



COUNTY OF SAN MATEO
Inter-Departmental Correspondence
Health System



DATE: January 4, 2012

BOARD MEETING DATE: February 14, 2012

SPECIAL NOTICE/HEARING: None

VOTE REQUIRED: Majority

TO: Honorable Board of Supervisors

FROM: Jean S. Fraser, Chief, Health System
Brian Zamora, Director, Family Health Services

SUBJECT: Certification Statements for California Children Services and Child Health and Disability Prevention Program

RECOMMENDATION:

Adopt a Resolution authorizing the President of the Board to sign Certification Statements for California Children's Services and Child Health and Disability Prevention Programs.

BACKGROUND:

The California Department of Health Care Services, Children's Medical Services (CMS) provides health care for children through preventive, diagnostic, treatment, rehabilitation, and follow-up services. CMS requires all cities and counties to submit an annual plan and budget, and provide Certification Statements signed by the local governing body chairperson to indicate approval of the plan and compliance with applicable sections of the State Health and Safety Code.

In San Mateo County the three major programs addressed in the CMS Plan are California Children's Services (CCS), Child Health and Disability Prevention (CHDP), and the Health Care Program for Children in Foster Care. CCS is a State program designed to treat children and youth with certain physically disabling medical conditions through case management, specialized medical treatment and rehabilitation. CHDP is a program that provides regular preventive health assessments to children and youth. Children with suspected health problems are referred for diagnosis and treatment. The Health Care Program for Children in Foster Care, through collaboration with the Human Services Agency, is a public health nursing program that provides expertise in meeting the medical, dental, mental and developmental needs of children and youth in foster care.

DISCUSSION

The FY 2011-12 CMS Plan was submitted to the State in January 2012 with the understanding that the Certification Statements for CCS and CHDP would follow. Key

features of the plan are: program accomplishments, job descriptions, performance measures and program budget. Signing the Certification statements certifies that the programs will comply with all applicable provisions, rules, and regulations from the California Health and Safety Code, Welfare and Institutions Code, Children's Medical Services Plan and Fiscal Guidelines Manual and Federal Title XIX of the Social Security Act and Title V of the Social Security Act. Submission of the Certification Statements was delayed due to budget uncertainty at the State level, resulting in delayed approval letters issued from CMS Branch.

The Resolution and Certification Statements have been reviewed and approved by County Counsel.

Approval of the Certification Statements contributes to the Shared Vision 2025 outcome of a Healthy Community by providing a variety of health care services to San Mateo County youth. It is anticipated that 90% of children enrolled in California Children's Services will have a primary care provider and 85% of low-income children will be up-to-date on their immunizations at age 2.

Performance Measures:

| Measure | FY 2010-11 Actual | FY 2011-12 Projected |
|------------------------------------------------------------------------------------------------|------------------------------|---------------------------------|
| Percentage of children enrolled in California Children's Services with a primary care provider | 89% | 90% |
| Percentage of low-income children with up-to-date immunizations at age 2 | 85% | 85% |

FISCAL IMPACT:

There is no fiscal impact as a result of signing the Certification Statements. Budgets for CCS and CHDP have been included in Family Health Services FY 2011-12 Adopted Budget. The estimated Net County Cost for CHDP is \$428,049 and for CCS is \$431,517.

RESOLUTION NO. _____

BOARD OF SUPERVISORS, COUNTY OF SAN MATEO, STATE OF CALIFORNIA

*** * * * ***

**RESOLUTION AUTHORIZING THE PRESIDENT OF THE BOARD TO SIGN
CERTIFICATION STATEMENTS FOR CALIFORNIA CHILDREN'S SERVICES AND
CHILD HEALTH AND DISABILITY PREVENTION PROGRAMS**

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

WHEREAS, the California Department of Health Care Services requires that an annual comprehensive plan and budget be submitted for programs that are overseen by the State's Children's Medical Services Branch (CMS); and

WHEREAS, in San Mateo County the three major programs addressed in the annual CMS plan include California Children's Services (CCS), and Child Health and Disability Prevention (CHDP), and the Health Care Programs for Children in Foster Care; and

WHEREAS, the State provides Certification Statements for CCS and CHDP that must be signed by the local governing body chairperson to indicate approval of the CMS plan, submitted to the State in January 2012; and

WHEREAS, there has been presented to this Board of Supervisors Certification Statements for the CCS and CHDP programs, and the Board has reviewed and approved the same.

NOW, THEREFORE, IT IS HEREBY DETERMINED AND ORDERED that the President of the Board of Supervisors is hereby authorized and directed to sign the CCS and CHDP Certification Statements, and the Clerk of this Board shall attest the President's signature thereto.

* * * * *

Children's Medical Services Plan and Fiscal Guidelines

Plan and Budget Required Documents Checklist

MODIFIED FY 2011-2012

| County/City: <u>San Mateo</u> | | Fiscal Year: <u>2011-2012</u> |
|-------------------------------|----------------------------------------------------------------------------------------------------------------|-------------------------------|
| Document | | Page Number |
| 1. | Checklist | 1-2 |
| 2. | Agency Information Sheet | 3 |
| 3. | Certification Statements | |
| | A. Certification Statement (CHDP) – Original and one photocopy | 4 |
| | B. Certification Statement (CCS) – Original and one photocopy | 5 |
| 4. | Agency Description | |
| | A. Brief Narrative | 6-9 |
| | B. Organizational Charts for CCS, CHDP, and HCPCFC | Retain locally |
| | C. CCS Staffing Standards Profile | Retain locally |
| | D. Incumbent Lists for CCS, CHDP, and HCPCFC | 10-16 |
| | E. Civil Service Classification Statements – Include if newly established, proposed, or revised | 17-21 |
| | F. Duty Statements – Include if newly established, proposed, or revised | 17-21 |
| 5. | Implementation of Performance Measures – Performance Measures for FY 2009-10 are due November 30, 2011. | N/A |
| 6. | Data Forms | |
| | A. CCS Caseload Summary | 22 |
| | B. CHDP Program Referral Data | 23-24 |
| 7. | Memoranda of Understanding and Interagency Agreements List | |
| | A. MOU/IAA List | 25 |
| | B. New, Renewed, or Revised MOU or IAA | N/A |
| | C. CHDP IAA with DSS biennially | Retain locally |
| | D. Interdepartmental MOU for HCPCFC biennially | Retain locally |
| 8. | Budgets | |
| | A. CHDP Administrative Budget (No County/City Match) | |
| | 1. Budget Summary | 26 |
| | 2. Budget Worksheet | 27 |

Children's Medical Services Plan and Fiscal Guidelines

County/City: San Mateo

Fiscal Year: 2011-2012

| | Document | Page Number |
|-----------|------------------------------------------------------------------------------|--------------------|
| | 3. Budget Justification Narrative | 28-29 |
| B. | CHDP Administrative Budget (County/City Match) - Optional | |
| 1. | Budget Summary | 30 |
| 2. | Budget Worksheet | 31 |
| 3. | Budget Justification Narrative | 32-34 |
| C. | CHDP Foster Care Administrative Budget (County/City Match) - Optional | |
| 1. | Budget Summary | 35 |
| 2. | Budget Worksheet | 36 |
| 3. | Budget Justification Narrative | 37 |
| D. | HCPCFC Administrative Budget | |
| 1. | Budget Summary | 38 |
| 2. | Budget Worksheet | 39 |
| 3. | Budget Justification Narrative | 40 |
| E. | CCS Administrative Budget | |
| 1. | Budget Summary | 41 |
| 2. | Budget Worksheet | 42-44 |
| 3. | Budget Justification Narrative | 45-47 |
| G. | Other Forms | |
| 1. | County/City Capital Expenses Justification Form | N/A |
| 2. | County/City Other Expenses Justification Form | N/A |
| 9. | Management of Equipment Purchased with State Funds | |
| 1. | Contractor Equipment Purchased with DHCS Funds Form (DHCS1203) | N/A |
| 2. | Inventory/Disposition of DHCS Funded Equipment Form (DHCS1204) | N/A |
| 3. | Property Survey Report Form (STD 152) | N/A |

Children's Medical Services Plan and Fiscal Guidelines

Agency Information Sheet

County/City: San Mateo

Fiscal Year: 2011-2012

Official Agency

| | | | |
|---------------|----------------------------------|-----------------|------------------------------------------------------|
| Name: | Jean Fraser Chief, Health System | Address: | San Mateo County Health Dept. |
| Phone: | 650-573-2585 | | 225 W. 37 th Ave., San Mateo, CA 94403 |

CMS Director (if applicable)

| | | | |
|---------------|--|-----------------|--|
| Name: | | Address: | |
| Phone: | | | |
| Fax: | | E-Mail: | |

CCS Administrator

| | | | |
|---------------|-------------------|-----------------|--------------------------------|
| Name: | Glenn Ibarrientos | Address: | 2000 Alameda De Las Pulgas |
| Phone: | (650) 573-2828 | | San Mateo, CA 94403, Suite 200 |
| Fax: | (650) 573-2751 | E-Mail: | gibarrientos@smcgov.org |

CHDP Director

| | | | |
|---------------|------------------|-----------------|--------------------------------|
| Name: | Anand Chabra, MD | Address: | 2000 Alameda De Las Pulgas |
| Phone: | (650) 573-3469 | | San Mateo, CA 94403, Suite 200 |
| Fax: | (650) 573-2859 | E-Mail: | achabra@smcgov.org |

CHDP Deputy Director

| | | | |
|---------------|-------------------|-----------------|--------------------------------|
| Name: | Glenn Ibarrientos | Address: | 2000 Alameda De Las Pulgas |
| Phone: | (650) 573-2828 | | San Mateo, CA 94403, Suite 200 |
| Fax: | (650) 573-2859 | E-Mail: | gibarrientos@smcgov.org |

Clerk of the Board of Supervisors or City Council

| | | | |
|---------------|----------------|-----------------|------------------------|
| Name: | John Maltbie | Address: | 400 County Center |
| Phone: | (650) 363-4121 | | Redwood City, CA 94063 |
| Fax: | (650) 363-1916 | E-Mail: | jmaltbie@smcgov.org |

Director of Social Services Agency

| | | | |
|---------------|--------------------|-----------------|-------------------------|
| Name: | Beverly B. Johnson | Address: | 400 Harbor Blvd. |
| Phone: | (650) 802-7559 | | Belmont, CA 94002 |
| Fax: | (650) 802-7516 | E-Mail: | BBJohnson@co.smcgov.org |

Chief Probation Officer

| | | | |
|---------------|----------------|-----------------|--------------------------|
| Name: | Stuart Forrest | Address: | 222 Paul Scannell Dr. |
| Phone: | (650) 312-8816 | | San Mateo, CA 94402 |
| Fax: | (650) 312-5597 | E-Mail: | stuforrest@co.smcgov.org |

Children's Medical Services Plan and Fiscal Guidelines

Certification Statement - Child Health and Disability Prevention (CHDP) Program

County/City: San Mateo

Fiscal Year: 2011-2012

I certify that the CHDP Program will comply with all applicable provisions of Health and Safety Code, Division 106, Part 2, Chapter 3, Article 6 (commencing with Section 124025), Welfare and Institutions Code, Division 9, Part 3, Chapters 7 and 8 (commencing with Section 14000 and 14200), Welfare and Institutions Code Section 16970, and any applicable rules or regulations promulgated by DHCS pursuant to that Article, those Chapters, and that section. I further certify that this CHDP Program will comply with the Children's Medical Services Plan and Fiscal Guidelines Manual, including but not limited to, Section 9 Federal Financial Participation. I further certify that this CHDP Program will comply with all federal laws and regulations governing and regulating recipients of funds granted to states for medical assistance pursuant to Title XIX of the Social Security Act (42 U.S.C. Section 1396 et seq.). I further agree that this CHDP Program may be subject to all sanctions or other remedies applicable if this CHDP Program violates any of the above laws, regulations and policies with which it has certified it will comply.

