

**MASTER AGREEMENT**

THIS AGREEMENT is made and entered into this 9th day of June, 2020, by and between the COUNTY OF FRESNO, a Political Subdivision of the State of California, hereinafter referred to as "COUNTY", and each CONTRACTOR, listed in Exhibit A "List of Contractors", attached hereto and by this reference incorporated herein, and collectively hereinafter referred to as "CONTRACTOR(S)", and such additional CONTRACTOR(S) as may, from time to time during the term of this Agreement, be added by COUNTY. Reference in this Agreement to "parties" shall be understood to refer to COUNTY and each individual CONTRACTOR, unless otherwise specified.

**WITNESSETH:**

WHEREAS, COUNTY, through its Department of Behavioral Health (DBH), is in need of qualified agencies to operate Full-Service Partnership (FSP) program sites that provide comprehensive mental health, housing, employment support and community supports to adults and older adults with a serious mental illness (SMI); and

WHEREAS, COUNTY, through its DBH, is a Mental Health Plan (MHP) as defined in Title 9 of the California Code of Regulations (C.C.R.), Section 1810.226; and

WHEREAS, CONTRACTOR(S) are qualified and willing to operate said FSP program sites and provide services pursuant to the terms and conditions of this Agreement.

NOW, THEREFORE, in consideration of their mutual covenants and conditions, the parties hereto agree as follows:

**1. COVERED SERVICES**

A. CONTRACTOR(S) shall perform all services and fulfill all responsibilities as set forth in Exhibit B, "Mental Health Services Act (MHSA) Full-Service Partnership (FSP) Program Overview", attached hereto and by this reference incorporated herein and made part of this Agreement. CONTRACTOR(S) shall also perform all services and fulfill all responsibilities as set forth in their individual "Scope of Work" documents approved by the COUNTY's DBH Director, or designee, and attached hereto as Exhibits B-1 *et. seq.* and incorporated herein by reference. In addition, all services identified as Full-Service Partnership (FSP) services shall be performed in accordance with Exhibit C, "Full-Service Partnership Service Delivery Model", attached hereto and by this reference incorporated

1 herein.

2 B. CONTRACTOR(S) shall also perform all services and fulfill all responsibilities as  
3 specified in COUNTY's Request for Proposal (RFP) No. 20-026 dated November 18, 2019, Addendum  
4 No. One (1) dated December 19 2019, hereinafter collectively referred to as COUNTY's Revised RFP  
5 No. 20-026, all incorporated herein by reference and made part of this Agreement. In the event of any  
6 inconsistency among these documents, the inconsistency shall be resolved by giving precedence in the  
7 following order of priority: (1) to this Agreement, including all Exhibits; (2) to COUNTY's Revised RFP  
8 No. 20-026; and (3) to CONTRACTOR(S)' Response to COUNTY's Revised RFP No. 20-026. A copy  
9 of the COUNTY's Revised RFP No. 20-026 and CONTRACTOR(S)' Response to COUNTY's Revised  
10 RFP No. 20-026 shall be retained and made available during the term of this Agreement by COUNTY's  
11 Internal Services Department – Purchasing Division.

12 C. CONTRACTOR(S) shall align programs, services, and practices with the vision,  
13 mission, and guiding principles of the DBH, as further described in Exhibit D, "Fresno County  
14 Department of Behavioral Health Guiding Principles of Care Delivery", attached hereto and by this  
15 reference incorporated herein and made part of this Agreement.

16 D. CONTRACTOR(S) shall send to County's DBH upon execution of this  
17 Agreement, a detailed plan ensuring clinically appropriate leadership and supervision of their clinical  
18 program. Recruitment and retaining clinical leadership with the clinical competencies to oversee  
19 services based on the level of care and program design presented herein shall be included in this plan.

20 E. CONTRACTOR(S) shall participate in utilizing and integrating the Reaching  
21 Recovery and other clinical tools and measures as directed by DBH.

22 F. It is COUNTY's expectation that CONTRACTOR(S) shall provide timely access  
23 to services that meet the State of California standards for care. CONTRACTOR(S) shall provide non-  
24 urgent services within ten (10) business days from request/referral to first appointment.  
25 CONTRACTOR(S) shall provide psychiatry services within fifteen (15) business days from  
26 request/referral to first appointment. CONTRACTOR(S) shall provide urgent services as soon as  
27 needed based on each individual's needs. CONTRACTOR(S) shall track timeliness of services to  
28 individuals and provide a monthly report showing the monitoring or tracking tool that captures said data.

1 COUNTY and CONTRACTOR(S) shall meet to go over this monitoring tool on a monthly basis as  
2 needed. COUNTY shall take corrective action if there is a failure to comply by an individual  
3 CONTRACTOR with the above timely access standards. CONTRACTOR(S) shall also provide tracking  
4 tools and measurements for effectiveness, efficiency, and client satisfaction indicators as required by  
5 Commission on Accreditation of Rehabilitation Facilities (CARF) standards and as further detailed in  
6 Exhibit B and Exhibits B-1 *et. seq.*

7 G. CONTRACTOR(S)' service delivery site of the FSP Services program will be  
8 identified and designated as stated in Exhibit A. Any change to CONTRACTOR(S)' service site location  
9 may be made upon thirty (30) days advance written notification to COUNTY's DBH Director and upon  
10 written approval from COUNTY's DBH Director, or designee.

11 H. CONTRACTOR(S) shall maintain requirements as an Organizational Provider  
12 throughout this Agreement, as described in Section Seventeen (17) of this Agreement. If for any reason  
13 this status is not maintained by any individual CONTRACTOR, the COUNTY may terminate this  
14 Agreement with the specific CONTRACTOR pursuant to Section Three (3) of this Agreement.

15 I. Each CONTRACTOR agrees that prior to providing services under the terms and  
16 conditions of this Agreement, it shall have appropriate staff hired and trained for program services and  
17 operations, or COUNTY may, in addition to other remedies it may have, suspend referrals or terminate  
18 this Agreement with such individual CONTRACTOR, in accordance with Section Three (3) of this  
19 Agreement.

20 J. This Agreement provides for FSP Services that includes comprehensive mental  
21 health, housing, employment support and community supports to adults and older adults with a SMI  
22 diagnosis and may include FSP services as detailed in Exhibit B and Exhibits B-1 *et. seq.*  
23 CONTRACTOR(S) shall collect, maintain and report all data for FSP Services independent of one  
24 another, including but not limited to: Medi-Cal billing, other insurance billing and reports; staff schedules  
25 and reports; performance measures; monthly invoices and general ledgers; and other data as required.

26 K. CONTRACTOR(S) shall participate in monthly, or as needed, workgroup  
27 meetings consisting of staff from COUNTY's DBH to discuss requirements, data reporting, training,  
28 policies and procedures, overall program operations and any problems or foreseeable problems that

1 may arise.

2 L. It is acknowledged by all parties hereto that COUNTY's DBH Contracts Division  
3 shall monitor said Adult FSP Services program in accordance with Section Fourteen (14) of this  
4 Agreement.

5 **2. TERM**

6 The term of this Agreement shall become effective retroactive to June 1, 2020 through  
7 and including June 30, 2023.

8 This Agreement may be extended for two (2) additional consecutive (12) month periods  
9 upon written approval of COUNTY and each individual CONTRACTOR no later than sixty (60) days  
10 prior to the first day of the next twelve (12) month extension. The COUNTY's DBH Director, or  
11 designee, is authorized to execute such written approval on behalf of COUNTY based on the individual  
12 CONTRACTOR'S satisfactory performance.

13 CONTRACTOR(S) added to this Agreement after the execution date shall become part  
14 of the Agreement effective upon the date the executed signature page is received and approved by the  
15 COUNTY's DBH Director, or designee, as set forth in Section Eleven (11) of this Agreement.

16 The June 30th termination date specified herein shall be the termination date for all  
17 CONTRACTOR(S), regardless of when CONTRACTOR is added to this Agreement. Any twelve (12)  
18 month renewal period of this Agreement for any CONTRACTOR already providing services under this  
19 Agreement shall commence on July 1st of the then current fiscal year.

20 **3. TERMINATION**

21 A. Non-Allocation of Funds - The terms of this Agreement, and the services to be  
22 provided thereunder, are contingent on the approval of funds by the appropriating government agency.  
23 Should sufficient funds not be allocated, the services provided may be modified, or this Agreement  
24 terminated at any time by giving the CONTRACTOR(S) sixty (60) days advance written notice.

25 B. Breach of Contract - COUNTY may immediately suspend or terminate this  
26 Agreement in whole or in part, where in the determination of the COUNTY there is:

- 27 1) An illegal or improper use of funds;  
28 2) A failure to comply with any term of this Agreement;

- 3) A substantially incorrect or incomplete report submitted to the COUNTY; and
- 4) Improperly performed service.

In no event shall any payment by COUNTY constitute a waiver by COUNTY of any breach of this Agreement or any default which may then exist on the part of any individual CONTRACTOR. Neither shall such payment impair or prejudice any remedy available to COUNTY with respect to the breach or default. The COUNTY shall have the right to demand of each CONTRACTOR the repayment to the COUNTY of any funds disbursed to such CONTRACTOR under this Agreement, which in the judgment of COUNTY were not expended in accordance with the terms of this Agreement. Each CONTRACTOR shall promptly refund any funds upon demand or, at COUNTY's option, such repayment shall be deducted from future payments owing to such CONTRACTOR under this Agreement.

C. Without Cause - Under circumstances other than those set forth above, this Agreement may be terminated by COUNTY or COUNTY's DBH Director, or designee, or one (1) or more CONTRACTOR(S) upon the giving of sixty (60) days advance written notice of an intention to terminate.

**4. COMPENSATION**

COUNTY agrees to pay CONTRACTOR(S) and CONTRACTOR(S) agree to receive compensation for actual expenditures incurred in accordance with the individual CONTRACTOR's budget documents approved by the COUNTY's DBH Director, or designee, attached hereto as Exhibits E-1 *et. seq.* and incorporated herein by this reference.

A. Annual Compensation Amounts

For the time period of June 1, 2020 through August 30, 2020, in no event shall the maximum compensation amount under this Agreement exceed One Million, Two Hundred Forty-Three Thousand, Thirty-Six and No/100 Dollars (\$1,243,036.00) for all CONTRACTOR(S) combined.

For the time period of September 1, 2020 through June 30, 2021, in no event shall the maximum compensation amount under this Agreement exceed Eleven Million, Four Hundred Ninety-Seven Thousand, Two Hundred Forty-Six and No/100 Dollars (\$11,497,246.00) for all CONTRACTOR(S) combined.

1 For the time period of July 1, 2021 through June 30, 2022, in no event shall the  
2 maximum compensation amount under this Agreement exceed Seventeen Million, Fifteen Thousand,  
3 Three Hundred Seventy-One and No/100 Dollars (\$17,015,371.00) for all CONTRACTOR(S)  
4 combined.

5 For the time period of July 1, 2022 through June 30, 2023, in no event shall the  
6 maximum compensation amount under this Agreement exceed Seventeen Million, Six Hundred  
7 Twenty-Two Thousand, Three Hundred Eighty-Eight and No/100 Dollars (\$17,622,388.00) for all  
8 CONTRACTOR(S) combined.

9 If performance standards are met and this Agreement is extended for an  
10 additional twelve (12) month extension period beginning July 1, 2023 through June 30, 2024, pursuant  
11 to Section Two (2), TERM, herein, then in no event shall the maximum compensation amount under  
12 this Agreement for the first twelve (12) month extension period exceed Eighteen Million, One Hundred  
13 Ninety-Eight Thousand, One Hundred Seventy-Five and No/100 Dollars (\$18,198,175.00) for all  
14 CONTRACTOR(S) combined.

15 If performance standards are met and this Agreement is extended for an  
16 additional twelve (12) month extension period beginning July 1, 2024 through June 30, 2025, pursuant  
17 to Section Two (2), TERM, herein, then in no event shall the maximum compensation amount under  
18 this Agreement for the second twelve (12) month extension period exceed Eighteen Million, Eight  
19 Hundred Six Thousand, Two Hundred Sixty-Three and No/100 Dollars (\$18,806,263.00) for all  
20 CONTRACTOR(S) combined.

21 The maximum amounts paid to each CONTRACTOR identified in this Agreement  
22 shall be as stated in the individual CONTRACTOR(S)' "Budget & Budget Narrative" documents  
23 approved by the COUNTY's DBH Director, or designee, as attached in Exhibits E-1 *et. seq.*

24 B. Total Maximum Compensation Amounts

25 In no event shall the total maximum compensation amount under this Agreement  
26 for the time period beginning effective upon execution through June 30, 2023 exceed Forty-Seven  
27 Million, Three Hundred Seventy-Eight Thousand, Forty-One and No/100 Dollars (\$47,378,041.00) for  
28 all CONTRACTOR(S) combined.

1 If performance standards are met and this Agreement is extended for an  
2 additional twelve (12) month renewal period beginning July 1, 2023 through June 30, 2024, pursuant to  
3 Section Two (2), TERM, then in no event shall the total maximum compensation amount under this  
4 Agreement exceed Sixty-Five Million, Five Hundred Seventy-Six Thousand, Two Hundred Sixteen and  
5 No/100 Dollars (\$65,576,216.00) for all CONTRACTOR(S) combined.

6 If performance standards are met and this Agreement is extended for a second  
7 additional twelve (12) month renewal period beginning July 1, 2024 through June 30, 2025, pursuant to  
8 Section Two (2), TERM, then in no event shall the total maximum compensation amount under this  
9 Agreement exceed Eighty-Four Million, Three Hundred Eighty-Two Thousand, Four Hundred Seventy-  
10 Nine and No/100 Dollars (\$84,382,479.00) for all CONTRACTOR(S) combined.

11 C. Prior to March 1st of each fiscal year, CONTRACTOR(S) may provide to  
12 COUNTY's DBH an updated budget and budget narrative in the format identified in Exhibits E-1 *et. seq.*  
13 for the upcoming twelve (12) month period. Each budget shall require justification by the  
14 CONTRACTOR(S), and approval of COUNTY's DBH Director, or designee, prior to April 1st for the  
15 upcoming twelve (12) month period covered by said budget. If said budget is not received by the March  
16 1st due date, the budget as attached to this Agreement for the upcoming twelve (12) month period will  
17 remain, as shown in Exhibits E-1 *et. seq.* The amount of said approved budget shall not exceed the  
18 maximum compensation for the then current Agreement period.

19 D. If CONTRACTOR(S) fail to generate the Medi-Cal revenue and/or client fee  
20 reimbursement amounts as set forth in the individual CONTRACTOR's budgets in Exhibits E-1 *et. seq.*,  
21 the COUNTY shall not be obligated to pay the difference between these estimated amounts and the  
22 actual amounts generated. It is further understood by COUNTY and CONTRACTOR(S) that any Medi-  
23 Cal revenue and/or client fee reimbursements above the amounts stated herein will be used to directly  
24 offset the COUNTY's contribution of funds identified in Exhibits E-1 *et. seq.* The offset of funds will also  
25 be clearly identified in monthly invoices received from CONTRACTOR(S) as further described in  
26 Section Five (5) of this Agreement.

27 E. Travel shall be reimbursed based on actual expenditures and mileage  
28 reimbursement shall be at CONTRACTOR(S)' adopted rate per mile, not to exceed the then current

1 Federal Internal Revenue Services (IRS) published rate.

2 F. It is understood that all expenses incidental to CONTRACTOR(S)' performance  
3 of services under this Agreement shall be borne by CONTRACTOR(S). If CONTRACTOR(S) fail to  
4 comply with any provision of this Agreement, COUNTY shall be relieved of its obligation for further  
5 compensation.

6 G. Payments shall be made by COUNTY to CONTRACTOR(S) in arrears for  
7 services provided during the preceding month, within forty-five (45) days after the date of receipt and  
8 approval by COUNTY of the monthly invoicing as described in Section Five (5) herein. Payments shall  
9 be made after receipt and verification of services provided in the performance of this Agreement, in  
10 accordance with the individual "Scope of Work" as provided for in Exhibits B-1 *et. seq.*, and shall be  
11 documented to COUNTY on a monthly basis by the tenth (10th) of the month following the month of  
12 said service provision.

13 H. COUNTY shall not be obligated to make any payments under this Agreement if  
14 the request for payment is received by COUNTY more than sixty (60) days after this Agreement has  
15 terminated or expired.

16 I. All final invoices and/or any final budget modification requests shall be submitted  
17 by CONTRACTOR(S) within sixty (60) days following the final month of service for which payment is  
18 claimed. No action shall be taken by COUNTY on invoices submitted beyond the sixty (60) day  
19 closeout period. Any compensation which is not expended by CONTRACTOR(S) pursuant to the terms  
20 and conditions of this Agreement shall automatically revert to COUNTY.

21 J. The services provided by CONTRACTOR(S) under this Agreement are funded in  
22 whole or in part by the State of California. In the event that funding for these services is delayed by the  
23 State Controller, COUNTY may defer payments to CONTRACTOR(S). The amount of the deferred  
24 payment shall not exceed the amount of funding delayed by the State Controller to the COUNTY. The  
25 period of time of the deferral by COUNTY shall not exceed the period of time of the State Controller's  
26 delay of payment to COUNTY plus forty-five (45) days.

27 K. CONTRACTOR(S) shall be held financially liable for any and all future  
28 disallowances/audit exceptions due to CONTRACTOR(S)' deficiency discovered through the applicable



1 State's audit process and MHP's utilization review process during the course of the Agreement. At  
2 COUNTY's election, the disallowed amount will be remitted within forty-five (45) days to COUNTY upon  
3 notification or shall be withheld from subsequent payments to CONTRACTOR(S). CONTRACTOR(S)  
4 shall not receive reimbursement for any units of services rendered that are disallowed or denied by the  
5 applicable MHP utilization review process or through the State Department of Health Care Services  
6 (DHCS) cost report audit settlement process for Medi-Cal eligible clients.

7 L. It is understood by CONTRACTOR(S) and COUNTY that this Agreement is  
8 funded with mental health funds to serve adults with SMI disorders, many of whom have co-occurring  
9 substance use disorders. It is further understood by CONTRACTOR(S) and COUNTY that funds shall  
10 be used to support appropriately integrated and documented treatment services for co-occurring mental  
11 health and substance use disorders in the target population, and that integrated services can be  
12 documented in assessments, interventions, and program notes documenting linkages.

13 **5. INVOICING**

14 A. CONTRACTOR(S) shall invoice COUNTY in arrears by the tenth (10<sup>th</sup>) of each  
15 month for actual services provided during the prior month to [DBHInvoices@fresnocountyca.gov](mailto:DBHInvoices@fresnocountyca.gov),  
16 [DBHInvoiceReview@fresnocountyca.gov](mailto:DBHInvoiceReview@fresnocountyca.gov) and a carbon copy email to the assigned DBH Mental Health  
17 Contracts Staff Analyst. After CONTRACTOR(S) renders service to referred clients, CONTRACTOR(S)  
18 shall invoice COUNTY for payment, certify the expenditure, and submit electronic claiming into  
19 COUNTY's electronic information system for all clients, including those eligible for Medi-Cal as well as  
20 those that are not eligible for Medi-Cal, including contracted cost per unit and actual cost per unit.  
21 Invoices and reports shall be in such detail as acceptable to COUNTY's DBH, as described in this  
22 Section Five (5) herein and in Section Fourteen (14) of this Agreement. Billing information must include  
23 the client's name, patient identification number, date of service, type of mental health service provided,  
24 duration of service, client's International Classification of Diseases (ICD) diagnosis, service provider  
25 name, units of service provided, rate of service provided, and actual amount of service. No  
26 reimbursement for services shall be made until the invoice, claims certification, and back-up  
27 documentation is received, verified and approved by COUNTY's DBH. COUNTY must pay  
28 CONTRACTOR before submitting a claim to DHCS for Federal reimbursement for Medi-Cal eligible

1 clients.

2           B.       CONTRACTOR shall submit monthly invoices and general ledgers that itemize  
3 the line item charges for monthly program costs (per applicable budget, as identified in Exhibit E-1 *et*.  
4 *seq.*), including the cost per unit calculation based on clients served within that month, and excluding  
5 unallowable costs. Unallowable costs such as lobbying or political donations must be deducted from the  
6 monthly invoice reimbursements. The invoices and general ledgers will serve as tracking tools to  
7 determine if CONTRACTOR's program costs are in accordance with its budgeted cost, and cost per  
8 unit negotiated by service modes compared to actual cost per unit, as set forth in Exhibit E-1 *et. seq.*  
9 The actual cost per unit will be based upon total costs and total units of service. It will also serve for the  
10 COUNTY to certify the public funds expended for purposes of claiming Federal and State  
11 reimbursement for the cost of Medi-Cal services and activities.

12           C.       Monthly invoices shall include a client roster, identifying volume reported by  
13 payer group clients served (including third party payer of services) by month and year-to-date, including  
14 percentages.

15           D.       If CONTRACTOR(S) choose to utilize the COUNTY's electronic health record  
16 (EHR) system (currently "AVATAR", the DBH contracted EHR system) method as their own full EHR,  
17 COUNTY's DBH shall invoice CONTRACTOR(S) in arrears by the fifth (5<sup>th</sup>) day of each month for the  
18 prior month's hosting fee for access to the COUNTY's electronic information system in accordance with  
19 the fee schedule as set forth in Exhibit F, "Electronic Health Records Software Charges" attached  
20 hereto and incorporated herein by reference. COUNTY shall invoice CONTRACTOR annually for the  
21 annual maintenance and licensing fee for access to the COUNTY's electronic information system in  
22 accordance with the fee schedule as set forth in Exhibit F. COUNTY shall also invoice  
23 CONTRACTOR(S) annually for the Reaching Recovery fee for access to the COUNTY's electronic  
24 information system in accordance with the fee schedule as set forth in Exhibit F. CONTRACTOR shall  
25 provide payment for these expenditures to Fresno County Department of Behavioral Health, Accounts  
26 Receivable, P.O. Box 712, Fresno, CA 93717-0712, Attention: Business Office, within forty-five (45)  
27 days after the date of receipt by CONTRACTOR(S) of the invoicing provided by COUNTY.\

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1           E.       At the discretion of COUNTY's DBH Director, or designee, if an invoice is  
2 incorrect or is otherwise not in proper form or substance, COUNTY's DBH Director, or designee, shall  
3 have the right to withhold payment as to only that portion of the invoice that is incorrect or improper  
4 after five (5) days prior notice to CONTRACTOR(S). CONTRACTOR(S) agrees to continue to provide  
5 services for a period of ninety (90) days after notification of an incorrect or improper invoice. If after the  
6 ninety (90) day period, the invoice(s) is still not corrected to COUNTY DBH's satisfaction, COUNTY's  
7 DBH Director, or designee, may elect to terminate this Agreement, pursuant to the termination  
8 provisions stated in Section Three (3) of this Agreement. In addition, for invoices received ninety (90)  
9 days after the expiration of each term of this Agreement or termination of this Agreement, at the  
10 discretion of COUNTY's DBH Director, or designee, COUNTY's DBH shall have the right to deny  
11 payment of any additional invoices received.

12           F.       CONTRACTOR(S) must report all third-party collections from other funding  
13 sources such as private insurance, client private pay or any other third party. COUNTY expects the  
14 invoice for reimbursement to equal the amount due CONTRACTOR less any funding sources not  
15 eligible for Federal reimbursement and any other revenues generated by CONTRACTOR (i.e., private  
16 insurance, etc.).

17           G.       CONTRACTOR(S) shall submit monthly staffing reports that identify all direct  
18 service and support staff, applicable licensure/certifications, and FTE hours worked to be used as a  
19 tracking tool to determine if CONTRACTOR(S)' program is staffed according to the services provided  
20 under this Agreement.

21           H.       CONTRACTOR(S) will remit annually within ninety (90) days from June 30, a  
22 schedule to provide the required information on published charges for all authorized direct specialty  
23 mental health services. The published charge listing will serve as a source document to determine each  
24 CONTRACTOR's usual and customary charge prevalent in the public mental health sector that is used  
25 to bill the general public, insurers or other non-Medi-Cal third party payers during the course of  
26 business operations.

27           I.       CONTRACTOR(S) must maintain such financial records for a period of seven (7)  
28 years, or if there a dispute, audit or inspection, until it is resolved, whichever is later. CONTRACTOR(S)

1 will be responsible for any disallowances related to inadequate documentation.

2 J. CONTRACTOR(S) are responsible for collection and managing data in a manner  
3 to be determined by DHCS and the DBH MHP in accordance with applicable rules and regulations.  
4 COUNTY's electronic information system is a critical source of information for purposes of monitoring  
5 and obtaining reimbursement. CONTRACTOR(S) must attend the COUNTY DBH's Business Office  
6 training on documentation and billing and related cost reporting.

7 K. CONTRACTOR(S) shall submit service data into COUNTY's electronic  
8 information system within thirty (30) calendar days from the date services were rendered. Federal and  
9 State reimbursement for Medi-Cal specialty mental health services is based on public expenditures  
10 certified by the CONTRACTOR(S). CONTRACTOR(S) must submit a signed certified public  
11 expenditure report in the monthly invoice. DHCS expects the claim for Federal and State  
12 reimbursement to equal the amount the COUNTY paid the CONTRACTOR(S) for the services rendered  
13 less any funding sources not eligible for Federal reimbursement.

14 L. CONTRACTOR(S) must provide all necessary data to allow the COUNTY to bill  
15 Medi-Cal, and any other third-party source, for services and meet State and Federal reporting  
16 requirements. The necessary data can be provided by a variety of means, including but not limited to:  
17 1) direct data entry into COUNTY's electronic information system; 2) providing an electronic file  
18 compatible with COUNTY's electronic information system; or 3) integration between COUNTY's  
19 electronic information system and CONTRACTOR(S)' information system(s).

