage
Appropriations	20,471,090	353,224	20,117,866	1.7%
Reimbursements (-)	-15,010,090	-353,224	-14,656,866	2.4%
Net Appropriations	5,461,000	0	5,461,000	0.0%
Revenues:				
Federal			0	
State	5,461,000		5,461,000	0.0%
Realignment			0	
Prop 172			0	
Fees			0	
Other			0	
Total Revenues	5,461,000	0	5,461,000	0.0%
Carryover			0	
Net Cost	0	0	0	
Fulltime Equivalent Positions	84.0	4.0	80.0	4.8%

Categorical Reduction: \$ -0-

Non-categorical Reduction: \$ 353,224 (Actual General Fund reductions occur as overhead reductions to Clinic Services and Health-Medical Treatment Account)

Staffing Reduction Summary

Class Code	Classification Name	Vacant	Filled
27539	Account Clerk Lv 2	1.0	
27560	Accounting Manager	1.0	
27541	Sr Account Clerk	2.0	
	Fulltime Equivalent Positions	4.0	0.0

Program Impact:

The reduction in CMISP Fiscal Unit is due to reduced service needs because of the Affordable Care Act (ACA). Actual General Fund reductions occur as overhead reductions to Clinic Services and Health-Medical Treatment Account. The elimination of four positions could impact the timeliness of payments to specialty providers for prior years billing not yet received.

2. Program Title: CMISP Case Management (7201200)

Program Description: County Medically Indigent Services Program (CMISP) Case Management is responsible for specialty and hospitalization medical authorization and care coordination for adults meeting financial and medical necessity criteria for service provision. Patients are referred by the County’s Primary Care Clinic and local hospitals. CMISP provides “last resort” primary, specialty and inpatient care for medically indigent persons as mandated by the State of California, Title 17 of the Welfare and Institutions Code.

	Base	Unfunded	Funded Base	Percentage
Appropriations	2,283,258	964,837	1,318,421	42.3%
Reimbursements (-)	-153,467		-153,467	0.0%
Net Appropriations	2,129,791	964,837	1,164,954	45.3%
Revenues:				
Federal			0	
State	400,000		400,000	
Realignment			0	
Prop 172			0	
Fees			0	
Other			0	
Total Revenues	400,000	0	400,000	0.0%
Carryover			0	
Net Cost	1,729,791	964,837	764,954	55.8%
Fulltime Equivalent Positions	13.8	8.8	5.0	63.8%

Categorical Reduction: \$ _____

Non-categorical Reduction: \$ 964,837

Staffing Reduction Summary Proposed (Excludes addition of 1.0 Sr. OA)

Class Code	Classification Name	Vacant	Filled
27603	Administrative Services Officer 1		1.0
27654	Claims Assistant Specialists	1.0	1.0
27783	Clerical Supervisor 1		1.0
28138	Medical Case Management Nurse	1.0	2.3
28140	Medical Director		0.5
28206	Office Assistant Lv. 2		1.0
28378	Secretary	1.0	
	Fulltime Equivalent Positions	3.0	6.8

Program Impact:

Budget-to Budget Staffing Reduction Summary

The following table shows the change in staffing from the 2013-14 Adopted Budget to the submitted 2014-15 Recommended Budget (Base) to the proposed cuts. The changes between the adopted budget and the submitted, recommended budget base are the result of vacant positions not being filled because of reduced service needs. The total reduction in staff (including base cuts and proposed cuts) from 2013-14 to 2014-15 is 20.6 FTE positions.