Signature of CHDP Director

Date Signed

Signature of Director or Health Officer

Date Signed

Signature and Title of Other – Optional

Date Signed

I certify that this plan has been approved by the local governing body.

Signature of Local Governing Body Chairperson

Date

Children's Medical Services Plan and Fiscal Guidelines

Certification Statement - California Children's Services (CCS)

County/City: San Mateo

Fiscal Year: 2011-2012

I certify that the CCS Program will comply with all applicable provisions of Health and Safety Code, Division 106, Part 2, Chapter 3, Article 5, (commencing with Section 123800) and Chapters 7 and 8 of the Welfare and Institutions Code (commencing with Sections 14000-14200), and any applicable rules or regulations promulgated by DHCS pursuant to this article and these Chapters. I further certify that this CCS Program will comply with the Children's Medical Services Plan and Fiscal Guidelines Manual, including but not limited to, Section 9 Federal Financial Participation. I further certify that this CCS Program will comply with all federal laws and regulations governing and regulating recipients of funds granted to states for medical assistance pursuant to Title XIX of the Social Security Act (42 U.S.C. Section 1396 et seq.) and recipients of funds allotted to states for the Maternal and Child Health Services Block Grant pursuant to Title V of the Social Security Act (42 U.S.C. Section 701 et seq.). I further agree that this CCS Program may be subject to all sanctions or other remedies applicable if this CCS Program violates any of the above laws, regulations and policies with which it has certified it will comply.

Signature of CCS Administrator

Date Signed

Signature of Director or Health Officer

Date Signed

Signature and Title of Other – Optional

Date Signed

I certify that this plan has been approved by the local governing body.

Signature of Local Governing Body Chairperson

Date

SAN MATEO COUNTY
Children's Medical Services
AGENCY NARRATIVE FY 2011-12

Agency Structure:

Three of the Children's Medical Services programs - the Child Health and Disability Prevention Program (CHDP), the Health Care Program for Children in Foster Care (HCPCFC) and California Children's Services (CCS) are in the Family Health Services Division of the San Mateo County Health System. The Health System is a separate agency from Human Services Agency in San Mateo County, though close cooperation and collaboration occurs for many services, including the CMS programs. The program managers for the CMS programs – Anand Chabra, MD, Medical Director for CCS and CHDP and Glenn Ibarrientos, PHN, Clinical Services Manager, Deputy Director for CHDP, HCPCFC and Administrator for CCS report to Brian Zamora, REHS, MPH, the Director of Family Health Services Division.

HCPCFC Services/ Staff Changes:

One public health nurse composes the staff of HCPCFC. She is employed and supervised in the Family Health Services Division and has an office alongside Human Services Agency staff in Child Welfare.

CHDP Staff Changes:

There will be an additional PHN starting January 2012. She will be 60% CHDP and 40 % Immunization Program

The SrPHN is now 65% CHDP, 4% HCPCFC, 5% Lead and 25% Child Protective Services (CPS).

The Administrative Assistant II continues to be 5% CHDP and 95% CCS.

The Clinical Services Manager continues to be 50 % in CCS as the Administrator and 50% as the CHDP Deputy Director.

The Program Coordinator I continues to be 50% CHDP (Dental) and 50% Family Health Services Contract Administrator.

Other CHDP Changes

Family Health Services has implemented an Electronic Health Record (EHR). CHDP program staff input PM160s requiring follow up and/or care coordination into the EHR. All documentation is now done within the EHR. This system allows the SrPHN, PHNs, BAs, CWs, and MOAs in the CHDP program to know who else in Family Health is involved with the client. This enhances follow up care coordination, and helps to decrease duplication of services.

CCS

The California Children's Services (CCS) program is a branch of the Family Health Services (FHS) Division of San Mateo County Health System.

California Children's Services consists of Administration (CCS) and the Medical Therapy Program (MTP). CCS includes:

Case Management: This section is responsible for medical and financial/residential determination and case management of CCS clients.

- Staff includes one vacant SrPHN, 6 Public Health Nurses, 1 MSW, 2 Benefits Analysts, 1 nutrition case manager and 5 case management technicians. 1 PHN and 1 PT/OT Case Manager position remain vacant.
- PHNs now provide case management for clients with physical injuries and rehab needs. In consultation with the Medical Therapy Program (MTP) Supervisors, they review and authorize all DME requests and PT/OT requests for non-MTP clients. Four of the PHNs case manage MTP clients, which entails attending Medical Therapy Conferences (MTC) at the Medical Therapy Unit (MTU) and providing on site case management for MTP clients.
- The CCS nutritionist provides nutrition assessment and consultation for high risk MTP clients and authorizes supplies, formulas and special food for all CCS clients. She serves as a liaison with the dietitians at special care centers, as well as with formula vendors. She consults with case managers, therapists and providers. She participates in community education and activities related to nutrition, and serves on the Get Healthy San Mateo County Task Force
- The Senior Public Health Nurse supervises the case management staff and assists the Director with planning for case management activities and quality improvement.

The CCS program is "carved in" to the county organized managed care program Health Plan of San Mateo (HPSM). Monthly case conferences are held at the CCS office for complex CCS/HPSM cases. The Medical Director of HPSM and HPSM case managers participate in these conferences.

Parent Liaison: A contract with the Family Resource Center provides CCS with the equivalent of a .50 FTE parent liaison. Through this contract, parents of CCS clients are available to the program for a variety of activities aimed at making the program more family centered. Currently, we have one Parent Liaison (PL), who helps families understand the CCS system and provides assistance with care coordination, finding resources, and linking with community agencies. The Parent Liaisons have helped develop our transition materials and handbook and update these as needed.

Medical Therapy Program (MTP): The MTP provides physical therapy (PT) and occupational therapy (OT) services to almost 500 clients birth through age 21 with eligible physical disabilities at two Medical Therapy Units (MTUs), one in San Bruno and one in San Mateo. Both units are Medi-Cal accredited Out-Patient Rehabilitation Centers. There is one satellite therapy site located in Redwood City Elementary School District and we are currently working with Ravenswood Elementary School District to obtain an additional satellite site in the district (East Palo Alto/Menlo Park). A large percentage of our clients live in the southern part of the county, so we are always working towards providing therapy in more accessible locations to these families.

In addition to individual OT and PT treatment, consultation and monitoring, a number of therapy groups are offered to enhance daily living skills and support independent exercise programs. The MTP is supervised by a physical therapy supervisor, an occupational therapy supervisor and an administrative supervisor who functions as a manager for the MTP. In collaboration with Kaiser Permanente, two separate rehab clinics are held in the MTU for approximately 80 Kaiser MTP clients. Approximately 70% of the remaining MTP clients receive medical direction for their therapy program through one of our four Medical Therapy Conferences (Orthopedic, Pediatric and (2) Physiatry). Nursing and Nutrition case management are available on site for children enrolled in the MTP. The CCS dietician runs nutrition management clinics at the MTU on an as needed basis (17 clients were served in 2010), consults at MTC (60 clients served in 2010) along with providing nutrition education sessions for MTP clients and their families and participating in the Activities of Daily Living skills groups as appropriate. Through a contract with the Family Resource Center, a Family Liaison (who is the mother of a former CCS client) is available to help MTP families find community resources, navigate the medical and educational system and transition their children to adulthood.

- The Administrative Assistant II oversees the CCS budget, CCS administrative policies and IT / CMS Net system.
- The Medical Office Services Supervisor supervises the 5 fiscal / case management technicians. These technicians provide clerical support to the PHN case managers, process claims and maintain data management.
- Both report to the Administrator.

The San Mateo County CCS program in conjunction with the Health Plan of San Mateo was awarded the Medi-Cal Managed Care Plan CCS demonstration project. CCS Administration will be moving to the Health Plan of San Mateo offices effective February 6, 2012. For now, CCS Administration will continue to be a county program, run by county employees. As of the submission of the CMS Plan and Budget FY 2011-2012, there are still many details to work out with the state prior to implementation.

The Medical Director of CCS is Anand Chabra, MD and the Administrator is Glenn Ibarrientos, PHN, Clinical Service Manager. Dr. Chabra is also the Medical Director of the CHDP Program and Glenn Ibarrientos is the Deputy Director of CHDP. Both attend a variety of Public Health and Family Health Leadership meetings, in addition to collaboratives, coalitions and council meetings that pertain to their areas of expertise. Both meet quarterly with the HPSM Medical Director and her staff. The HPSM Medical Director also attends monthly CCS Administrative case management meetings.

California Children's Services Incumbent List

Complete the table below for all personnel listed in the CCS budgets. Use **the same** job titles for both the budget and the incumbent list. Total percent for an individual incumbent should **not be over 100 percent**.

Specify whether job duty statements or civil service classification statements have been revised or changed. Only submit job duty statements and civil service classification statements that are new or have been revised. This includes (1) changes in job duties or activities, (2) changes in percentage of time spent for each activity, and (3) changes in percentage of time spent for enhanced and non-enhanced job duties or activities.

Identify Nurse Liaison positions using: **MCMC** for Medi-Cal Managed Care; **HF** for Healthy Families; **IHO** for In-Home Operations, and; **RC** for Regional Center.

