Department Name: Health and Human Services

1. Program Title: Special Supplemental Food Program for Women, Infants and Children (WIC)

Program Description: WIC provides nutrition and health education and food assistance for low-income pregnant and postpartum women, infants and children up to the age of five.

	Base	Unfunded	Recommended	Percentage
Appropriations	\$6,385,095	\$48,944	\$6,336,151	0.8%
Reimbursements (-)	-114,702		-114,702	0.0%
Net Appropriations	6,270,393	48,944	6,221,449	0.8%
Revenues:				
Federal	5,386,678	0	5,386,678	0.0%
State	0	0	0	
Realignment	0	0	0	
Prop 172	0	0	0	
Fees	0	0	0	
Other	834,771	0	834,771	0.0%
Total Revenues	6,221,449	0	6,221,449	0.0%
Carryover				
Net Cost	\$48,944	\$48,944	\$0	100.0%
Fulltime Equivalent Positions	48.8	1.0	47.8	2.0%

Categorical Reduction: \$48,944 Non-categorical Reduction: \$0

Program Impact

WIC base funding was reduced due to an inability to meet an additional caseload target of 3,000 due to a decline in birth rate and a shift in demographics resulting in a reduction in the WIC funding allocation for the second and third years of the contract.

Staffing Reduction Impact

1.0 FTE Nutrition Assistant-Spanish Language/Latin Culture (vacant) position will be reallocated to another program. The deletion of this position will require remaining staff to serve a greater number of participants.

2. Program Title: Clinic Services

Program Description: Provides services to the medically indigent population, healthcare for the homeless, refugee health and integrated behavioral health.

	Base	Unfunded	Recommended	Percentage
Appropriations	\$21,013,437	\$120,618	\$20,892,819	0.6%
Reimbursements (-)	-674,240		-674,240	0.0%
Net Appropriations	20,339,197	120,618	20,218,579	0.6%
Revenues:				
Federal	1,799,589	0	1,799,589	0.0%
State	93,010	0	93,010	0.0%
Realignment	12,153,838	0	12,153,838	0.0%
Prop 172	0	0	0	
Fees	55,000	0	55,000	0.0%
Other	5,938,000	0	5,938,000	0.0%
Total Revenues	20,039,437	0	20,039,437	0.0%
Carryover				
Net Cost	\$299,760	\$120,618	\$179,142	40.2%
Fulltime Equivalent Positions	83.6	1.0	82.6	1.2%

Categorical Reduction: \$0 Non-categorical Reduction: \$120,618

Program Impact:

CMISP and clinic services for Sacramento County residents are in a transitional period due to implementation of the LIHP. Resource needs are changing and are being reallocating to where most needed.

Staffing Reduction Impact

1.0 FTE Supervising RN (Vacant) will be reallocated to another program. Clinics have been utilizing a combination of registry and on-call staff to fulfill some of the workforce needs associated with LIHP. It was determined that this position would not be utilized and is being reallocated to another program.

3. Program Title: Behavioral Health Services PHF Funding

Program Description: Provides funding for contracted beds with Crestwood Psychiatric Health Facility, additional beds for Medi-Cal patients with Heritage Oaks, Sierra Vista and Sutter Psychiatry for Health, and State Hospital contract, and sub-acute bed contracts

	Base	Unfunded	Recommended	Percentage
Appropriations	\$26,546,536	\$637,440	\$25,909,096	2.4%
Reimbursements (-)	0	0	0	
Net Appropriations	26,546,536	637,440	25,909,096	2.4%
Revenues:				
Federal	4,331,571	0	4,331,571	0.0%
State	0	0	0	
Realignment	18,264,103	0	18,264,103	0.0%
Prop 172	0	0	0	
Fees	0	0	0	
Other	375,000	0	375,000	0.0%
Total Revenues	22,970,674	0	22,970,674	0.0%
Carryover			0	
Net Cost	\$3,575,862	\$637,440	\$2,938,422	17.8%
Fulltime Equivalent Positions	0.0	0.0	0.0	

Categorical Reduction: \$0 Non-categorical Reduction: \$637,440

Program Impact

The reduction to this budget unit will impact the County's responsibility to pay the private psychiatric hospitals for inpatient services provided to Medi-Cal consumers as required under the Mental Health Plan. With the implementation of the Affordable Care Act, it is anticipated that this cost will increase significantly as more patients are eligible and enroll in Medi-Cal. The current contracted rate for the three private hospitals is \$950 per day, which is the result of litigation and includes ancillary services. The contract also requires the private hospitals to serve the indigent with no reimbursement. There is no federal reimbursement for these costs as the three private hospitals are under the Institute of Mental Disease (IMD) exclusion due to the bed capacity of the facilities. Although the County is part of the IMD pilot program, no revenues from this have been realized to date. Should the County be unable to pay for these services, litigation is inevitable.