Job Title	2013-14 FTE	Bdgt-Bdgt Loss	2014-15 Base FTE	Proposed Reduction	Proposed 2014-15 FTE
Account Clerk Lv 2	1.0	(1.0)	-	-	-
Admin Svcs Officer 1	1.0	-	1.0	(1.0)	-
Claims Assistance Specialist	7.0	(4.0)	3.0	(2.0)	1.0
Clerical Supv 1	1.0	-	1.0	(1.0)	-
Health Program Coord	1.0	(1.0)	-	-	-
Human Services Division Mgr Rng B	1.0	-	1.0	-	1.0
Medical Case Management Nurse	10.1	(5.8)	4.3	(3.3)	1.0
Medical Director	0.5	-	0.5	(0.5)	-
Office Assistant Lv 1	-	1.0	1.0	(1.0)	-
Secretary	1.0	-	1.0	(1.0)	-
Sr Office Assistant	1.0	(1.0)	-	1.0	1.0
Supv Med Case Mgmnt Nurse	1.0	-	1.0	-	1.0
7201200 CMISP	25.6	(11.8)	13.8	(8.8)	5.0

Proposed Reduction

The proposed reduction of staffing and operating expenses does not result in a reduction of services. These reductions are consistent with a decrease in service volume due to transitions associated with early Medicaid expansion under the Low Income Health Program (LIHP) and Affordable Care Act (ACA) new health care coverage programs, particularly Expanded Medi-Cal.

The total cut to the submitted 2014-15 Recommended Budget is \$964,837. CMISP Case Management proposes cutting 9.8 FTE and regaining 1.0 Sr. Office Assistant for a net staff reduction from base budget of 8.8 FTE. Besides cuts to staff, use of registry services is reduced by \$136,172 and other operating costs consistent with decreased staffing are reduced by \$49,847.

Due to the size of the team and need for support (supervision, back-up coverage), this team will be co-located at the Primary Care Center. Staff will need to work closely with the clinic team in order to track and follow up with post hospital discharges and continuity of care. This leaves the suite at Micron vacant until 2016.

Potential Impact on other Departments/Program Partners:

This reduction is based on current volumes. In the event that volumes increase, staffing will require augmentation. Service providers, including hospitals and specialty services, could be affected by the eventual volume of CMISP eligible and non-insured clients because of reduced ability to authorize treatments.

Labor Relations – Throughout labor negotiations with C.N.A, U.A.P.D. and UPE 005, and currently with AFSCME, the County's position has been there will be no layoff of staff. The proposed reduction of staff will change the County's communication.

3. Program Title: Pharmacy (7201600)

Program Description: Pharmacy Services and Supports provide pharmaceuticals, medical supplies and staffing to County programs. These include programs in the division and in Behavioral Health and Public Health Divisions.

	Base	Unfunded	Funded Base	Percentage
Appropriations	6,888,295	1,588,009	5,300,286	23.1%
Reimbursements (-)	-2,002,519		-2,002,519	0.0%
Net Appropriations	4,885,776	1,588,009	3,297,767	32.5%
Revenues:				
Federal			0	
State	150,000		150,000	
Realignment	1,000,000	-272,904	1,272,904	
Prop 172			0	
Fees			0	
Other	115,000		115,000	
Total Revenues	1,265,000	-272,904	1,537,904	-21.6%
Carryover			0	
Net Cost	3,620,776	1,860,913	1,759,863	51.4%
Fulltime Equivalent Positions	30.8	15.9	14.9	51.6%

Categorical Reduction: \$ _____

Non-categorical Reduction: \$ 1,588,009

Staffing Reduction Summary

Class Code	Classification Name	Vacant	Filled
28248	Pharmacist		4.3
28313	Pharmacy Assistant		3.6
28314	Pharmacy Technician		7.0
27541	Sr. Account Clerk		1.0
	Fulltime Equivalent Positions	0.0	15.9

Program Impact:

Budget-to Budget Staffing Reduction Summary

The following table, shows the change in staffing from the 2013-14 Adopted Budget to the submitted 2014-15 Recommended Budget (Base) to the proposed cuts. The changes between the adopted budget and the submitted, recommended budget base are the result of vacant positions not being filled because of reduced service needs. The total reduction in staff (including base cuts and proposed cuts) from 2013-14 to 2014-15 is 17.9 FTE positions.