County/City: **San Mateo**

Fiscal Year: **2011-12**

| Job Title | Incumbent Name | FTE % on CCS Admin Budget | FTE % in Other Programs (Specify) | Have Job Duties Changed? (Yes or No) | Has Civil Service Classification Changed? (Yes or No) |
|---------------------|-------------------|---------------------------------|--------------------------------------------|-----------------------------------------------|----------------------------------------------------------------|
| CCS Administrator | Glenn Ibarrientos | 50% | 50% CHDP | No | No |
| Physician | Anand Chabra MD | 55% | 40% MCH 5% CHDP | No | No |
| Senior PHN, HF, IHO | Vacant | 100% | | No | No |
| Public Health Nurse | Maria Brillantes | 100% | | No | No |

| Job Title | Incumbent Name | FTE % on CCS Admin Budget | FTE % in Other Programs (Specify) | Have Job Duties Changed? (Yes or No) | Has Civil Service Classification Changed? (Yes or No) |
|-------------------------------------------------------|-----------------------|------------------------------------------|------------------------------------------------------|---------------------------------------------------------|--------------------------------------------------------------------------|
| Public Health Nurse, Early Childhood Nurse Liaison | Angie Santos | 90% | | No | No |
| Public Health Nurse | Amanda Morales | 95% | | No | No |
| Public Health Nurse | Elizabeth Solis | 100% | | No | No |
| Public Health Nurse | Maricar Arsalane | 100% | | No | No |
| Public Health Nurse, MCMC | Jimmy Yan | 100% | | No | No |
| Medical Social Worker | Mitchell Eckstein | 95% | | No | No |
| Benefits Analyst | Jenny Infante | 100% | | No | No |
| Benefits Analyst | Martha Alexander | 100% | | No | No |
| Admin Assistant/IT | Joseph Del Aguila | 95% | 5% on CHDP Budget | No | No |
| Medical Office Services Supervisor | Joanna Nuevo | 98% | | No | No |
| Medical Office Specialist | Birzayit Santiago | 100% | | No | No |
| Medical Office Specialist | Linda Maher | 100% | | No | No |
| Patient Services Assistant II | Ana Alvarez | 100% | | No | No |
| Patient Services Assistant II | Carmen Rodas | 100% | | No | No |

| Job Title | Incumbent Name | FTE % on CCS Admin Budget | FTE % in Other Programs (Specify) | Have Job Duties Changed? (Yes or No) | Has Civil Service Classification Changed? (Yes or No) |
|--------------------------------------|-----------------------|------------------------------------------|------------------------------------------------------|---------------------------------------------------------|--------------------------------------------------------------------------|
| Patient Services Assistant II | Ana Menjivar | 100% | | No | No |
| Chief Therapist | Carol Maddox | 20% | 80% MTP | No | No |
| Nutritionist | Janelle Giangerelli | 85% | 15% MTP | No | No |
| Accountant | Jing Lang | 10% | 90% FH Accting. | No | No |
| Fiscal Office Specialist - Claims | Renee De la Rosa | 100% | | No | No |
| System Support Specialist | Kim Pijma | 14% | 20% CHDP 66% FH Admin | No | No |
| PT/OT Case Manager | Vacant | 100% | | No | No |
| Public Health Nurse | Vacant | 100% | | No | No |

Incumbent List - Child Health and Disability Prevention Program

For FY2010-11, complete the table below for all personnel listed in the CHDP budgets. Use **the same** job titles for both the budget and the incumbent list. Total percent for an individual incumbent should **not be over 100 percent**.

Specify whether job duty statements or civil service classification statements have been revised or changed. Only submit job duty statements and civil service classification statements that are new or have been revised. This includes (1) changes in job duties or activities, (2) changes in percentage of time spent for each activity, and (3) changes in percentage of time spent for enhanced and non-enhanced job duties or activities.

County/City: **San Mateo County /**

Fiscal Year: **2011-12**

| Job Title | Incumbent Name | FTE % on CHDP No County/ City Match Budget | FTE % on CHDP County/City Match Budget | FTE % in Other Programs (Specify) | Have Job Duties Changed? (Yes or No) | Has Civil Service Classification Changed? (Yes or No) |
|---------------------------------------------|----------------------------|--------------------------------------------------------|----------------------------------------------------|--------------------------------------------|-----------------------------------------------|-------------------------------------------------------------------|
| Medical Director | Anand Chabra, MD | 3% | 2% | 40% MCH 55% CCS | No | No |
| Clinical Service Manager Deputy Director | Glenn Ibarrientos, RN, PHN | 50% | 0% | 50% CCS | No | No |
| CHDP Medical Consultant | Dorothy Vura-Weis | 10% | 25% | 15% GF**** | New | New |
| PHN | Lenora Torres | 0% | 0% | 40%HCPCFC 60% FC | No | No |

County/City: San Mateo County /

Fiscal Year: 2011-12

| Job Title | Incumbent Name | FTE % on CHDP No County/ City Match Budget | FTE % on CHDP County/City Match Budget | FTE % in Other Programs (Specify) | Have Job Duties Changed? (Yes or No) | Has Civil Service Classification Changed? (Yes or No) |
|----------------------------|-----------------------|--------------------------------------------------------|----------------------------------------------------|--------------------------------------------|-----------------------------------------------|-------------------------------------------------------------------|
| Senior Public Health Nurse | Vera Williams | | 66% | 4% HCPCFC 25% HSA 5% Lead | No | No |
| Health Educator | Robyn Ziegler | 25% | 0% | 75% IAP** | No | No |
| Public Health Nurse | Marty Rosier | 0% | 80% | 10% Lead 10% Asthma | No | No |
| Dietitian | Yvette Bedrosian | 60% | 0% | 0% | No | No |
| Program Coordinator I | Rachelle Salvana | 50% | 0% | 50% FHS**** Contract Admin. | No | No |
| Administrative Asst. II- | Joseph DelAguila | 0% | 5% | 95% CCS | No | Yes |
| Benefits Analyst II | Maria Esther Fennelly | 0% | 100% | 0% | No | No |
| Benefits Analyst II | Ivonne Gutierrez | 85% | 0% | 0% | No | No |
| Medical Office Assist. II | Patricia Liberona | 95% | 0% | 0% | No | No |

County/City: San Mateo County /

Fiscal Year: 2011-12

| Job Title | Incumbent Name | FTE % on CHDP No County/ City Match Budget | FTE % on CHDP County/City Match Budget | FTE % in Other Programs (Specify) | Have Job Duties Changed? (Yes or No) | Has Civil Service Classification Changed? (Yes or No) |
|----------------------------|-----------------|--------------------------------------------------------|----------------------------------------------------|--------------------------------------------|-----------------------------------------------|-------------------------------------------------------------------|
| Public Health Nurse | Marcy Spaulding | 0 | 60% | 40% IAP** | New | New |
| Community Worker II | Lilia Herrera | 62% | 13% | 25% GF***** | No | No |
| Systems Support Specialist | Kim Pijma | 0% | 20% | 80% GF***** | No | No |
| Public Health Nurse | Frances Sanchez | 0% | 80% | | No | No |

- IAP ** Immunization Assistance Program
- FHS ***** Family Health Services
- GF ***** General Funds

Incumbent List - Health Care Program for Children in Foster Care

For FY2011-12, complete the table below for all personnel listed in the HCPCFC and CHDP Foster Care Administrative (County/City) budgets. Use the same job titles for both the budget and the incumbent list. Total percent for an individual incumbent should **not be over 100 percent**.

Specify whether job duty statements or civil service classification statements have been revised or changed. Only submit job duty statements and civil service classification statements that are new or have been revised. This includes (1) changes in job duties or activities, (2) changes in percentage of time spent for each activity, and (3) changes in percentage of time spent for enhanced and non-enhanced job duties or activities.

County/City: **San Mateo County**

Fiscal Year: 2011-12

| Job Title | Incumbent Name | FTE % on HCPCFC Budget | FTE % on FC Admin County/City Match Budget | FTE % in Other Programs (Specify) | Have Job Duties Changed? (Yes or No) | Has Civil Service Classification Changed? (Yes or No) |
|----------------------------|----------------|------------------------|--------------------------------------------|-----------------------------------|--------------------------------------|-------------------------------------------------------|
| Senior Public Health Nurse | Vera Williams | 4% | 0% | HSA-25% CHDP-66% Lead-5% | No | No |
| Public Health Nurse | Lenora Torres | 40% | 60% | | No | No |
| | | | | | | |
| | | | | | | |

Public Health Nurse

DEFINITION

Under general direction, provide and coordinate a variety of health services to the client; provide services to at-risk children and adults, including teaching of health practices which prevent illness and promote general well-being, and organizing and staffing well-baby, family planning, immunization, STD, TB, HIV, pre-natal and other related clinics; provide health education and screening examinations to people in community settings.

QUALIFICATIONS

Education and Experience:

Any combination of education and experience that would likely provide the required knowledge, skills and abilities is qualifying.

Licensure/Certification:

- California license as a Registered Nurse.
- California Certificate as a Public Health Nurse.

Knowledge of:

- Principles and practices of public health nursing, with emphasis on field and clinic activities.
- Problem solving through nursing process.
- Technical nursing procedures.
- Health and social services resources.
- Collaborative health planning with multi-disciplinary teams.

Skill/Ability to:

- Teach and counsel.
- Perform technical nursing procedures.
- Assess physical, psycho-social and nutritional needs.
- Assess community health needs.
- Teach and guide other health personnel and volunteers.
- Motivate people in positive health attitudes and behavior.
- Work effectively with multi-problem families.
- Problem solve.
- Make independent judgments and ability to work autonomously.
- Assume a leadership role in community health programs.
- Communicate effectively both verbally and orally.
- Be culturally sensitive.
- Be flexible to adapting to a changing environment.
- Organize communities regarding health matters.

EXAMPLES OF DUTIES

Duties may include, but are not limited to, the following:

- Assess clients health status through history taking, observation and screening tests.
- Develop care plan including goals and time frames.
- Counsel, teach, and coordinate health and social services provided to client/family.
- Inform high risk group of resources and make referrals as appropriate.
- Document services and clients response to services.
- Provide limited therapeutic nursing care; administer medication and treatments, teaches self care when appropriate.
- Participate in defining and addressing community health needs through consultation, recruitment of providers and development of resources.
- Participate in organizing clinics, staffs and manages clinics; perform physical assessments, screening tests.
- Participate in developing instruction materials.
- Keep statistical records, write reports.
- Assist with orientation instruction and guidance of community workers, and related personnel.
- Perform related duties as assigned.

**Public Health Nurse
60% CHDP**

Duty Statement

The CHDP PHN under the supervision of the Sr. PHN, will perform Care Coordination of the acute and complex PM160s and Provider Relations activities for the CHDP Providers in San Mateo County. She will intensively inform the CHDP clients of the need for medical care as recommended by their physician and then link them to the resources that will provide the needed care.

The PHN will perform facility site and medical chart reviews in the offices of CHDP Providers ensuring that quality medical care is provided to the children eligible for CHDP. She will inform the providers of the latest CHDP information, brochures and trainings.

Staff Physician

DEFINITION

Under general direction, provide professional medical services to patients in health care facilities and other settings located throughout San Mateo County.

QUALIFICATIONS

Education and Experience:

Any combination of education and experience that would likely provide the required knowledge, skills and abilities is qualifying. A typical way to qualify is:

Completion of a residency training program approved by the American Medical Association, or two years of clinical experience post internship in an appropriate medical specialty.

Licensure/Certification:

- License to practice medicine or osteopathy in the State of California.

Board certification or Board eligibility in Family Practice, Internal Medicine, Pediatrics, Adolescent Medicine or a related area is highly desirable.

Skill/Ability to:

- Diagnose and treat patients.
- Develop and monitor appropriate treatment plans.
- Establish and maintain effective working relationships with patients, their families, staff and others.
- Learn and apply laws, statutes, codes and regulations governing California health service providers, and JCAHO and other regulatory requirements.
- Maintain medical records and prepare reports.
- Serve on interdisciplinary teams.
- Clinically supervise licensed and professional staff.

Knowledge of:

- Current developments, trends and research in the medical field.
- Basic understanding of clinical supervisory principles and practices.
- Pharmacology and psychopharmacology including laws regarding informed consent, dosage ranges, drug incompatibilities, and side effects.
- Proper documentation of clinical services.
- Principles, practices, and techniques of general medicine and its application.
- Medical diagnosis and treatment.
- Hospitals and Clinics organization.
- Knowledge of communicable disease control.
- Knowledge of public health practices and procedures.