However, the Department is optimistic that it may be able to contain the costs of this reduction. We have developed partnerships with providers to open 16-bed or less psychiatric health facilities (PHFs) so that Medi-Cal revenues may be claimed for inpatient costs. We have opened the Intake Stabilization Unit, reducing the need for inpatient acute care. These should help Behavioral Health Services to better manage the use of the private pay hospitals.

Potential Impact on other Departments/Program Partners: Private Psychiatric Hospitals and Subacute bed providers.

4. Program Title: Mental Health Child and Family Services

Program Description: Provides planning, administrative support, and management to children's services. Responsible for a wide range of mental health services, including crisis intervention, psychiatric inpatient, day treatment, outpatient therapy, case management, and medication.

	Base	Unfunded	Recommended	Percentage
Appropriations	\$67,557,021	\$25,000	\$67,532,021	0.0%
Reimbursements (-)	-6,907,391	-25,000	-6,882,391	0.4%
Net Appropriations	60,649,630	0	60,649,630	0.0%
Revenues:				
Federal	29,553,489	0	29,553,489	0.0%
State	0	0	0	
Realignment	30,746,244	0	30,746,244	0.0%
Prop 172	0	0	0	
Fees	0	0	0	
Other	349,897	0	349,897	0.0%
Total Revenues	60,649,630	0	60,649,630	0.0%
Carryover				
Net Cost	\$0	\$0	\$0	
Fulltime Equivalent Positions	54.8	0.0	54.8	0.0%

Categorical Reduction: \$0 Non-categorical Reduction: \$25,000

Program Impact:

Please refer to Juvenile Medical Services (7230000) for impact of \$25,000 reduction.

5. Program Title: Child Protective Services (CPS)

	Base	Unfunded	Recommended	Percentage
Appropriations	\$107,304,244	\$2,340,680	\$104,963,564	2.2%
Reimbursements (-)	-312,558	0	-312,558	0.0%
Net Appropriations	106,991,686	2,340,680	104,651,006	2.2%
Revenues:				
Federal	52,893,259	312,793	52,580,466	0.6%
State	3,101,782	693,887	2,407,895	22.4%
Realignment	48,503,996	0	48,503,996	0.0%
Prop 172	0	0	0	
Fees	0	0	0	
Other	1,392,649	234,000	1,158,649	16.8%
Total Revenues	105,891,686	1,240,680	104,651,006	1.2%
Carryover				
Net Cost	\$1,100,000	\$1,100,000	\$0	100.0%
Fulltime Equivalent Positions	670.8	13.8	657.0	2.1%

Program Description: CPS provides services for abused and neglected children.

Categorical Reduction: \$2,340,680 Non-categorical Reduction: \$0

Staffing Reduction Summary

	Vacant	Filled
Human Services Social Worker, Range B	3.0	5.8
Human Services Social Worker, Range B - Spanish Lang/Latin Culture	1.0	
Human Services Supervisor	1.0	
Office Assistant, Level 2	2.0	
Senior Office Assistant		1.0
Fulltime Equivalent Positions	7.0	6.8

Program Impact:

- Community Care Licensing funding for the Family Child Care Homes program will be cut by 52% in fiscal year 2013-2014.
- The current program will not be able to sustain the work with a reduction of this magnitude.
- The program currently has 13.8 staff with the following break down: 1.0 Human Services Supervisor, 9.8 Human Services Social Workers, 1.0 Senior Office Assistant and 2.0 Office Assistants.
- The plan will be to reallocate these positions to other programs by filling vacancies.
- A reduction in funding of this magnitude would not allow for the prompt licensing of homes, inspection of homes, response to complaints and completion of legal documents when administrative legal action needs to be taken.

- The regulatory guidelines for completion of work could not be adhered to by program staff and the program would be unable to comply with audit requirements.
- Sacramento County is the only large county that administers a Family Child Care Home licensing program. It would not be feasible to maintain the program with such a reduction in revenue.
- It appears necessary to return the program to Community Care Licensing, to be administered by the State.