20 M. If a client has dual coverage, such as other health coverage (OHC) or Federal  
21 Medicare, the CONTRACTOR(S) will be responsible for billing the carrier and obtaining a  
22 payment/denial or have validation of claiming with no response ninety (90) days after the claim was  
23 mailed before the service can be entered into the COUNTY's electronic information system.  
24 CONTRACTOR(S) must report all revenue collected from OHC, Medicare, third-party, or private-pay in  
25 each monthly invoice and in the annual cost report that is required to be submitted. A copy of  
26 explanation of benefits or CWM 1500 is required as documentation. CONTRACTOR(S) must comply  
27 with all laws and regulations governing MediCare program, including, but not limited to: 1) the  
28 requirement of the Medicare Act, 42 U.S.C. Section 1395 *et seq.*; and 2) the regulation and rules

1 promulgated by the Centers for Medicare and Medicaid Services as they relate to participation,  
2 coverage and claiming reimbursement. CONTRACTOR(S) will be responsible for compliance as of the  
3 effective date of each federal, state or local law or regulation specified.

4 N. Data entry into COUNTY's electronic information system shall be the  
5 responsibility of the CONTRACTOR(S). The direct specialty mental health services data must be  
6 reconciled by the CONTRACTOR(S) to the monthly invoices submitted for payment. COUNTY shall  
7 monitor the volume of services and cost of services entered into the COUNTY's electronic information  
8 system. Any and all audit exceptions resulting from the provision and reporting of Medi-Cal services by  
9 CONTRACTOR(S) shall be the sole responsibility of the CONTRACTOR(S). CONTRACTOR(S) will  
10 comply with all applicable policies, procedures, directives and guidelines regarding the use of  
11 COUNTY's electronic information system. If CONTRACTOR(S) elects to use their own EHR system,  
12 the EHR must have Certification Commission for Healthcare Information Technology (CCHIT)  
13 certification for Security Access Control, Audit and Authentication. CONTRACTOR(S)' billers in the  
14 EHR system will need to sign an Electronic Signature Certification (ESR).

15 O. Medi-Cal Certification and Mental Health Plan Compliance

16 CONTRACTOR(S) shall establish and maintain Medi-Cal certification or become  
17 certified within ninety (90) days of the start of each CONTRACTOR's term within this Agreement. In  
18 addition, CONTRACTOR shall work with the COUNTY's DBH to execute the process if not currently  
19 certified by COUNTY for credentialing of staff. During this process, the CONTRACTOR(S) will obtain a  
20 legal entity number established by the DHCS, as this is a requirement for maintaining MHP  
21 organizational provider status throughout the term of this Agreement. CONTRACTOR(S) will be  
22 required to become Medi-Cal certified prior to providing direct specialty mental health services to Medi-  
23 Cal eligible clients and seeking reimbursement from the COUNTY for costs associated with direct  
24 specialty mental health services. CONTRACTOR(S) will not be reimbursed by COUNTY for any direct  
25 specialty mental health services rendered prior to certification.

26 CONTRACTOR(S) shall provide specialty mental health services in accordance  
27 with the COUNTY's MHP. CONTRACTOR(S) must comply with the "Fresno County Mental Health Plan  
28 Compliance Program and Code of Conduct" set forth in Exhibit G, attached hereto and incorporated

1 herein by reference and made part of this Agreement.

2 CONTRACTOR(S) may provide direct specialty mental health services using  
3 unlicensed staff as long as the individual is approved as a provider by the COUNTY's MHP, is  
4 supervised by licensed staff who met the Board of Behavioral Sciences requirements for supervision,  
5 works within his/her scope, and only delivers allowable direct specialty mental health services.  
6 Unlicensed staff must also be credentialed by COUNTY's DBH Managed Care.

7 It is understood that each service is subject to audit for compliance with Federal  
8 and State regulations and that COUNTY may be making payments in advance of said review. In the  
9 event that a service is disapproved, COUNTY may, at its sole discretion, withhold compensation or  
10 offset from other payments due, the amount of said disapproved services. CONTRACTOR(S) shall be  
11 responsible for audit exceptions to ineligible dates of services or incorrect application of utilization  
12 review requirements.

13 **6. INDEPENDENT CONTRACTOR**

14 In performance of the work, duties, and obligations assumed by CONTRACTOR(S)  
15 under this Agreement, it is mutually understood and agreed that CONTRACTOR(S), including any and  
16 all of CONTRACTOR(S)' officers, agents, and employees will at all times be acting and performing as  
17 independent contractors, and shall act in an independent capacity and not as an officer, agent, servant,  
18 employee, joint venture, partner, or associate of COUNTY. Furthermore, COUNTY shall have no right  
19 to control or supervise or direct the manner or method by which each CONTRACTOR shall perform its  
20 work and function. However, COUNTY shall retain the right to administer this Agreement so as to verify  
21 that each CONTRACTOR is performing their obligations in accordance with the terms and conditions  
22 thereof. CONTRACTOR(S) and COUNTY shall comply with all applicable provisions of law and the  
23 rules and regulations, if any, of governmental authorities having jurisdiction over matters which are  
24 directly or indirectly the subject of this Agreement.

25 Because of its status as an independent contractor, each CONTRACTOR shall have  
26 absolutely no right to employment rights and benefits available to COUNTY employees. Each  
27 CONTRACTOR shall be solely liable and responsible for providing to, or on behalf of, its employees all  
28 legally-required employee benefits. In addition, CONTRACTOR(S) shall be solely responsible and save

1 COUNTY harmless from all matters relating to payment of CONTRACTOR(S)' employees, including  
2 compliance with Social Security, withholding, and all other regulations governing such matters. It is  
3 acknowledged that during the term of this Agreement, CONTRACTOR(S) may be providing services to  
4 others unrelated to COUNTY or to this Agreement.

5 **7. MODIFICATION**

6 Any matters of this Agreement may be modified from time to time by the written consent  
7 of all the parties without, in any way, affecting the remainder.

8 Notwithstanding the above, changes to services, staffing, and responsibilities of the  
9 CONTRACTOR(S), as set forth in Exhibit B and Exhibits B-1 *et. seq.*, as needed to accommodate  
10 changes in the law relating to mental health and substance use disorder treatment, may be made with  
11 the signed written approval of COUNTY's DBH Director, or designee, and CONTRACTOR(S) through  
12 an amendment approved by COUNTY's Counsel and the COUNTY's Auditor-Controller/Treasurer-Tax  
13 Collector's Office.

14 Changes to expense category (i.e., Personnel Expenses, Operating Expenses, Financial  
15 Services Expenses, etc.) subtotals in the budgets that do not exceed ten percent (10%) of the  
16 maximum compensation payable to the individual CONTRACTOR, changes to the volume of units of  
17 services/types of service units and service rates to be provided as set forth in Exhibits E-1 *et. seq.*,  
18 movement of funds between individual CONTRACTOR's program budgets, and changes to the fee  
19 schedule, as shown in Exhibit F, may be made with the written approval of COUNTY's DBH Director, or  
20 designee. Changes to the expense category subtotals in the budget that exceed ten percent (10%) of  
21 the maximum compensation payable to the individual CONTRACTOR, or changes that exceed the  
22 maximum amount payable to the individual CONTRACTOR, may be made with the signed written  
23 approval of COUNTY's DBH Director, or designee, through an amendment approved by COUNTY's  
24 Counsel and COUNTY's Auditor-Controller/Treasurer-Tax Collector's Office.

25 Said modifications to scope of services, service volume/types of service units, service  
26 rates, expense category subtotals, and/or individual CONTRACTOR's maximum amount payable shall  
27 not result in any change to the total combined maximum compensation amount payable to all  
28 CONTRACTOR(S) under this Agreement, as stated herein.

1           **8.    NON-ASSIGNMENT**

2           COUNTY and CONTRACTOR(S) shall not assign, transfer or subcontract this  
3 Agreement nor their rights or duties under this Agreement without the prior written consent of COUNTY  
4 and the individual CONTRACTOR seeking to make such assignment.

5           **9.    HOLD-HARMLESS**

6           Each CONTRACTOR agrees to indemnify, save, hold harmless, and at COUNTY's  
7 request, defend the COUNTY, its officers, agents and employees from any and all costs and expenses,  
8 including attorney fees and court costs, damages, liabilities, claims and losses occurring or resulting to  
9 COUNTY in connection with the performance, or failure to perform, by each CONTRACTOR, its  
10 officers, agents or employees under this Agreement, and from any and all costs and expenses,  
11 including attorney fees and court costs, damages, liabilities, claims and losses occurring or resulting to  
12 any person, firm or corporation who may be injured or damaged by the performance, or failure to  
13 perform, of CONTRACTOR(S), its officers, agents or employees under this Agreement.

14           Each CONTRACTOR agrees to indemnify COUNTY for Federal, State of California  
15 and/or local audit exceptions resulting from noncompliance herein on the part of the  
16 CONTRACTOR(S).

17           **10. INSURANCE**

18           Without limiting COUNTY's right to obtain indemnification from each CONTRACTOR or  
19 any third parties, each CONTRACTOR, at its sole expense, shall maintain in full force and effect the  
20 following insurance policies throughout the term of this Agreement:

21           A.    Commercial General Liability

22                   Commercial General Liability Insurance with limits of not less than Two Million  
23                   Dollars (\$2,000,000) per occurrence and an annual aggregate of Four Million  
24                   Dollars (\$4,000,000). This policy shall be issued on a per occurrence basis.  
25                   COUNTY may require specific coverages including completed operations,  
26                   product liability, contractual liability, Explosion-Collapse-Underground, fire legal  
27                   liability or any other liability insurance deemed necessary because of the nature  
28                   of the Agreement.

27           B.    Automobile Liability

28                   Comprehensive Automobile Liability Insurance with limits no less than One  
                    Million Dollars (\$1,000,000) per accident for bodily injury and property damage.



1 Coverage should include any automobile used in connection with this  
2 Agreement. If CONTRACTOR(S) employees are not covered by  
3 CONTRACTOR(S) automobile liability insurance policy, CONTRACTOR(S) shall  
4 ensure that each employee as part of this Agreement procures and maintains  
5 their own private automobile coverage in force during the term of this Agreement,  
6 at the employee's sole cost and expense.

7 C. Professional Liability

8 If CONTRACTOR(S) employs licensed professional staff (e.g. Ph.D., R.N.,  
9 L.C.S.W., L.M.F.T., etc.) in providing services, Professional Liability Insurance  
10 with limits of not less than One Million Dollars (\$1,000,000) per occurrence,  
11 Three Million Dollars (\$3,000,000) annual aggregate. CONTRACTOR agrees  
12 that it shall maintain, at its sole expense, in full force and effect for a period of  
13 five (5) years following the termination of this Agreement, one or more policies of  
14 professional liability insurance with limits of coverage as specified herein.

15 D. Real and Property Insurance

16 CONTRACTOR(S) shall maintain a policy of insurance for all risk personal  
17 property coverage which shall be endorsed naming the County of Fresno as an  
18 additional loss payee. The personal property coverage shall be in an amount that  
19 will cover the total of the COUNTY purchase and owned property, at a minimum,  
20 as discussed in Section Twenty-One (21) of this Agreement.

21 All Risk Property Insurance

22 As applicable, CONTRACTOR(S) will provide property coverage for the full  
23 replacement value of the COUNTY'S personal property in possession of  
24 CONTRACTOR(S) and/or used in the execution of this Agreement. COUNTY will  
25 be identified on an appropriate certificate of insurance as the certificate holder  
26 and will be named as an Additional Loss Payee on the Property Insurance Policy.

27 E. Worker's Compensation

28 A policy of Worker's Compensation Insurance as may be required by the  
California Labor Code.

Child Abuse/Molestation and Social Services Coverage

Each CONTRACTOR shall have either separate policies or an umbrella policy  
with endorsements covering Child Abuse/Molestation and Social Services  
Liability coverage or have a specific endorsement on their General Commercial  
liability policy covering Child Abuse/Molestation and Social Services Liability. The  
policy limits for these policies shall be One Million Dollars (\$1,000,000) per  
occurrence with a Two Million Dollars (\$2,000,000) annual aggregate. The  
policies are to be on a per occurrence basis.

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1 G. Cyber Liability

2 Cyber Liability Insurance, with limits not less than Two Million Dollars  
3 (\$2,000,000) per occurrence or claim, Two Million Dollars (\$2,000,000)  
4 aggregate. Coverage shall be sufficiently broad to respond to the duties and  
5 obligations as is undertaken by CONTRACTOR(S) in this Agreement and shall  
6 include, but not be limited to, claims involving infringement of intellectual  
7 property, including but not limited to infringement of copyright, trademark, trade  
8 dress, invasion of privacy violations, information theft, damage to or destruction  
9 of electronic information, release of private information, alteration of electronic  
10 information, extortion and network security. The policy shall provide coverage for  
11 breach response costs as well as regulatory fines and penalties as well as credit  
12 monitoring expenses with limits sufficient to respond to these obligations.

9 H. Waiver of Subrogation

10 CONTRACTOR(S) hereby grants to COUNTY a waiver of any right to  
11 subrogation which any insurer of said CONTRACTOR(S) may acquire against  
12 the COUNTY by virtue of the payment of any loss under such insurance.  
13 CONTRACTOR(S) agrees to obtain any endorsement that may be necessary to  
14 affect this waiver of subrogation, but this provision applies regardless of whether  
15 or not the COUNTY has received a waiver of subrogation endorsement from the  
16 insurer.

15 Each CONTRACTOR shall obtain endorsements to the Commercial General Liability  
16 insurance naming the County of Fresno, its officers, agents, and employees, individually and  
17 collectively, as additional insured, but only insofar as the operations under this Agreement are  
18 concerned. Such coverage for additional insured shall apply as primary insurance and any other  
19 insurance, or self-insurance, maintained by COUNTY, its officers, agents and employees shall be  
20 excess only and not contributing with insurance provided under CONTRACTOR(S)' policies herein.  
21 This insurance shall not be cancelled or changed without a minimum of thirty (30) days advance written  
22 notice given to COUNTY.

23 Within thirty (30) days from the date each CONTRACTOR signs this Agreement, said  
24 CONTRACTOR shall provide certificates of insurance and endorsements as stated above for all of the  
25 foregoing policies, as required herein, to the County of Fresno, Department of Behavioral Health,  
26 Contract Services Division, 3133 N. Millbrook Ave, Fresno, California, 93703, Attention: Mental Health  
27 Contract Staff Analyst, stating that such insurance coverages have been obtained and are in full force;  
28 that the County of Fresno, its officers, agents and employees will not be responsible for any premiums

1 on the policies; that such Commercial General Liability insurance names the County of Fresno, its  
2 officers, agents and employees, individually and collectively, as additional insured, but only insofar as  
3 the operations under this Agreement are concerned; that such coverage for additional insured shall  
4 apply as primary insurance and any other insurance, or self-insurance, maintained by COUNTY, its  
5 officers, agents and employees, shall be excess only and not contributing with insurance provided  
6 under CONTRACTOR(S) policies herein; and that this insurance shall not be cancelled or changed  
7 without a minimum of thirty (30) days advance, written notice given to COUNTY.

8 In the event CONTRACTOR(S) fails to keep in effect at all times insurance coverage as  
9 herein provided, COUNTY may, in addition to other remedies it may have, suspend or terminate this  
10 Agreement upon the occurrence of such event.

11 All policies shall be with admitted insurers licensed to do business in the State of  
12 California. Insurance purchased shall be from companies possessing a current A.M. Best, Inc. rating of  
13 A FSC VII or better.

14 **11. ADDITIONS/DELETIONS OF CONTRACTORS**

15 COUNTY's DBH Director, or designee, reserves the right at any time during the term of  
16 this Agreement to add new CONTRACTOR(S) to those listed in Exhibit A with oversight and approval  
17 by Internal Services Department – Purchasing Division. It is understood any such additions will not  
18 affect compensation paid to any other CONTRACTOR, and therefore such additions may be made by  
19 COUNTY without notice to or approval of the other CONTRACTOR(S) under this Agreement. These  
20 same provisions shall apply to the deletion of any CONTRACTOR(S) contained in Exhibit A, except  
21 that deletions shall be by written mutual agreement between the COUNTY and the particular  
22 CONTRACTOR to be deleted, or shall be in accordance with the provisions of Section Three (3) of this  
23 Agreement.

24 **12. LICENSES/CERTIFICATES**

25 Throughout the term of this Agreement, CONTRACTOR(S) and CONTRACTOR(S)' staff  
26 shall maintain all necessary licenses, permits, approvals, certificates, waivers and exemptions  
27 necessary for the provision of the services hereunder and required by the laws and regulations of the  
28 United States of America, State of California, the County of Fresno, and any other applicable

1 governmental agencies. CONTRACTOR(S) shall notify COUNTY immediately in writing of its inability to  
2 obtain or maintain such licenses, permits, approvals, certificates, waivers and exemptions irrespective  
3 of the pendency of any appeal related thereto. Additionally, CONTRACTOR(S) and CONTRACTOR(S)'  
4 staff shall comply with all applicable laws, rules or regulations, as may now exist or be hereafter  
5 changed.

6 **13. RECORDS**

7 CONTRACTOR(S) shall maintain records in accordance with COUNTY's  
8 "Documentation Standards for Client Records," attached hereto as Exhibit H and incorporated herein by  
9 reference. During site visits, COUNTY shall be allowed to review records of services provided, including  
10 the goals and objectives of the treatment plan, and how the therapy provided is achieving the goals and  
11 objectives. All medical records shall be maintained for a minimum of ten (10) years from the date of the  
12 end of the Agreement.

13 **14. REPORTS**

14 A. Outcome Reports

15 CONTRACTOR(S) shall submit to COUNTY's DBH service outcome reports, as  
16 requested by COUNTY's DBH. Outcome reports and outcome requirements are subject to change at  
17 COUNTY's DBH discretion. All performance outcome measures shall adhere to the Commission on  
18 Accreditation of Rehabilitation Facilities (CARF) standards.

19 B. Additional Reports

20 CONTRACTOR(S) shall also furnish to COUNTY such statements, records,  
21 reports, data, and other information as COUNTY may request pertaining to matters covered by this  
22 Agreement. In the event that CONTRACTOR(S) fails to provide such reports or other information  
23 required hereunder, it shall be deemed sufficient cause for COUNTY to withhold monthly payments  
24 until there is compliance. In addition, CONTRACTOR(S) shall provide written notification and  
25 explanation to COUNTY within five (5) days of any funds received from another source to conduct the  
26 same services covered by this Agreement.

27 C. Cost Report

28 CONTRACTOR(S) agrees to submit a complete and accurate detailed Cost

1 Report on an annual basis for each fiscal year ending June 30<sup>th</sup> in the format prescribed by the DHCS  
2 for the purposes of Short Doyle Medi-Cal reimbursements and total costs for programs. The cost report  
3 will be the source document for several phases of settlement with the DHCS for the purposes of Short  
4 Doyle Medi-Cal reimbursement. CONTRACTOR(S) shall report costs under their approved legal entity  
5 number established during the Medi-Cal certification process. The information provided applies to  
6 CONTRACTOR(S) for program related costs for services rendered to Medi-Cal and non-Medi-Cal.  
7 CONTRACTOR(S) will remit a schedule to provide the required information on published charges (PC)  
8 for all authorized services. The report will serve as a source document to determine their usual and  
9 customary charge prevalent in the public mental health sector that is used to bill the general public,  
10 insurers, or other non-Medi-Cal third party payers during the course of business operations.  
11 CONTRACTOR(S) must report all collections for Medi-Cal/Medicare services and collections. The  
12 CONTRACTOR(S) shall also submit with the Cost Report a copy of the CONTRACTOR(S)' general  
13 ledger that supports revenues and expenditures and reconciled detailed report of reported total units of  
14 services rendered under this Agreement to the units of services reported by CONTRACTOR(S) to  
15 COUNTY'S electronic information system.

16 Cost Reports must be submitted to the COUNTY as a hard copy with a signed  
17 cover letter and electronic copy of completed DHCS cost report form along with requested support  
18 documents following each fiscal year ending June 30<sup>th</sup>. During the month of September of each year  
19 this Agreement is effective, COUNTY will issue instructions of the annual cost report which indicates  
20 the training session, DHCS cost report template worksheets, and deadlines to submit, as determined by  
21 State annually. CONTRACTOR(S) shall remit a hard copy of cost report to County of Fresno, Attention:  
22 Cost Report Team, PO BOX 45003, Fresno CA 93718. CONTRACTOR(S) shall remit the electronic  
23 copy or any inquiries to [DBHCostReportTeam@fresnocountyca.gov](mailto:DBHCostReportTeam@fresnocountyca.gov).

24 All Cost Reports must be prepared in accordance with General Accepted  
25 Accounting Principles (GAAP) and Welfare and Institutions Code §§ 5651(a)(4), 5664(a), 5705(b)(3)  
26 and 5718(c). Unallowable costs such as lobby or political donations must be deducted on the Cost  
27 Report and invoice reimbursement.

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1 If the CONTRACTOR(S) does not submit the Cost Report by the deadline,  
2 including any extension period granted by the COUNTY, the COUNTY may withhold payments of  
3 pending invoicing under compensation until the cost report has been submitted and clears COUNTY  
4 desk audit for completeness.

5 D. Settlements with State Department of Health Care Services (DHCS)

6 During the term on this Agreement and thereafter, COUNTY and  
7 CONTRACTOR(S) agree to settle dollar amounts disallowed or settled in accordance with DHCS audit  
8 settlement findings related to the Medi-Cal and EPSDT reimbursements. CONTRACTOR(S) will  
9 participate in the several phases of settlements between COUNTY/CONTRACTOR(S) and DHCS. The  
10 phases of initial cost reporting for settlement according to State reconciliation of records for paid Medi-  
11 Cal services and audit settlement are: State DHCS audit 1) initial cost reporting - after an internal  
12 review by COUNTY, the COUNTY files cost report with State DHCS on behalf of the  
13 CONTRACTOR(S)' legal entity for the fiscal year; 2) settlement – State reconciliation of records for paid  
14 Medi-Cal services, approximately eighteen (18) to thirty-six (36) months following the State close of the  
15 fiscal year, DHCS will send notice for any settlement under this provision to the COUNTY; 3) Audit  
16 Settlement - State DHCS audit. After final reconciliation and settlement DHCS may conduct a review of  
17 medical records, cost reports along with support documents submitted to COUNTY in initial submission  
18 to determine accuracy and may disallow cost and/or unit of service reported on the CONTRACTOR(S)'  
19 legal entity cost report. COUNTY may choose to appeal and therefore reserves the right to defer  
20 payback settlement with CONTRACTOR(S) until resolution of the appeal. DHCS Audits will follow  
21 federal Medicaid procedures for managing overpayments.

22 If at the end of the Audit Settlement, the COUNTY determines that it overpaid  
23 CONTRACTOR(S), it will require the CONTRACTOR(S) to repay the Medi-Cal related overpayment.  
24 Funds owed to COUNTY will be due within forty-five (45) days of notification by the COUNTY, or  
25 COUNTY shall withhold future payments until all excess funds have been recouped by means of an  
26 offset against any payments then or thereafter owing to CONTRACTOR(S) under this or any other  
27 Agreement.

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1 E. FSP Data Collection and Reporting to DHCS

2 CONTRACTOR(S) shall report client/partner information and outcomes of FSP  
3 program directly into the FSP Data Collection and Reporting (DCR) system. Data shall be submitted  
4 through an online interface using forms set forth in Exhibit I, attached hereto and by this reference  
5 incorporated herein and made part of this Agreement.

6 CONTRACTOR(S) shall submit to COUNTY's DBH by the Fifteenth (15<sup>th</sup>) of each month  
7 all monthly activity, outcome and budget reports for the preceding month. CONTRACTOR(S) shall also  
8 provide records of rents collected from each individual and include the individual's name, date of birth  
9 and social security number. All data transmitted must be in strict conformance with Section Twenty (20)  
10 and Section Twenty-One (21) of this Agreement.

11 **15. MONITORING**

12 CONTRACTOR(S) agree to extend to COUNTY's staff, COUNTY's DBH Director, or  
13 designee, and DHCS, or their designees, the right to review and monitor records, program or  
14 procedures, at any time, in regard to clients, as well as the overall operation of CONTRACTOR(S)'  
15 program, in order to ensure compliance with the terms and conditions of this Agreement.

16 **16. REFERENCES TO LAWS AND RULES**

17 In the event any law, regulation, or policy referred to in this Agreement is amended  
18 during the term thereof, the parties hereto agree to comply with the amended provision as of the  
19 effective date of such amendment.

20 **17. COMPLIANCE WITH STATE REQUIREMENTS**

21 CONTRACTOR(S) recognizes that COUNTY operates its mental health programs under  
22 an agreement with DHCS, and that under said agreement the State imposes certain requirements on  
23 COUNTY and its subcontractors. CONTRACTOR(S) shall adhere to all State Requirements, including  
24 those identified in Exhibit J, "State Mental Health Requirements", attached hereto and by this reference  
25 incorporated herein and made part of this Agreement.

26 **18. COMPLIANCE WITH STATE MEDI-CAL REQUIREMENTS**

27 CONTRACTOR(S) shall be required to maintain organizational provider certification by  
28 COUNTY. CONTRACTOR(S) must meet Medi-Cal organization provider standards as listed in Exhibit

1 K, "Medi-Cal Organizational Provider Standards", attached hereto and by this reference incorporated  
2 herein and made part of this Agreement. It is acknowledged that all references to Organizational  
3 Provider and/or Provider in Exhibit K shall refer to CONTRACTOR(S). In addition, CONTRACTOR(S)  
4 shall inform every client of their rights under the COUNTY's MHP as described in Exhibit L, "Fresno  
5 County Mental Health Plan Grievances and Appeals Process," attached hereto and by this reference  
6 incorporated herein and made part of this Agreement. CONTRACTOR(S) shall also file an incident  
7 report for all incidents involving clients, following the DBH's "Incident Reporting and Intensive Analysis"  
8 policy and procedure guide and using the "Incident Report" worksheet identified in Exhibit M, attached  
9 hereto and by this reference incorporated herein and made part of this Agreement, or a protocol and  
10 worksheet presented by CONTRACTOR(S) that is accepted by COUNTY's DBH Director, or designee.