CHDP Medical Consultant
Staff Physician
35% CHDP

DUTY STATEMENT

The CHDP Medical Consultant, an experienced Family Physician, will support the CHDP Medical Director in providing medical oversight of CHDP providers, implementation of CHDP policies and procedures, and maintaining CHDP standards in pediatric care in San Mateo County. Specific areas of focus will include:

1. With the CHDP Medical Director, communicating with CHDP providers and other pediatric providers around CHDP standards
2. Educating CHDP providers, their staff, and other pediatric providers in the community on best practices in asthma care and prevention, dental care and oral health, screening for medical/dental/vision disorders, developmental screening, and breastfeeding
3. Supporting efforts to integrate medical and dental services for low income children in San Mateo County
4. Supporting breastfeeding promotion efforts in San Mateo County and coordinating services with the WIC program
5. Other activities, as needed, supporting the CHDP program with medical expertise and resources

California Children's Services Caseload Summary Form

County: San Mateo

Fiscal Year: 2011-12

| | | A | | B | | | |
|-------------------------------|---------------------------------------------------------------|-----------------------------|------------------------|-----------------------------|------------------------|-----------------------------------------------------------------------|------------------------|
| CCS Caseload 0 to 21 Years | | 08-09 Actual Caseload | % of Grand Total | 09-10 Actual Caseload | % of Grand Total | 10-11 Estimated Caseload based on first three quarters | % of Grand Total |
| MEDI-CAL | | | | | | | |
| 1 | Average of Total Open (Active) Medi- Cal Children | 1334 | 68.7% | 1481 | 59% | 1340 | 67.6% |
| 2 | Potential Case Medi-Cal | 69 | 3.6% | 518 | 21% | 65 | 3.3% |
| 3 | TOTAL MEDI-CAL (Row 1 + Row 2) | 1403 | 72.3% | 1999 | 79% | 1405 | 70.9% |
| NON MEDI-CAL | | | | | | | |
| Healthy Families | | | | | | | |
| 4 | Average of Total Open (Active) Healthy Families | 188 | 9.7% | 346 | 14% | 191 | 9.6% |
| 5 | Potential Cases Healthy Families | 10 | .5% | 121 | 5% | 9 | .5% |
| 6 | Total Healthy Families (Row 4 + Row 5) | 198 | 10.2% | 467 | 19% | 200 | 10.1% |
| Straight CCS | | | | | | | |
| 7 | Average of Total Open (Active) Straight CCS Children | 323 | 16.6% | 36 | 1% | 358 | 18.1% |
| 8 | Potential Cases Straight CCS Children | 17 | .9% | 13 | 1% | 17 | .9% |
| 9 | Total Straight CCS (Row 7 + Row 8) | 340 | 17.5% | 49 | 2% | 375 | 19% |
| 10 | TOTAL NON MEDI- CAL (Row 6 + Row 9) | 538 | 27.7% | 516 | 21% | 576 | 29.1% |
| GRAND TOTAL | | | | | | | |
| 11 | (Row 3 + Row 10) | 1941 | 100% | 2515 | 100% | 1981 | 100% |

CHDP Program Referral Data

| | | | | | | |
|------------------------------------------------------------------------------------------------------------------------------------------|----------|------------|----------|------------|----------|------------|
| COUNTY/CITY: SAN MATEO COUNTY | FY 08-09 | | FY 09-10 | | FY 10-11 | |
| Basic Informing and CHDP Referrals | | | | | | |
| 1. Total number of CalWORKs/Medi-Cal cases informed and determined eligible by Department of Social Services | N/A | N/A | N/A | N/A | N/A | N/A |
| 2. Total number of cases and recipients in "1" requesting CHDP services | Cases | Recipients | Cases | Recipients | Cases | Recipients |
| a. Number of CalWORKs cases/recipients | 355 | 718 | 288 | 586 | 151 | 324 |
| b. Number of Foster Care cases/recipients | N/A | N/A | N/A | N/A | N/A | N/A |
| c. Number of Medi-Cal only cases/recipients | 1086 | 1747 | 1162 | 2083 | 1176 | 2115 |
| d. Number Unknown | 1 | 1 | 0 | 0 | 0 | 0 |
| 3. Total number of EPSDT eligible recipients and unborn, referred by Department of Social Services' workers who requested the following: | N/A | 2466 | N/A | 2583 | N/A | 2439 |

| COUNTY/CITY: SAN MATEO COUNTY | FY 08-09 | FY 09-10 | FY 10-11 |
|--------------------------------------------------------------------------------------------------------|----------|----------|----------|
| a. Medical and/or dental services | 293 | 266 | 220 |
| b. Medical and/or dental services with scheduling and/or transportation | 561 | 384 | 95 |
| c. Information only (optional) | 16 | 165 | 2083 |
| d. Unknown | 1596 | 1768 | 41 |
| 4a. Number of cases (PM357s) distributed for intensive informing by phone or letter | 1442 | 1510 | 1327 |
| b. Number of persons who were contacted by telephone or outreach letter | 2466 | 2583 | 2439 |
| Results of Assistance | | | |
| 5. Number of recipients actually provided scheduling and/or transportation assistance by program staff | 8** | 3 | 0 |
| 6. Number of recipients in "5" who actually received medical and/or dental services | 3 | 3 | N/A |

** Appointments still pending

12/22/11

Memoranda of Understanding/Interagency Agreement List

List all current Memoranda of Understanding (MOUs) or Interagency Agreements (IAAs) in California Children's Services, Child Health and Disability Prevention Program, and Health Care Program for Children in Foster Care. Specify whether the MOU or IAA has changed. Submit only those MOUs and IAAs that are new, have been renewed, or have been revised. For audit purposes, counties or cities should maintain current MOUs and IAAs on file.

County/City: **San Mateo County CCS**

Fiscal Year: 2011-12

| Title or Name of MOU/IAA | Is this a MOU or an IAA? | Effective Dates From / To | Date Last Reviewed by County/ City | Name of Person Responsible for this MOU/IAA? | Did this MOU/IAA Change? (Yes or No) |
|-----------------------------|--------------------------|---------------------------|------------------------------------|----------------------------------------------|--------------------------------------|
| Special Education | IAA | 7/1/10—6/30/13 | 6/10/10 | C. Maddox | No |
| Golden Gate Regional Center | IAA | 5/1/2010—4/30/13 | 4/27/10 | G. Ibarientos | No |
| WIC Program | IAA | 7/10—8/12 | 7/10/10 | G. Ibarientos | No |
| Health Plan of San Mateo | MOU | 9/10—6/12 | 9/10/10 | G. Ibarientos | No |

CHDP Administrative Budget Summary for FY 2011-12
No County/City Match
County/City Name: San Mateo

| Column | 1 | 2 | 3 | 4 | 5 |
|------------------------------|-------------------------|----------------------|-------------------------------------|--------------------------------------|-----------------------------------------|
| Category/Line Item | Total Budget (2 + 3) | Total CHDP Budget | Total Medi-Cal Budget (4 + 5) | Enhanced State/Federal (25/75) | Nonenhanced State/Federal (50/50) |
| I. Total Personnel Expenses | \$503,285 | \$0 | \$503,285 | \$195,932 | \$301,556 |
| II. Total Operating Expenses | \$6,029 | \$2,002 | \$4,000 | \$2,000 | \$2,011 |
| III. Total Capital Expenses | \$0 | \$0 | \$0 | | \$0 |
| IV. Total Indirect Expenses | \$80,526 | \$0 | \$80,526 | | \$80,526 |
| V. Total Other Expenses | \$0 | \$0 | \$0 | | \$0 |
| Budget Grand Total | \$589,840 | \$2,002 | \$582,025 | \$197,932 | \$384,093 |

| Column | 1 | 2 | 3 | 4 | 5 |
|---------------------|-------------|----------------------|--------------------------|---------------------------|------------------------------|
| Source of Funds | Total Funds | Total CHDP Budget | Total Medi-Cal Budget | Enhanced State/Federal | Nonenhanced State/Federal |
| State General Funds | \$2,002 | \$2,002 | | | |
| Medi-Cal Funds: | \$582,025 | | \$582,025 | | |
| State | \$241,530 | | \$241,530 | \$49,483 | \$192,047 |
| Federal (Title XIX) | \$340,496 | | \$340,496 | \$148,449 | \$192,047 |

| | | | |
|-------------------------|---------------|----------------|------------------------------------------------------------------------------------|
| | 1/18/2012 | (650) 573-2828 | gibarrientos@co.sanmateo.ca.us |
| Prepared By (Signature) | Date Prepared | Phone Number | Email Address |

| | | | |
|-------------------------------------------------|-----------|----------------|------------------------------------------------------------------------------------|
| | 1/18/2012 | (650) 573-2828 | gibarrientos@co.sanmateo.ca.us |
| CHDP Director or Deputy Director (Signature) | Date | Phone Number | Email Address |