Job Title	2013-14 FTE	Bdgt-Bdgt Loss	2014-15 Base FTE	Proposed Reduction	Proposed 2014-15 FTE
Admin Svcs Officer 2	1.0	-	1.0	-	1.0
County Pharmacist	1.0	-	1.0	-	1.0
Medical Asst Lv 2	1.0	(1.0)	-	-	-
Pharmacist	10.2	-	10.2	(4.3)	5.9
Pharmacy Assistant	5.6	-	5.6	(3.6)	2.0
Pharmacy Manager	1.0	-	1.0	-	1.0
Pharmacy Technician	10.0	-	10.0	(7.0)	3.0
Sr Account Clerk	1.0	-	1.0	(1.0)	-
Sr Pharmacy Technician	1.0	-	1.0	-	1.0
Stock Clerk	1.0	(1.0)	-	-	-
7201600 PHARMACY	32.8	(2.0)	30.8	(15.9)	14.9

Proposed Reduction

The proposed reduction of staffing and operating expenses is consistent with a decrease in service volume due to transitions associated with early Medicaid expansion under the Low Income Health Program (LIHP) and Affordable Care Act (ACA) new health care coverage programs. County Clinic and Pharmacy have begun new partnerships with Correctional Health and Probation Adult Day Reporting Center (ADRC) to assist with transitional care, health services and linkages for those needing medical services. This assistance will be limited only to those who are uninsured/in the process of eligibility.

Besides staff cuts, extra help staffing is reduced by \$232,686; registry services are reduced by \$127,731; overtime is reduced by \$6,000; other operating expenses are reduced by \$60,591.

Elimination of North State College of Pharmacy Agreement – This is a zero dollar agreement that sanctions a teaching relationship between the County Pharmacy and the North State College of Pharmacy. North State has three faculty (one full-time and two part-time) and 4 – 5 interns based at PCC at any time. Clinical faculty and students provide a chronic diabetes management program for patients served by the County. This program offers education, 1:1 teaching, and ongoing evaluation of patients with diabetes. Remaining pharmacy staff will restructure and provide a modified program.

Behavioral Health and Walgreens – The Behavioral Health Division’s Mental Health Treatment Center (MHTC) utilizes the Walgreen’s contract for filling prescriptions after hours and weekends when the County pharmacy is closed. Since the County does not provide afterhours or weekend pharmacy services, the clients would be discharged without medication and be required to return the next business day to receive their prescriptions. The majority of the clients are discharged during the day; however, the Intake Stabilization and the Inpatient Units discharge clients who can be stabilized and treated at any time of day. Lack of access to discharge medication will fragment care and compliance with care to prevent reentry to crisis services. A reduction in pharmacy staff will result in the cancellation of the Walgreen’s contract due to 71J.

Potential Impact on other Departments/Program Partners:

County MHTC clients released without medications could impact law enforcement, emergency departments, jail, and other system partners. Hospital emergency departments could receive more individuals needing prescriptions filled.

Labor Relations – Throughout labor negotiations with C.N.A, U.A.P.D. and UPE 005, and currently with AFSCME, the County’s position has been there will be no layoff of staff. The proposed reduction of staff will change the County’s communication.

4. Program Title: Clinic Services (7201800)

Program Description: Clinic Services provides health care services to Sacramento County residents who are medically indigent. This is done in fulfillment of the County’s statutory and legal obligations under Welfare & Institutions 17000 to act as provider of last resort for the medically indigent. Clinic Services also includes health programs to other vulnerable, at-risk populations such as Healthcare for the Homeless, Refugee Health and Primary Care Integrated Behavioral Health.

	Base	Unfunded	Funded Base	Percentage
Appropriations	12,870,967	2,487,391	10,383,576	19.3%
Reimbursements (-)	-476,400		-476,400	0.0%
Net Appropriations	12,394,567	2,487,391	9,907,176	20.1%
Revenues:				
Federal	529,500		529,500	
State	110,000	-240,000	350,000	
Realignment	8,884,580	272,904	8,611,676	
Prop 172			0	
Fees	55,000		55,000	
Other	361,000		361,000	
Total Revenues	9,940,080	32,904	9,907,176	0.3%
Carryover			0	
Net Cost	2,454,487	2,454,487	0	100.0%
Fulltime Equivalent Positions	61.8	20.0	41.8	32.4%