11 **19. CONFIDENTIALITY**

12 All services performed by CONTRACTOR(S) under this Agreement shall be in strict  
13 conformance with all applicable Federal, State of California and/or local laws and regulations relating to  
14 confidentiality.

15 **20. HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT**

16 COUNTY and CONTRACTOR(S) each consider and represent themselves as covered  
17 entities as defined by the U.S. Health Insurance Portability and Accountability Act of 1996, Public Law  
18 104-191 (HIPAA) and agree to use and disclose protected health information (PHI) as required by law.

19 COUNTY and CONTRACTOR(S) acknowledge that the exchange of PHI between them  
20 is only for treatment, payment, and health care operations.

21 COUNTY and CONTRACTOR(S) intend to protect the privacy and provide for the  
22 security of PHI pursuant to the Agreement in compliance with HIPAA, the Health Information  
23 Technology for Economic and Clinical Health Act, Public Law 111-005 (HITECH), and regulations  
24 promulgated thereunder by the U.S. Department of Health and Human Services (HIPAA Regulations)  
25 and other applicable laws. As part of the HIPAA Regulations, the Privacy Rule and the Security Rule  
26 require CONTRACTOR(S) to enter into a contract containing specific requirements prior to the  
27 disclosure of PHI, as set forth in, but not limited to, Title 45, Sections 164.314(a), 164.502(e) and  
28 164.504(e) of the Code of Federal Regulations (CFR).



1           **21.    DATA SECURITY**

2           For the purpose of preventing the potential loss, misappropriation or inadvertent access,  
3 viewing, use or disclosure of COUNTY data including sensitive or personal client information; abuse of  
4 COUNTY resources; and/or disruption to COUNTY operations, individuals and/or agencies that enter  
5 into a contractual relationship with the COUNTY for the purpose of providing services under this  
6 Agreement must employ adequate data security measures to protect the confidential information  
7 provided to CONTRACTOR(S) by the COUNTY, including but not limited to the following:

8           A.    CONTRACTOR-Owned Mobile, Wireless, or Handheld Devices

9           CONTRACTOR(S) may not connect to COUNTY networks via personally-owned  
10 mobile, wireless or handheld devices, unless the following conditions are met:

- 11                   1)    CONTRACTOR(S) has received authorization by COUNTY for  
12                            telecommuting purposes;  
13                   2)    Current virus protection software is in place;  
14                   3)    Mobile device has the remote wipe feature enabled; and  
15                   4)    A secure connection is used.

16           B.    CONTRACTOR-Owned Computers or Computer Peripherals

17           CONTRACTOR(S) may not bring CONTRACTOR-owned computers or  
18 computer peripherals into the COUNTY for use without prior authorization from the COUNTY's Chief  
19 Information Officer, and/or designee(s), including but not limited to mobile storage devices. If data is  
20 approved to be transferred, data must be stored on a secure server approved by the COUNTY and  
21 transferred by means of a Virtual Private Network (VPN) connection, or another type of secure  
22 connection. Said data must be encrypted.

23           C.    COUNTY-Owned Computer Equipment

24           CONTRACTOR(S) may not use COUNTY computers or computer peripherals on  
25 non-COUNTY premises without prior authorization from the COUNTY's Chief Information Officer,  
26 and/or designee(s).

27           D.    CONTRACTOR(S) may not store COUNTY's private, confidential or sensitive

28 data on any hard-disk drive, portable storage device, or remote storage installation unless encrypted.

1 E. CONTRACTOR(S) shall be responsible to employ strict controls to ensure the  
2 integrity and security of COUNTY's confidential information and to prevent unauthorized access,  
3 viewing, use or disclosure of data maintained in computer files, program documentation, data  
4 processing systems, data files and data processing equipment which stores or processes COUNTY  
5 data internally and externally.

6 F. Confidential client information transmitted to one party by the other by means of  
7 electronic transmissions must be encrypted according to Advanced Encryption Standards (AES) of 128  
8 BIT or higher. Additionally, a password or pass phrase must be utilized.

9 G. CONTRACTOR(S) are responsible to immediately notify COUNTY of any  
10 violations, breaches or potential breaches of security related to COUNTY's confidential information,  
11 data maintained in computer files, program documentation, data processing systems, data files and  
12 data processing equipment which stores or processes COUNTY data internally or externally.

13 H. COUNTY shall provide oversight to CONTRACTOR(S)' response to all incidents  
14 arising from a possible breach of security related to COUNTY's confidential client information provided  
15 to CONTRACTOR(S). CONTRACTOR(S) will be responsible to issue any notification to affected  
16 individuals as required by law or as deemed necessary by COUNTY in its sole discretion.  
17 CONTRACTOR(S) will be responsible for all costs incurred as a result of providing the required  
18 notification.

19 **21. PROPERTY OF COUNTY**

20 A. COUNTY and CONTRACTOR(S) recognizes that fixed assets are tangible and  
21 intangible property obtained or controlled under COUNTY's MHP for use in operational capacity and  
22 will benefit COUNTY for a period more than one year. Depreciation of the qualified items will be on a  
23 straight-line basis.

24 For COUNTY purposes, fixed assets must fulfill three (3) qualifications:

- 25 1. Asset must have life span of over one (1) year.
- 26 2. The asset is not a repair part.
- 27 3. The asset must be valued at or greater than the capitalization thresholds  
28 for the asset type.

<u>Asset type</u>	<u>Threshold</u>
• land	\$0
• buildings and improvements	\$100,000
• infrastructure	\$100,000
• tangible	\$5,000
○ equipment	
○ vehicles	
• intangible asset	\$100,000
○ internally generated software	
○ purchased software	
○ easements	
○ patents	
• and capital lease	\$5,000

Qualified fixed asset equipment is to be reported and approved by COUNTY. If it is approved and identified as an asset, it will be tagged with a COUNTY program number. A "Fixed Asset Log", attached hereto as Exhibit N and by this reference incorporated herein and made part of this Agreement, will be maintained by COUNTY's Asset Management System and annual inventoried until the asset is fully depreciated. During the terms of this Agreement, CONTRACTOR(S)' fixed assets may be inventoried in comparison to COUNTY's DBH Asset Inventory System.

B. Certain purchases less than Five Thousand and No/100 Dollars (\$5,000.00) but more than One Thousand and No/100 Dollars (\$1,000.00), with over one (1) year life span, and/or are mobile and high risk of theft or loss are sensitive assets. Such sensitive items are not limited to computers, copiers, televisions, cameras and other sensitive items as determined by COUNTY's DBH Director, or designee. CONTRACTOR(S) maintains a tracking system on the items and are not required to be capitalize or depreciated. The items are subject to annual inventory for compliance.

C. Assets shall be retained by COUNTY, as COUNTY property, in the event this Agreement is terminated or upon expiration of this Agreement. Each CONTRACTOR agrees to participate in an annual inventory of all COUNTY fixed and inventoried assets. Upon termination or expiration of this Agreement, CONTRACTOR(S) shall be physically present when fixed and inventoried assets are returned to COUNTY possession. Each CONTRACTOR is responsible for returning to COUNTY all COUNTY owned undepreciated fixed and inventoried assets, or the monetary value of said assets if unable to produce the assets at the expiration or termination of this Agreement.

1 CONTRACTOR(S) further agree to the following:

2 1. To maintain all items of equipment in good working order and condition,  
3 normal wear and tear is expected;

4 2. To label all items of equipment with COUNTY assigned program number,  
5 to perform periodic inventories as required by COUNTY and to maintain an inventory list showing  
6 where and how the equipment is being used, in accordance with procedures developed by COUNTY.  
7 All such lists shall be submitted to COUNTY within ten (10) days of any request therefore; and

8 3. To report in writing to COUNTY immediately after discovery, the loss or  
9 theft of any items of equipment. For stolen items, the local law enforcement agency must be contacted  
10 and a copy of the police report submitted to COUNTY.

11 D. The purchase of any equipment by CONTRACTOR(S) with funds provided  
12 hereunder shall require the prior written approval of COUNTY's DBH, shall fulfill the provisions of this  
13 Agreement as appropriate, and must be directly related to CONTRACTOR(S)' services or activity under  
14 the terms of this Agreement. COUNTY's DBH may refuse reimbursement for any costs resulting from  
15 equipment purchased, which are incurred by CONTRACTOR(S), if prior written approval has not been  
16 obtained from COUNTY.

17 E. CONTRACTOR(S) must obtain prior written approval from COUNTY's DBH  
18 whenever there is any modification or change in the use of any property acquired or improved, in whole  
19 or in part, using funds under this Agreement. If any real or personal property acquired or improved with  
20 said funds identified herein is sold and/or is utilized by CONTRACTOR(S) for a use which does not  
21 qualify under this Agreement, CONTRACTOR(S) shall reimburse COUNTY in an amount equal to the  
22 current fair market value of the property, less any portion thereof attributable to expenditures of funds  
23 not provided under this Agreement. These requirements shall continue in effect for the life of the  
24 property. In the event this Agreement expires, or terminates, the requirements for this Section shall  
25 remain in effect for activities or property funded with said funds, unless action is taken by the State  
26 government to relieve COUNTY of these obligations.

27 **22. NON-DISCRIMINATION**

28 During the performance of this Agreement, CONTRACTOR(S) and its subcontractors

1 shall not deny the contract's benefits to any person on the basis of race, religious creed, color, national  
2 origin, ancestry, physical disability, mental disability, medical condition, genetic information, marital  
3 status, sex, gender, gender identity, gender expression, age, sexual orientation, or military and veteran  
4 status, nor shall they discriminate unlawfully against any employee or applicant for employment  
5 because of race, religious creed, color, national origin, ancestry, physical disability, mental disability,  
6 medical condition, genetic information, marital status, sex, gender, gender identity, gender expression,  
7 age, sexual orientation, or military or veteran status. CONTRACTOR(S) shall insure that the evaluation  
8 and treatment of employees and applicants for employment are free of such discrimination.

9 CONTRACTOR(S) and subcontractors shall comply with the provisions of the Fair  
10 Employment and Housing Act (Gov. Code §12800 et seq.), the regulations promulgated thereunder  
11 (Cal. Code Regs., tit. 2, §11000 et seq.), the provisions of Article 9.5, Chapter 1, Part 1, Division 3, Title  
12 2 of the Government Code (Gov. Code §11135-11139.5), and the regulations or standards adopted by  
13 the awarding state agency to implement such article. CONTRACTOR(S) shall permit access by  
14 representatives of the Department of Fair Employment and Housing and the awarding state agency  
15 upon reasonable notice at any time during the normal business hours, but in no case less than twenty-  
16 four (24) hours' notice, to such of its books, records, accounts, and all other sources of information and  
17 its facilities as said Department or Agency shall require to ascertain compliance with this clause.  
18 CONTRACTOR(S) and its subcontractors shall give written notice of their obligations under this clause  
19 to labor organizations with which they have a collective bargaining or other agreement. (See Cal. Code  
20 Regs., tit. 2, §11105) CONTRACTOR(S) shall include the Non-Discrimination and compliance  
21 provisions of this clause in all subcontracts to perform work under this Agreement.

22 **23. CULTURAL COMPETENCY**

23 As related to Cultural and Linguistic Competence, CONTRACTOR(S) shall comply with:

- 24 A. Title 6 of the Civil Rights Act of 1964 (42 U.S.C. Section 2000d, and 45 C.F.R  
25 Part 80) and Executive Order 12250 of 1979 which prohibits recipients of federal financial assistance  
26 from discriminating against persons based on race, color, national origin, sex, disability or religion.  
27 This is interpreted to mean that a limited English proficient (LEP) individual is entitled to equal access  
28 and participation in federally funded programs through the provision of comprehensive and quality

1 bilingual services.

2 B. Policies and procedures for ensuring access and appropriate use of trained  
3 interpreters and material translation services for all LEP consumers, including, but not limited to,  
4 assessing the cultural and linguistic needs of its consumers, training of staff on the policies and  
5 procedures, and monitoring its language assistance program. CONTRACTOR(S)' procedures must  
6 include ensuring compliance of any sub-contracted providers with these requirements.

7 C. CONTRACTOR(S) shall not use minors as interpreters.

8 D. CONTRACTOR(S) shall provide and pay for interpreting and translation services  
9 to persons participating in CONTRACTOR(S)' services who have limited or no English language  
10 proficiency, including services to persons who are deaf or blind. Interpreter and translation services  
11 shall be provided as necessary to allow such participants meaningful access to the programs, services  
12 and benefits provided by CONTRACTOR(S). Interpreter and translation services, including translation  
13 of CONTRACTOR(S)' "vital documents" (those documents that contain information that is critical for  
14 accessing CONTRACTOR(S)' services or are required by law) shall be provided to participants at no  
15 cost to the participant. CONTRACTOR(S) shall ensure that any employees, agents, subcontractors, or  
16 partners who interpret or translate for a program participant, or who directly communicate with a  
17 program participant in a language other than English, demonstrate proficiency in the participant's  
18 language and can effectively communicate any specialized terms and concepts peculiar to  
19 CONTRACTOR(S) services.

20 E. In compliance with the State mandated Culturally and Linguistically Appropriate  
21 Services standards as published by the Office of Minority Health, CONTRACTOR(S) must submit to  
22 COUNTY for approval, within sixty (60) days from date of contract execution, CONTRACTOR(S)' plan  
23 to address all fifteen (15) national cultural competency standards as set forth in the "National Standards  
24 on Culturally and Linguistically Appropriate Services (CLAS)", Exhibit O and Exhibit O-1, "Cultural  
25 Competence Form", attached hereto and by this reference incorporated herein and made a part of this  
26 Agreement. COUNTY's annual on-site review of CONTRACTOR(S) shall include collection of  
27 documentation to ensure all national standards are implemented. As the national competency  
28 standards are updated, CONTRACTOR(S)' plan must be updated accordingly.

1 F. CONTRACTOR(S) shall be responsible for conducting an annual cultural  
2 competency self-assessment and provide the results of said self-assessment to the COUNTY'S DBH.  
3 The annual cultural competency self-assessment instruments shall be reviewed by the COUNTY and  
4 revised as necessary to meet the approval of the COUNTY.

5 G. Cultural competency training for CONTRACTOR(S)' staff should be substantively  
6 integrated into health professions education and training at all levels, both academic and  
7 functional, including core curriculum, professional licensure, and continuing professional development  
8 programs. On an annual basis, CONTRACTOR(S)' direct service providers shall complete eight (8)  
9 hours of cultural competency training. CONTRACTOR(S) on a monthly basis shall provide COUNTY  
10 DBH a monthly monitoring tool/report that shows cultural competency trainings completed.

11 H. CONTRACTOR(S) shall attend the COUNTY's Cultural Competency Committee  
12 monthly meetings, maintain its own cultural competence oversight committee, and develop a cultural  
13 competency plan to address and evaluate cultural competency issues.

14 **24. AMERICANS WITH DISABILITIES ACT**

15 CONTRACTOR(S) agrees to ensure that deliverables developed and produced,  
16 pursuant to this Agreement shall comply with the accessibility requirements of Section 508 of the  
17 Rehabilitation Act and the Americans with Disabilities Act of 1973 as amended (29 U.S.C. §794 (d)),  
18 and regulations implementing that Act as set forth in Part 1194 of Title 36 of the Code of Federal  
19 Regulations. In 1998, Congress amended the Rehabilitation Act of 1973 to require Federal agencies to  
20 make their electronic and information technology (EIT) accessible to people with disabilities. California  
21 Government Code Section 11135 codifies section 508 of the Act requiring accessibility of electronic and  
22 information technology.

23 **25. CONFLICT OF INTEREST**

24 No officer, agent, or employee of COUNTY who exercises any function or responsibility  
25 for planning and carrying out the services provided under this Agreement shall have any direct or  
26 indirect personal financial interest in this Agreement. In addition, no employee of COUNTY shall be  
27 employed by CONTRACTOR(S) to fulfill any contractual obligations with COUNTY.

28 ///

1 CONTRACTOR(S) shall also comply with all Federal, State of California, and local  
2 conflict of interest laws, statutes, and regulations, which shall be applicable to all parties and  
3 beneficiaries under this Agreement and any officer, agent, or employee of COUNTY.

4 **26. CHARITABLE CHOICE**

5 CONTRACTOR(S) may not discriminate in its program delivery against a client or  
6 potential client on the basis of religion or religious belief, a refusal to hold a religious belief, or a refusal  
7 to actively participate in a religious practice. Any specifically religious activity or service made available  
8 to individuals by CONTRACTOR(S) must be voluntary as well as separate in time and location from  
9 COUNTY-funded activities and services. CONTRACTOR(S) shall inform COUNTY as to whether it is  
10 faith-based. If an individual CONTRACTOR identifies as faith-based, it must submit to COUNTY's DBH  
11 a copy of its policy on referring individuals to an alternate treatment provider, and include a copy of this  
12 policy in its client admission forms. The policy must inform individuals that they may be referred to an  
13 alternative provider if they object to the religious nature of the program, and include a notice to  
14 COUNTY's DBH. Adherence to this policy will be monitored during annual site reviews and reviews of  
15 client files. If an individual CONTRACTOR identifies as faith-based, by July 1st of each year  
16 CONTRACTOR will be required to report to COUNTY's DBH the number of individuals who requested  
17 referrals to alternate providers based on religious objection.

18 **27. TAX EQUITY AND FISCAL RESPONSIBILITY ACT**

19 To the extent necessary to prevent disallowance of reimbursement under section  
20 1861(v) (1) (I) of the Social Security Act, (42 U.S.C. § 1395x, subd. (v)(1)[I]), until the expiration of four  
21 (4) years after the furnishing of services under this Agreement, CONTRACTOR(S) shall make  
22 available, upon written request to the Secretary of the United States Department of Health and Human  
23 Services, or upon request to the Comptroller General of the United States General Accounting Office,  
24 or any of their duly authorized representatives, a copy of this Agreement and such books, documents,  
25 and records as are necessary to certify the nature and extent of the costs of these services provided by  
26 CONTRACTOR(S) under this Agreement. CONTRACTOR(S) further agrees that in the event  
27 CONTRACTOR(S) carries out any of its duties under this Agreement through a subcontract, with a  
28 value or cost of Ten Thousand and No/100 Dollars (\$10,000.00) or more over a twelve (12) month



1 period, with a related organization, such Agreement shall contain a clause to the effect that until the  
2 expiration of four (4) years after the furnishing of such services pursuant to such subcontract, the  
3 related organizations shall make available, upon written request to the Secretary of the United States  
4 Department of Health and Human Services, or upon request to the Comptroller General of the United  
5 States General Accounting Office, or any of their duly authorized representatives, a copy of such  
6 subcontract and such books, documents, and records of such organization as are necessary to verify  
7 the nature and extent of such costs.

8 **28. SINGLE AUDIT CLAUSE**

9 A. If CONTRACTOR(S) expends Seven Hundred Fifty Thousand Dollars and  
10 No/100 Dollars (\$750,000.00) or more in Federal and Federal flow-through monies, CONTRACTOR(S)  
11 agrees to conduct an annual audit in accordance with the requirements of the Single Audit Standards  
12 as set forth in Office of Management and Budget (OMB) 2 CFR 200. CONTRACTOR(S) shall submit  
13 said audit and management letter to COUNTY. The audit must include a statement of findings or a  
14 statement that there were no findings. If there were negative findings, CONTRACTOR(S) must include  
15 a corrective action plan signed by an authorized individual. CONTRACTOR(S) agrees to take action to  
16 correct any material non-compliance or weakness found as a result of such audit. Such audit shall be  
17 delivered to COUNTY's DBH Business Office for review within nine (9) months of the end of any fiscal  
18 year in which funds were expended and/or received for the program. Failure to perform the requisite  
19 audit functions as required by this Agreement may result in COUNTY performing the necessary audit  
20 tasks, or at COUNTY's option, contracting with a public accountant to perform said audit, or, may result  
21 in the inability of COUNTY to enter into future agreements with CONTRACTOR(S). All audit costs  
22 related to this Agreement are the sole responsibility of CONTRACTOR(S).

23 B. A single audit report is not applicable if CONTRACTOR(S)' Federal contracts do  
24 not exceed the Seven Hundred Fifty Thousand and No/100 Dollars (\$750,000.00) requirement or  
25 CONTRACTOR(S)' only funding is through Drug-related Medi-Cal. If a single audit is not applicable, a  
26 program audit must be performed and a program audit report with management letter shall be  
27 submitted by CONTRACTOR(S) to COUNTY as a minimum requirement to attest to each  
28 CONTRACTOR's solvency. Said audit report shall be delivered to COUNTY's DBH Business Office for

1 review, no later than nine (9) months after the close of the fiscal year in which the funds supplied  
2 through this Agreement are expended. Failure to comply with this Act may result in COUNTY  
3 performing the necessary audit tasks or contracting with a qualified accountant to perform said audit. All  
4 audit costs related to this Agreement are the sole responsibility of CONTRACTOR(S) who agrees to  
5 take corrective action to eliminate any material noncompliance or weakness found as a result of such  
6 audit. Audit work performed by COUNTY under this section shall be billed to the CONTRACTOR(S) at  
7 COUNTY's cost, as determined by COUNTY's Auditor-Controller/Treasurer-Tax Collector.

8 C. CONTRACTOR(S) shall make available all records and accounts for inspection  
9 by COUNTY, the State of California, if applicable, the Comptroller General of the United States, the  
10 Federal Grantor Agency, or any of their duly authorized representatives, at all reasonable times for a  
11 period of at least three (3) years following final payment under this Agreement or the closure of all other  
12 pending matters, whichever is later.

13 **29. COMPLIANCE**

14 CONTRACTOR(S) agrees to comply with the COUNTY's "Contractor Code of Conduct  
15 and Ethics" and the COUNTY's Compliance Program in accordance with Exhibit G. Within thirty (30)  
16 days of entering into this Agreement with the COUNTY, CONTRACTOR(S) shall have all of  
17 CONTRACTOR(S)' employees, agents and subcontractors providing services under this Agreement  
18 certify in writing, that he or she has received, read, understood, and shall abide by the Contractor Code  
19 of Conduct and Ethics. CONTRACTOR(S) shall ensure that within thirty (30) days of hire, all new  
20 employees, agents and subcontractors providing services under this Agreement shall certify in writing  
21 that he or she has received, read, understood, and shall abide by the Contractor Code of Conduct and  
22 Ethics. CONTRACTOR(S) understands that the promotion of and adherence to the Code of Conduct is  
23 an element in evaluating the performance of CONTRACTOR(S) and its employees, agents and  
24 subcontractors.

25 Within thirty (30) days of entering into this Agreement, and annually thereafter, all  
26 employees, agents and subcontractors providing services under this Agreement shall complete general  
27 compliance training and appropriate employees, agents and subcontractors shall complete  
28 documentation and billing or billing/reimbursement training. All new employees, agents and

1 subcontractors shall attend the appropriate training within thirty (30) days of hire. Each individual who is  
2 required to attend training shall certify in writing that he or she has received the required training. The  
3 certification shall specify the type of training received and the date received. The certification shall be  
4 provided to the COUNTY's Compliance Officer at 1925 E. Dakota Ave, Fresno, California 93726.  
5 CONTRACTOR(S) agrees to reimburse COUNTY for the entire cost of any penalty imposed upon  
6 COUNTY by the Federal Government as a result of CONTRACTOR(S)' violation of the terms of this  
7 Agreement.

8 **30. ASSURANCES**

9 In entering into this Agreement, CONTRACTOR(S) certifies that it is not currently  
10 excluded, suspended, debarred, or otherwise ineligible to participate in the Federal Health Care  
11 Programs: that it has not been convicted of a criminal offense related to the provision of health care  
12 items or services; nor has it been reinstated to participation in the Federal Health Care Programs after  
13 a period of exclusion, suspension, debarment, or ineligibility. If COUNTY learns, subsequent to entering  
14 into a contract, that CONTRACTOR(S) is ineligible on these grounds, COUNTY will remove  
15 CONTRACTOR(S) from responsibility for, or involvement with, COUNTY's business operations related  
16 to the Federal Health Care Programs and shall remove such CONTRACTOR(S) from any position in  
17 which CONTRACTOR(S)' compensation, or the items or services rendered, ordered or prescribed by  
18 CONTRACTOR(S) may be paid in whole or part, directly or indirectly, by Federal Health Care  
19 Programs or otherwise with Federal Funds at least until such time as CONTRACTOR(S) is reinstated  
20 into participation in the Federal Health Care Programs.

21 A. If COUNTY has notice that CONTRACTOR(S) has been charged with a criminal  
22 offense related to any Federal Health Care Program, or is proposed for exclusion during the term of any  
23 contract, CONTRACTOR(S) and COUNTY shall take all appropriate actions to ensure the accuracy of  
24 any claims submitted to any Federal Health Care Program. At its discretion given such circumstances,  
25 COUNTY may request that CONTRACTOR(S) cease providing services until resolution of the charges  
26 or the proposed exclusion.

27 B. CONTRACTOR(S) agrees that all potential new employees of  
28 CONTRACTOR(S) or subcontractors of CONTRACTOR(S) who, in each case, are expected to perform

1 professional services under this Agreement, will be queried as to whether: (1) they are now or ever  
2 have been excluded, suspended, debarred, or otherwise ineligible to participate in the Federal Health  
3 Care Programs; (2) they have been convicted of a criminal offense related to the provision of health  
4 care items or services; and or (3) they have been reinstated to participation in the Federal Health Care  
5 Programs after a period of exclusion, suspension, debarment, or ineligibility.