CHDP Administrative Budget Worksheet for FY 2011-12

January 18, 2012

No County/City Match
 State and State/Federal
 County/City Name: San Mateo

| Column | 1A | 1B | 1 | 2A | 2 | 3A | 3 | 4A | 4 | 5A | 5 |
|---------------------------------------------|----------|---------------|---------------------------------|---------------|-------------------|------------------|-------------------------------|----------|--------------------------------|----------|-----------------------------------|
| Category/Line Item | % or FTE | Annual Salary | Total Budget (1A x 1B or 2 + 3) | CHDP % or FTE | Total CHDP Budget | Total Medi-Cal % | Total Medi-Cal Budget (4 + 5) | % or FTE | Enhanced State/Federal (25/75) | % or FTE | Nonenhanced State/Federal (50/50) |
| Personnel Expenses | | | | | | | | | | | |
| 1. Clinical Serv Mgr G. Ibarrientos | 50% | \$118,519 | \$59,260 | 0% | \$0 | 100% | \$59,260 | 30% | \$17,778 | 70% | \$41,482 |
| 2. Program Coordinator I R. Salvana | 50% | \$81,780 | \$40,890 | 0% | \$0 | 100% | \$40,890 | 20% | \$8,178 | 80% | \$32,712 |
| 3. M.D.- D. Vura-Weis (0.50) | 10% | \$168,480 | \$16,848 | 0% | \$0 | 100% | \$16,848 | 70% | \$11,794 | 30% | \$5,054 |
| 4. Dietitian - Y Bedrosian (0.60) | 60% | \$75,040 | \$45,024 | 0% | \$0 | 100% | \$45,024 | 54% | \$24,313 | 46% | \$20,711 |
| 5. Health Educator - R. Ziegler | 25% | \$82,164 | \$20,541 | 0% | \$0 | 100% | \$20,541 | 40% | \$8,216 | 60% | \$12,325 |
| 6. Medical Off Asst. II P Liberona 0.95 | 95% | \$50,109 | \$47,604 | 0% | \$0 | 100% | \$47,604 | 75% | \$35,703 | 25% | \$11,901 |
| 7. Community Worker II L. Herrera | 62% | \$51,048 | \$31,650 | 0% | \$0 | 100% | \$31,650 | 50% | \$15,825 | 50% | \$15,825 |
| 8. Medical Director - A Chabra | 3% | \$168,480 | \$5,054 | 0% | \$0 | 100% | \$5,054 | 75% | \$3,791 | 25% | \$1,264 |
| 9. Benefits Analyst II - I Gutierrez (0.85) | 85% | \$61,214 | \$52,032 | 0% | \$0 | 100% | \$52,032 | 0% | \$0 | 100% | \$52,032 |
| 10. Admin Analyst II - J. DelAguila | 5% | \$74,316 | \$3,716 | 0% | \$0 | 100% | \$3,716 | 0% | \$0 | 100% | \$3,716 |
| Total Salaries and Wages | | | \$322,619 | | \$0 | | \$322,619 | | \$125,597 | | \$193,305 |
| Less Salary Savings | | | \$0 | | \$0 | | \$0 | | \$0 | | \$0 |
| Net Salaries and Wages | | | \$322,619 | | \$0 | | \$322,619 | | \$125,597 | | \$193,305 |
| Staff Benefits (Specify %) 56.00% | | | \$180,666 | | \$0 | | \$180,666 | | \$70,335 | | \$108,251 |
| I. Total Personnel Expenses | | | \$503,285 | | \$0 | | \$503,285 | | \$195,932 | | \$301,556 |
| II. Operating Expenses | | | | | | | | | | | |
| 1. Travel | | | \$3,390 | | \$1,390 | | \$2,000 | | \$1,500 | | \$500 |
| 2. Training | | | \$2,639 | | \$612 | | \$2,000 | | \$500 | | \$1,511 |
| II. Total Operating Expenses | | | \$6,029 | | \$2,002 | | \$4,000 | | \$2,000 | | \$2,011 |
| III. Capital Expenses | | | | | | | | | | | |
| II. Total Capital Expenses | | | \$0 | | \$0 | | \$0 | | | | \$0 |
| IV. Indirect Expenses | | | | | | | | | | | |
| 1. Internal (Specify %) 10.00% | | | \$50,329 | | \$0 | | \$50,329 | | | | \$50,329 |
| 2. External (Specify %) 6.00% | | | \$30,197 | | \$0 | | \$30,197 | | | | \$30,197 |
| IV. Total Indirect Expenses | | | \$80,526 | | \$0 | | \$80,526 | | | | \$80,526 |
| V. Other Expenses | | | | | | | | | | | |
| V. Total Other Expenses | | | \$0 | | \$0 | | \$0 | | | | \$0 |
| Budget Grand Total | | | \$589,840 | | \$2,002 | | \$587,811 | | \$197,932 | | \$384,093 |

Prepared By (Signature)

 CHDP Director or
 Deputy Director

Date Prepared

Date

(650) 573-2828

Phone Number

(650) 573-2828

Phone Number

gibarrientos@co.sanmateo.ca.us

Email Address

gibarrientos@co.sanmateo.ca.us

Email Address

**San Mateo County
CHDP No Match Budget Narrative
FY 2011-2012**

I. Personnel Expense

Total Salaries: \$322,619

Total Benefits: \$180,666

Total Personnel Expense: **\$503,285**

Personnel Changes:

Personnel benefits have increased 2% due overall increase in medical insurance. The Medical Director is now 3% and the Health Educator is now 25% on this budget. The Benefits Analyst is now 85% and the Medical Office Assistant is now 95% on this budget. The Program Coordinator., 50%, and Staff Physician, 10% was added to this budget. These changes enabled us to meet the money allotted to us.

II . Operating Expenses

Travel: \$ 3,390

Travel expenses are used for staff to attend a variety of programmatic meetings such as the Bay Area Deputy Directors' and subcommittee meetings (dental, nutrition, and health education), workshops and educational conferences. Expenses also include visits to provider offices, community agencies and schools to perform duties related to CHDP. Prior approval from the state will be obtained for travel as necessary. San Mateo County pays \$0.55 per mile.

Training: \$2,639

Staff training costs allocated to CHDP staff

Total Operating Expense: \$6,029

III. Capital Expense

Total Capital Expense: \$0

IV. Indirect Expense

Internal @ 10% \$50,329 According to the San Mateo County Cost Allocation Plan, 10% internal indirect expenses are charged to each Health Department program to cover costs incurred by in house administrative and accounting services.

External @ 6% \$30,197 This covers County administrative costs.

Total Indirect Expense: \$ 80,526

V. Other Expense \$0

Total Other Expense: \$0

Budget Grand Total: \$589,840

CHDP Administrative Budget Summary for FY 2011-12

Summary for FY 2011-12

County/City Match

County/City Name: San Mateo

| Column | 1 | 2 | 3 |
|------------------------------|-------------------------|------------------------------------|------------------------------------------|
| Category/Line Item | Total Budget (2 + 3) | Enhanced County/Federal (25/75) | Nonenhanced County/Federal (50/50) |
| I. Total Personnel Expenses | \$694,452 | \$420,982 | \$273,469 |
| II. Total Operating Expenses | \$227,777 | \$4,500 | \$223,277 |
| III. Total Capital Expenses | \$0 | | \$0 |
| IV. Total Indirect Expenses | \$111,112 | | \$111,112 |
| V. Total Other Expenses | \$2,000 | | \$2,000 |
| Budget Grand Total | \$1,035,341 | \$425,482 | \$609,859 |

| Column | 1 | 2 | 3 |
|---------------------------|-------------|------------------------------------|---------------------------------------|
| Source of Funds | Total Funds | Enhanced County/Federal (25/75) | Nonenhanced County/Federal (50/50) |
| County Funds | \$411,300 | \$106,371 | \$304,929 |
| Federal Funds (Title XIX) | \$624,041 | \$319,112 | \$304,929 |

| | | | |
|-------------------------------------------------|---------------|----------------|------------------------------------------------------------------------------------|
| | | (650) 573-2828 | gibarrientos@co.sanmateo.ca.us |
| Prepared By (Signature) | Date prepared | Phone Number | Email Address |
| | | (650) 573-2828 | gibarrientos@co.sanmateo.ca.us |
| CHDP Director or Deputy Director (Signature) | Date | Phone Number | Email Address |

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CHDP Administrative Budget Worksheet for FY 2011-12

County/City Match

County/City Name: San Mateo

| Column | 1A | 1B | 1 | 2A | 2 | 3A | 3 |
|-------------------------------------|----------|---------------|---------------------------------|----------|---------------------------------|----------|------------------------------------|
| Category/Line Item | % or FTE | Annual Salary | Total Budget (1A x 1B or 2 + 3) | % or FTE | Enhanced County/Federal (25/75) | % or FTE | Nonenhanced County/Federal (50/50) |
| I. Personnel Expenses | | | | | | | |
| 1. SrPHN Vera Williams | 66% | \$116,260 | \$76,732 | 75% | \$57,549 | 25% | \$19,183 |
| 2. PHN M. Spaulding | 60% | \$107,747 | \$64,648 | 75% | \$48,486 | 25% | \$16,162 |
| 3. Dept Sys Analyst Pijma | 20% | \$98,556 | \$19,711 | 0% | \$0 | 100% | \$19,711 |
| 4. Community Worker II Herrera | 13% | \$51,048 | \$6,636 | 25% | \$1,659 | 75% | \$4,977 |
| 5. Benefit Analyst Fennelly | 100% | \$61,212 | \$61,212 | 0% | \$0 | 100% | \$61,212 |
| 7. M.D. D. Vura -Weis (0.50) | 25% | \$168,480 | \$42,120 | 75% | \$31,590 | 25% | \$10,530 |
| 8. PHN Frances Sanchez (0.80) | 80% | \$107,747 | \$86,198 | 75% | \$64,648 | 25% | \$21,549 |
| 11. PHN Marty Rosier | 80% | \$109,881 | \$87,905 | 75% | \$65,928 | 25% | \$21,976 |
| 14. Medical Director, A Chabra | 2% | \$180,273 | \$3,605 | 90% | \$3,245 | 10% | \$361 |
| Total Salaries and Wages | | | \$445,161 | | \$269,861 | | \$175,301 |
| Less Salary Savings | | | \$0 | | \$0 | | \$0 |
| Net Salaries and Wages | | | \$445,161 | | \$269,861 | | \$175,301 |
| Staff Benefits (Specify %) 56.00% | | | \$249,290 | | \$151,122 | | \$98,168 |
| I. Total Personnel Expenses | | | \$694,452 | | \$420,982 | | \$273,469 |
| II. Operating Expenses | | | | | | | |
| 1. Travel | | | \$4,500 | | \$2,500 | | \$2,000 |
| 2. Training | | | \$3,000 | | \$2,000 | | \$1,000 |
| 3. Printing/Copying | | | \$4,500 | | | | \$4,500 |
| 4. Supplies | | | \$8,500 | | | | \$8,500 |
| 5. Equipment Lease | | | \$4,600 | | | | \$4,600 |
| 6. Meetings/ Conferences | | | \$5,500 | | | | \$5,500 |
| 7. Telephone Services | | | \$18,500 | | | | \$18,500 |
| 8. Rent | | | \$136,677 | | | | \$136,677 |
| 9. Informational Technical Services | | | \$42,000 | | | | \$42,000 |
| II. Total Operating Expenses | | | \$227,777 | | \$4,500 | | \$223,277 |
| III. Capital Expenses | | | | | | | |
| II. Total Capital Expenses | | | \$0 | | \$0 | | \$0 |
| IV. Indirect Expenses | | | | | | | |
| 1. Internal (Specify %) 10.00% | | | \$69,445 | | | | \$69,445 |
| 2. External (Specify %) 6.00% | | | \$41,667 | | | | \$41,667 |
| IV. Total Indirect Expenses | | | \$111,112 | | | | \$111,112 |
| V. Other Expenses | | | | | | | |
| 1. Vision Consultant | | | \$1,000 | | | | \$1,000 |
| 2. Audiologist Consultant | | | \$1,000 | | | | \$1,000 |
| V. Total Other Expenses | | | \$2,000 | | | | \$2,000 |
| Budget Grand Total | | | \$1,035,341 | | \$425,482 | | \$609,859 |

Prepared By (Signature)

Date Prepared

(650) 573-2828

Phone Number

gibarrientos@co.sanmateo.ca.us

Email Address

CHPD Director or Deputy Director
(Signature)

Date

(650) 573-2828

Phone Number

gibarrientos@co.sanmateo.ca.us

Email Address

**San Mateo County
CHDP Match Budget Narrative
FY 2011-2012**

I. Personnel Expense

Total Salaries: \$ 445,161

Total Benefits: \$ 249,290

Total Personnel Expense: \$ 694,451

Personnel Changes:

1. The SrPHN is now 64% CHDP Match, 5% HCPCFC, 5% Lead and 25% HSA. One PHN is now 80% CHDP Match. One Staff Physician is now 25% CHDP Match.
- 2.. New PHN is 60% CHDP Match

II. Operating Expenses

Printing/Copying \$4,500

Costs allocated to CHDP staff.

Supplies \$8,500

This is the actual costs incurred for the purchase of office supplies, equipment (computers) and furniture.

