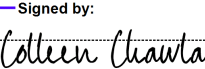
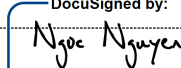
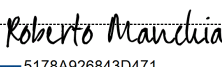


COUNTY OF SAN MATEO APPROPRIATION TRANSFER REQUEST				REQUEST NO. ATR25-B0704	
DEPARTMENT: Health/Behavioral Health & Recovery Services				DATE: 6/13/2025	
1. REQUEST TRANSFER OF APPROPRIATION AS LISTED BELOW:					
	CODES			AMOUNT	DESCRIPTION
	FUND or ORG	ACCOUNT	JL ORG CODE Measure K only		
FROM	See Supporting Attachment	See Supporting Attachment		5,002,244	See Supporting Attachment
TO	See Supporting Attachment	See Supporting Attachment		5,002,244	See Supporting Attachment
Justification (Attach Memo if Necessary): Appropriation transfer request to allow a final payment of FY 24-25 CalAIM Fee-for-Service claims for contracted providers that require an increase to the contract maximum obligation					
Signed by:					
DEPARTMENT HEAD 				DATE 6/13/2025	
178BB49A967E45D...					
2. <input type="checkbox"/> Board Action Required <input checked="" type="checkbox"/> Four-Fifths Vote Required <input type="checkbox"/> Board Action Not Required					
Remarks:					
DocuSigned by:					
COUNTY CONTROLLER 				DATE 6/17/2025	
311A76FBA8404C2...					
3. <input checked="" type="checkbox"/> Approve as Requested <input type="checkbox"/> Approve as Revised <input type="checkbox"/> Disapproved					
Remarks:					
DocuSigned by:					
COUNTY EXECUTIVE 				DATE 6/17/2025	
5178A926843D471...					
DO NOT WRITE BELOW THIS LINE – FOR BOARD OF SUPERVISORS USE ONLY					

BOARD OF SUPERVISORS, COUNTY OF SAN MATEO, STATE OF CALIFORNIA  
RESOLUTION TRANSFERRING FUNDS  
RESOLUTION NO. \_\_\_\_\_

RESOLVED, by the Board of Supervisors of the County of San Mateo, that

WHEREAS, the Department hereinabove named in the Request for Appropriation, Allotment or Transfer of Funds has requested the transfer of certain funds as described in said Request; and

WHEREAS, the County Controller has approved said Request as to accounting and available balances, and the County Executive has recommended the transfer of funds as set forth hereinabove:

NOW, THEREFORE, IT IS HEREBY ORDERED AND DETERMINED that the recommendations of the County Executive be approved and that the transfer of funds as set forth in said Request be effected.

Regularly passed and adopted this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_

AYES and in favor of said resolution:

NOES and against said resolution:

Supervisors: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Supervisors: \_\_\_\_\_  
\_\_\_\_\_  
Absent  
Supervisors: \_\_\_\_\_

ATTEST: \_\_\_\_\_  
Clerk of Said Board

\_\_\_\_\_  
PRESIDENT, BOARD OF SUPERVISORS  
COUNTY OF SAN MATEO

**County of San Mateo  
Appropriation Transfer Request  
(Supporting Attachment)**

**Department:** Health/Behavioral Health & Recovery Services

**Date:** 6/13/2025

**REQUEST TRANSFER OF APPROPRIATION AS LISTED BELOW:**

	CODES				
	FUND or ORG	ACCOUNT	JL ORG CODE Measure K only	AMOUNT	DESCRIPTION
FROM	61329	1685		1,216,352	FY24-25 contract payments
	61429	1685		1,559,392	FY24-25 contract payments
	61729	1685		2,226,500	FY24-25 contract payments
		Subtotal			5,002,244
TO	61329	5875		1,216,352	FY24-25 contract payments
	61429	5875		1,559,392	FY24-25 contract payments
	61729	6163		2,226,500	FY24-25 contract payments
		Subtotal			5,002,244



SAN MATEO COUNTY HEALTH

**BEHAVIORAL HEALTH  
& RECOVERY SERVICES**

2000 Alameda de las Pulgas  
Suite 235  
San Mateo, CA 94403  
650-573-2541 T  
650-573-2841 F  
[smchealth.org](http://smchealth.org)