Categorical Reduction: \$ _____

Non-categorical Reduction: \$ 1,832,991

Staffing Reduction Summary

Class Code	Classification Name	Vacant	Filled
27604	Clerical Supv. 2		1.0
28065	Human Services Program Planner, Range B	1.0	
28122	Medical Assistant Lv. 2		7.5
28206	Office Assistant Lv. 2	2.0	7.0
28267	Physician 3		0.5
28147	Sr. Mental Health Counselor	1.0	
	Fulltime Equivalent Positions	4.0	16.0

Program Impact:

Budget-to Budget Staffing Reduction Summary

The following table, shows the change in staffing from the 2013-14 Adopted Budget to the submitted 2014-15 Recommended Budget (Base) to the proposed cuts. The changes between

the adopted budget and the submitted, recommended budget base are the result of vacant positions not being filled because of reduced service needs. The total reduction in staff (including base cuts and proposed cuts) from 2013-14 to 2014-15 is 34.0 FTE positions.

Job Title	2013-14 FTE	Bdgt-Bdgt Loss	2014-15 Base FTE	Proposed Reduction	Proposed 2014-15 FTE
Account Clerk Lv 2	1.0	-	1.0	-	1.0
Admin Svcs Officer 1	3.0	(1.0)	2.0	-	2.0
Admin Svcs Officer 2	1.0	-	1.0	-	1.0
Claims Assistance Specialist	-	2.0	2.0	-	2.0
Clerical Supv 2	1.0	-	1.0	(1.0)	-
Dentist 2	0.5	-	0.5	-	0.5
Health Program Coord	1.0	(1.0)	-	-	-
Health Program Mgr	2.0	-	2.0	-	2.0
Human Services Program Planner Rng	1.0	-	1.0	(1.0)	-
Medical Asst Lv 2	19.5	(2.0)	17.5	(7.5)	10.0
Medical Director	1.0	-	1.0	-	1.0
Medical Transcriber Lv 2	1.0	(1.0)	-	-	-
Mental Health Program Coord	1.0	-	1.0	-	1.0
Nurse Practitioner	1.5	(0.5)	1.0	-	1.0
Office Assistant Lv 1	22.5	(4.5)	18.0	(9.0)	9.0
Physician 2	2.0	(1.0)	1.0	-	1.0
Physician 3	5.8	(4.0)	1.8	(0.5)	1.3
Radiologic Technologist	1.0	-	1.0	-	1.0
Registered Nurse Lv 2	3.0	(1.0)	2.0	-	2.0
Sr Mental Health Counselor	2.0	-	2.0	(1.0)	1.0
Sr Office Assistant	4.0	-	4.0		4.0
Supv Radiologic Technologist	1.0	-	1.0	-	1.0
7201800 CLINIC SERVICES	75.8	(14.0)	61.8	(20.0)	41.8

Proposed Reduction

The proposed reduction of staff positions, contracts and operating expenses is consistent with a decrease in service volume due to transitions associated with early Medicaid expansion under the Low Income Health Program (LIHP) and Affordable Care Act (ACA) new health care coverage programs. In the event that volumes of the indigent increase, staffing will require augmentation. County Clinic and Pharmacy have begun new partnerships with Correctional Health and Probation Adult Day Reporting Center (ADRC) to assist with transitional care, health services and linkages for those needing medical services. This assistance will be limited only to those who are uninsured/in the process of eligibility. Correctional Health and ADRC will need to learn to navigate the system for FFS Medi-Cal and managed care.

Besides staff cuts, extra help is reduced by \$198,577; registry services are reduced by \$183,635; contract services are reduced by \$235,000 based on decreased volumes and projections based on actual expenditures – CARES contract for \$50,000 (provides primary care services to adults with HIV/AIDS who qualify for CMISP) and FONEMED contract for \$20,000 (reduce after-hours medical advice line). Other operating costs reduced by \$362,092.