Equipment lease \$ 4,600

Cost of photocopier lease allocated to CHDP

Meetings/Conference \$5,500

Includes costs allocated to CHDP staff for state and local, CHDP meetings and a staff retreat.

Telephone Service \$18,500

Cost per line plus cost for calls allocated to CHDP. CHDP has extra lines for rollover use.

| | | |
|-------------------------|-----------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Rent | \$136,677 | Renting 4,244 sq.feet at \$32.20 per sq. foot for 15.5 staff. |
| Travel | \$4,500 | Travel expenses are used for staff to attend a variety of programmatic meetings such as the Bay Area Deputy Directors and subcommittee meetings (dental, nutrition, and health education), workshops and educational conferences. Expenses also include visits to provider offices, community agencies and schools to perform duties related to CHDP. Prior approval from the state will be obtained for travel as necessary. Cost of fuel has made this increase. San Mateo County pays \$0.55 per mile. |
| Training | \$3,000 | Staff training costs allocated to CHDP. |
| Informational Technical | \$42,000 | Costs of information technology services and computer lease services allocated to CHDP and for CHDP's portion of the Electronic Health Record (EHR) initial implementation. |

Total Operating Expense: \$ 227,777

III. Capital Expense

Total Capital Expense: \$0

IV. Indirect Expense

| | | |
|----------------|-----------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Internal @ 10% | \$ 69,445 | According to the San Mateo County Cost Allocation Plan, 10% internal indirect expenses are charged to each Health Department program to cover costs incurred by in house administrative and accounting services. |
| External @ 6% | \$41,667 | This covers County administrative costs. |

Total Indirect Expense: \$ 111,112

V. Other Expenses:

1. Audiologist Consultant: \$ 1,000
2. Vision Consultant: \$ 1,000

Utilized for hearing screening workshops.
Utilized for vision screening and workshops.

Total Other Expense: \$ 2,000

Budget Grand Total: \$1,035,341

Foster Care Administrative Budget Summary Fiscal Year 20011-12**County-City Match****County/Title XIX Federal Funds****County/City Name: San Mateo**

| Column | 1 | 2 | 3 |
|-----------------------------|-------------------------|---------------------------------------------|------------------------------------------------|
| Category/Line Item | Total Budget (2 + 3) | Enhanced County- City/Federal (25/75) | Nonenhanced County- City/Federal (50/50) |
| I. Total Personnel Expense | \$102,848 | \$94,620 | \$8,228 |
| II. Total Operating Expense | \$1,160 | \$928 | \$232 |
| III. Total Capital Expense | | | |
| IV. Total Indirect Expense | \$10,285 | | \$10,285 |
| V. Total Other Expense | | | |
| Budget Grand Total | \$114,292 | \$95,548 | \$18,745 |

| Column | 1 | 2 | 3 |
|---------------------------|-------------|---------------------------------------------|------------------------------------------------|
| Source of Funds | Total Funds | Enhanced County- City/Federal (25/75) | Nonenhanced County- City/Federal (50/50) |
| County-City Funds | \$33,259 | \$23,887 | \$9,372 |
| Federal Funds (Title XIX) | \$81,033 | \$71,661 | \$9,372 |
| Budget Grand Total | \$114,292 | | |

Source County-City Funds:

| | | | |
|-------------------------------------------------|---------------|--------------------------------|-----------------------------------------------------------------------------------------------------|
| Prepared By (Signature) | Date Prepared | (650) 573-2828 Phone Number | gibarrientos@co.sanmateo.ca.us Email Address |
| CHDP Director or Deputy Director (Signature) | Date | (650) 573-2828 Phone Number | gibarrientos@co.sanmateo.ca.us Email Address |

Foster Care Administrative Budget Fiscal Year 2011-12
County-City/Federal Match
County/Title XIX Federal Funds
County/City Name: San Mateo

| Column | 1A | 1B | 1 | 2A | 2 | 3A | 3 |
|-------------------------------------|----------|---------------|------------------------------------|----------|--------------------------------------|----------|-----------------------------------------|
| Category/Line Item | % or FTE | Annual Salary | Total Budget (1A x 1B or 2 + 3) | % or FTE | Enhanced County-City/Federal (25/75) | % or FTE | Nonenhanced County-City/Federal (50/50) |
| I. Personnel Expenses | | | | | | | |
| 1. PHN Lenora Torres | 60% | \$109,880 | \$65,928 | 92% | \$60,654 | 8% | \$5,274 |
| Total Salaries and Wages | | | \$65,928 | | \$60,654 | | \$5,274 |
| Less Salary Savings | | | \$0 | | \$0 | | \$0 |
| Net Salaries and Wages | | | \$65,928 | | \$60,654 | | \$5,274 |
| Staff Benefits (Specify %) 56.00% | | | \$36,920 | | \$33,966 | | \$2,954 |
| I. Total Personnel Expenses | | | \$102,848 | | \$94,620 | | \$8,228 |
| II. Operating Expenses | | | | | | | |
| 1. Travel | | | \$660 | | \$528 | | \$132 |
| 2. Training | | | \$500 | | \$400 | | \$100 |
| | | | | | | | |
| II. Total Operating Expenses | | | \$1,160 | | \$928 | | \$232 |
| III. Capital Expenses | | | | | | | |
| 1. | | | | | | | |
| 2. | | | | | | | |
| II. Total Capital Expenses | | | | | | | |
| IV. Indirect Expenses | | | | | | | |
| 1. Internal (Specify %) 10.00% | | | \$10,285 | | | | \$10,285 |
| 2. External | | | | | | | |
| IV. Total Indirect Expenses | | | \$10,285 | | | | \$10,285 |
| V. Other Expenses | | | | | | | |
| 1. | | | | | | | |
| 2. | | | | | | | |
| V. Total Other Expenses | | | | | | | |
| Budget Grand Total | | | \$114,292 | | \$95,548 | | \$18,745 |

Prepared By (Signature)

Date Prepared

(650) 573-2828
Phone Numbergibarrientos@co.sanmateo.ca.us
Email Address

CHDP Director or Deputy Director (Signature)

Date

(650) 573-2828
Phone Numbergibarrientos@co.sanmateo.ca.us
Email Address

**San Mateo County
Foster Care Administrative County Match Budget Narrative
FY 2011-2012**

I. Personnel Expense

Total Salaries \$65,928

Total Benefits: \$36,920

Total Personnel Expense: \$102,848 The PHN position is 60% in the FC budget and 40% in the HCPCFC budget. The SrPHN is only in the HCPCFC budget. This was done in order to meet the amount of money allotted to us. Benefits have increased 2% due to the overall increase in medical insurances costs.

II. Operating Expense

Travel: \$660 Part of FC staff travel reimbursement

Training: \$500 FC staff training costs

Total Operating Expense: \$1,160

III. Capital Expense

Total Capital Expense: \$0

IV. Indirect Expense

Internal @ 10% \$ 10,285 Costs supporting in-house administrative and accounting services.

Total Indirect Expense: \$10,285

V. Other Expense

Total Other Expense: \$0

VI. Budget Grand Total: \$114,292

HPCFC Administrative Budget Summary

Fiscal Year 2011-12

County/City Name: San Mateo

| Column | 1 | 2 | 3 |
|------------------------------|-------------------------|-----------------------------------|--------------------------------------|
| Category/Line Item | Total Budget (2 + 3) | Enhanced State/Federal (25/75) | Nonenhanced State/Federal (50/50) |
| I. Total Personnel Expenses | \$75,820 | \$68,238 | \$7,582 |
| II. Total Operating Expenses | \$855 | \$522 | \$333 |
| III. Total Capital Expenses | | | |
| IV. Total Indirect Expenses | \$7,582 | | \$7,582 |
| V. Total Other Expenses | | | |
| Budget Grand Total | \$84,257 | \$68,760 | \$15,497 |

| Column | 1 | 2 | 3 |
|---------------------------|-------------|--------------------------------------|--------------------------------------|
| Source of Funds | Total Funds | Enhanced State/Federal (25/75) | Nonenhanced State/Federal (50/50) |
| State Funds | \$24,939 | \$17,190 | \$7,749 |
| Federal Funds (Title XIX) | \$59,319 | \$51,570 | \$7,749 |
| Budget Grand Total | \$84,258 | | |

| | | | |
|-------------------------------------------------|---------------|--------------------------------|-----------------------------------------------------------------------------------------------------|
| Prepared By (Signature) | Date Prepared | (650) 573-2828 Phone Number | gibarrientos@co.sanmateo.ca.us Email Address |
| CHDP Director or Deputy Director (Signature) | Date | (650) 573-2828 Phone Number | gibarrientos@co.sanmateo.ca.us Email Address |

Revised April 2005

HCPCFC Administrative Budget Worksheet
Fiscal Year 2011-12
County/City Name: San Mateo

| Column | 1A | 1B | 1 | 2A | 2 | 3A | 3 |
|----------------------------------------|----------|---------------|---------------------------------------|----------|--------------------------------------|----------|-----------------------------------------|
| Category/Line Item | % or FTE | Annual Salary | Total Budget (1A x 1B or 2 + 3) | % or FTE | Enhanced State/Federal (25/75) | % or FTE | Nonenhanced State/Federal (50/50) |
| I. Personnel Expenses | | | | | | | |
| 1. PHN Lenora Torres | 40% | \$109,881 | \$43,952 | 90% | \$39,557 | 10% | \$4,395 |
| 2. SrPHN Vera Williams | 4% | \$116,260 | \$4,650 | 90% | \$4,185 | 10% | \$465 |
| 3. | | | | | | | |
| 4. | | | | | | | |
| 5. | | | | | | | |
| Total Salaries and Wages | | | \$48,603 | | \$43,743 | | \$4,860 |
| Less Salary Savings | | | | | | | |
| Net Salaries and Wages | | | \$48,603 | | \$43,743 | | \$4,860 |
| Staff Benefits (Specify %) 56.00% | | | \$27,218 | | \$24,496 | | \$2,722 |
| I. Total Personnel Expenses | | | \$75,820 | | \$68,238 | | \$7,582 |
| II. Operating Expenses | | | | | | | |
| 1. Travel | | | \$522 | | \$372 | | \$150 |
| 2. Training | | | \$333 | | \$150 | | \$183 |
| II. Total Operating Expenses | | | \$855 | | \$522 | | \$333 |
| III. Capital Expenses | | | | | | | |
| 1. | | | | | | | |
| 2. | | | | | | | |
| II. Total Capital Expenses | | | | | | | |
| IV. Indirect Expenses (10% Cap) | | | | | | | |
| 1. Internal (Specify %) 10.00% | | | \$7,582 | | | | \$7,582 |
| 2. External | | | | | | | |
| IV. Total Indirect Expenses | | | \$7,582 | | | | \$7,582 |
| V. Other Expenses | | | | | | | |
| 1. | | | | | | | |
| 2. | | | | | | | |
| V. Total Other Expenses | | | | | | | |
| Budget Grand Total | | | \$84,257 | | \$68,760 | | \$15,497 |

39

| | | |
|----------------------------------------------------|---------------------|------------------------------------------------------------------------------------|
| | (650) 573-2828 | gibarrientos@co.sanmateo.ca.us |
| Prepared By (Signature) _____ | Date prepared _____ | Phone Number _____ Email Address _____ |
| CHDP Director or Deputy Director (Signature) _____ | Date _____ | Phone Number _____ Email Address _____ |

**San Mateo County
HCPCFC County No Match Budget Narrative
FY 2011-2012**

I. Personnel Expense

Total Salaries: \$48,603

Total Benefits: \$27,218

Total Personnel Expense: \$75,820

PHN position is 40% and the SrPHN is 4%.
With these configurations we were able to
meet the money allotted to us.
Benefits have increased 2% due to the
overall increase in medical insurance.