COUNTY OF SAN MATEO

**Inter-Departmental Correspondence**

Health/Behavioral Health & Recovery Services

**DATE:** June 12, 2026

**BOARD MEETING DATE:** June 24, 2025

**TO:** Robert Manchia, Chief Financial Officer

**FROM:** Colleen Chalwa, Chief, Health  
Jei Africa, Director, Behavioral Health & Recovery Services  
Janet Gard, Deputy Director, Administration & Finance

**Subject:** Appropriation Transfer Request to Allow a Final Payment of FY 2024-25 CalAIM Fee-for-Service Claims for Mental Health and Substance Use Disorder Contracted Providers that Require an Increase to the Contract Maximum Obligations Due to Increased Service Volume

**RECOMMENDATION:**

Approve an Appropriation Transfer Request (ATR) accepting unanticipated Intergovernmental Revenue (\$3,001,347) and Charges for Services (\$2,000,898) increasing Service and Supplies (\$2,775,744) and Other Charges (\$2,226,500) to allow a final FY 2024-25 payment to contracted providers for CalAIM fee-for-services units that require an increasing the contract maximum obligation due to increased service volume providers.

**BACKGROUND:**

Behavioral Health and Recovery Services (BHRS), as required by CalAIM, introduced fee-for-service payments to contracted Mental Health and Substance Use Disorder providers in FY 2024-25. The fee-for-service payment structure requires that these providers be paid for all units of services delivered. In some cases, provider fee-for-service volumes have surpassed expectations. To accommodate





SAN MATEO COUNTY HEALTH

## BEHAVIORAL HEALTH & RECOVERY SERVICES

payments for these service volume increases, FY 2024-25 contract maximum obligations for the affected providers must be increased. The FY 2024-25 contracts will be amended through an “umbrella” contract adjustment request Board action on August 12. This ATR is required to accept unanticipated Intergovernmental Revenue and Medi-Cal reimbursement into the appropriate accounts in FY 2024-25.

### **DISCUSSION:**

The Appropriations Transfer Request will provide one-time transition funds for BHRS to pay contracted providers for all FY 2024-25 CalAIM fee-for-service units as contractually required.

### **FISCAL IMPACT:**

With the approval of this Appropriation Transfer Request, BHRS providers will receive the full amount of FY 2024-25 CalAIM fee-for-service units. There is no impact to the general fund or Net County Cost.



SAN MATEO COUNTY HEALTH

**BEHAVIORAL HEALTH  
& RECOVERY SERVICES**

County of San Mateo  
Appropriation Transfer Request  
(Supporting Attachment)

Department: Health/BHRS Date: 6/12/2025

REQUEST TRANSFER OF APPROPRIATION AS LISTED BELOW:

	CODES			AMOUNT	DESCRIPTION
	FUND or ORG	ACCOUNT	JL ORG CODE Measure K only		
FROM	61329	1685		1,216,352	Appropriation transfer request to allow a final payment of FY 24-25 CalAIM Fee-for-Service claims for contracted providers that require an increase to the contract maximum obligations due to increased service volume.
	61429	1685		1,559,392	Appropriation transfer request to allow a final payment of FY 24-25 CalAIM Fee-for-Service claims for contracted providers that require an increase to the contract maximum obligations due to increased service volume.
	61729	1685		2,226,500	Appropriation transfer request to allow a final payment of FY 24-25 CalAIM Fee-for-Service claims for contracted providers that require an increase to the contract maximum obligations due to increased service volume.
	Subtotal			5,002,244	
TO	61329	5875		1,216,352	Appropriation transfer request to allow a final payment of FY 24-25 CalAIM Fee-for-Service claims for contracted providers that require an increase to the contract maximum obligations due to increased service volume.
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	Subtotal			5,002,244	

Updated 6/17/25



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## BEHAVIORAL HEALTH & RECOVERY SERVICES

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SAN MATEO COUNTY HEALTH

**BEHAVIORAL HEALTH  
& RECOVERY SERVICES**