6                   1)       In the event the potential employee or subcontractor informs  
7 CONTRACTOR(S) that he or she is excluded, suspended, debarred or otherwise ineligible, or has been  
8 convicted of a criminal offense relating to the provision of health care services, and CONTRACTOR(S)  
9 hires or engages such potential employee or subcontractor, CONTRACTOR(S) will ensure that said  
10 employee or subcontractor does no work, either directly or indirectly relating to services provided to  
11 COUNTY.

12                   2)       Notwithstanding the above, COUNTY at its discretion may terminate this  
13 Agreement in accordance with Section Two (2) of this Agreement, or require adequate assurance (as  
14 defined by COUNTY) that no excluded, suspended or otherwise ineligible employee or subcontractor of  
15 CONTRACTOR(S) will perform work, either directly or indirectly, relating to services provided to  
16 COUNTY. Such demand for adequate assurance shall be effective upon a timeframe to be determined  
17 by COUNTY to protect the interests of COUNTY consumers.

18                   C.       CONTRACTOR(S) shall verify (by asking the applicable employees and  
19 subcontractors) that all current employees and existing subcontractors who, in each case, are expected  
20 to perform professional services under this Agreement: (1) are not currently excluded, suspended,  
21 debarred, or otherwise ineligible to participate in the Federal Health Care Programs; (2) have not been  
22 convicted of a criminal offense related to the provision of health care items or services; and (3) have not  
23 been reinstated to participation in the Federal Health Care Program after a period of exclusion,  
24 suspension, debarment, or ineligibility. In the event any existing employee or subcontractor informs  
25 CONTRACTOR(S) that he or she is excluded, suspended, debarred or otherwise ineligible to  
26 participate in the Federal Health Care Programs, or has been convicted of a criminal offense relating to  
27 the provision of health care services, CONTRACTOR(S) will ensure that said employee or  
28 subcontractor does no work, either direct or indirect, relating to services provided to COUNTY.

1                   1)       CONTRACTOR(S) agrees to notify COUNTY immediately during the term  
2 of this Agreement whenever CONTRACTOR(S) learns that an employee or subcontractor who, in each  
3 case, is providing professional services under this Agreement is excluded, suspended, debarred or  
4 otherwise ineligible to participate in the Federal Health Care Programs, or is convicted of a criminal  
5 offense relating to the provision of health care services.

6                   2)       Notwithstanding the above, COUNTY at its discretion may terminate this  
7 Agreement in accordance with Section Three (3) of this Agreement, or require adequate assurance (as  
8 defined by COUNTY) that no excluded, suspended or otherwise ineligible employee or subcontractor of  
9 CONTRACTOR(S) will perform work, either directly or indirectly, relating to services provided to  
10 COUNTY. Such demand for adequate assurance shall be effective upon a timeframe to be determined  
11 by COUNTY to protect the interests of COUNTY clients.

12                   D.       CONTRACTOR(S) agrees to cooperate fully with any reasonable requests for  
13 information from COUNTY, which may be necessary to complete any internal or external audits relating  
14 to CONTRACTOR(S)'s compliance with the provisions of this Section.

15                   E.       CONTRACTOR(S) agrees to reimburse COUNTY for the entire cost of any  
16 penalty imposed upon COUNTY by the Federal Government as a result of CONTRACTOR(S)' violation  
17 of CONTRACTOR(S)' obligations as described in this Section.

18                   **31.    PUBLICITY PROHIBITION**

19                   None of the funds, materials, property or services provided directly or indirectly under  
20 this Agreement shall be used for CONTRACTOR(S)' advertising, fundraising, or publicity (*i.e.*,  
21 purchasing of tickets/tables, silent auction donations, etc.) for the purpose of self-promotion.  
22 Notwithstanding the above, publicity of the services described in Section One (1) of this Agreement  
23 shall be allowed as necessary to raise public awareness about the availability of such specific services  
24 when approved in advance by COUNTY's DBH Director, or designee, and at a cost to be provided in  
25 Exhibits E-1 *et. seq.* for such items as written/printed materials, the use of media (*i.e.*, radio, television,  
26 newspapers) and any other related expense(s).

27                   **32.    COMPLAINTS**

28                   CONTRACTOR(S) shall log complaints and the disposition of all complaints from a client

1 or a client's family. CONTRACTOR(S) shall provide a copy of the detailed complaint log entries  
2 concerning COUNTY-sponsored clients to COUNTY at monthly intervals by the tenth (10<sup>th</sup>) day of the  
3 following month, in a format that is mutually agreed upon. In addition, CONTRACTOR(S) shall provide  
4 details and attach documentation of each complaint with the log. CONTRACTOR(S) shall post signs  
5 informing clients of their right to file a complaint or grievance. CONTRACTOR(S) shall notify COUNTY  
6 of all incidents reportable to State licensing bodies that affect COUNTY clients within twenty-four (24)  
7 hours of receipt of a complaint.

8           Within ten (10) days after each incident or complaint affecting COUNTY-sponsored  
9 clients, CONTRACTOR(S) shall provide COUNTY with information relevant to the complaint,  
10 investigative details of the complaint, the complaint and CONTRACTOR(S)' disposition of, or corrective  
11 action taken to resolve the complaint. In addition, CONTRACTOR(S) shall inform every client of their  
12 rights as set forth in Exhibit L and Exhibit M regarding grievances and incident reporting.

13           **33.    CHILD ABUSE REPORTING ACT**

14           CONTRACTOR(S) shall establish a procedure acceptable to the COUNTY's DBH  
15 Director, or designee, to ensure that all of the CONTRACTOR(S)' employees, consultants,  
16 subcontractors or agents described in the Child Abuse Reporting Act, section 1116 et seq. of the Penal  
17 Code, and performing services under this Agreement shall report all known or suspected child abuse or  
18 neglect to a child protective agency as defined in Penal Code section 11165.9. This procedure shall  
19 include:

20           A.    A requirement that all CONTRACTOR(S)' employees, consultants,  
21 subcontractors or agents performing services shall sign a statement that he or she knows of and will  
22 comply with the reporting requirements as defined in Penal Code section 11166(a), identified in Exhibit  
23 P, attached hereto and incorporated herein by reference and made part of this Agreement.

24           B.    Establishing procedures to ensure reporting even when employees, consultants,  
25 subcontractors, or agents who are not required to report child abuse under Penal Code section  
26 11166(a), gain knowledge of or reasonably suspect that a child has been a victim of abuse or neglect.

27           **34.    DISCLOSURE OF OWNERSHIP AND/OR CONTROL INTEREST**  
28           **INFORMATION**

1 This provision is only applicable if CONTRACTOR(S) is a disclosing entity, fiscal agent,  
2 or managed care entity as defined in Code of Federal Regulations (C.F.R), Title 42 § 455.101 455.104,  
3 and 455.106(a)(1),(2).

4 In accordance with C.F.R., Title 42 §§ 455.101, 455.104, 455.105 and 455.106(a)(1),(2),  
5 the following information must be disclosed by CONTRACTOR(S) by completing Exhibit Q, “Disclosure  
6 of Ownership and Control Interest Statement”, attached hereto and by this reference incorporated  
7 herein and made part of this Agreement. CONTRACTOR(S) shall submit this form to COUNTY’s DBH  
8 within thirty (30) days of the effective date of this Agreement. Additionally, CONTRACTOR(S) shall  
9 report any changes to this information within thirty-five (35) days of occurrence by completing Exhibit Q.  
10 CONTRACTOR(S) is required to submit a set of fingerprints for any person with a five (5) percent or  
11 greater direct or indirect ownership interest in CONTRACTOR(S). COUNTY may terminate this  
12 Agreement where any person with a five percent (5%) or greater direct or indirect ownership interest in  
13 the CONTRACTOR(S) did not submit timely and accurate information and cooperate with any  
14 screening method required in CFR, Title 42, Section 455.416. Submissions shall be scanned portable  
15 document format (pdf) copies and are to be sent via email to  
16 [DBHContractedServicesDivision@fresnocountyca.gov](mailto:DBHContractedServicesDivision@fresnocountyca.gov), Attention: Contracts Administration. COUNTY  
17 may deny enrollment or terminate this Agreement where any person with a five percent (5%) or greater  
18 direct or indirect ownership interest in CONTRACTOR(S) has been convicted of a criminal offense  
19 related to that person’s involvement with the Medicare, Medicaid, or Title XXI program in the last ten  
20 (10) years.

21 **35. DISCLOSURE – CRIMINAL HISTORY AND CIVIL ACTIONS**

22 CONTRACTOR(S) are required to disclose if any of the following conditions apply to  
23 them, their owners, officers, corporate managers and partners (hereinafter collectively referred to as  
24 “CONTRACTOR(S)”):

25 A. Within the three (3) year period preceding the Agreement award, they have been  
26 convicted of, or had a civil judgment rendered against them for:

- 27 1) Fraud or a criminal offense in connection with obtaining, attempting to  
28 obtain, or performing a public (federal, state, or local) transaction or

1 contract under a public transaction;

2 2) Violation of a federal or state antitrust statute;

3 3) Embezzlement, theft, forgery, bribery, falsification, or destruction of  
4 records; or

5 4) False statements or receipt of stolen property.

6 B. Within a three (3) year period preceding their Agreement award, they have had  
7 a public transaction (federal, state, or local) terminated for cause or default.

8 Disclosure of the above information will not automatically eliminate CONTRACTOR(S)  
9 from further business consideration. The information will be considered as part of the determination  
10 of whether to continue and/or renew the Agreement and any additional information or explanation  
11 that a CONTRACTOR(S) elects to submit with the disclosed information will be considered. If it is  
12 later determined that the CONTRACTOR(S) failed to disclose required information, any contract  
13 awarded to such CONTRACTOR(S) may be immediately voided and terminated for material failure to  
14 comply with the terms and conditions of the award.

15 CONTRACTOR(S) must sign a "Certification Regarding Debarment, Suspension, and  
16 Other Responsibility Matters- Primary Covered Transactions" in the form set forth in Exhibit R, attached  
17 hereto and by this reference incorporated herein and made part of this Agreement. Additionally,  
18 CONTRACTOR(S) must immediately advise the COUNTY in writing if, during the term of this  
19 Agreement: (1) CONTRACTOR(S) becomes suspended, debarred, excluded or ineligible for  
20 participation in federal or state funded programs or from receiving Federal funds as listed in the  
21 excluded parties' list system (<http://www.epls.gov>); or (2) any of the above listed conditions become  
22 applicable to CONTRACTOR(S). CONTRACTOR(S) shall indemnify, defend and hold the COUNTY  
23 harmless for any loss or damage resulting from a conviction, debarment, exclusion, ineligibility or other  
24 matter listed in the signed Certification Regarding Debarment, Suspension, and Other Responsibility  
25 Matters.

26 **36. DISCLOSURE OF SELF-DEALING TRANSACTIONS**

27 This provision is only applicable if any individual CONTRACTOR is operating as a  
28 corporation (a for-profit or non-profit corporation) or if during the term of this Agreement, any such



1 CONTRACTOR changes its status to operate as a corporation.

2 Members of the CONTRACTOR(S)' Board of Directors shall disclose any self-dealing  
3 transactions that they are a party to while CONTRACTOR(S) is providing goods or performing services  
4 under this Agreement. A self-dealing transaction shall mean a transaction to which the  
5 CONTRACTOR(S) is a party and in which one or more of its directors has a material financial interest.  
6 Members of the Board of Directors shall disclose any self-dealing transactions that they are a party to  
7 by completing and signing a "Self-Dealing Transaction Disclosure Form", attached hereto as Exhibit S  
8 and incorporated herein by reference and made part of this Agreement, and submitting it to the  
9 COUNTY prior to commencing with the self-dealing transaction or immediately thereafter.

10 **37. AUDITS AND INSPECTIONS**

11 CONTRACTOR(S) shall at any time during business hours, and as often as the  
12 COUNTY may deem necessary, make available to the COUNTY for examination all of its records and  
13 data with respect to the matters covered by this Agreement. CONTRACTOR(S) shall, upon request by  
14 the COUNTY, permit the COUNTY to audit and inspect all such records and data necessary to ensure  
15 CONTRACTOR(S)' compliance with the terms of this Agreement.

16 If this Agreement exceeds Ten Thousand and No/100 Dollars (\$10,000.00),  
17 CONTRACTOR(S) shall be subject to the examination and audit of the State Auditor General for a  
18 period of three (3) years after final payment under contract (California Government Code section  
19 8546.7).

20 **38. NOTICES**

21 The persons having authority to give and receive notices under this Agreement and their  
22 addresses include the following:

<u>COUNTY</u>	<u>CONTRACTOR(S)</u>
Director, Fresno County	Refer to Exhibit A
Department of Behavioral Health	
1925 E Dakota Ave	
Fresno, CA 93726	

26 All notices between the COUNTY and CONTRACTOR(S) provided for or permitted  
27 under this Agreement must be in writing and delivered either by personal service, by first-class United  
28 States mail, by an overnight commercial courier service, or by telephonic facsimile transmission. A

1 notice delivered by personal service is effective upon service to the recipient. A notice delivered by first-  
2 class United States mail is effective three (3) COUNTY business days after deposit in the United States  
3 mail, postage prepaid, addressed to the recipient. A notice delivered by an overnight commercial  
4 courier service is effective one (1) COUNTY business day after deposit with the overnight commercial  
5 courier service, delivery fees prepaid, with delivery instructions given for next day delivery, addressed  
6 to the recipient. A notice delivered by telephonic facsimile is effective when transmission to the recipient  
7 is completed (but, if such transmission is completed outside of COUNTY business hours, then such  
8 delivery shall be deemed to be effective at the next beginning of a COUNTY business day), provided  
9 that the sender maintains a machine record of the completed transmission. For all claims arising out of  
10 or related to this Agreement, nothing in this Section establishes, waives, or modifies any claims  
11 presentation requirements or procedures provided by law, including but not limited to the Government  
12 Claims Act (Division 3.6 of Title 1 of the Government Code, beginning with Section 810).

13 **39. SEVERABILITY**

14 If any non-material term, provision, covenant, or condition of this Agreement is held by a  
15 court of competent jurisdiction to be invalid, void or unenforceable, the remainder of the provisions shall  
16 remain in full force and effect, and shall in no way be affected, impaired or invalidated.

17 **40. SEPARATE AGREEMENT**

18 It is mutually understood by the parties that this Agreement does not, in any way, create  
19 a joint venture among the individual CONTRACTORS. By execution of this Agreement,  
20 CONTRACTOR(S) understand that a separate Agreement is formed between each individual  
21 CONTRACTOR and COUNTY.

22 **41. GOVERNING LAW**

23 The parties agree that for the purpose of venue, performance under this Agreement is in  
24 Fresno County, California.

25 The rights and obligations of the parties and all interpretation and performance of this  
26 Agreement shall be governed in all respects by the laws of the State of California.

27 **42. ENTIRE AGREEMENT**

28 This Agreement, including all Exhibits (listed below), COUNTY's Revised RFP No. 20-

1 026, and CONTRACTOR(S)' Response to COUNTY's Revised RFP No. 20-026 constitutes the entire  
2 agreement between CONTRACTOR(S) and COUNTY with respect to the subject matter hereof and  
3 supersedes all previous agreement negotiations, proposals, commitments, writings, advertisements,  
4 publications, and understandings of any nature whatsoever unless expressly included in this  
5 Agreement.

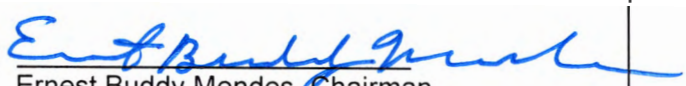
6	Exhibit A	List of Contractors
7	Exhibit B	Adult FSP Program Overview
8	Exhibit B-1, <i>et. seq.</i>	CONTRACTOR(S)' Scope of Work
9	Exhibit C	FSP Service Delivery Model
10	Exhibit D	DBH Guiding Principles of Care Delivery
11	Exhibit E-1, <i>et. seq.</i>	Budgets and Narratives
12	Exhibit F	Electronic Health Records Software Charges
13	Exhibit G	Fresno County Mental Health Compliance Plan and Code of Conduct
14	Exhibit H	Documentation Standards for Client Records
15	Exhibit I	DCR Tracking Forms (PAF, KETS & 3M)
16	Exhibit J	State Mental Health Requirements
17	Exhibit K	Medi-Cal Organizational Provider Standards
18	Exhibit L	Fresno County MHP Grievances and Appeals Process
19	Exhibit M	Protocol for Completion of Incident Report
20	Exhibit N	Fixed Asset and Sensitive Item Tracking Log
21	Exhibit O	National Standards for CLAS
22	Exhibit O-1	Cultural Competence Form
23	Exhibit P	Notice of Child Abuse Report
24	Exhibit Q	Disclosure of Ownership and Control Interest Statement
25	Exhibit R	Certification Regarding Debarment, Suspension, and Other Responsibility Matters – Primary Covered Transactions
26	Exhibit S	Self-Dealing Transaction Disclosure Form

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1 IN WITNESS WHEREOF, the parties hereto have executed this Agreement as of the day and  
2 year first hereinabove written.

3  
4 **CONTRACTOR(S):**  
5 SEE ATTACHED EXHIBIT A

**COUNTY OF FRESNO:**

6  
7 By:   
8 Ernest Buddy Mendes, Chairman  
9 of the Board of Supervisors  
10 of the County of Fresno

11  
12 Date: 6-9-2020

13 **ATTEST:**  
14 Bernice E. Seidel  
15 Clerk of the Board of Supervisors  
16 County of Fresno, State of California

17 By:   
18 Deputy

19 Date: 6-9-2020

20  
21 **PLEASE SEE ADDITIONAL  
22 SIGNATURE PAGE ATTACHED**

23  
24 Fund/Subclass: 0001/10000  
25 Organization: 56302007  
26 Account/Program: 7295/0

27 ft

28

1 **CONTRACTOR:**  
2 **TURNING POINT OF CENTRAL CALIFORNIA, INC.**

3  
4  
5 By: 

6 Print Name: Raymond R. Banks

7 Title: Chief Executive Officer

8 Date: 5/5/2020

9  
10 By: 

11 Print Name: Bruce Tyler

12 Title: Chief Financial Officer

13 Date: 5/5/2020

14 Mailing Address:

15 615 S. Atwood St.  
16 Visalia, CA 93277  
17 Attention: Scott Hollander, LCSW/COO  
18 Phone No.: (559) 732-8086 ext. 7101  
19 Phone No.: (559) 999-8983 cell  
20 shollander@tpocc.org

21  
22  
23  
24  
25  
26  
27  
28

1 **CONTRACTOR:**

2 **MENTAL HEALTH SYSTEMS, INC.**

3  
4 By: 

5 Print Name: James C Callaghan Jr

6 Title: CEO/President  
7 Chairman of the Board, or  
8 President, or Chief Operating Officer,  
9 or any Vice President

10 Date: May 5, 2020

11 By: 

12 Print Name: Joelle Verbestel

13 Title: Chief Financial Officer  
14 Secretary (of Corporation), or  
15 any Assistant Secretary, or  
16 Chief Financial Officer, or  
17 any Assistant Treasurer

18 **Mailing Address:**

19 9465 Farnham Street  
20 San Diego, CA 92123  
21 Attention: James C. Callaghan, CEO  
22 Phone No.: (858) 573-2600 ext. 1101  
23 Phone No.: (858) 254-4338 cell  
24 icallaghan@mhsinc.org

**ADULT FULL-SERVICE PARTNERSHIP PROGRAM**

**LIST OF CONTRACTOR(S)**

**1. Turning Point of Central California, Inc.**

Business Type: Private, non-profit, 501 (c)(3) corporation  
Business Address: P.O. Box 7447  
Visalia, CA 93290  
Contact: Raymond Banks, CEO  
raymondbanks@tpocc.org  
Service Addresses: Site #1 - Vista  
258 N Blackstone Ave  
Fresno, CA 93701  
Site #2 - TBD  
TBD Determined  
Target Population: Adult and Older Adult with Serious Mental Illness (SMI)  
Level of Care: Outpatient/Intensive Case Management and Full-Service Partnership

**2. Mental Health Systems, Inc.**

Business Type: Private, non-profit, 501 (c)(3) corporation  
Business Address: 9465 Farnham Street  
San Diego, California 92123  
Contact: James C. Callaghan, President & CEO  
jcallaghan@mhsinc.org  
Service Addresses: Site #3 - DART  
TBD Determined  
Target Population: Adult and Older Adult with Serious Mental Illness (SMI)  
Level of Care: Outpatient/Intensive Case Management and Full-Service Partnership

**3. Additional Contractor(s)**

Business Type: TBD  
Business Address: TBD  
Contact: TBD  
Service Addresses: Site #4  
TBD  
Target Population: Adult and Older Adult with Serious Mental Illness (SMI)  
Level of Care: Outpatient/Intensive Case Management and Full-Service Partnership

**Mental Health Services Act (MHSA)  
Full-Service Partnership (FSP) Program Overview  
Scope of Work**

**CONTRACT SERVICES:** Full-Service Partnership Program Sites providing Comprehensive Mental Health, Housing, Employment Support and Community Supports for Adults and Older Adults with Serious Mental Illness (SMI)

**CONTRACT TERM:** June 1, 2020 – August 30, 2020, Ramp-Up  
September 1, 2020 – June 30, 2023, 2-Year, 10-month Initial Term  
July 1, 2023 – June 30, 2025, two (2) possible twelve-month extensions

**CONTRACTOR(s):** Refer to Exhibit A

**BACKGROUND:**

COUNTY, on behalf of the Department of Behavioral Health (DBH), as funded by Mental Health Services Act (MHSA), Community Services and Support (CSS), is providing Full-Service Partnership (FSP) Services to Adults and Older Adults with severe mental illness (SMI) by contracting for a maximum of four (4) Adult FSP program sites, providing comprehensive mental health, housing, employment services and community supports with a continuous service capacity for up to 720 individuals. Each one (1) of the four (4) program sites will maintain a combined caseload per site of 180 clients at any given time throughout the contract term.

The FSP program(s) will encompass a unified team approach, in which the provider commits to do “whatever-it-takes” and “meet the client where they are” to assist each individual to reach their personal recovery, resiliency and wellness goals while reducing the number of days of hospitalization, incarceration and/or homelessness. Services are provided on a voluntary basis, 24 hours per day, seven days per week (24/7), with a case manager to client ratio of no more than 1:15.

Each FSP program site shall implement elements of the Assertive Community Treatment (ACT) model within the context of creating a team structure for comprehensive and coordinated services that support and promote recovery. Adoption of select ACT program elements will help FSP teams achieve the team structure required by Mental Health Services Act (MHSA) regulations. Each FSP program site will not need to implement full-fidelity ACT program services, however, is expected to demonstrate provision of discernable elements of the model.

CONTRACTOR(s) must be thoroughly familiar with the provisions of MHSA, including but not limited to State MHSA regulations, policy interpretations, and definitions. CONTRACTOR(s) must also be thoroughly familiar and have knowledge and understanding of Fresno County’s diverse and unique populations. CONTRACTOR(s) will use MHSA funds to reach the unserved and underserved new clients, existing clients, and their family members who receive services through Fresno County DBH and other contracted services.

CONTRACTOR(s) programs, services, and practices must align with DBH’s vision, mission, and “Guiding Principles of Care Delivery”, attached as Exhibit D. DBH’s principles of care delivery define and guide a system that strives for excellence in the provision of behavioral health services where the values of wellness, resiliency, and recovery are central to the development of programs, services, and workforce. The principles provide the clinical framework that influences decision-making in all aspects of care delivery including program design and implementation, service delivery, training of the workforce, allocation of resources, and measurement of outcomes.

**SCHEDULE OF SERVICES:**

CONTRACTOR(s) staff shall be available to provide community-based services to clients twenty-four (24) hours per day, seven (7) days per week.



**Mental Health Services Act (MHSA)  
Full-Service Partnership (FSP) Program Overview  
Scope of Work**

**TARGET POPULATION:**

Each individuals' participation in a CONTRACTOR(s)'s Full-Service Partnership (FSP) program is on a voluntary basis. The target population to be served under this Agreement includes individuals 18 years of age and older from Fresno County who meet the requirements for an SMI diagnosis, are not currently receiving services, **and** meet one (1) or more of the following criteria:

- Homelessness;
- At risk of homelessness – such as youth aging out of foster care or persons coming out of jail;
- Involved in the criminal justice system (including adults with child protection issues); and/or
- Frequent users of hospital and/or emergency room services as the primary resource for mental health treatment

**or** are underserved and at risk of:

- Homelessness – such as persons living in institutions or nursing homes;
- Criminal justice involvement; and/or
- Institutionalization.

**PROJECT DESCRIPTION:**

CONTRACTOR(s)' FSP Programs shall be a "whatever-it-takes" program working toward ending homelessness, frequent hospitalizations, and/or incarcerations for adults with SMI. This program will provide comprehensive mental health, housing, employment support and community supports to a maximum of 720 adult and older adults with the goal of supporting them in recovery and self-sufficiency. Services must be strength-based, client-directed, co-occurring capable, and employ psychosocial rehabilitation and recovery model principles. Further, all services shall be delivered using either 1) evidence-based practice, 2) promising practices standards, or 3) community/practice-based evidence standard, that at a minimum, focus on proactively engaging all referred individuals in their treatment services.

The FSP program shall be a partnership between the CONTRACTOR(s) and COUNTY DBH, with the CONTRACTOR(s) providing multi-level services directed toward the individual needs of the enrollees. Services and supports provided by the CONTRACTOR(s) shall include, but shall not be limited to: assessments, therapy, medication support, personal service coordination, crisis management, rehabilitation services, employment and education, advocacy and linkage to community resources. Additional support includes any direct assistance necessary to ensure that clients obtain the basic necessities of daily life, such as food, clothing, transportation, housing, personal hygiene, medical services, and other financial support. These services and supports shall be made available regardless of individuals' comorbid diagnostic condition with SMI, inpatient or residential placement, or other community resource to which an individual is linked. It is expected that each client approved to enter the program will be offered the full array of services and supports, including three (3) face-to-face contacts per week, or more as clinically appropriate. COUNTY staff shall oversee program outcomes, reporting, client referrals and contract monitoring.