II. Operating

Travel: \$522

Part of HCFCPC staff travel reimbursement

Training: \$333

HCFCPC staff training costs

Total Operating Expense: \$855

III. Capital Expense

Total Capital Expense: \$0

IV. Indirect Expense

Internal @ 10% \$7,582

Costs supporting in-house administrative
and accounting services.

Total Indirect Expense: \$7,582

V. Other Expense \$0

Total Other Expense: \$0

Budget Grand Total: \$84,257

| CCS CASELOAD | Actual Caseload | Percent of Grand Total |
|-------------------------------------------------------|-----------------|------------------------|
| MEDI-CAL | | |
| Average of Total Open (Active) Medi-Cal Children | 1,340 | 67.6% |
| Potential Cases Medi-Cal | 65 | 3.3% |
| TOTAL MEDI-CAL | 1,405 | 70.9% |
| NON MEDI-CAL | | |
| Healthy Families | | |
| Average of Total Open (Active) HF Children | 191 | 9.6% |
| Potential Cases HF | 9 | 0.5% |
| Total Healthy Families | 200 | 10.1% |
| Straight CCS | | |
| Average of Total Open (Active) Straight CCS Children | 358 | 18.1% |
| Potential Cases Straight CCS | 17 | 0.9% |
| Total Straight CCS | 375 | 19.0% |
| TOTAL NON MEDI-CAL | 576 | 29.1% |
| GRAND TOTAL | 1,981 | 100% |

CCS Administrative Budget Summary for FY 2011-12

County Name: San Mateo

| Column | 1 | 2 | 3 | 4 | 5 |
|-----------------------------|--------------|--------------------------------------------------|------------------------------------|--------------------------------------|-----------------------------------------|
| Category/Line Item | Total Budget | Non-Medi-Cal County/State/HF Co/St/Federal | Total Medi-Cal State/Federal | Enhanced State/Federal (25/75) | Nonenhanced State/Federal (50/50) |
| I. Total Personnel Expense | 2,972,419 | 863,874 | 2,108,545 | 983,703 | 1,124,842 |
| II. Total Operating Expense | 371,187 | 107,878 | 263,309 | 3,800 | 259,509 |
| III. Total Capital Expense | 0 | 0 | 0 | | - |
| IV. Total Indirect Expense | 638,773 | 185,647 | 453,126 | | 453,126 |
| V. Total Other Expense | 40,000 | 11,625 | 28,375 | | 28,375 |
| Budget Grand Total | 4,022,379 | 1,169,024 | 2,853,355 | 987,503 | 1,865,853 |

| Column | 1 | 2 | 3 | 4 | 5 |
|-----------------------------|--------------|-----------------------------------------------------|------------------------------------|--------------------------------------|-----------------------------------------|
| Source of Funds | Total Budget | Non-Medi-Cal County/State/HF Co/State/Federal | Total Medi-Cal State/Federal | Enhanced State/Federal (25/75) | Nonenhanced State/Federal (50/50) |
| Straight CCS | | | | | |
| State | 381,157 | 381,157 | | | |
| County | 381,157 | 381,157 | | | |
| CCS Healthy Families | | | | | |
| State | 71,174 | 71,174 | | | |
| County | 71,174 | 71,174 | | | |
| Federal (Title XXI) | 264,361 | 264,361 | | | |
| Medi-Cal Funds: | | | | | |
| State | 1,179,802 | | 1,179,802 | 246,876 | 932,926 |
| Federal (Title XIX) | 1,673,553 | | 1,673,553 | 740,627 | 932,926 |

Prepared By (Signature)

Date Prepared

650-573-3428

Phone Number

Jdelaguila@co.sanmateo.ca.us

Email Address

CCS Administrator (Signature)

Date Signed

Phone Number

Email Address

| CCS CASELOAD | ACTUAL CASELOAD | OF GRAND TOTAL |
|---------------------------------------------------|-----------------|----------------|
| MEDI-CAL | | |
| Average of Total Open (Active) Medi-Cal Children | 1,340 | 87.6% |
| Potential Cases of Medi-Cal | 65 | 3.3% |
| TOTAL MEDI-CAL | 1,405 | 70.9% |
| NON MEDI-CAL | | |
| Healthy Families | | |
| Average of Total Open (Active) HF Children | 191 | 9.6% |
| Potential Cases HF | 9 | 0.5% |
| Total Healthy Families | 200 | 10.1% |
| Straight CCS | | |
| Children | 358 | 18.1% |
| Potential Cases Straight CCS | 17 | 0.9% |
| Total Straight CCS | 375 | 19.0% |
| TOTAL NON MEDI-CAL | 576 | 29.1% |
| GRAND TOTAL | 1,981 | 100% |

CCS Administrative Budget Worksheet for FY 2011-12

County Name: San Mateo

| COLUMN | 1 | 2 | 3 | 4A | 4 | 5A | 5 | 6A | 6 | 7A | 7 |
|------------------------------------------------------|---------------|------------------|-------------------------------------|---------------|-----------------------------------------|---------------|---------------------|-------|----------------------|-------|------------------------------------------------------|
| Category/Line Item | % FTE | Annual Salary | Total Budget (1 x 2 or 4 + 5) | % FTE | Non-Medi-Cal County/State (50/50) | % FTE | Medi-Cal (6 + 7) | % FTE | Medi-Cal Enhanced | % FTE | Medi-Cal Non-Enhanced State/Federal (50/50) |
| I. Personnel Expense | | | | | | | | | | | |
| Program Administration | | | | | | | | | | | |
| 1. Administrator - Glenn Ibarrientos | 50% | 126,352 | 63,176 | 29.06% | 18,361 | 70.94% | 44,815 | | | 100% | 44,815 |
| 2. Administrative Assistant II - Joseph Del Aguila | 95% | 76,020 | 72,219 | 29.06% | 20,989 | 70.94% | 51,230 | | | 100% | 51,230 |
| 3. Medical Office Services Supervisor - Joanne Nuevo | 98% | 69,084 | 67,702 | 29.06% | 19,676 | 70.94% | 48,026 | | | 100% | 48,026 |
| 4. System Support Specialist - Kim Pijma | 14% | 98,556 | 13,798 | 29.06% | 4,010 | 70.94% | 9,788 | | | 100% | 9,788 |
| Subtotal | | 370,012 | 216,895 | | 63,036 | | 153,859 | | | | 153,859 |
| Medical Case Management | | | | | | | | | | | |
| 1. Physician - Anand Chabra MD | 60% | 176,917 | 106,150 | 29.06% | 30,850 | 70.94% | 75,300 | 47% | 35,391 | 53% | 39,909 |
| 2. Sr. PHN - Vacant | 100% | 101,952 | 101,952 | 29.06% | 29,630 | 70.94% | 72,322 | 62% | 44,839 | 38% | 27,482 |
| 3. Chief Therapist- Carol Maddox | 20% | 103,452 | 20,690 | 29.06% | 6,013 | 70.94% | 14,677 | 72% | 10,568 | 28% | 4,110 |
| 4. Medical Social Worker - Mitchell Eckstein | 95% | 78,780 | 74,841 | 29.06% | 21,751 | 70.94% | 53,090 | 60% | 31,854 | 40% | 21,236 |
| 5. PHN - Jimmy Yan | 100% | 109,044 | 109,044 | 29.06% | 31,691 | 70.94% | 77,353 | 70% | 54,147 | 30% | 23,206 |
| 6. PHN - Elizabeth Solis | 100% | 115,905 | 115,905 | 29.06% | 33,685 | 70.94% | 82,219 | 65% | 53,443 | 35% | 28,777 |
| 7. PHN - Maricar Arsalane | 100% | 112,058 | 112,058 | 29.06% | 32,567 | 70.94% | 79,491 | 53% | 42,130 | 47% | 37,361 |
| 8. PHN - Amanda Morales | 95% | 109,440 | 103,968 | 29.06% | 30,216 | 70.94% | 73,752 | 72% | 53,101 | 28% | 20,650 |
| 9. PHN - Angie Santos | 90% | 107,748 | 96,973 | 29.06% | 28,183 | 70.94% | 68,790 | 71% | 48,841 | 29% | 19,949 |
| 10. PHN - Maria Brillantes | 100% | 107,748 | 107,748 | 29.06% | 31,315 | 70.94% | 76,433 | 69% | 52,739 | 31% | 23,694 |
| 12. PHN - Vacant | 100% | 105,624 | 105,624 | 29.06% | 30,697 | 70.94% | 74,927 | 66% | 49,451 | 34% | 25,475 |
| Subtotal | | 1,228,667 | 1,054,953 | | 306,601 | | 748,352 | | 476,504 | | 271,849 |
| Other Health Care Professionals | | | | | | | | | | | |
| 1. Dietitian - Janelle Gangerelli | 85% | 75,048 | 63,791 | 29.06% | 18,540 | 70.94% | 45,251 | 66% | 29,866 | 34% | 15,385 |
| 2. PT/OT Case Manager - Vacant | 100% | 80,664 | 80,664 | 29.06% | 23,443 | 70.94% | 57,221 | 66% | 37,766 | 34% | 19,455 |
| Subtotal | | 155,712 | 144,455 | | 41,983 | | 102,472 | | 67,631 | | 34,840 |
| Ancillary Support | | | | | | | | | | | |
| 1. Benefits Analyst - Martha Alexander | 100% | 68,549 | 68,549 | 29.06% | 19,922 | 70.94% | 48,626 | | | 100% | 48,626 |
| 2. Benefits Analyst - Jenny Infante | 100% | 68,549 | 68,549 | 29.06% | 19,922 | 70.94% | 48,626 | | | 100% | 48,626 |
| Subtotal | | 137,097 | 137,097 | | 39,845 | | 97,253 | | | | 97,253 |
| Clerical and Claims Support | | | | | | | | | | | |
| 1. MOS - Birzayit Santiago | 100% | 59,772 | 59,772 | 29.06% | 17,372 | 70.94% | 42,400 | 41% | 17,384 | 59% | 25,016 |
| 2. MOS - Linda Maher | 100% | 58,080 | 58,080 | 29.06% | 16,880 | 70.94% | 41,200 | 35% | 14,420 | 65% | 26,780 |
| 3. PSA - Ana Alvarez | 100% | 53,256 | 53,256 | 29.06% | 15,478 | 70.94% | 37,778 | 40% | 15,111 | 60% | 22,667 |
| 4. PSA - Carmen Rodas | 100% | 53,256 | 53,256 | 29.06% | 15,478 | 70.94% | 37,778 | 21% | 7,933 | 79% | 29,845 |
| 5. PSA - Ana Menjivar | 100% | 53,256 | 53,256 | 29.06% | 15,478 | 70.94% | 37,778 | 73% | 27,578 | 27% | 10,200 |
| 6. FOS - Renee De la Rosa | 100% | 55,068 | 55,068 | 29.06% | 16,004 | 70.94% | 39,064 | 0% | - | 100% | 39,064 |
| 7. Sr. Accountant - Jing Lang | 10% | 71,724 | 7,172 | 29.06% | 2,085 | 70.94% | 5,088 | 0% | - | 100% | 5,088 |
| Grand Total FTE | 22.12 | | | | | | | | | | |
| Subtotal | | 404,412 | 339,860 | | 98,774 | | 241,087 | | 82,427 | | 158,660 |
| Total Salary and Wages | | | 1,893,261 | 29.06% | 550,238 | 70.94% | 1,343,022 | | 626,562 | | 716,460 |
| Less Salary Savings | | | - | | 0 | | 0 | | 0 | | 0 |
| Net Salary and Wages | | | 1,893,261 | 29.06% | 550,238 | | 1,343,022 | | 626,562 | | 716,460 |
| Staff Benefits (Specify %) | 57.00% | | 1,079,159 | 29.06% | 313,636 | 70.94% | 765,523 | | 357,140 | | 408,382 |
| I. Total Personnel Expense | | | 2,972,419 | | 863,874 | | 2,108,545 | | 983,703 | | 1,124,842 |