Other Clinic Service programs will remain operational with no impact. They include an Integrated Behavioral Health Primary Care Medical Home, Health Care for the Homeless, and Refugee Health Assessment.

Elimination of the UCD Transforming Education and Community Health (TEACH) residency program. – This includes partial funding of \$112,118 for a clinical faculty preceptor. In addition to this faculty, there are several other faculty physicians who share preceptor duties, approximately six residents, 3 subspecialty faculty and several medical students. This program has provided primary care and limited specialty services to medically indigent patients. This program has been offered in collaboration with Sacramento County since 2005. It aims to reduce health disparities and increase the number of primary care physicians in medically underserved community. This program along with North State School of Pharmacy has offered excellent clinical training as well as high quality services.

County employees such as Medical Assistants (2), Office Assistants (2) and administrative support (Health Program Coordinator (HPC); or reallocation of the HPC position to a RN Supervisor) will need to be reinstated if these teaching programs continue. Due to patient service volume reduction, the size and/or other components of the teaching programs would require restructuring.

Dental Clinic – Hours will be reduced to 20 hours per week in the new fiscal year. This is due to decrease in service demands. Operational hours will be in the mornings M – F.

Elimination of the Human Services Program Planner Range B – There are no planning staff in this division. This position staffs the Medi-Cal Managed Care Advisory Committee and other necessary administrative tasks. The Medi-Cal Managed Care Advisory Committee provides local stakeholder input and advisement to the State Department of Health Care Services and to the Geographic Managed Care Health Plans. The committee is comprised of key stakeholders representing the following: advocates, clinics, health plans, hospital systems, pharmacy, physicians, physician groups, Public Health Advisory Board, and government representatives (State, County Board, DHHS, and DHA). Under Welfare & Institutions 14089.07 establishes this committee as permissible not mandatory. This Committee will be eliminated. The division will struggle to produce metrics and implement a compliance program.

Potential Impact on other Departments/Program Partners:

This reduction is based on current service volumes. It will not impact services to the residual CMISP, uninsured presenting with a medical need that are in the process of eligibility, or other Clinic Service programs. Service volumes and access will be monitored. If volumes increase or accessibility does not meet requirements, staffing will require augmentation.

These reductions will impact a longstanding, well respected teaching and service relationships with UCD Department of Internal Medicine. This program provides high quality teaching and clinical services to an ethnically diverse, low income population with complex conditions. They also promote experience working with at risk populations in the public sector service. With the Affordable Care Act (ACA), the need for primary and specialty physicians and training programs is heightened.

Labor Relations – Throughout labor negotiations with C.N.A, U.A.P.D. and UPE 005, and currently with AFSCME, the County's position has been there will be no layoff of staff. The proposed reduction of staff will change the County's communication.

5. Program Title: Public Guardian/Public Conservator/Public Administrator (7203300)

Program Description: Provides public conservatorship of the person and estate for County residents who are adjudicated to be gravely disabled as a result of mental illness or have been determined by a medical professional to lack capacity to manage their own affairs. The Public Administrator acts as the personal representative/special administrator for estates of residents who have died when there is no will or known person to administer the estate.

	Base	Unfunded	Funded Base	Percentage
Appropriations	5,004,690		5,004,690	0.0%
Reimbursements (-)	-1,234,213		-1,234,213	
Net Appropriations	3,770,477	0	3,770,477	0.0%
Revenues:				
Federal	376,896		376,896	
State	0		0	
Realignment	2,347,917	-610,664	2,958,581	
Prop 172	0		0	
Fees	425,000		425,000	
Other	10,000		10,000	
Total Revenues	3,159,813	-610,664	3,770,477	-19.3%
Carryover			0	
Net Cost	610,664	610,664	0	100.0%
Fulltime Equivalent Positions	38.0		38.0	0.0%

Program Impact:

The proposed reduction of the FY 2014-15 Public Guardian/Public Conservator/Public Administrators recommended budget will be covered by one-time unspent Realignment funding from prior years. During FY 2014-15 funding sources for the program will be reviewed and other resources will be used to cover the one-time funding need.