**Client Referrals:**

All client referrals will be approved by the DBH Director, or designee. While referrals can be made from various sources, approval of an individual's entry into the Adult FSP program will be made by DBH.

**Staffing:**

**Mental Health Services Act (MHSA)  
Full-Service Partnership (FSP) Program Overview  
Scope of Work**

FSP programs seek to engage individuals with SMI into intensive, wraparound services with a low case manager to client ratio between (1:10) to (1:15), and provide a “whatever it takes” and “meeting the client where they are” approach to wellness and recovery, including but not limited to:

- Promoting recovery and increasing quality of life;
- Decreasing negative outcomes such as hospitalization, incarceration, and homelessness; and
- Increasing positive outcomes such as increased life skills, access to benefits and income, involvement with meaningful activities such as education and employment, and socialization and psychosocial supports (e.g., psychosocial outcomes).

CONTRACTOR(s) shall dedicate a specific number of Full Time Equivalent (FTE) staff, further described in Exhibit E-1, *et. seq.*, “Budgets and Budget Narratives”, each specifically assigned to an identified FSP Program Site. CONTRACTOR(s) staffing shall include a minimum of a 1.00 FTE Psychiatrist to meet with individuals on a monthly basis, or more as clinically indicated, per respective FSP program site.

**PROGRAM OBJECTIVES AND DELIVERABLES - FSP:**

The following items listed below represent FSP program goals to be achieved by CONTRACTOR(s). Each FSP program site’s success will be based on the number of goals it can achieve, resulting from performance outcomes. Under no circumstance shall outcome achievement preclude individuals from accessing medically necessary services or supports. The CONTRACTOR(s) will utilize a computerized tracking system with which outcome measures and other relevant client data, such as demographics, will be maintained.

1. Reduce frequency of hospitalizations for each client. CONTRACTOR(s) will provide, through client self-reporting, most recent 12-month history for each client which will be used as baseline data. Each individual will show a 70% reduction in hospitalization after one year of receiving services or upon discharge. Reports and data will be submitted on a monthly basis.
2. Reduce frequency of homelessness for each client. CONTRACTOR(s) will provide most recent 12-month history for each individual which will be used as baseline data. Each individual will show an 80% reduction in days spent homeless after one year of receiving services or upon discharge. Each individual will obtain and maintain stable housing after one year of receiving services or upon discharge. Reports and data will be submitted on a monthly basis.
3. Reduce frequency of incarceration for each client. CONTRACTOR(s) will provide, through client self-reporting, most recent 12-month history for each individual which will be used as baseline data. Each individual will show an 80% reduction in days spent incarcerated after one year of receiving services. Each additional year will show an additional 5% reduction. Reports and data will be submitted on a monthly basis.
4. CONTRACTOR(s) will provide each individual with the appropriate level of housing support, reflective of the individual’s needs. Each individual in need of housing will receive assistance in housing placement and support – including emergency housing – contingent upon level of need and independent functioning. Each individual will have stable housing upon discharge. Reports and data will be submitted on a monthly basis.
5. CONTRACTOR(s) will provide services to the satisfaction of clients and will address any reported complaints. Satisfaction surveys will be made available and reviewed regularly; a bi-annual Performance Outcome Improvement survey will be provided to clients; and complaint forms and grievance forms will be made easily available to clients. Reports and data will be submitted on a monthly or annual basis, respectively.

**Mental Health Services Act (MHSA)  
Full-Service Partnership (FSP) Program Overview  
Scope of Work**

6. CONTRACTOR(s) will provide a level of service and support that reflect each individual's needs. Each individual will increase their level of functioning and, within one year of treatment (or as clinically appropriate), will transition to a lower level of service within the program. Each individual's transition related services shall include preparing for discharge to a lower intensity of services, living in housing independent of FSP services and supports, or both as clinically appropriate. Reports and data will be submitted on a monthly basis.
7. CONTRACTOR(s) will provide services helping each individual to achieve a level of recovery, stability, and independence that will allow transition to the least restrictive level of care possible. Written reports will be submitted on a quarterly basis.
8. CONTRACTOR(s) shall work with individuals to assist them in setting their goals and generating a Plan of Care which includes personalized wellness goals for each individual. These goals will be evaluated, monitored, and adjusted regularly. Written reports will be submitted on a quarterly basis.
9. CONTRACTOR(s) shall establish and maintain collaborative relationships with agencies and individuals who have frequent contact with hospitalized, homeless, or incarcerated adults. Examples of collaborative relationships include local law enforcement agencies, Veterans Administration, Marjorie Mason Center, Fresno County Human Services Departments, churches, acute psychiatric facilities, schools, community centers, etc. Letters of introduction, including description of services and how to contact the FSP program shall be distributed to potential partners.
10. CONTRACTOR(s) will complete quarterly reports, as mandated by the State for FSPs. Reports shall be made directly into the FSP Data Collection and Reporting (DCR) system.
11. Direct Services productivity rate is expected to be at a minimum of seventy-five percent (75%) and reported in writing at regularly scheduled meetings with COUNTY staff.
12. CONTRACTOR(s) will identify services provided to each client on a monthly basis, as needed by the Department, including recreational and social activities and linkages provided to clients such as the County's Job Option Program. This information will be provided to the designated Division Manager in a monthly report.

**CONTRACTOR(s)'S RESPONSIBILITIES:**

CONTRACTOR(s) may operate the FSP program by utilizing the Assertive Community Treatment (ACT) model of care to provide services to adult clients with SMI who are frequent users of hospital and crisis services and therefore, are at risk of hospitalization, incarceration, and homelessness.

**CONTRACTOR(s) shall:**

- A. Coordinate with law enforcement and courts services, as needed.
- B. Be available to provide the following services, including but not limited to:
  - Personal service coordination and supportive counseling;
  - Ongoing assessment of the individual's mental illness symptoms and response to treatment;
  - Educating each individual regarding his/her mental illness and the effects (including side effects) of prescribed medications;

**Mental Health Services Act (MHSA)  
Full-Service Partnership (FSP) Program Overview  
Scope of Work**

- Symptom management efforts directed towards helping the individual identify the symptoms and their occurrence patterns, and development of methods (internal, behavioral, adaptive) to lessen their effects;
  - Provision, both on planned and on an “as needed” basis, of such psychological support as is necessary to help individuals accomplish their personal goals and cope with the stresses of day-to-day living.
- C. Be available to provide crisis assessment and intervention twenty-four (24) hours per day, seven (7) days per week throughout the year, including telephone and face-to-face contact as needed. The following crisis response measures shall also be followed:
- Response to crisis shall be rapid and flexible;
  - When crisis housing is necessary for short-term care and inpatient treatment (either voluntary or involuntary), the staff shall collaborate with the treatment staff in such facilities. Support shall be provided to the maximum extent possible, including accompanying the individual to the facility, remaining with the individual during assessment, and beginning the process of planning with the individual for discharge to the community as soon as possible;
- D. Provide services in the areas of medication prescription, administration, monitoring, and documentation.
- The psychiatrist shall assess each individual’s mental illness symptoms and behavior and prescribe appropriate medication, regularly review and document symptoms as well as the individual’s response to the prescribed medications, educate the individual and family members, and monitor, treat and document any medication side effects.
  - The nurse shall establish medication policies and procedures which identify processes to administer medications, train other team members, and assess regularly other team members’ competency in this area.
  - All FSP team staff shall assess and document individual’s mental illness symptoms and behavior in response to medication and shall monitor for medication side-effects during the provision of observed self-administration and during ongoing face-to-face contacts.
  - Regarding residents of residential care facilities, the team shall collaborate with staff at these facilities to ensure individuals at these locations are taking prescribed medications and the staff is monitoring their response to the medication(s). Furthermore, the staff shall review the facility records (after receiving written consent from the client) and shall regularly collaborate with facility staff about treatment plans, goals, objectives and interventions.
- E. Provide whatever direct assistance is necessary and reasonable to ensure that the individual obtains the basic necessities of daily life, such as food, housing, clothing, medical services, and other financial support.
- F. Ensure that each FSP Team member shall have, in their possession, during regular working hours (and appropriate on-call hours) an adequate amount of financial resources to make emergency purchases of food, shelter, clothing, prescriptions, transportation, or other items for individuals, as needed. The team shall have access to larger flexible funding accounts for assistance with housing deposits, furniture purchases, and other items, with sound accounting practices for recording and monitoring the use of these funds.

**Mental Health Services Act (MHSA)  
Full-Service Partnership (FSP) Program Overview  
Scope of Work**

- G. Assist the individual with establishing a payee or payee service. The FSP team may utilize client assistance funds to assist individuals with short-term loans or grants, as necessary. The team shall link individuals to appropriate social services, provide transportation as necessary, and link the individual to appropriate legal advocacy representation.
- H. Provide training, instruction, support and assistance to the client in developing personal skills, including but not limited to, the ability to:
- Carry out personal hygiene tasks;
  - Perform household chores, including housekeeping, cooking, laundry and shopping;
  - Develop or improve money management skills;
  - Use community transportation; and
  - Locate, finance and maintain safe, clean and affordable housing.
- I. Develop and support the individual's participation in recreation, social activities, and relationships. Priority shall be given to supporting individuals in establishing positive social relationships in normative community settings. Staff shall assist individuals in establishing positive social relationships and participating in social/recreational activities in the community. Such services shall include, but not be limited to, assisting clients in:
- Developing social skills and other skills needed to develop meaningful personal relationships;
  - Planning appropriate and productive use of leisure time including familiarizing clients with available social and recreational opportunities;
  - Interacting with landlords, neighbors and others effectively and appropriately;
  - Developing assertiveness and self-esteem; and
  - Using existing self-help centers, groups, spiritual, and recreational groups to combat isolation and withdrawal experienced by many persons coping with severe mental illness.
- J. Provide alcohol, tobacco and drug abuse services for individuals with co-occurring disorders, as clinically appropriate and in accordance with harm reduction principles. This will include, but is not limited to individual and group interventions to assist individuals in:
- Identifying alcohol, tobacco, and drug abuse effects and patterns;
  - Recognizing interactive effects of alcohol, tobacco, and drug use, psychiatric symptoms and psychotropic medications;
  - Developing coping skills and alternatives to minimize alcohol, tobacco and drug use;
  - Achieving periods of abstinence and/or decreased risk behaviors and increased stability;
  - Attending appropriate recovery or self-help meetings; and
  - Achieving an alcohol and drug free lifestyle, as desired.

**Mental Health Services Act (MHSA)  
Full-Service Partnership (FSP) Program Overview  
Scope of Work**

- K. Act to minimize the individual's involvement in the criminal justice system, with services to include, but not be limited to;
- Helping the individual identify precipitants to client's criminal involvement;
  - Providing necessary treatment, support and education to help eliminate unlawful activities or criminal involvement that may be a consequence of the individual's mental illness; and
  - Collaborating with, and assisting individuals collaborate with, police, court personnel, and jail/prison officials to ensure appropriate coordination and clinical support with the legal processes.
- L. Assist each individual, family and other members of the individuals' support network to relate in a positive and supportive manner through such means as:
- Education about individuals' severe mental illness and their role in the therapeutic process and treatment services and supports;
  - Supportive counseling;
  - Intervention to resolve conflict; and
  - Referral, as appropriate, of the family to therapy, self-help and other family support services;
- M. Coordinate with other community mental health and non-mental health providers, as well as other medical professionals. Staff shall provide the following functions for all individuals served:
- Development of formal and informal affiliations with other human service providers including, mental health, physical health care, addiction treatment providers, and inpatient units;
  - Involvement of other pertinent agencies, the individual's family, and members of the individual's social network in the coordination of the assessment, and in the development, implementation and revision of service plans;
  - Advocacy and assistance to individuals to obtain needed benefits and services, such as supplemental security income, general relief, housing subsidies, food stamps, medical assistance, and legal services;
  - Coordination of meetings of the individual's service providers in the community;
  - Maintenance of ongoing communication with all other agencies serving the individual, including hospitals, primary care physicians, rehabilitation services, and housing providers as required;
  - Maintenance of working relationships with other community services, such as education, law enforcement and social services;
  - Maintenance of the clinical treatment relationship with the individual on a continuing basis whether the individual is in the hospital, in the community, involved with other agencies or the criminal justice system; and
  - Methods for service coordination and communication between the team and other service providers serving the same individuals shall be developed and implemented consistent with Fresno County confidentiality rules.

**Mental Health Services Act (MHSA)  
Full-Service Partnership (FSP) Program Overview  
Scope of Work**

- N. Monitor service outcomes to determine if the individual has meaningful use of their time, stays in school or maintains employment, has reduced numbers of hospitalizations, incarcerations, and periods of homelessness. The DBH will use State identified criteria for measuring these outcomes. The treatment team will be monitored to ensure appropriate service delivery and adherence to MHSA philosophies.
- O. Provide comprehensive services, including intensive mental health treatment, rehabilitation, and case management with the goal of increasing adaptive functioning in the community and preventing unnecessary re-admissions to Institutes of Mental Disease (IMD), acute inpatient facilities, or other higher levels of care.
- P. Meet with DBH on a monthly basis, or more often as agreed upon, for contract and performance monitoring.

**Employment and Education**

FSP program sites will assist the individual in accessing and participating in the employment and education programs offered in the community, as appropriate.

In order to facilitate individual participation in community education and employment programs, FSP shall include, but is not limited to:

- Collaboration with and education of community providers as it relates to individuals' mental illness, abilities, levels of functioning, educational and employment interest, as well as potential effects of the client's mental health symptoms on participation, in education and work;
- Encouragement and individual rehabilitation related to the integration, practicing, follow through, and problem solving, as it relates to continued education and employment
- Individual supportive counseling and education to assist the individual, family, and support system in identifying, managing, and coping with the symptoms of mental illness that may interfere with his/her work or education experience;
- On-the-job or work-related crisis intervention;
- Crisis intervention in the educational setting;
- Work/education-related supportive services, such as assistance with grooming and personal hygiene, securing appropriate clothing, wake-up calls, and transportation; and
- The team staff shall also link with the supportive services offered for additional and ongoing support related to education and employment.

**Housing**

The FSP team will empower individuals to take an active role in the recovery process. The FSP team will provide housing options and assist individuals in maintaining a stable residence by providing needed services, accessing resources, and encouraging individuals to be independent, productive and responsible.

- 1. The team shall provide whatever direct assistance is necessary to ensure that the individual obtains the basic necessities of daily life, including but not limited to:
  - Safe, clean, affordable housing;

**Mental Health Services Act (MHSA)  
Full-Service Partnership (FSP) Program Overview  
Scope of Work**

- Food and clothing;
  - Medical and dental services; and
  - Securing appropriate financial support, which may include Supplemental Security Income (SSI), Social Security Disability Insurance (SSDI), General Relief (GR), and money management or payee services.
2. CONTRACTOR(s) shall ensure that team members have rapid access to flexible spending funds for items such as security deposits, furniture, and/or other items required for independent living.
  3. CONTRACTOR(s) will provide housing services, as needed, to ensure that individuals *maintain* their housing. CONTRACTOR(s) shall provide:
    - Training and assistance to individuals in locating, securing, and inhabiting housing which is appropriate to their level of functioning;
    - Training and instruction, including individual support, problem solving, skill development, modeling, and supervision, in the home and community settings, to teach the client to manage finances and maintain safe, clean, affordable housing;
    - Supportive and independent housing for each individual with the goal of having every individual in secure sustainable housing that is appropriate for their level of ability and need, as soon as reasonably possible;
  4. CONTRACTOR(s) will establish a program to provide rent subsidies for independent housing needed while developing a plan for sustainable housing based on individual need and ability.

**Levels of Care**

FSP Services are designed in a framework which allows the individual to move fluidly through different levels of care as the client's individual recovery and wellness dictates. CONTRACTOR(s)' specific levels of services are identified and detailed in Exhibit B-1 *et. seq.*

**Hours of Operation**

CONTRACTOR(s)' specific hours of operation are identified and detailed in Exhibit B-1 *et. seq.*

**Program Outcomes/Performance Outcome Measures**

*Services and Performance Measures* - Under the provision of the MHSA CSS component, COUNTY's DBH receives funding to expand, develop, and create successful CSS programs for children, transitional aged youth, adults, and older adults. These services are designed and shall be delivered in a culturally, ethically, and linguistically competent approach for underserved and unserved populations. CONTRACTOR(s)' specific approaches to these services, performance measures, and outcome goals are detailed in Exhibits B-1 *et. seq.*

CONTRACTOR(s) shall comply with all project monitoring and compliance protocols, procedures, data collection methods, and reporting requirements requested by the COUNTY. CONTRACTOR(s) shall use performance outcome measures for evaluating program and system effectiveness to ensure services and service delivery strategies are positively impacting the target population.



**Mental Health Services Act (MHSA)  
Full-Service Partnership (FSP) Program Overview  
Scope of Work**

In addition, these measures shall be used to ensure FSP services are in alignment with MHSA guiding principles, which include: an integrated service experience; community collaboration; cultural competence; individual/family driven service; and wellness, resilience, and recovery focused services.

Goals of the FSP programs include reduced utilization of more costly crisis services, and minimization or elimination of more severe outcomes such as substance use disorders, hospitalizations or incarcerations.

Performance outcome measures shall be tracked on an ongoing basis and used to update the COUNTY monthly (by the 10<sup>th</sup> of the month following the report period). In addition, performance outcome measures are reported to the COUNTY annually in accumulative reports for overall program and contract evaluation. Forms and tools used to gather and report data reflecting services provided, populations served, and impact of those services are to be developed by the COUNTY and CONTRACTOR(s). CONTRACTOR(s) will work closely with the COUNTY to analyze the data and make necessary adjustments to service delivery and reporting requirements before the start of each new fiscal year.

CONTRACTOR(s)' specific performance measures and outcome goals are identified and detailed in Exhibit B-1 *et. seq.* Measurable outcomes may be reviewed for input and approval by a designated DBH work group upon contract execution and adjusted as needed each new fiscal year. The purpose of this review process is to ensure a comprehensive system wide approach to the evaluation of programs through an effective outcome reporting process.

DBH collects data about the characteristics of the persons served and measures service delivery performance indicators in each of the following CARF Domains. At minimum, one performance indicator will be identified for each of the four CARF domains listed below.

1. **Effectiveness:** A performance dimension that assesses the degree to which an intervention or services have achieved the desired outcome/result/quality of care through measuring change over time. The results achieved and outcomes observed are for persons served.

*Examples of indicators include:* Persons get a job with benefits, or receive supports needed to live in the community, increased function, activities, or participation, and improvement of health, employment/earnings, or plan of care goal attainment.

2. **Efficiency:** Relationship between results and resources used, such as time, money, and staff. The demonstration of the relationship between results and the resources used to achieve them. A performance dimension addressing the relationship between the outputs/results and the resources used to deliver the service.

*Examples of indicators include:* Direct staff cost per person served, amount of time it takes to achieve an outcome, gain in scores per days of service, service hours per person achieving some positive outcome, total budget (actual cost) per person served, length of stay and direct service hours of clinical and medical staff.

3. **Access:** Organizations' capacity to provide services of those who desire or need services. Barriers or lack thereof for persons obtaining services. The ability of persons served to receive the right service at the right time. A performance dimension addressing the degree to which a person needing services is able to access those services.

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*Examples of indicators include:* Timeliness of program entry (From 1<sup>st</sup> request for service to 1<sup>st</sup> service), ongoing wait times/wait lists, minimizing barriers to getting services, and no-show/cancellation rates.

4. **Satisfaction:** Satisfaction Measures are usually orientated towards consumers, family, staff, and stakeholders. The degree to which persons served, COUNTY and other stakeholders are satisfied with services. A performance dimension that describes reports or ratings from persons served about services received from an organization.

*Examples of indicators include:* opinion of persons served or other key stakeholders in regards to access, process, or outcome of services received, Consumer and/or Treatment Perception Survey.

CONTRACTOR(s) will address each of the categories referenced above in CONTRACTOR(s)' specific performance measures and outcome goals as identified and detailed in Exhibit B-1 *et. seq.* and may propose/provide other performance and outcome measures that are deemed best to evaluate the services provided to persons served and/or to evaluate overall program performance.

Separate performance and outcomes measures are expected for specialty mental health services and clinical training services. DBH may adjust the performance and outcome measures periodically throughout the duration of this Agreement, as needed, to best measure the program as determined by COUNTY. CONTRACTOR(s) shall utilize and integrate clinical tools as directed by DBH. Reaching Recovery are outcome tools for adults and shall be utilized, documented, and made available to COUNTY by CONTRACTOR(s) for each individual.

CONTRACTOR(s) must utilize a computerized tracking system with which performance and outcome measures and other relevant individual data, such as demographics, will be maintained. The data tracking system may be incorporated into the CONTRACTOR(s)' EHR or be a stand-alone database. The DBH must be afforded read-only access to the CONTRACTOR(S)' data tracking system, if applicable. The DBH prefers that the CONTRACTOR(s) utilize its EHR (currently "Avatar") with full access being provided by DBH. However, if the CONTRACTOR(s) is unable or unwilling to utilize DBH's current EHR, arrangements must be made to ensure that an interface to transfer all necessary reporting and outcome information is developed to meet the needs of DBH.

**Additional Reporting Requirements per FSP Site**

CONTRACTOR(s) will be responsible for meeting with DBH on a monthly basis, or more often as agreed upon between DBH and CONTRACTOR(s), for contract and performance monitoring. CONTRACTOR(s) will be required to submit monthly reports to the COUNTY that will include, but not be limited to: dollars billed for Medi-Cal and MHSA (non-Medi-Cal) persons served; actual expenses; the number of persons served served/anticipated to be served; utilization of services by persons served; and staff composition. These reports will be due within thirty (30) days after the last day of the previous month or payments may be delayed.

Additional reporting is required for FSPs by DHCS. The DHCS uses the FSP Data Collection and Reporting (DCR) system to ensure adequate research and evaluation, regarding the effectiveness of services being provided and the achievement of the outcome measures. CONTRACTOR will need to report individual/partner information and outcomes of the FSP program directly into the DCR system. Data will be submitted through an online interface using specific forms. The Partnership Assessment Form (PAF) gathers baseline information about the partner and shall be completed once the partnership is established. Key Event Tracking (KET) provides a snapshot of changes in key quality of life areas and shall be tracked on a continuous basis throughout the course of the FSP. The Quarterly Assessment collects updated information about changes in quality of life areas and shall be completed every three (3) months from the date the partnership is established. Lastly, each site operated by each CONTRACTOR shall report weekly census capacity to the DBH Director, or designee.

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In addition to the requirements set above, the following items listed below represent program goals to be achieved by CONTRACTOR(s). The CONTRACTOR(s) programs' success will be based on the number of goals it can achieve, resulting from performance outcomes. CONTRACTOR(s) will utilize a computerized tracking system with which outcome measures and other relevant client data, such as demographics, will be maintained.

**Regarding Crisis Interventions and Recidivism:**

Each enrollee will have no more than six (6) key events (specifically incarceration, homelessness, and crisis or inpatient hospitalization admission) during the first six (6) months in the Adult FSP programs. There will be a reduction of key events for enrollees tracked as:

- No more than three (3) key events (incarceration, homelessness, and crisis or inpatient hospitalization admission) during months six to twelve (6-12) of enrollment in program.
  - No more than one (1) key event (incarceration, homelessness, and crisis or inpatient hospitalization admission) during months thirteen to eighteen (13-18) of enrollment in program.
- A. FSP Program Sites will show zero percent (0%) days of homelessness after being enrolled in the program, unless an individual declined housing assistance. CONTRACTOR(s) shall notify DBH of individuals' decline and document accordingly. CONTRACTOR(s) must have clear documentation of efforts to house individuals in an appropriate setting.
- B. FSP Program Sites will show a ninety percent (90%) reduction in individuals' days in inpatient psychiatric hospitalizations after being enrolled in FSP compared to the year before being enrolled in the FSP.
- C. FSP Program Sites will show a ninety percent (90%) reduction in individuals' days incarcerated after being enrolled in FSP compared to the year before being enrolled in the FSP.

**Regarding Linkages and Referrals:**

- A. Within ninety (90) days of being enrolled in the FSP, one hundred percent (100%) of individuals who did not have SSI will have made applications completed to receive SSI. CONTRACTOR(s) will provide this data as requested.
- B. Within six (6) months of being enrolled in the FSP, one hundred percent (100%) of individuals will have linkages to and documentation of a Primary Care Physician.
- C. Within thirty (30) days of enrollment, one hundred percent (100%) of individuals will have participated in forming their Individualized Service Plan.
- D. Within one hundred twenty (120) days of enrollment, one hundred percent (100%) of individuals will be provided/linked to job coaching activities.
- E. Where appropriate, within ninety (90) days of enrollment, at least seventy-five percent (75%) of applicable individuals will have been offered the opportunity to participate in Supportive Education and Employment Services. Within one hundred twenty (120) days of enrollment, at least ninety-five percent (95%) of applicable individuals will have been offered the opportunity to participate in Supportive Education and Employment Services.

Outcomes will be monitored to ensure the individual has meaningful use of their time, maintains employment, and hospitalizations and incarcerations are reduced as well as homelessness. COUNTY's DBH

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will use State criteria for measuring these outcomes. CONTRACTOR(s) FSP Program Sites will be monitored regarding services delivered and if they meet the goals of the MHSA.

The FSP Program Sites will use an effective method likely to bring about intended outcomes, based on one of the following standards, or a combination of the following standards (as defined by current MHSA regulations):

- Evidence-based practice standard
- Promising practice standard
- Community and/or practice-based evidence standard

**MHSA**

CONTRACTOR will collect all data and fulfill all reporting requirements as specified in the applicable MSHA regulations related to the program type, strategies, and standards indicated above or as indicated in MHSA regulations. CONTRACTOR(s) will work with COUNTY to ensure data, outcomes, and reports are included in all required MHSA reports, plans, and updates.