| CCS CASELOAD | ACTUAL CASELOAD | OF GRAND TOTAL |
|---------------------------------------------------|-----------------|----------------|
| MEDI-CAL | | |
| Average of Total Open (Active) Medi-Cal Children | 1,340 | 67.6% |
| Potential Cases of Medi-Cal | 65 | 3.3% |
| TOTAL MEDI-CAL | 1,405 | 70.9% |
| NON MEDI-CAL | | |
| Healthy Families | | |
| Average of Total Open (Active) HF Children | 191 | 9.6% |
| Potential Cases HF | 9 | 0.5% |
| Total Healthy Families | 200 | 10.1% |
| Straight CCS | | |
| Children | 358 | 18.1% |
| Potential Cases Straight CCS | 17 | 0.9% |
| Total Straight CCS | 375 | 19.0% |
| TOTAL NON MEDI-CAL | 576 | 29.1% |
| GRAND TOTAL | 1,981 | 100% |

CCS Administrative Budget Worksheet for FY 2011-12

County Name: San Mateo

| COLUMN | 1 | 2 | 3 | 4A | 4 | 5A | 5 | 6A | 6 | 7A | 7 |
|------------------------------------|-------|---------------|-------------------------------------|--------|-----------------------------------------|--------|---------------------|-------|----------------------|-------|------------------------------------------------------|
| Category/Line Item | % FTE | Annual Salary | Total Budget (1 x 2 or 4 + 5) | % FTE | Non-Medi-Cal County/State (50/50) | % FTE | Medi-Cal (6 + 7) | % FTE | Medi-Cal Enhanced | % FTE | Medi-Cal Non-Enhanced State/Federal (50/50) |
| II. Operating Expense | | | | | | | | | | | |
| 1. Travel | | | 5,622 | 29.06% | 1,634 | 70.94% | 3,988 | 50% | 1,994 | 50% | 1,994 |
| 2. Training | | | 3,264 | 29.06% | 949 | 70.94% | 2,315 | 78% | 1,806 | 22% | 509 |
| 3. Continuing Education | | | 1,000 | 29.06% | 291 | 70.94% | 709 | | | | 709 |
| 4. Space Rental | | | 191,949 | 29.06% | 55,786 | 70.94% | 136,163 | | | | 136,163 |
| 5. Office Supplies | | | 21,435 | 29.06% | 6,230 | 70.94% | 15,205 | | | | 15,205 |
| 6. Furniture | | | 2,000 | 29.06% | 581 | 70.94% | 1,419 | | | | 1,419 |
| 7. IT/Telephone | | | 115,541 | 29.06% | 33,580 | 70.94% | 81,961 | | | | 81,961 |
| 8. Other | | | 30,376 | 29.06% | 8,828 | 70.94% | 21,548 | | | | 21,548 |
| 9. | | | - | 29.06% | - | 70.94% | - | | | | - |
| II. Total Operating Expense | | | 371,187 | | 107,878 | | 263,309 | | 3,800 | | 259,509 |

| CCS CASELOAD | ACTUAL CASELOAD | OF GRAND TOTAL |
|---------------------------------------------------|--------------------|-------------------|
| MEDI-CAL | | |
| Average of Total Open (Active) Medi-Cal Children | 1,340 | 67.6% |
| Potential Cases of Medi-Cal | 65 | 3.3% |
| TOTAL MEDI-CAL | 1,405 | 70.9% |
| NON MEDI-CAL | | |
| Healthy Families | | |
| Average of Total Open (Active) HF Children | 191 | 9.6% |
| Potential Cases HF | 9 | 0.5% |
| Total Healthy Families | 200 | 10.1% |
| Straight CCS | | |
| Children | 358 | 18.1% |
| Potential Cases Straight CCS | 17 | 0.9% |
| Total Straight CCS | 375 | 19.0% |
| TOTAL NON MEDI-CAL | 576 | 29.1% |
| GRAND TOTAL | 1,981 | 100% |

CCS Administrative Budget Worksheet for FY 2011-12

County Name: San Mateo

| COLUMN | 1 | 2 | 3 | 4A | 4 | 5A | 5 | 6A | 6 | 7A | 7 |
|----------------------------------------|--------|---------------|-------------------------------------|--------|-----------------------------------------|--------|---------------------|-------|----------------------|-------|------------------------------------------------------|
| Category/Line Item | % FTE | Annual Salary | Total Budget (1 x 2 or 4 + 5) | % FTE | Non-Medi-Cal County/State (50/50) | % FTE | Medi-Cal (6 + 7) | % FTE | Medi-Cal Enhanced | % FTE | Medi-Cal Non-Enhanced State/Federal (50/50) |
| III. Capital Expense | | | | | | | | | | | |
| 1. | | | | | - | | - | | | | - |
| 2. | | | | | - | | - | | | | - |
| III. Total Capital Expense | | | - | | - | | - | | | | - |
| IV. Indirect Expense | | | | | | | | | | | |
| 1. Internal | 19.17% | | 569,813 | 29.06% | 165,605 | 70.94% | 404,208 | | | 100% | 404,208 |
| 2. External | 2.32% | | 68,960 | 29.06% | 20,042 | 70.94% | 48,918 | | | 100% | 48,918 |
| IV. Total Indirect Expense | | | 638,773 | | 185,647 | | 453,126 | | | | 453,126 |
| V. Other Expense | | | | | | | | | | | |
| 1. Maintenance & Transportation | | | 11,000 | 29.06% | 3,197 | 70.94% | 7,803 | | | 100% | 7,803 |
| 2. Contractor - Family Resource Center | | | 26,000 | 29.06% | 7,556 | 70.94% | 18,444 | | | 100% | 18,444 |
| 3. Family Centered Care Services | | | 3,000 | 29.06% | 872 | 70.94% | 2,128 | | | 100% | 2,128 |
| V. Total Other Expense | | | 40,000 | | 11,625 | | 28,375 | | | | 28,375 |
| Budget Grand Total | | | 4,022,379 | | 1,169,024 | | 2,853,355 | | 987,503 | | 1,865,853 |

Prepared By (Signature)

Date Prepared

650-573-3428

Phone Number

Jdelaguila@co.sanmateo.ca.us

Email Address

CCS Administrator (Signature)

Date Signed

Phone Number

Email Address

**CCS Budget Narrative
San Mateo County
FY 2011 - 2012**

I. Personnel Expense

Total Salaries: \$1,893,261

Total Benefits: \$1,079,159

Total Personnel Expense: **\$2,972,419**

Enhanced/Non-Enhanced – varies per position, based on time study reported by participating personnel

Caseload Summary – determined pursuant to budget instructions.

Personnel Changes

Hired new CCS Program administrator

Vacant PHN

Vacant Sr. PHN position

Vacant PT/OT Case Manager

Benefit Analyst position deleted

II. Operating Expense

| | | |
|--------|---------|--------------------------------------------------------------------------|
| Travel | \$5,622 | Employee Mileage reimbursement rate Based on previous year's run rate |
|--------|---------|--------------------------------------------------------------------------|

| | | |
|----------|--------|-----------------------------------------------------------------------------------------------------------|
| Training | \$3264 | Meetings & Conferences- \$1,812: Trainer, Workshop, Speaker & Other Meetings, \$150 LMS - \$1302 |
|----------|--------|-----------------------------------------------------------------------------------------------------------|

| | | |
|----------------------|--------|----------------------------------------------------------------------------------------------------------------------------------|
| Continuing Education | \$1000 | Continuing Education for Case Managers – per their bargaining agreement for tuition/professional training reimbursement |
|----------------------|--------|----------------------------------------------------------------------------------------------------------------------------------|

| | | |
|--------------|-----------|-------------------------|
| Space Rental | \$191,949 | \$15,995.75 X 12 Months |
|--------------|-----------|-------------------------|

| | | |
|-----------------|----------|--------------------------------------------------------------|
| Office Supplies | \$21,435 | Outside Printing & Copy Service – 5,856 based on run rate |
|-----------------|----------|--------------------------------------------------------------|

General Office Supplies – 15,579 based on run rate;

| | | |
|--------------|-----------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Furniture | \$2,000 | Planned purchase of furniture for new employees |
| Other | \$30,376 | Advertising and Publicity Exp - 95 Misc. Maint. Expense – 1,000 run rate Finger printing & Criminology – 50 run rate Auto Liability Insurance – 60 run rate Hospital Liability Insurance – 8,124 run rate Office Bond Insurance – 1,140 run rate County Property Insurance – 466 run rate County Counsel Services – 3,538 run rate County Wide Security – 1,241 run rate Postage – 12,954 Record Storage – 1,020 Shred It – 688 |
| IT/Telephone | \$115,541 | Telephone service charge – 35,731 run rate IT Automation Charges – 74,525 Computer Equipment 5,000 PC/LAN Software – 285 |

Total Operating Expense \$371,187

III. Capital Expense

None

IV. Indirect Expense

| | | |
|-------------------|-----------|-------------------------------------------------------------------|
| Internal @ 19.17% | \$569,813 | Costs supporting in-house administrative and accounting services. |
|-------------------|-----------|-------------------------------------------------------------------|

| | | |
|------------------|----------|----------------------------------------------|
| External @ 2.32% | \$68,960 | Costs for in-house data Processing services. |
|------------------|----------|----------------------------------------------|

Total Indirect Expense \$638,773

V. Other Expense

| | | |
|-----------------|----------|----------------------------------------|
| Maint. & Trans. | \$11,000 | Client Transportation Charges – 11,000 |
|-----------------|----------|----------------------------------------|

| | | |
|---------------------------|--------------------|------------------------------------------------------------------------|
| Contractor | \$26,000 | Based on contract amount for Family Resource Center – parental liaison |
| Family Centered Care | \$3,000 | Expenses for multicultural parent task force meetings. |
| Total Other Expense | \$40,000 | |
| Budget Grand Total | \$4,022,379 | |