Potential Impact on other Departments/Program Partners:

Child Protective Services (CPS) primary focus is on child safety. The continuation with Day Care Licensing (DCL) functions utilizes staffing resources that need to be directed to carrying out CPS child safety and permanency practices. Additionally, CPS is not equipped to continue carrying out these functions. This is even more evident given that the State cut funding for this function to CPS by 52% for Fiscal year 2013-14. The ability to operate this program with this level of reduction in funding would not be feasible. Operating the program even if funding was able to be restored would still cause a hardship for CPS due to our current demands and need for all staffing resources. Safety in homes licensed for the purpose of providing daycare is more appropriately aligned with the roles and responsibilities of Community Care Licensing. (CCL). CCL through the California Department of Social Services (CDSS) has an infrastructure that specifically focuses on the core mission of licensing homes as stated on the CDSS informational web site. The roles of CCL are clearly defined and focused on all aspects of licensure. CPS's does not have the ability to operate at the level in which CDSS CCL infrastructure is purposefully designed, and over the years the need to focus on the CPS core mission of child safety has increased versus the role licensing daycare homes. This transition to State operations may delay processing of new applicants, and a need for clear communication to existing licensed homes would need to be developed to support a smooth transition. Current licensed homes would benefit from an infrastructure that has in place a full team of CCL line and administrative staff, a dedicated website for resources and services such as the ability to pay fees via on-line - services that CPS does not have nor are equipped to provide.

6. Program Title: Alcohol and Drug Services

Program Description: Provides planning, administrative support, and management to adult and youth services. Responsible for a wide range of prevention and treatment services, which include outpatient and residential treatment services, and community based prevention programs.

	Base	Unfunded	Recommended	Percentage
Appropriations	\$30,227,193	\$72,808	\$30,154,385	0.2%
Reimbursements (-)	-5,452,756	0	-5,452,756	0.0%
Net Appropriations	24,774,437	72,808	24,701,629	0.3%
Revenues:				
Federal	13,784,756	0	13,784,756	0.0%
State	437,967	0	437,967	0.0%
Realignment	10,000,622	0	10,000,622	0.0%
Prop 172	0	0	0	
Fees	0	0	0	
Other	478,284	0	478,284	0.0%
Total Revenues	24,701,629	0	24,701,629	0.0%
Carryover				
Net Cost	\$72,808	\$72,808	\$0	100.0%
Fulltime Equivalent Positions	38.8	0.0	38.8	0.0%

Categorical Reduction: \$72,808 Non-categorical Reduction: \$0

Program Impact: The Federal Government has reduced the funding available for programs, known as Federal Sequestration. One of the funding streams impacted was the Substance Abuse Prevention and Treatment (SAPT) Block Grant. The State is still working on the details, but the anticipate percentage decrease is 5.2% equaling \$351,330 which impacts treatment and prevention programs.

Program identified under spent prior year SAPT funding and 2011 Realignment funds to backfill the reduction for the treatment services portion of the reduction. The 2011 Realignment funds are primarily used to fund Drug Medi-Cal services, which is an entitlement program. The current anticipated need of 2011 Realignment funds for the entitlement services are below the amount of funding available, which allows program to shift the anticipated unspent funding to backfill the loss of SAPT funds for treatment services provided by the contractors. The shifting of the \$174,225 in 2011 Realignment funds will be monitored closely in conjunction with the level of demand for Drug Medi-Cal services.

Program was not able to identify additional funding to backfill for the \$72,808 reduction to the prevention programs. This reduction will be shared among the ten prevention provider contracts and will decrease system, delay data collection/program evaluation, and increase staff workloads. If the actual amount is different than the amount anticipated, program will make the appropriate changes to remain within the available funds.

Potential Impact on other Departments/Program Partners: Impact on the community and other programs as the individuals receiving the prevention services will no longer receive services.

7. Program Title: Family and Children Programs

Program Description: 'Family & Children's Services: Child Health & Disability Prevention (CHDP), Health Care Program for Children in Foster Care (HCPCFC), Children Home Visiting Program-Nurse Family Partnership (CHVP-NFP), Maternal, Child and Adolescent Health (MCAH), The Black Infant Health and Childhood Lead Poisoning Prevention. Programs address the health and primary needs of infants, foster care children, mothers, children and adolescents, and their families. Investigates cases of lead poisoning and works with providers in the community to increase access to health care for low income children and families.