Current MHSA Regulations can be found at the following website:

<http://mhsoac.ca.gov/laws-and-regulations>

CONTRACTOR should understand all MHSA regulations to ensure they have the organizational capacity to record, track, and report all required elements.

**COUNTY RESPONSIBILITIES:**

**COUNTY shall:**

1. Provide oversight of the CONTRACTOR(s) FSP Program Sites through the County Department of Behavioral Health (DBH) and the DBH Contracted Services Division Manager, or designee. In addition to contract monitoring of the FSP Program Sites, oversight includes, but is not limited to, coordination with DHCS and MHSA in regard to program administration and outcomes.
2. Assist the CONTRACTOR(s) in making linkages with the entire behavioral health system. This will be accomplished through regularly scheduled meetings as well as formal and informal consultation.
3. Participate in evaluating the progress of the overall program and the efficiency of collaboration with the CONTRACTOR(s) staff and will be available to the CONTRACTOR(s) for ongoing consultation.
4. Receive and analyze statistical data outcome information from CONTRACTOR(s) throughout the term of this Agreement on a monthly basis. The DBH will notify the CONTRACTOR(s) when additional participation is required. The performance outcome measurement process will not be limited to survey instruments but will also include, as appropriate, client and staff interviews, chart reviews, and other methods of obtaining required information.

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5. Recognize that cultural competence is a goal toward which professionals, agencies, and systems should strive. Becoming culturally competent is a developmental process and incorporates the importance of culture, assessment of cross-cultural relations, vigilance towards the dynamics that result from cultural differences, the expansion of cultural knowledge, and the adaptation of services to meet culturally unique needs. Offering those services in a manner that fails to achieve its intended result due to cultural and linguistic barriers is not cost effective. To assist the CONTRACTOR(s) efforts towards cultural and linguistic competency, DBH shall provide the following at no cost to CONTRACTOR(s):
  - A. Technical assistance to CONTRACTOR(s) regarding cultural competency requirements and sexual orientation training.
  - B. Mandatory cultural competency training including sexual orientation and sensitivity training for DBH and CONTRACTOR(s) personnel, at minimum once per year. COUNTY will provide mandatory training regarding the special needs of this diverse population and will be included in the cultural competence training(s). Sexual orientation and sensitivity to gender differences is a basic cultural competence principle and shall be included in the cultural competency training. Literature suggests that the mental health needs of lesbian, gay, bisexual, transgender, questioning and other (LGBTQ+) individuals may be at increased risk for mental disorders and behavioral health problems due to exposure to societal stressors such as stigmatization, prejudice and anti-gay violence. Social support may be critical for this population. Access to care may be limited due to concerns about providers' sensitivity to differences in sexual orientation.
  - C. Technical assistance for CONTRACTOR(s) in translating behavioral health and substance use disorder services information into DBH's threshold languages (Spanish, Laotian, Cambodian and Hmong). Translation services and costs associated will be the responsibility of the CONTRACTOR(s).

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- CONTRACTOR:** Turning Point of Central California, Inc.
- CONTACT:** Sharon Ross, Regional Director  
[sross@tpocc.org](mailto:sross@tpocc.org)
- Ryan Banks, Deputy Regional Director  
[ryanbanks@tpocc.org](mailto:ryanbanks@tpocc.org)
- SITE ADDRESS:** 258 N. Blackstone Avenue, Fresno, CA 93701
- SERVICES:** Full-Service Partnership Program Sites providing Comprehensive Mental Health, Housing, Employment Support and Community Supports for Adults and Older Adults with Serious Mental Illness
- CONTRACT TERM:** June 1, 2020 – August 30, 2020, Ramp-Up  
September 1, 2020 – June 30, 2023, 2-Year, 10-month Initial Term  
July 1, 2023 – June 30, 2025, two (2) possible twelve-month extensions

**PROGRAM DESCRIPTION**

CONTRACTOR's FSP programs are designed for adults who have been diagnosed with SMI and would benefit from an intensive service program. The foundation of FSPs is doing "whatever it takes" to help individuals on their path to recovery and wellness. CONTRACTOR's FSP Program embraces individual-driven services and supports with each individual choosing services based on individual needs. CONTRACTOR's FSP Program will feature a low staff-to-individual ratio (1:15), 24/7 crisis availability, and a team approach that is a partnership between behavioral health program staff and individuals.

CONTRACTOR's FSP programs will continue to assist with housing, employment, and education in addition to providing behavioral health services and integrated treatment for individuals who have a co-occurring mental health and substance abuse disorder. Services shall be provided to individuals in their homes, the community, and other locations when clinically indicated. Peer and caregiver support groups are available to each individual served by the program. Embedded in CONTRACTOR's FSP Programs is a commitment to deliver services in ways that are culturally and linguistically competent and appropriate. CONTRACTOR's program shall deliver, coordinate, supervise, and administer their FSP programs while clearly demonstrating principles of wellness and recovery, as well as Fresno County Department of Behavioral Health's Vision, Mission, and Guiding Principles.

A strengths-based, individual-directed care plan will be developed with every individual to "meet individuals where they are," and provide tailored treatment that focuses on engagement and is effective. In addition to management of primary and negative symptoms of individuals' mental illness, measurable attainable self-set goals in key areas such as financial management, education and employment shall be made available to each individual served by the program. While some symptoms may never be fully eliminated, the ability to manage and overcome them may ultimately be more empowering and essential for long-term recovery. CONTRACTOR believes individuals'

self-achievements for control of their life to be the most important factor for overall life satisfaction and an essential component to the motivation to achieve ongoing recovery and growth.

CONTRACTOR will operate two (2) FSP Program Sites upon execution of this Agreement. One of the two sites will be the ongoing "Vista" Program but modified to a capacity of 180 individuals served. The second site will require an additional 180 individuals served, which may include a portion of the previous "Vista" Program individuals. This will result in an overall expansion of individuals served from 300 to 360. Both Program Sites will enable people who are diagnosed with a mental illness to be able to live, work, learn, and participate fully in community life. Recovery often means recovering aspects of life and fulfillment despite a disability. It can also mean reduction or elimination of symptoms. Resilience describes aspects of personal qualities, such as, optimism and traits of problem-solving skills, that lead to mastery and independence. Even negative experiences can build resilience as problems are overcome and learning leads to hope and self-reliance. Services that enable recovery and resilience are easy to access, integrated, seamless, individual-centered, multi-disciplinary, culturally competent, and chosen. All services described herein shall be recovery and resilience oriented. CONTRACTOR seeks to increase opportunities for individuals and families to have greater choice in service type and service providers as well as treatment strategies for service delivery. CONTRACTOR shall empower individuals served by the program autonomy in treatment, services, and support by emphasizing individuals' choice. Choices encourage personal responsibility, incentivize insight, self-monitoring, and accountability, while creating interest and benefit for sustaining recovery. Choices restore dignity and encourage quality of life.

## **LOCATION OF SERVICES**

All sites listed below have been selected based on close proximity to the public bus stops to assist individuals with having geographic access to services both in the clinic and in the community. Every treatment plan will be geared with the intent of gradually decreasing each individual's dependence on the program while increasing their independence and ability to access a network of supports, services, and providers in the community.

The current Vista program, Program Site No. 1, is located at 258 N. Blackstone Ave., Fresno, CA 93701. The proposed site for service delivery for Program Site No. 2 is 3040 N. Fresno St., Fresno, CA, 93703. Upon execution of this Agreement, CONTRACTOR will engage in negotiations for a lease.

CONTRACTOR has worked with many FSP programs and understands that flexibility in services is extremely valuable in ensuring engagement and allowing each individual to direct services. Locations of services shall be provided in the field, meeting the individuals where they are, as we utilize the "whatever it takes" approach to service delivery at every practical and clinically appropriate instance. Such locations would be individuals' home, shelters, business, (e.g., coffee shops, library, grocery store, etc.) school, work, and doctor's office, while taking measures to ensure privacy and attend to confidentiality. CONTRACTOR shall provide services in the most appropriate location for the individual and allowing the individual to decide what is best for them as opposed to the traditional outpatient delivery of services being office-based.

For many individuals living with severe mental illness, transportation is often a significant barrier to accessing treatment services, completing daily activities, and gaining independence. CONTRACTOR will assist all individuals with developing a means for stable transportation and transport individual as needed regardless of functional ability level. CONTRACTOR's staff shall be available to provide individuals served with transportation in agency vehicles with the intention of

assisting each individual in becoming more self-sufficient over time. CONTRACTOR's staff shall provide education around the public transportation options and financial assistance to access transportation.

CONTRACTOR shall abide by all Final Rule mandates, or any other federal, state, or county regulatory requirements regarding timely appointment standards, and shall provide the following:

- Urgent care appointment for services that do not require prior authorization – within 48 hours of a request
- Urgent appointment for services that do require prior authorization – within 96 hours of a request
- Non-urgent appointment with a non-physician mental health care provider – within ten (10) business days of request
- Non-urgent appointment with a psychiatrist – within fifteen (15) business days of request
- Opioid treatment program – within three (3) business days of request
- Individuals who access outpatient specialty mental health services shall receive an appointment within ten (10) business days from request to appointment.

### **HOURS OF OPERATION**

CONTRACTOR's FSP Program Sites shall have office hours of operation Monday through Friday from 8:00 a.m. to 5:00 p.m. In addition, the FSP Program Sites will be adequately staffed and will provide services in the field (program hours) until 7:00 p.m. Monday through Friday. The FSP Program Sites shall also have services available on Saturdays and Sundays from 8:00 a.m. to 5:00 p.m. This level of accessibility for the individual and/or family will help to reduce and prevent negative outcomes for individuals including unnecessary hospitalizations, incarcerations, or evictions.

### **DESCRIPTION OF SERVICES**

#### **Crisis Assessment and Intervention**

CONTRACTOR's treatment teams shall be available to respond to individuals' served crises 24/7 including the ability to respond in the community and in person when appropriate. These services shall be delivered by the treatment teams, as needed. Services shall be delivered directly to the individual through direct assistance in the clinic or community when clinically appropriate. These services shall be provided in a culturally and linguistically appropriate manner with assistance from other treatment team staff or interpreter services as needed.

Program staff members are certified in CPR and First Aid, as well as Pro-Act training (which focus on verbal crisis intervention and de-escalation), Adverse Childhood Experiences (ACES) and the Columbia Suicide Severity Rating Scale. CONTRACTOR's clinicians are also trained in Recognizing and Responding to Suicide Risk (RRSR). individual CONTRACTOR's clinical and medical staff will seek certification by DBH Managed Care for the ability to write 5150's for individual. individual

#### **Other crisis services**

CONTRACTOR's 24/7 rapid response will be available for a number of crises including, but



not limited to;

- Being stranded without transportation
- Experiencing a physical health emergency
- Experiencing exacerbated behavioral health symptoms
- Running out of needed medications
- Unexpected immediate/urgent housing need
- Roommate/family conflicts requiring support
- Experiencing heightened anxiety or fears surrounding safety
- Experiencing physical threats to safety

### **Medication Services**

CONTRACTOR shall provide the following regarding Medication Services:

- Medication Prescriptions/Licensed Psychiatrist
- Injectable Medication Services
- Medication Education (provided by both psychiatrist and nursing staff)
- Monitoring medication delivery (nursing staff will deliver medications face-to-face)
- Labs (as ordered by the Psychiatrist)

### **Hygiene**

CONTRACTOR understands that for an individual to begin or continue working on their mental health symptoms, basic necessities must be taken care of first. The Program Sites shall provide all those needs to assist the individual in stabilizing and providing support. Some of these items include hygiene packages, such as shampoo, soap, toothpaste/toothbrush, and deodorant. Other items in stock at the clinics are basic clothing items, such as socks, underwear, shirts and pants. CONTRACTOR shall maintain a stock of some basic necessity supplies at each of their Program Sites at all times. If the program does not have immediate access, the staff shall purchase those items the same day the individual is identified in need. Other basic necessities, such as food and water, will be provided both in the office setting and at placement or their current housing as needed.

### **Housing**

CONTRACTOR shall ensure that each individual has appropriate housing. CONTRACTOR has many valued relationships with Room and Board vendors allowing for quick response from housing vendors to get individual placed in housing the same day they are enrolled in services or in need of housing. CONTRACTOR shall maintain positive communication and relationships with agencies supportive of housing needs.

### **Group Rehabilitation**

The FSP Program Sites shall have access to daily groups, as many as four (4) a day, to encourage and teach new skills related to personal growth. Other opportunities for building personal growth shall be provided for in the community. These services shall be individualized and assisted by their Personal Service Coordinator and include, cooking classes, knitting, yoga, Zumba, gardening, etc.

Examples of group topics include:

- WRAP - Wellness and Recovery Action Plan

- Identifying and using strengths
- Education on socialization skills
- Positive self-care
- Communication skills and boundaries/assertiveness skills
- Healthy self-esteem/positive thinking
- Conflict resolution education and skills building
- Language/stigma of mental health
- Setting behavioral health goals
- Anger education and coping skills
- Creating healthy relationships
- Coping with stress/anxiety in public setting
- Coping with grief and loss
- Stages of change
- Craft and activities group
- Money Management Group

For many people living with a severe mental illness, the associated symptoms significantly interfere with social development, forming relationships, making friends, and relating with family members, employers, and landlords. Providing group rehabilitation services to assist individual to meet interpersonal goals and to increase social skills needed for effective interpersonal performance will be one of the most important responsibilities for the treatment team.

### **Social and Interpersonal Support**

CONTRACTOR shall provide assistance with a wide range of social activities. The treatment teams will help each individual to develop, restore, and maintain social and interpersonal relationships, to engage in social and leisure-time activities, and to increase their social network by providing social and interpersonal support to individuals.

CONTRACTOR shall create opportunities for social networking by providing support groups, hosting program sponsored social activities, linking individuals to other community recreational programs, cultural ceremonies, or spiritual celebrations. Monthly social activities will be offered to further promote social development including movie and pizza days, local plays, trips to the zoo, trips to the County Fair, farmers markets, local art museums/events, barbeques at the park, and holiday events. In addition, individuals shall be linked to other community resources including, Blue Sky Wellness Center, Heritage Day Center, Cultural and/or religious centers, and community centers where individuals can use learned social skills to further expand opportunities for social development. CONTRACTOR shall ensure that individualized feedback/intervention is available and provided in a clinically meaningful way during these opportunities.

### **Co-Occurring Services**

CONTRACTOR shall provide a welcoming, safe environment for individuals with co-occurring diagnoses. Treatment shall be made available continuously to all individual regardless of their "readiness" for abstinence or ability to participate. Supportive and cognitive-behavioral treatment will be provided individually and in groups. The team will use directive methods to help individuals lessen substance use, to change associated attitudes and behaviors, and to develop new ways of coping and living. A Dual Diagnosis Specialist Case Manager along with the treatment teams will work towards developing a trusting relationship with the individual so that they are more willing to discuss substance use and its effects on behavioral health, physical health, and

daily functioning. A Dual Diagnosis Specialist Case Manager will keep individuals engaged by providing counseling and supportive services in the office and in community settings. Further, a Dual Diagnosis Specialist Case Manager shall frequently combine this work with other treatment goals.

### **Courts and the Justice System**

CONTRACTOR has experience in working with the Behavioral Health Court, the Public Defender's Office, the District Attorney, Jail Psychiatric Services, Police Department, Sheriff's Office, as well as County Probation Department. CONTRACTOR shall continue to work cooperatively with law enforcement, the Courts, and Probation Departments to assist individual to follow the law, comply with all of their legal requirements, and promote the best interests and recovery of the individual. Staff, particularly a Criminal Justice Case Manager, will work directly with the individual to assist in resolving all criminal justice involvement. These services shall be delivered directly by a Criminal Justice Case Manager and other treatment team staff as appropriate.

A Criminal Justice Specialist shall work to minimize each individuals' involvement in the Criminal Justice System by: 1) helping the individual to identify precipitants to each individuals' criminal involvement, 2) providing necessary treatment, support, and education to help eliminate unlawful activities or criminal involvement that may be a consequence of individuals behavioral health symptoms, 3) collaborate with police, court, and jail officials to ensure appropriate use of legal and behavioral health services.

A cognitive behavioral approach shall be used in examining how thoughts lead to behavior and will examine how erroneous thinking leads to criminal behavior. Staff will work cooperatively with probation, parole, court, and law enforcement agencies to meet supervision requirements. Cognitive behavioral approaches/interventions assist the individual to change thinking that leads to criminal activities and lifestyles. Staff will also assist the individual to understand how the effects/symptoms of their behavioral health can lead to commission of crime, and to develop a plan of crime prevention for their own lifestyle/behaviors. Staff will help the individual to develop alternatives to the functions or individual perceived "benefits" that the criminal behavioral has provided the individual.

CONTRACTOR's Criminal Justice Case Managers shall apply for Fresno County jail passes that will enable them to have the ability to contact individuals while incarcerated inside the jail. It is beneficial to develop a relationship with the jail's clinical assessment team and detention facility personnel. Obtaining access to the jail assists in discharge planning for the individuals served. A Criminal Justice Case Manager shall work directly with any individual who becomes involved in the criminal justice system. Services shall include assistance in the following:

- Maintaining contact with individuals while incarcerated
- Supporting individual throughout any criminal justice involvement
- Advocating with jail medical services for any medical needs the individual may have (this task will be done in collaboration with the nursing staff who will ensure that all pertinent medical information is made available to jail medical staff including current medication regimen)
- Advocacy with the courts
- Linking individual to legal aid
- Assisting individuals with arranging payment of fines as needed
- Providing an overview of Behavioral Health Court if this is an option for the individual

## **Behavioral Health Court (BHC)/Wellness Court (WC) Support**

BHC/WC services delivered to individuals shall include:

- Conducting regular case conferences in conjunction with the BHC/WC team to determine progress and to problem solve barriers
- Supporting the individual during case conferences
- Assistance/support during court appearances
- Specialized treatment planning which includes input from the BHC/WC team
- Assistance in meeting all court participation requirements
- Assistance/support during meetings with probation officers and ongoing communication with probation officers
- Linkage to and financial assistance (as needed) for mandatory drug testing as appropriate/ordered by the court
- Referral/linkage to residential substance abuse treatment as needed/ordered by the court
- Court advocacy in conjunction with BHC/WC team

## **LEVELS OF CARE**

CONTRACTOR's services are designed in a framework which allows the individual to move fluidly through different levels of care as the individual's recovery and wellness dictates. In addition to the four (4) levels of care, all individuals will be able to receive targeted support services as needed. Each individual served by the program shall be continuously assessed and evaluated for appropriate level of care placement and transitioned when clinically indicated. The four (4) levels of care starting with the level of highest intensity are:

- Level 1 - Engagement and Stabilization
- Level 2 - Recovery and Discovery
- Level 3 - Empowerment and Strength
- Level 4 - Forward Bound

CONTRACTOR shall implement principles and practices of the assertive community treatment (ACT) model of care within the FSP Program Sites and will continue to use this model in delivery of services. The FSP services are collaborative and shall be integrated with community services. Linkage to family therapy and education on community supports such as NAMI, and Fresno County Family Support Group, will be made available to families and individual support partners as individuals move through all phases of service delivery. Twenty-four (24) hour on-call services and crisis services shall be made available to all individuals throughout their enrollment in the CONTRACTOR's program.

The following are service descriptions that shall be provided by CONTRACTOR in each level of care:

### **Level 1 - Engagement and Stabilization**

Engagement and Stabilization (Level 1) is the highest level of support and most intensive level of services for an individual. During this time, an individual will be offered services according to individualized needs and the intensity of the services can be adjusted to meet each individuals' changing needs during this period. It is very important that the services be hands-on and frequent during this initial level. During each individuals' engagement and stabilization period the individual

is making many adjustments and changes which may require flexibility in frequency of services. As such, the services in Level 1, while intense, will have an ebb and flow based upon individual individualized acceptance and need—there may be some periods where an individual needs services daily, followed by periods of lesser need. Individuals often enter the program and are experiencing distress and need support across multiple domains. The intention of this level of care is to provide support for the individual's needs and increase the individual's stabilization. A "whatever it takes" approach will be the focus for delivery of these services.

### **Level 2 - Recovery and Discovery**

Recovery and Discovery (Level 2) continues with a focus on recovery and wellness goals and will begin to address stabilization across multiple domains. Some of the areas of focus are self-discovery/increased awareness and insight into mental health, sustained management of mental health symptoms, exploring education and employment goals, increased socialization skills, permanent housing, and increased engagement in individual recovery. This is the level where the majority of the stabilization work will be addressed and there are many tasks to be completed. This is a level where an individual can experience both recovery and discovery of self and their own strengths. This is expected to be the longest level of care due to the nature of the tasks to be completed. Each individual's participation in this level shall be reviewed at a minimum every six (6) months and informed by Reaching Recovery outcomes. Services at this level remain frequent and the expectation is that there will be increased individual engagement and participation in a variety of services.

### **Level 3 - Empowerment and Strength**

Empowerment and Strength (Level 3) maximizes focus on recovery and wellness goals. In this level, an individual will have experienced sustained stability and will be well on their way to independent living. This level will provide fewer intensive services as it allows an individual to "test the water" of independence and experience life with their own strengths. The program recognizes that this is an important area of growth and will remain available to the individual as needed while continuing to support the individual as needed. An additional focus in this level will be educating the individual on how to meet their needs through community resources and to independently access help when needed. Individuals in Level 3 are now being prepared for the final level of services. There is now a decrease in the number of case management, physician, therapist, and nursing contacts based upon the individualized functioning of the individual. It is anticipated that housing is stable, the individual has not required crisis services, monthly income has become stable, and the individual has made progress in the management of mental health symptoms (with or without medication support). The individual is now encouraged to move closer to independence utilizing the individual own strengths.

### **Level 4 - Forward Bound**

Forward Bound (Level 4) is intended to be a safety net and monitoring level of services. When an individual has successfully transitioned to Level 4 it is assumed that the individual has reached baseline and is stable across multiple domains. The individual has learned recovery and wellness goals and has achieved some success at mastering independent living goals. CONTRACTOR shall ensure that individuals' housing is stable prior to discharge from Forward Bound. Times of transition can produce anxiety which can exacerbate an individual's symptoms. Support at Level 4 will allow the individual a safety net of services while they are attempting to assert their independence and receive services in the community. CONTRACTOR has experienced that sometimes when an individual is linked to a lower level of care, individuals experience significant

anxiety, which results in decompensation. Level 4 will mirror the less intensive services that the individual will be transitioned to and will allow the individual to adjust to less program contact, while becoming engaged in other community services. This is a hands-on level of care as the individual will be supported throughout the transition to another provider. The expected time frame for this level is three (3) months; however as long as the transition is not complete the individual will remain in this level.

In addition to these four levels of care we will have four special “in addition” categories. Regardless of the level of care, an individual will be given an additional level of supported services as appropriate.

- Hospitalization/Post Hospitalization Support Level
- Incarceration/Post Incarceration Support Level
- Homelessness Support Level
- Dual Diagnosis Support Level

### **HOSPITALIZATION/POST HOSPITALIZATION SUPPORT LEVEL**

Being hospitalized is often a very traumatic experience. CONTRACTOR understands that extra support during this time has proven to have a positive influence on individuals’ recovery. This level of care is not a stand-alone level. This level shall be added as an additional level of support whenever an individual is placed in an inpatient psychiatric setting or evaluated and discharged without admission. These services shall be delivered directly by members of the treatment team and will be coordinated by the individual’s primary case manager. Services shall be delivered to the individual and to the individual’s support persons (per individual preference). The services delivered in this supplementary support level are:

- When an individual’s Application for up to 72-Hour Assessment, Evaluation, and Crisis Intervention or Placement for Evaluation and Treatment (a.k.a., DHCS 1801 Application, or “5150 hold”) is being written by CONTRACTOR’s staff, before initial placement in the hospital the individual will receive explanation from their trusted Treatment Team regarding what is occurring and why. CONTRACTOR shall maintain compliance with any regulation specified or referenced on the most current version of said form.
- CONTRACTOR shall always contact the inpatient hospital to provide collateral information (e.g., current medications, allergies if applicable and medication history, circumstance of the initiation of the hold).
- The individual’s case manager shall maintain contact with the inpatient hospital, psychiatric health facility, or crisis stabilization unit as applicable throughout the individual’s stay. CONTRACTOR shall begin discharge planning immediately following the detainment advisement.
- If the individual has given permission for family/support person involvement, collateral services shall be offered to the family/support person during this time.
- A case staffing shall take place to determine the options of placement and treatment for the individual upon discharge; if appropriate the involved family/support person will be invited to this case staffing.
- During the time the individual is placed in the inpatient hospital, psychiatric health facility, or crisis stabilization unit, a member of the treatment team will maintain contact with the individual, letting the individual’s level of functioning dictate the frequency of these contacts.
- Upon discharge from the hospital, a Treatment Team member will ensure the individual is transported to the appropriate destination and that housing arrangements have been made.

