

**COUNTY OF SACRAMENTO
CALIFORNIA**

For the Agenda of:
June 17, 2008

To: Board of Supervisors

From: Countywide Services Agency

Subject: Report Back – Summarize The Fiscal Year 2008-2009 Realignment Allocation Including Revenue Use Restrictions And The Impact Of Increasing In-Home Supportive Services Provider Payments And Future Realignment Revenue

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REPORT BACK

Realignment is received from the State of California for the benefit of Mental Health, Public Health, and Social Services programs. The following charts represent the Fiscal Year 2008-09 estimated total receipts by category and the allocation to a specific program within the category. The funding allocations within each account are made to mandated programs first and then to programs as agreed upon between the Countywide Services Agency Administrator and Department Heads. However, Departments are encouraged to use the funding amounts within mandated programs that can best maximize revenues from State and Federal sources.

Public Health Account

Program	FY 07/08 Estimated Revenue	FY 07/08 % Allocation
CMISP Case Management	\$2,251,440	4.26%
Pharmacy	619,616	1.18%
Clinics	8,140,982	15.41%
Public Health Programs	168,362	0.32%
Public Health Laboratory	196,035	0.37%
Public Health - Field Services	868,299	1.64%
Public Health Officer/AIDS	378,840	0.72%
Juvenile Medical Services	5,919,995	11.20%
CMISP - Health Treatment Pmts	20,086,170	38.01%
	DHHS TOTAL	38,629,739 73.11%
	DHA TOTAL	1,014,514 1.92%
	SHERIFF TOTAL	\$13,195,024 24.97%
	COUNTY TOTAL	\$52,839,277 100.00%

Mental Health Account

Program	FY 07/08 Estimated Revenue	FY 07/08 % Allocation
Mental Health Administration	\$1,020,134	2.00%
Mental Health Cultural Competency	209,854	0.42%
Mental Health Quality Assurance	1,717,927	3.37%
Mental Health Research & Evaluation	872,792	1.71%
Mental Health Treatment Center	13,552,292	26.60%
Children's Mental Health	5,691,576	11.17%
Adult Mental Health	23,804,923	46.74%
Juvenile (MH) Medical Services	511,465	1.00%
	DHHS TOTAL	47,380,963 93.01%
Sheriff - Adult Correctional Health	SHERIFF TOTAL	3,560,283 6.99%
	COUNTY TOTAL	\$50,941,246 100.00%

Social Services Account

Program	FY 07/08 Estimated Revenue	FY 07/08 % Allocation
IHSS - Administration	\$3,556,766	3.62%
Adult Protective Services	1,609,739	1.64%
Public Guardian	1,256,717	1.27%
Child Protective Services	16,294,059	16.57%
California Children's Services	1,629,406	1.66%
IHSS - Provider Payments	36,038,682	36.65%
	DHHS TOTAL	60,385,370 61.41%
Public Authority	PA TOTAL	413,989 0.42%
DHA - Administration	4,563,713	4.64%
DHA - Assistance	32,971,624	33.53%
	DHA TOTAL	37,535,338 38.17%
	COUNTY TOTAL	\$98,334,698 100.00%

In 1991, the State transferred several programs to the counties, changed the shared state and county costs for social service and health programs, and increased the sales tax and vehicle license fee (VLF) revenue to help offset the increased financial obligations to the counties. The revenues are deposited to three separate trust accounts (Mental Health, Public Health, and Social Services) within the county and are designated for the programs transferred to counties.

Specifically, those programs are Community-based mental health programs, State hospital services for county patients, Institutions for Mental Disease, AB8 County Health Services, Local Health Services, the Medically Indigent Services Program, County Medical Services Program, California Children's Services, AFDC – Foster Care (now CalWORKS), Child Welfare Services, In-Home Supportive Services, County Services Block Grant, Adoption Assistance Program, Greater Avenue for Independence program, AFDC – Family Group and Unemployed Parent (now CalWORKS), County Administration related to CalWORKS, and Food Stamps.

Although funds are deposited into three separate trust accounts, the realignment statute allows for the transfer of money amongst these accounts in certain circumstances. These transfers allow counties to adjust program allocations to best meet their service obligations. Each county is allowed to transfer up to 10 percent of the annual allocation of an account to the other two accounts. In order to take advantage of this provision, the county must document at a public meeting that the decision is being made to ensure the most cost-effective provision of services. All transfers apply for only the year in which they were made.

Mental Health and Public Health are not anticipated to receive caseload growth; caseload growth is first applied to Social Services caseload growth activity, any remaining caseload growth resources are then applied to Mental Health and Public Health. The state then assesses that the current year base can be met with expected realignment revenues and determines the amount in excess of what is needed to make the base payments. Excess revenue is allotted based on the aggregate total amongst all counties and then split proportionately. If any one county experiences a significant increase in growth, the proportionate share to that county would increase and affect the amounts other counties receive.

In the case of caseload growth for counties, all Social Services programs are included in the cost calculation. For example, the Social Services programs included are Children's Welfare Services, CalWorks, Foster Care, Adult Protective Services, In-Home Supportive Services (IHSS), and California Children's Services. If the costs of caseload growth in any one or more programs are negative, it impacts the overall growth in the Social Services account.

Should the IHSS caseload costs increase and the other Social service program caseload costs decrease the net difference of caseload growth could be zero resulting in no additional growth allocated to the County Social Services Account.

While the funding allocation for IHSS could be increased within the Social Services account, historically there is no direct program growth recovery.

Respectfully submitted,

APPROVED:

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