	Base	Unfunded	Recommended	Percentage
Appropriations	\$6,558,584	\$84,772	\$6,473,812	1.3%
Reimbursements (-)	-42,193	0	-42,193	0.0%
Net Appropriations	6,516,391	84,772	6,431,619	1.3%
Revenues:				
Federal	4,265,323	0	4,265,323	0.0%
State	1,132,844	0	1,132,844	0.0%
Realignment	676,465	0	676,465	0.0%
Prop 172	0	0	0	
Fees	0	0	0	
Other	3,500	0	3,500	0.0%
Total Revenues	6,078,132	0	6,078,132	0.0%
Carryover	0	0	0	
Net Cost	\$438,259	\$84,772	\$353,487	19.3%
Fulltime Equivalent Positions	35.0	0.0	35.0	0.0%

Categorical Reduction: \$46,500 Non-categorical Reduction: \$38,272

Program Impact:

Other revenues in the amount of \$46,500 ended in FY 12-13. This fund was granted by California Wellness endowment and provided Nurse Family Partnership's client with resources not included in the main funding. The resources will no longer be available to the client.

Reduction in realignment will impact several operating expense accounts including interpreting services, client transportation, printing services, office supplies and others. Program will try to find less expensive options to mitigate the impact to the community.

Potential Impact on other Departments/Program Partners: N/A

8. Program Title: Health Officer Program

Program Description: Communicable Disease Control, STD Control, epidemiology, immunizations, record births and deaths, public health emergency preparedness and response, support services for low income persons with HIV/AIDS, education programs to prevent sexually transmitted diseases, chronic disease, teen pregnancy, childhood and elderly illness and injury, and nutrition education. The Public Health Laboratory provides testing for tuberculosis, rabies, salmonella, sexually transmitted diseases, water borne diseases, pandemic flu and any other disease that may threaten the community's well-being, including agents used in bioterrorism. In addition, the Chest Clinic, that provides Tuberculosis services to the Sacramento residents, was added to the Health Officer Proposed Budget in FY 13-14.

	Base	Unfunded	Recommended	Percentage
Appropriations	\$20,252,848	\$270,268	\$19,982,580	1.3%
Reimbursements (-)	-1,931,619	0	-1,931,619	0.0%
Net Appropriations	18,321,229	270,268	18,050,961	1.5%
Revenues:				
Federal	8,323,459	0	8,323,459	0.0%
State	2,451,011	0	2,451,011	0.0%
Realignment	579,297	0	579,297	0.0%
Prop 172	0	0	0	
Fees	1,317,286	0	1,317,286	0.0%
Other	973,790	0	973,790	0.0%
Total Revenues	13,644,843	0	13,644,843	0.0%
Carryover	0	0	0	
Net Cost	\$4,676,386	\$270,268	\$4,406,118	5.8%
Fulltime Equivalent Positions	89.6	1.0	88.6	1.1%

Categorical Reduction: \$145,970 Non-categorical Reduction: \$124,298

Program Impact: The realignment reduction will result in the elimination of 1.0 FTE Public Health Microbiologist (vacant) position and the reduction of the Public Health Laboratory's capability to respond to County wide disease outbreaks, which in turn reduced the safety and security of County residents. Potential reductions of the Public Health Emergency Preparedness Grant due to Sequestration will impact training and proficiency testing for Select Agents. The turnaround time for some testing results will increase.

Consolidating the Laboratory Budget Unit and the Chest Clinic Tuberculosis Program into the Health Officer's budget resulted in restructuring of reimbursements and revenues.

Reduction in the Public Health Emergency Preparedness grant were less than previously expected and reductions for FY 13-14 will be covered with carry-over funds from FY 12-13 that is allowed under the terms of the grant.

The final allocation for Ryan White is unknown at this time but reductions will impact HIV/AIDS services in the community and the contracts with the Community Based Organizations will be reduced according the HIV Planning Council priorities.

Potential Impact on other Departments/Program Partners: The County Primary Care Clinic, Main Jail, RCCC, community clinics, UC Davis and all hospitals in the region and health providers who send in specimens to test for respiratory illnesses, STDs, norovirus and other gastrointestinal illnesses and TB tests will experience delays in receiving results. All Sacramento County Animal Control programs as well as those in El Dorado, Yolo County and others who participate in Rabies control will experience delays in getting test results. This will also impact members of the public who may have been exposed to food-borne illnesses or bitten by a possibly rabid animal as they may experience longer waits in getting test results. Law enforcement and those possibly exposed to a biological weapon may also experience delays in getting test results.