- After discharge, a psychiatrist appointment will be made immediately for the medication regimen to be evaluated with the individual. If the individual is not taking medications, the option of taking medications will be discussed at this time.
- After discharge from the hospital, a case staffing with the individual's team will take place. The purpose of the staffing will be to identify triggers that resulted in the hospitalization and to determine ways to provide more support for the individual. This will be an opportunity to explore what is working or not working in the treatment plan and what needs to be increased or added to the plan. The individual's current level of care will also be evaluated.
- The individual will be invited to be included in this staffing and the individual's input will be solicited. If the individual chooses not to attend this staffing the results of staffing will be discussed with individual and the individual's input sought at that time.
- If the individual has support persons or family who are involved in treatment, the support persons/family will be invited (with the individual's permission) to attend the case staffing team meeting. Family/support person involvement is highly valued and every opportunity to empower the family and include the individual's support persons in treatment will be utilized.
- Service contact and delivery increases to five (5) contacts a week for a minimum of three (3) weeks. This will be all face-to-face contact, whenever possible. The goal is to give extra support to the individual and to assist the individual in handling stressors immediately. This increased contact has proven to be one of the most valued and effective of post-hospitalization services.
- During this time, the individual's placement will be re-evaluated. Steps are taken to ensure that the individual is in the least restrictive most appropriate housing available. It may be determined that a higher or lower level of housing supervision is appropriate. It may be determined that the same level of housing in a different location would be appropriate.
- After three (3) weeks there will be another staffing which the individual and family/support persons are invited to attend. At this meeting, it will be decided if the current level of care is appropriate or if there are changes needed to be made. It will also be an opportunity to discuss what has been working and what hasn't been working. Any adjustments needed will be made to the ISSP at this time.

Throughout these first three (3) post hospitalization weeks, the individual will remain within the same level of care. During the case staffing following this three (3) week period, an evaluation of the appropriateness of the level of services can be made. Hospitalization will not be the only factor in determining the need for change in the level of care. Sometimes individuals have circumstances which create a temporary crisis or have a relapse which triggers the hospitalization. Many aspects of the individual's life and level of functioning will be explored to determine the individual's service needs. The Reaching Recovery Tools can give a snapshot of the individual's current functioning and can help determine appropriate level of care.

### **INCARCERATION/POST INCARCERATION SUPPORT**

Being incarcerated is often a very traumatic experience. CONTRACTOR knows that extra support during this time has proven to have a positive influence on the individual's recovery. This level of care is not a stand-alone level. This level will be added as an additional level of support whenever an individual is incarcerated or arrested and released without incarceration. These services will be delivered directly by a Criminal Justice Specialist and coordinated by the individual's primary case manager while the individual is incarcerated. Upon discharge from the Jail, all appropriate team members will deliver services. Services will be delivered to the individual

and to individual family and partners (per individual preference). The services delivered at this supplementary support level are:

- If an individual becomes incarcerated, the individual will be added to a Criminal Justice Case Manager case load as well as remaining with their current primary case manager.
- The Criminal Justice/Case Manager will visit the individual in Jail as soon as possible (this position will have obtained the necessary jail clearance.)
- The Criminal Justice/Case Manager will also act as a court liaison to assist and support the individual.
- If the individual is incarcerated for an extended period (seven days or more), the Mental Health Specialist Criminal Justice/Case Manager will work collaboratively with the individual's primary case manager so that the individual will have weekly contact, engagement, and support while incarcerated.
- After release from Jail, a psychiatrist appointment will be made immediately for the medication regimen to be evaluated with the individual. If the individual is not taking medications, the option of taking medications will be discussed at this time.
- When an individual is released from incarceration, a case staffing with the individual's Treatment Team will take place. The purpose of the staffing will be to identify triggers that resulted in the incarceration and to determine ways to provide more support for the individual. This will be an opportunity to explore what is working or not working in the treatment plan and what needs to be increased or added to the plan.
- The individual will be invited to be included in this staffing and the individual's input will be solicited. If the individual chooses not to attend this staffing, the results of staffing will be discussed with individual and the individual's input sought at that time.
- If the individual has support persons or family who are involved in treatment, the support persons/family will be invited to attend this staffing. Family/support person involvement is highly valued and every opportunity to empower the family and include the support persons in treatment will be utilized. If the individual has a probation officer, the probation officer will also be invited to the staffing with the individual's permission.
- Housing services will be adjusted, as necessary, to the individual's need.
- Depending upon the triggers that resulted in the charges, the individual will be encouraged to attend the appropriate groups and seek counseling services at the program.
- Staff will work closely with the courts and probation to ensure that the individual is cooperating to the best of individual's ability.

### **HOMELESSNESS SUPPORT LEVEL**

CONTRACTOR understands that housing is one of the most important needs for all persons and holds the belief that persons living with a SMI diagnosis can successfully live in and maintain normal housing with frequent and consistent team contact and support. Sometimes even with these supports an individual may have difficulty maintaining housing and will become homeless. This is a traumatic experience for the clients and can exacerbate the individual's behavioral health symptoms. CONTRACTOR knows that extra support during this time has proven to have a positive influence on the individual's recovery. This level of care is not a stand-alone level. This level will be added as an additional level of support whenever an individual becomes homeless. These services will be delivered directly by members of the Treatment Team and will be coordinated by the individual's primary case manager in collaboration with the Housing Coordinator. Services will be delivered to the individual and to individual family and partners (per individual request). The services delivered at this level are:



- Emergency case staffing with the individual (and individual family if appropriate), Case Manager, and Housing Coordinator to explore housing options available for individual.
- The individual will be offered Emergency or Temporary housing and linked to this housing.
- The individual's contact information will be changed on the caseload.
- A Key Event Tracking (KET) form will be completed as appropriate and the information entered into the tracking system.
- The circumstances which resulted in the individual becoming homeless will be explored and the individual will be supported and educated on how to maintain housing as needed.
- If the individual has given permission for family/support person involvement collateral services will be offered to the family/support person during this time.
- A psychiatrist appointment will be made for the medication regime to be evaluated with the individual. If the individual is not taking medications, the option of taking medications will be discussed at this time.
- A case staffing with the individual's team will take place. The purpose of the staffing will be to identify triggers that resulted in the homelessness and to determine ways to provide more support for the individual. This will be an opportunity to explore what is working or not working in the treatment plan and what needs to be increased or added to the plan. The individual's current level of care will also be evaluated.
- The individual will be invited to be included in this staffing and the individual's input will be solicited. If the individual chooses not to attend this staffing, the results of staffing will be discussed with individual and the individual's input sought at that time. If the individual has support or family who are involved in treatment, the support/family will be invited with the individual's permission to attend this staffing. Family/support and involvement is highly valued and every opportunity to empower the family and include the family in treatment will be utilized.
- Service contact and delivery may be increased to three (3) contacts per week for a minimum of three (3) weeks. This will be all face-to-face contacts when possible. The goal is to give extra support to the individual and to assist the individual in handling stressors immediately.
- During this time the individual's placement is re-evaluated. Steps are taken to ensure that the individual is in the least restrictive most appropriate housing available. It may be determined that a higher or lower level of housing supervision is appropriate. It may be determined that the same level of housing in a different location would be appropriate.
- After approximately three (3) weeks there will be another staffing where the individual and family/support are invited to attend. At this meeting, it will be decided if the current level of care is appropriate or if there are changes needed to be made. It will also be an opportunity to discuss what has been working and what has not been working. Any adjustments will be made to the ISSP at this time.

Throughout these first three (3) post homelessness weeks the individual will remain in the same level of care and during the case staffing an evaluation of the appropriateness of the level of services can be made. Homelessness will not be the only factor in determining the need for change in the level of care. Sometimes individuals have circumstances which create a temporary crisis or have a relapse which triggers the homelessness. Many aspects of the individual's life and level of functioning will be explored to determine individual's service need. The Reaching Recovery Tools have proved helpful in giving a snapshot of current functioning and can help determine appropriate level of care.

## **DUAL DIAGNOSIS SUPPORT LEVEL**

Delivery of services and approaches for individuals with SMI diagnoses and co-existing substance use disorders will be a vital part of the recovery and wellness process. Treatment is made available continuously to all individuals regardless of their “readiness” for abstinence or ability to participate. The Dual Diagnosis Specialist will combine the use of harm reduction practices with motivational interventions to transition individuals through stages of change. The five stages of change include pre-contemplation, contemplation, preparation, action, and maintenance. The five stages of change follow the individual from the initial stage in which the individual sees no need to change, to the final stages where the individual makes the change and then maintains it. In the preparation and action phases the Dual Diagnosis Specialist will assist the individual in developing a plan to become and stay clean and sober. The plan may include detoxification, inpatient treatment, outpatient treatment, AA/NA groups, sober living residences, and positive social supports for sobriety. It is during this stage that individuals will often reach out for assistance. Whenever an individual requests help to maintain sobriety it will be made available to the individual. Relapse is expected as part of the change process. When relapse occurs, the Dual Diagnosis Specialist and Case Manager will assist the individual in not catastrophizing the relapse in order to limit the length and damage, including returning to treatment if needed. The Treatment Team will selectively use outside treatment services as appropriate. Outside providers will be enlisted when inpatient services are needed for individual detoxification, induce remission of heavy substance use, or to establish linkage to outpatient treatment.

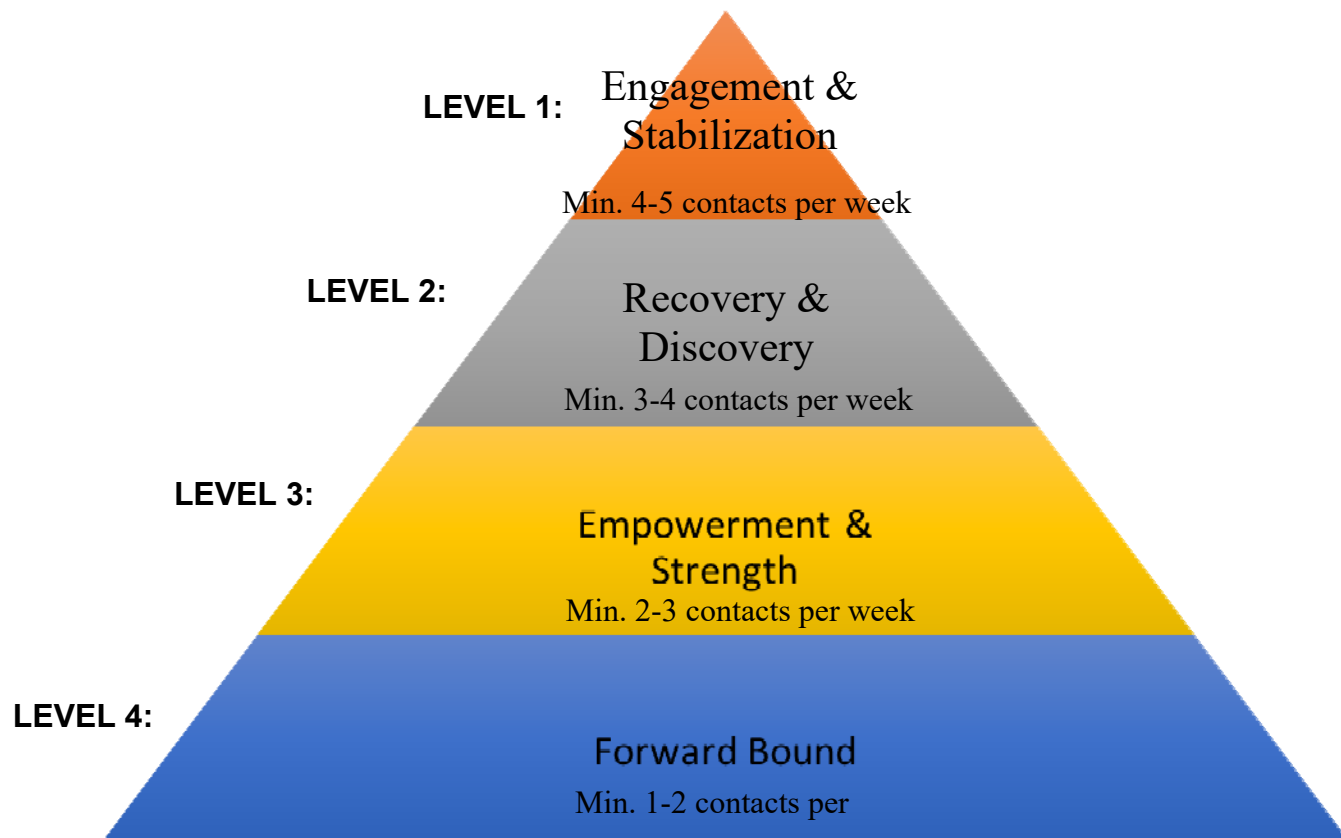
This is a traumatic experience and can exacerbate the individual’s behavioral health symptoms. CONTRACTOR knows that extra support during this time has proven to have a positive influence on the individual’s recovery. This level of care is not a stand-alone level. This level will be added as an additional level of support whenever an individual agrees to dual diagnosis services. These services will be delivered directly by a number of members of the Treatment Team and will be coordinated by the individual’s primary Case Manager in collaboration with the Dual Diagnosis Specialist. The services delivered at this level are:

- Emergency case staffing with the individual (and individual family if appropriate), Case Manager, and Dual Diagnosis Specialist to explore treatment options available for the individual.
- The individual will be offered and linked to substance use disorder treatment based upon individual’s acceptance of these services.
- The individual’s housing options will be explored and a change made as appropriate. (sober living, residential treatment care, detoxification)
- After the treatment options has been determined, a case staffing with the individual’s Treatment Team will take place. The purpose of the staffing will be to identify triggers and to determine ways to provide more support for the individual. This will be an opportunity to explore what is working or not working in the treatment plan and what needs to be increased or added to the plan. The individual’s current level of care will also be evaluated. The individual will be invited to be included in this staffing and the individual’s input will be solicited. If the individual chooses not to attend this staffing the results of staffing will be discussed with individual and the individuals input sought at that time. If the individual has support or family who are involved in treatment the support/family will be invited with the individual’s permission to attend this staffing. Family/support and involvement is highly valued and every opportunity to empower the family and include the family in treatment will be utilized.
- If the individual has given permission for family/support person involvement collateral services will be offered to the family/support person during this

time.

- A psychiatrist appointment will be made for the medication regime to be evaluated with the individual. If the individual is not taking medications, the option of taking medications will be discussed at this time.
- Service contact and delivery is maintained while individual is in residential treatment. This will be all face-to-face contact when possible. The goal is to give extra support to the individual and to assist the individual in handling stressors immediately.
- During this time the individual's placement will be re-evaluated. Steps will be taken to ensure that the individual is in the least restrictive most appropriate housing available. It may be determined that a higher or lower level of housing supervision is appropriate. It may be determined that the same level of housing in a different location would be appropriate.
- After approximately three (3) weeks, there will be another staffing where the individual and family/support are invited to attend (as appropriate). At this meeting, it will be decided if the current level of care is appropriate or if there are changes needed to be made. It will also be an opportunity to discuss what has been working and what hasn't been working. Any adjustments needed will be made to the ISSP at this time.

Throughout these first three (3) post dual diagnosis weeks the individual will remain in the same level of care and during the case staffing an evaluation of the appropriateness of the level of services can be made. Substance use or relapse will not be the only factor in determining the need for change in the level of care. Many aspects of the individual's life and level of functioning will be explored to determine individual's service need. The Reaching Recovery Tools have proved helpful in giving a snapshot of individual's current functioning and can help determine appropriate level of care.



\*The contact frequency is approximate and may be adjusted according to individual need.

\*\*For details regarding service intensity, see the previous section.

### **LEVEL ELIGIBILITY/TRANSITION CRITERIA**

Individuals and Case Managers will together assess “Recovery and Wellness” goals as written into the ISSP every six (6) months and will be updated as needed.

#### **Level 1 - Engagement and Stabilization**

Engagement and Stabilization begins with focus on recovery and wellness goals. All individuals will enter the program at this level. An individual will be objectively stable in the following domains for at least six (6) months before transitioning to Level 2 - Recovery and Discovery.

1. Individual has begun to show engagement in the program. *(The individual will have successfully attended all scheduled psychiatric, nursing and therapy appointments (or cancelled appropriately) for at least three months. Individual will have participated in case management contact in the community at an appropriate level for at least three months. Individual will have several instances of initiating contact with the treatment team.)*
2. Individual crisis or crisis visits will have decreased during the last six months. *(It is anticipated that individuals will have crisis of many types during the enrollment in the program therefore the goal is to see a decrease in crisis rather than an elimination of crisis.)*
3. Individual has been hospitalized less than once in the last six months. *(During this initial period of program enrollment frequent hospitalizations are sometimes experienced however*

*as the individual becomes engaged and stable in a variety of domains these hospitalizations are anticipated to decrease as enrollment in the program continues.)*

4. Individual has not been incarcerated in the last six months. *(If a individual becomes incarcerated and access to the program is restricted it will take a longer period of time for individual to accomplish the tasks of this level.)*
5. Housing in the community has remained stable for a minimum of three months *(It is anticipated that there is housing movement when an individual first enters a program and housing can be considered stable for this level when it is maintained for 3 months.)*
6. Individual has been able to consistently access food and clothing resources with or without the assistance of the case manager. *(It is anticipated that as an individual's finances stabilize and management of symptoms improves, they will become more independent in this area.)*
7. Medication concerns have been addressed and individual adheres to medication regime in accordance with individual level of functioning. *(Some individuals will choose not to take medication and not taking medications alone will not prevent transition.)*
8. Individual has applied to all appropriate entitlements and finances have begun to stabilize. *(Individual has applied for benefits upon enrollment however obtaining these can take a longer period of time.)*
9. Individual will have been referred to a Primary Care Physician and any medical concerns have been addressed.
10. Reaching Recovery Tools indicates lower level of care.

#### Level 2 - Recovery and Discovery

Recovery and Discovery continues with focus on recovery and wellness goals and begins to focus on stabilization across multiple domains. Some of the areas of focus are: (1) self-discovery/ increased awareness and insight into mental health, (2) sustained management of mental health symptoms, (3) exploring education and employment goals, increased socialization skills, (4) permanent housing, and (5) increased engagement in individual recovery. This is the level where the majority of the stabilization work will be addressed and there are many tasks to be completed. This is the level where an individual can experience both recovery and discovery of self and their own strengths. This is expected to be the longest level of care due to the nature of the tasks to be completed. An individual's participation in this level will be reviewed at a minimum every six (6) months. An individual will be objectively stable in the following domains for at least six (6) months before transitioning to Level 3 - Empowerment and Strength.

1. Individual has shown engagement and progress in the program. *(Individual is regularly accessing Case Management services, Rehabilitation services, and attending Groups and/or Individual Therapy through the program. The individual successfully attends all scheduled psychiatric, nursing and therapy appointments (or cancelled appropriately) for at least six months.)*
2. Individual crisis or crisis visits will have decreased to less than once in the last six months. *(It is anticipated that individuals will have crisis of many types during the enrollment in the program therefore the goal is to see a decrease in crisis vs. an elimination of crisis. At this level there should be a major decrease in crisis instances.)*

3. Individual has not been hospitalized in the last six months. *(The expectation is that during this level the individual will have learned coping skills to handle crisis and will utilize the treatment team services to assist in times of crisis.)*
4. Individual has not been incarcerated in the last six months. *(If an individual becomes incarcerated and access to the program is restricted it will take a longer period of time for individual to accomplish the tasks of this level.)*
5. Housing in the community remained stable for a minimum of six months and is becoming or has become self-sustaining.
6. Individual has been able to consistently access food and clothing resources and is self-sustaining.
7. Medications are stable and self-administered/monitored and the individual adheres to appropriate medication regimen. *(Some individuals will choose not to take medication and not taking medications alone will not prevent transition.)*
8. Monthly income is stable and self-sustaining (Medi-Cal/SSI) or stable financial arrangement in place.
9. Individual has been successfully linked to community resources and/or has an understanding of how to access these resources.
10. Individual has been given the opportunity to become involved in education or employment and works towards those goals and is accessing these services.
11. Individual is able to attend pertinent appointments without assistance.
12. Individual has begun to learn to advocate for themselves in the community.
13. REACHING RECOVERY TOOLS indicates lower level of care.

### Level 3 - Empowerment and Strength

Empowerment and Strength maximizes focus on recovery and wellness goals. In this level an individual will have experienced sustained stability and will be well on the way to independent living. This level will provide less intensive services as it allows an individual to “test the water” of independence and experience life with their own strengths. The program recognizes that this is an important area of growth and will remain available to the individual as needed and will continue to support the individual as needed. An additional focus in this level will be ensuring the individual understands how to have their needs met through community resources and is aware of where to find help when needed. An individual will be objectively stable in the following domains for at least six (6) months before transitioning to Level 4 - Forward Bound.

1. Individual has shown engagement and progress in the program and community.
2. No crisis or crisis visits in the last three months.
3. Individual has not been hospitalized in the last six months.
4. Individual has not been incarcerated in the last six months.
5. Housing in the community remained stable for a minimum of six months and is self-sustaining.
6. Individual has been able to consistently access food and clothing resources and self-sustaining.
7. Medications are stable and self-administered/monitored and the individual adheres to appropriate medication regimen. *(Some individuals will choose not to take medication and not taking medications alone will not prevent transition.)*

8. Monthly income is stable and self-sustaining (Medi-Cal/SSI) and individual is able to budget or stable financial arrangements are in place.
9. Individual has been successfully linked to community resources and/or has an understanding of how to access these resources.
10. Individual has been given the opportunity to become involved in education or employment and is working towards those goals and is accessing these services.
11. Individual is able to attend pertinent appointments without assistance.
12. Individual is able to advocate for themselves in the community when appropriate.
13. Individual no longer requires services beyond medication monitoring, therapy and groups.
14. Reaching Recovery Tools indicates a lower level of care.

#### Level 4 - Forward Bound

Forward Bound is intended to be a safety net and a monitoring level of service. When an individual has successfully transitioned to this level it is assumed that the individual has reached baseline and is stable across multiple domains. The individual has learned recovery and wellness goals and has achieved some success at mastering independent living goals. However, transition is often an anxiety producing time and often exacerbates individual's symptoms. Providing this level will allow the individual a safety net of services while they are attempting to assert their independence and receive services in the community. CONTRACTOR has experienced that sometimes when an individual is linked to a lower level of care, the individual experiences great anxiety which results in decomposition. This level of care will mirror the less intensive services that the individual will be transitioned to and will allow the individual to adjust to less program contact, while becoming engaged in other community services. This is a hands-on level of care as the individual will be supported throughout the transition to another provider. The expected time frame for this level is three (3) months; however, as long as the transition is not complete the individual will remain in this level.

1. Individual has been stabilized across multiple domains and has been referred to another provider.
2. There are no hospitalizations, no incarcerations, no homelessness, and no individual crisis.
3. Housing in the community has remained stable.
4. There are no medication concerns.
5. Reaching Recovery Tools indicate a lower level of care.

The individual's level of care will be formally reviewed at a minimum of every six (6) months from the last level review and may be reviewed at any time as treatment dictates. This review will be a case staffing with the Treatment Team and the individual and individual/family/support persons will be invited to attend (dependent upon individual preference). During this staffing, the individual's input will be sought as well as the input from the other treatment team staff to determine what is working and what needs to be improved. This staffing will be done in conjunction with the ISSP, which will allow adjustments to be made to the plan as well if appropriate. The criteria for each level will be reviewed so an objective decision based upon individual's readiness for transition can be made. The criteria will be discussed with the individual upon entrance to the level and will be provided in written format for the individual as well as support persons to review. In addition to this regularly scheduled six (6) month review, an individual's level of care will be reviewed when any of the following occur:

1. The therapist, psychiatrist, case manager or other treatment team members express concern that the level of care may need to be adjusted.

2. The individual experiences one of the following triggering events: hospitalization, crisis services, incarceration, homelessness or significant substance use concerns. *(These individual experiences will trigger a review to assess the individual's ongoing needs to determine if the individual needs to have a level change. In addition, for any these triggering events the individuals will automatically have an increase in supportive services as described under program services. These supportive services temporarily increase the intensity and frequencies of individual services to support the individual through these events. After these supportive services have been in place for three weeks a case staffing will take place to determine the appropriate level of care for the individual.)*

The individual's level of care will be tracked on the master caseload spreadsheet (a HIPAA compliant encrypted document for use internally in the program). This spreadsheet is accessible to appropriate staff and contains information important to individual care. Some of the types of information in addition to individual demographic information are program enrollment date, assessment date, POC due date, diagnosis, last psychiatrist appointment, insurance information, financial information, PCP appointments, last hospitalization, last incarceration, housing status and primary case manager and primary therapist. CONTRACTOR has found that having this information in a spreadsheet has been a benefit to individual care. CONTRACTOR propose to add another domain on this master caseload which will list individual levels of care and enrollment into that level, the caseload will also show the next review date to adjust the level if needed. It will also track hospitalization, crisis services, incarceration, homelessness and instances of significant substance use concerns. There will be an additional tracking sheet created that will track every level case staffing the individual has had to allow the treatment team an overall understanding of the individual's progress through the program. This additional spreadsheet will also track hospitalization, crisis services, incarceration, homelessness and instances of significant substance use concerns.

## **PROGRAM OBJECTIVES, DELIVERABLES AND OUTCOMES**

CONTRACTOR will utilize a computer tracking system with which outcome measures and other relevant data will be maintained.

Program objectives will include:

1. A 70% reduction in hospitalization frequency for each individual after one year of receiving services or upon discharge.
2. An 80% reduction in days spent homeless after one year of receiving services or upon discharge.
3. An 80% reduction in days spent incarcerated after one year of receiving services.

Program deliverables will include:

1. All individuals receiving the appropriate level of housing support.
2. Individual satisfaction with services and timely, efficient resolution of complaints.
3. All individuals receiving the level of service and support that addresses their unique needs.
4. All individuals receive services that help them achieve a level of recovery, stability and independence that will allow transition to the least restrictive level of care possible as appropriate for their individual needs.
5. The collaborative development and achievement of meaningful treatment and wellness goals for all individuals.



6. Collaborative relationships will be established and maintained between CONTRACTOR and community partners who have frequent contact with hospitalized, homeless or incarcerated adults.
7. Timely submission of all required reports through the DCR system.
8. Minimum of 65% productivity for direct service staff.
9. CONTRACTOR will identify services provided to each individual on a monthly basis.

### TARGET CATEGORIES:

The following outcome measures will be collected during the implementation of this program: **(1)** Effectiveness, **(2)** Efficiency, **(3)** Access, **(4)** Satisfaction and Feedback of Persons Served as well as Stakeholders. These outcomes are evidenced by a reduction in hospitalizations, incarcerations, homelessness and medical hospitalizations as well as increased participation in education, employment or volunteerism.

The following is a detailed overview of the outcomes generated by the program, in accordance with the four (4) domains set forth by the **Commission on Accreditation of Rehabilitation Facilities (CARF)** and which address the program's effectiveness, efficiency, access, satisfaction and feedback of persons served and stakeholders. Additional details are provided for each of the outcomes in the area of program effectiveness including a targeted reduction in psychiatric hospitalizations, incarcerations, homelessness, and medical hospitalizations and targeted improvement in individual participation in educational settings and employment or volunteerism.

### **1. Effectiveness-**

#### a. Psychiatric Hospitalization

Hospitalization refers to any hospital admission captured in COUNTY's electronic health record, Avatar. Data may be entered by any hospital that utilizes Avatar including COUNTY's PHF, Community Behavioral Health Center (CBHC), and Kaweah Delta Psychiatric Hospital. The goal of this measure is to assess the degree of effectiveness for FSP level services. CONTRACTOR will track decreases in the number of days hospitalized post enrollment and compare to the total number of days spent in a psychiatric setting 12 months prior to program enrollment.

- i. Objective: To prevent and reduce the total number of individuals and days spent in a psychiatric hospital setting compared to the total number of individuals and days spent hospitalized 12 months prior to program enrollment.
- ii. Indicator: Percentage of individuals that experienced no psychiatric hospitalizations, and total number of individuals and days spent in a hospital setting compared to pre-enrollment.
- iii. Eligible Individuals: FSP individuals served by the program for a minimum of one year.
- iv. Time of Measure: FY 20-21
- v. Data Source: DCR/ITWS State database.
- vi. Target Goal Expectancy: A minimum of 70% of individuals enrolled in FSP services will experience no episodes of psychiatric hospitalization. The number of individuals and days spent in a psychiatric hospital setting will be reduced when compared to the number of days hospitalized prior to program enrollment.
- vii. Outcome: Will be measured annually.

#### b. Incarcerations

Incarceration refers to individuals confined in a jail or prison setting. The goal is to reduce the number of days spent confined in a jail or prison setting compared to the number of days spent incarcerated 12 months prior to program enrollment.

- i. Objective: To prevent and reduce the total number of individuals and days spent incarcerated compared to the total number of days spent incarcerated 12 months prior to program enrollment.
- ii. Indicator: Percentage of individuals that experienced no incarcerations and the total number of individuals and days spent incarcerated compared to pre-enrollment.
- iii. Eligible Individuals: FSP individuals served by the program a minimum of one year.
- iv. Time of Measure: FY 20-21
- v. Data Source: DCR/ITWS State database.
- vi. Target Goal Expectancy: A minimum of 70% of individuals enrolled in FSP services will experience no episodes of incarceration. The total number of individuals and days incarcerated will be reduced when compared to 12 months prior to enrollment.
- vii. Outcome: Will be measured annually.

#### c. Homelessness

Homelessness refers to individuals without a place to live, who are living in a place not meant for human habitation, or who are living in an emergency shelter. The goal is to reduce the total number of days spent homeless compared to the total number of days spent homeless 12 months prior to program enrollment.

- i. Objective: To prevent and reduce the total number of individuals and days spent homeless compared to the total number of individuals and days spent homeless 12 months prior to program enrollment.
- ii. Indicator: Percentage of individuals that experienced no episodes of homelessness and the total number of individuals and days spent homeless compared to pre-enrollment.
- iii. Eligible Individuals: FSP individuals served by the program a minimum of one year.
- iv. Time of Measure: FY 20-21
- v. Data Source: DCR/ITWS State database.
- vi. Target Goal Expectancy: A minimum of 70% of individuals enrolled in FSP services will experience no episodes of homelessness. The total number of individuals and days spent homeless will be reduced when compared to 12 months prior to program enrollment.
- vii. Outcome: Will be measured annually.

#### d. Medical Hospitalizations

Medical hospitalization refers to individuals who frequently require hospitalization at a local hospital or emergency department as a result of chronic or untreated physical health related conditions. The goal is to reduce the total number of days spent in a hospital or emergency department setting compared to the total number of days spent hospitalized 12 months prior to program enrollment.

- i. Objective: To prevent and reduce the total number of individuals and days spent in a hospital or emergency department (ED) setting compared to 12 months prior to program enrollment.
- ii. Indicator: Percentage of individuals that experienced no episodes of medical hospitalizations or ED admissions, and the total number of individuals and days admitted in a medical hospital or ED compared to pre-enrollment.
- iii. Eligible Individuals: FSP individuals served by the program for a minimum of one year.
- iv. Time of Measure: FY 20-21
- v. Data Source: DCR/ITWS State database.

- vi. Target Goal Expectancy: A minimum of 70% of individuals enrolled in FSP services will experience no episodes of medical hospitalizations or ED admissions. The total number of individuals and days admitted in a medical hospital or ED will be reduced when compared to 12 months prior to program enrollment.
- vii. Outcome: Will be measured annually.

e. Participation in Educational Settings

Educational setting refers to any learning environment or institution that offers educational services and curriculum according to specific objectives. Examples may include adult schools, vocational schools, community colleges, on-line coursework and universities. The goal is to increase the annual percentage of participants enrolled in educational settings.

- i. Objective: To increase the annual percentage of FSP participants enrolled in educational settings.
- ii. Indicator: Annual percentage of FSP individuals enrolled in educational settings.
- iii. Eligible Individuals: FSP individuals served by the program enrolled in educational settings.
- iv. Time of Measure: FY 20-21
- v. Data Source: DCR/ITWS State database.
- vi. Target Goal Expectancy: 15% of FSP individuals will be enrolled in educational settings.
- vii. Outcome: To be measured annually.

f. Participation in Employment or Volunteerism

Employment refers to work environments where individuals are paid competitive wages in exchange for job related activities performed. Volunteerism refers to environments where individuals willingly provide services or complete tasks without any expectation of financial compensation but may gain work experience and job-related skills. The goal is to increase the annual percentage of participants engaged in employment or volunteer activities.

- i. Objective: To increase the annual percentage of FSP individuals engaged in employment or volunteer activities.
- ii. Indicator: Annual percentage of FSP individuals engaged in employment or volunteer activities.
- iii. Eligible Individuals: FSP individuals served by the program engaged in employment or volunteer activities.
- iv. Time of Measure: FY 20-21
- v. Data Source: DCR/ITWS State database.
- vi. Target Goal Expectancy: To have a minimum of 15% of FSP individuals engaged in employment or volunteer activities annually.
- vii. Outcome: To be measured annually.

**Reading Recovery: Consumer Recovery Measure and Recovery Marker Inventory**

Reaching Recovery is a tool that was developed by the Mental Health Center of Denver; its major focus is tracking change across multiple domains of wellness. This set of tools is designed to track the degree of change across multiple domains of wellness utilizing tools designed to measure recovery. With Reaching Recovery in place, the FSP Programs will begin to utilize several tools designed to measure recovery for FSP level individuals: the Recovery Needs Level Marker, Consumer Recovery Measure, and the Recovery Marker Inventory.

Recovery Needs Level (RNL):

- i. Objective: To ensure the appropriate level of service intensity at a individual's stage of recovery; to move individuals towards increased levels of functioning; and to transition individuals to the least restrictive level of care.
- ii. Indicator: Recovery Needs Level (RNL) records the status of observed needs across 17 domains. RNL scores are compared at 6-month intervals to show trends of recovery through time. Reduced scores indicate positive recovery growth and movement towards reduced levels of service.
- iii. Eligible Individuals: FSP individuals served by the program a minimum of one year.
- iv. Time of Measure: FY 20-21
- v. Data Source: Avatar Electronic Health Record
- vi. Target Goal Expectancy: To have a minimum of 50% of individuals that participated in services realize positive recovery growth and a minimum of 25% transition to lower levels of service.
- vii. Outcome: To be measured annually.

#### Recovery Marker Inventory (RMI):

- i. Objective: To provide a quarterly practitioner rating of a participant's progress in recovery areas that tend to correlate with an individual's recovery.
- ii. Indicator: Recovery Marker Inventory (RMI) A practitioner's rating of the participant's recovery on 8 objective factors associated with recovery: employment, education, active growth, level of symptom management, participation in services, housing. RMI scores are compared at quarterly intervals to show trends of recovery through time. Increased scores indicate positive recovery growth.
- iii. Eligible Individuals: FSP individuals served by the program a minimum of one year.
- iv. Time of Measure: FY 20-21
- v. Data Source: Avatar Electronic Health Record
- vi. Target Goal Expectancy: To have a minimum of 50% of individuals that participated in services realize positive RMI recovery growth trends.
- vii. Outcome: To be measured annually.

#### Consumer Recovery Measure (CRM):

- i. Objective: To measure the individual's perception of their recovery.
- ii. Indicator: Consumer Recovery Measure (CRM) A quarterly rating of a individual's perception of recovery across 5 dimensions: hope, symptom management, personal sense of safety, active growth orientation, satisfaction with social networks. Increased scores indicate positive recovery growth from the individual's perspective.
- iii. Eligible Individuals: FSP individuals served by the program a minimum of one year.
- iv. Time of Measure: FY 20-21
- v. Data Source: Avatar Electronic Health Record
- vi. Target Goal Expectancy: To have a minimum of 50% of individuals that participated in services perceive positive recovery growth trends.
- vii. Outcome: To be measured annually.

## 2. Efficiency-

### a. Cost per Individual

Costs include all staffing and overhead costs associated with the operation of each FSP Program Site. The goal is to efficiently use resources and maintain or minimize costs per individual.

- i. Objective: To efficiently use resources and maintain or minimize cost per individual.
- ii. Indicator: Total program costs compared to number of unique individuals served.

- iii. Eligible Individuals: FSP individuals served by the program.
- iv. Time of Measure: FY 20-21
- v. Data Source: Avatar and Financial Records
- vi. Target Goal Expectancy: To keep within departmental budgeted costs for the program.
- vii. Outcome: To be measured annually.

### 3. Access-

#### a. Length of time from referral to first contact

Each FSP Program Site will receive referrals from multiple community entities for individuals seeking treatment for co-occurring disorders. The goal of the programs is to act promptly for each referral and to provide timely service for individuals requesting services. The target wait time from referral to first contact is within two (2) business days.

- i. Objective: To provide timely service for individuals requesting mental health care.
- ii. Indicator: Percentage of individuals that received first contact attempts within 7 business days of the referral date.
- iii. Eligible Individuals: Individuals referred to the program.
- iv. Time of Measure: FY 20-21
- v. Data Source: Avatar
- vi. Target Goal Expectancy: 70% of individuals will attempt to be contacted within 7 business days of the referral date.
- vii. Outcome: To be measured annually.

#### b. Length of time from first contact to first assessment appointment offered

Each FSP Program Site will receive assessment referrals from multiple community entities. The goal of the programs is to act promptly for each referral and the goal wait time from referral to first intake/assessment appointment is within 10 business days.

- i. Objective: To provide timely service for individuals requesting mental health care.
- ii. Indicator: Percentage of individuals offered their first assessment appointment within 10 business days of the first contact date.
- iii. Eligible Individuals: Individuals referred to the program and offered an assessment appointment.
- iv. Time of Measure: FY 20-21
- v. Data Source: Avatar
- vi. Target Goal Expectancy: 70% of individuals will be offered their first assessment appointment within 10 business days of the first contact date.
- vii. Outcome: To be measured annually.

#### c. Length of time from assessment to the first psychiatry appointment offered

Each FSP Program Site will receive referrals from multiple community entities for psychiatry appointments. The goal of the programs is to act promptly for each referral. The goal wait time from referral to first scheduled psychiatry appointment is within 15 business days.

- i. Objective: To provide timely service for individuals requesting psychiatric care and medications.
- ii. Indicator: Percentage of individuals offered their first psychiatry appointment within 15 business days of their assessment appointment.
- iii. Eligible Individuals: Individuals assessed and enrolled into program services.
- iv. Time of Measure: FY 20-21
- v. Data Source: Avatar
- vi. Target Goal Expectancy: 70% of individuals will be offered their first psychiatry appointment within 15 business days of their assessment date.

- vii. Outcome: To be measured annually.

#### **4. Satisfaction & Feedback of Persons Served & Stakeholders-**

##### Consumer Perception Survey

Consumer Perception Surveys (CPS) are conducted every six (6) months. FSP individuals and their family members will be encouraged to complete the CPS surveys made available to them at County and contracted provider organizations.

- i. Objective: To gauge satisfaction of individuals and collect data for service planning and quality improvement.
- ii. Indicator: Average percent of individuals who complete the survey and response was 'Agree' or 'Strongly Agree' for the following domains: General Satisfaction, Perception of Access, Perception of Quality and Appropriateness, Perception of Treatment Participation, Perception of Outcomes of Services, Perception of Functioning, and Perception of Social Connectedness.
- iii. Eligible Individuals: Individuals who agree to complete the survey.
- iv. Time of Measure: The survey will be conducted in May of 2020.
- v. Data Source: Consumer Perception Survey data
- vi. Target Goal Expectancy: The program would like to see a majority of individuals satisfied for each domain.
- vii. Outcome: To be measured annually.

**Mental Health Services Act (MHSA)  
Full-Service Partnership (FSP) Program  
Scope of Work**

**CONTRACTOR:** Mental Health Systems, Inc.

**CONTACT:** James C. Callaghan, President & CEO  
[jcallaghan@mhsinc.org](mailto:jcallaghan@mhsinc.org)

**SITE ADDRESS:** 2550 West Clinton Avenue Fresno, CA 93705

**SERVICES:** Full-Service Partnership Program providing Comprehensive Mental Health, Housing, Employment Support and Community Supports for Adults and Older Adults with Serious Mental Illness

**CONTRACT TERM:** June 1, 2020 – August 30, 2020, Ramp-Up  
September 1, 2020 – June 30, 2023, 2-Year, 10-month Initial Term  
July 1, 2023 – June 30, 2025, two (2) possible twelve-month extensions

**PROJECT DESCRIPTION**

CONTRACTOR's Daring to Achieve Recovery Together (DART) Program Site will be recovery oriented, co-occurring disorder capable FSP programs consisting of three (3) levels of care: FSP, Heightened FSP, and Intensive FSP so that individuals have the support they require to remain engaged in services with the flexibility of moving from one level to another seamlessly. Each DART program will provide comprehensive, dual diagnosis services staffed by teams which will be composed of qualified, culturally diverse professionals who mirror the cultures of the individuals to be served and who bring a variety of education, experience levels, lived experience, and expertise in the field of mental illness, substance use disorder recovery, supportive services and housing to the program.

The DART Program design will provide community-based and culturally-competent outpatient mental health treatment and substance use disorder treatment which increases the likelihood of individuals becoming productive members of society. DART will provide the full spectrum of FSP services 24 hours per day, seven days per week (24/7).

With recovery as the primary goal, services will include a strong focus on skills building. DART staff will meet individuals "where they are" and do "whatever it takes" to move the individuals we serve through the stages of change to empower each individual to achieve their goals. The program's philosophy and values include the belief that every person has the potential for growth, regardless of disability; each client's Individual Services and Support Plan (ISSP) will be strength-based focusing on individual and family strengths with the firm belief that all individuals can achieve recovery goals, gain increased independence, self-sufficiency and achieve community integration with the necessary individualized supports.

The DART FSP Program will incorporate a comprehensive array of evidence-based practices and models including the Housing First model, combined with a harm reduction model that ensures individuals face the fewest barriers to service as possible. The DART Program will provide a wide variety of housing services to support our mantra: "it's not if the client is ready for housing but is the housing ready for our client." To ensure the "housing is ready for our client"

speaks to our ability to wrap the appropriate amount of care around each individual thus allowing them to successfully live in housing of their choice.

The DART FSP Program will ensure that all services are:

- Recovery oriented;
- Client-centered and built upon collaborations between each team, individual and family that emphasize individual ownership of the recovery process;
- Designed to incorporate strengths-based solutions to improve the individual's quality of life utilizing a broad array of integrated services;
- Linking individuals to supportive services in the community;
- Inclusive of the participation of family members and community support systems;
- Supportive of peer recovery networks; and
- Focused on reducing hospitalizations, incarcerations, homelessness and crisis episodes.

### **LOCATION OF SERVICES**

To increase the frequency of individuals obtaining needed services within the community, CONTRACTOR will:

- 1) Utilize program vehicles to travel to outreach locations in order to provide services to individuals wherever they are residing or most comfortable;
- 2) Provide transportation to services, if needed;
- 3) Provide bus passes or access to Uber Health for those without their own transportation;
- 4) Provide care packages to meet immediate needs of individuals and to help with their engagement in services;
- 5) Each FSP team will provide services in a specific geographic area, with outreach taking place throughout Fresno in areas where individuals who may be in need of services are known to congregate;
- 6) Provide services in the field, including medical/psychiatric, at least 80% of the time;
- 7) Collaborate with other community agencies in order to connect and engage with potential individuals;
- 8) Include peers with lived experience or the experience of having lived with an individual who has struggled with homelessness, mental health, and/or substance use;
- 9) Include team members who reflect the demographics of the population;



10) Establish rapport by building relationships—the key to a successful program that effectively links individuals to needed services and to address common barriers.

The CONTRACTOR's DART FSP Program Site will be located throughout the metropolitan Fresno/Clovis area at the following addresses:

DART West, 2550 West Clinton Avenue Fresno, CA 93705

## **DESCRIPTION OF SERVICES**

### **Outreach and Engagement:**

CONTRACTOR will have Peer Support Specialists on each of the Treatment Teams. All staff will be trained in and will use Motivational Interviewing (MI) to meet individuals where they are, establish rapport, and help individuals establish baseline goals for improving their circumstances. All services will be voluntary and individualized based on each individual's unique needs, challenges and level of functioning; "client voice and choice" will always be respected. Outreach and engagement activities will respect the individual as the expert in their own life and will focus on strengths rather than deficits throughout the process of initial contact, engagement, and linkage with other providers. The Treatment Teams will work with individuals to establish what they want and will point them in the direction to achieve their objectives while honoring their preferences, including how often they wish to be contacted. In addition, CONTRACTOR will provide education on the choices or services available in the community which will help the individual and family to attain their goals.

### **Crisis Intervention:**

FSP teams will be trained in crisis de-escalation and will incorporate crisis planning into each client's ISSP. In order to best support FSP individuals when they are in crisis, CONTRACTOR will build upon and keep a strong network of resources available. The Program Manager (PM) for the Program Site will meet with entities such as the Kingsview Crisis Intervention Team (CIT), and the WestCare Supportive Overnight Stay Program, hospitals and emergency rooms, crisis responders, faith-based and culturally-affiliated organizations serving specific religious or ethnic populations, as well as the LGBTQ community so that CONTRACTOR is able to coordinate warm handoffs when our individuals are in crisis. In addition, CONTRACTOR will operate a 24/7 crisis line to ensure that our individuals may always reach an understanding team member in times of duress.

### **Needs Assessment:**

All individuals enrolled in CONTRACTOR's FSP program will undergo continuous assessment of needs and strengths through the use of formal assessment tools, self-report and staff and family/support observations. The Personal Services Coordinator (PSC) conducts the initial intake and assessment at a location convenient to the individual in order to meet them where they are in terms of both geography and in terms of defining what they perceive as their most pressing issues.

### **Coordination of Services:**

One of the primary tasks of the PSC is to coordinate services in order to optimize the overall health of FSP individuals. CONTRACTOR values such coordination of care, as well as the

linkage of individuals to medical homes, per their service plans. Through strong relationships with physical healthcare providers CONTRACTOR assures quality coordinated care, integrated treatment, and bidirectional communication and referrals. Communication is critical for FSP individuals to receive the most comprehensive care possible. CONTRACTOR's FSP Program will request mandatory client/guardian authorization to exchange information with primary care providers prior to releasing any client information; then upon authorization, the program will communicate with primary care providers as required. Contact, at minimum, is made annually with each PCP per the individual's needs and contact is documented. Many times, due to the individual's changing needs, hospitalizations, lab results, or high-risk situations, contact is made more frequently in the best interest of the individual. CONTRACTOR uses a Care Coordination form to track referrals to PCPs and the form is kept in the individual's chart. All contacts are documented, and ongoing evidence of collaboration is maintained in our clinical charts.

### **Collateral and Family/Peer Support and Education Services:**

CONTRACTOR's FSP Treatment Teams will work to integrate family and peers supports into each individual's recovery to help support ongoing efforts and to assist with reintegration to the community. Collateral support begins with the assessment process when the PSC works to elicit information from the individual's natural supports. Throughout the individual's participation in the FSP program, Treatment Team members engage and teach family through psychoeducational groups, individual meetings, and by promoting the message of recovery and hope in all interactions utilizing language that represents their shared experiences rather than labels, diagnoses, and clinical terminology. This message of hope includes the vision that recovery is a process with no limitations, including going to school, volunteering, and employment. Through honest and open communication and sharing, team members assist individuals and family members in understanding that no matter how challenging the situation, "There is always hope." The presence of peers on each FSP team helps to reinforce this message, as well as to give individuals and family a relatable individual who can truly understand their journey.

### **Individual and Group Therapeutic Services:**

CONTRACTOR's FSP Program will offer each individual treatment that is specific to their needs and goals. Individuals may engage in individual therapy sessions with a licensed or license-eligible clinician. CONTRACTOR will typically use Cognitive Behavioral Therapy (CBT) as a baseline treatment modality; however, CONTRACTOR's clinicians will use the most appropriate modalities based on the needs of the individual such as CBT for Psychosis (CBTp), Trauma-Focused CBT (TF-CBT), and Dialectical Behavior Therapy (DBT) as well as reinforcing skills learned in groups such as Cognitive Behavioral Social Skills group, DBT group, Seeking Safety, etc. A variety of group therapy options are offered at each program to include those focusing on specific therapeutic modalities, trauma, co-occurring disorders (COD), wellness, life skills, etc. The FSP Program will have its own unique group schedule based on the individual population's needs and goals.

### **Treatment and Support for Co-Occurring Disorders:**

All CONTRACTOR team members will be trained in COD including providing a welcoming environment for those with COD so that all individuals can feel comfortable discussing their substance use with staff. All staff will also be trained to provide COD services and will be able to provide both individual and group services to those individuals with COD. Including a Dual Recovery Case Manager and Peer Support Specialist is an additional strategy to ensure that individuals are comfortable with disclosing their substance use and feel that staff are empathetic with their experiences both with the positive and negative effects of substance use. While the goal

of services will be to help individuals achieve an alcohol and drug free lifestyle if that is their choice, the program will also use harm reduction strategies as individuals move through the stages of change from denial, unless abstinence is mandated by the Court.

**Rehabilitation/Activities of Daily Living:**

CONTRACTOR's program rehabilitation services will support individuals in the improvement, maintenance, or restoration of functional skills, daily living skills, social and leisure skills, grooming and personal hygiene skills, obtaining support resources, and medication education. Services to family members will provide support for those individuals and address the goals of the ISSP and their role and needed skills or skill development in supporting their family member. Many skills will be taught by CONTRACTOR team members as they work with individuals directly "in vivo," in community-based workshops or groups. Rehabilitation services may take place individually or in groups, and in the home or other community location. Whether in individual meetings or small groups, team members will work with the individual to develop and use appropriate skills such as personal hygiene, house cleaning and household chores including housekeeping and laundry, using community and public transportation, shopping for and preparing/cooking healthy meals, money management skills, and care of physical health.

**Medication Support Services:**

CONTRACTOR has a great deal of experience providing comprehensive medication management and support services and working with Patient Assistance Programs (PAPs). FSP program services will include medication evaluation, prescribing, Medication Assisted Treatment (MAT) for COD, medication education, consultation, prescription delivery, monitoring, linkage, and support provided at the program site or in the community based on the individual's wishes.

**Personal Service Care Coordination:**

Each person served in the CONTRACTOR's FSP program will have an identified single point of responsibility, the Personal Service Coordinator (PSC) who functions as the Case Manager to ensure that services are provided as appropriate, available in a timely manner and individualized. The PSC does initial outreach, engagement, and intake, ensuring that the individual's basic needs are addressed including food, clothing, and shelter and serves as the individual's main point of contact for service provision throughout their enrollment in the program.

**Linkage and Consultation:**

CONTRACTOR works in each community to establish a roadmap of referrals and linkages necessary to assist individuals in meeting their goals across all life domains both during and after program participation. Based on individual and family choice, team members will provide active linkage to community resources (e.g., faith-based, Legal Aid, etc.); other service providers including those providing primary care, mental health services, and substance use disorder services; self-help communities; Wellness Recovery Action Plan (WRAP) groups; ethnic organizations; peer-run programs, including NAMI and Recovery International and Clubhouses; recreational resources; and health and wellness providers. CONTRACTOR's DART Program will provide "active linkage" which typically involves a Peer and Family Advocate or other identified team member going with the individual until the individual feels connected to the resource. Referrals and linkages are made with a "warm handoff" to ensure that the individual and provider have made a genuine connection.

### **Non-Behavioral Health Services and Supports:**

Transportation, housing, flexible funds, and representative payee services are all addressed individually in each individual's Plan, coordinated by their PSC.

### **HOURS OF OPERATION**

CONTRACTOR's FSP Program Site will be open from 7 a.m. to 7 p.m. seven days per week with after-hours services provided as necessary. When individual intervention is required between 7 p.m. and 7 a.m., the on-call team member will notify the Supervisor on Call and the team will respond in person if necessary. The team members identified as most appropriate to respond will meet at the individual's location to address the crisis and do "whatever it takes" to ensure client safety and to stabilize the situation. The Consultant Psychiatrist will also be available to assist as needed. The team may also respond in the community, if it is determined to be safe, to transport the individual to another housing location such as the master leased unit set aside for respite care and late in the day referrals; for example, if the landlord is threatening to evict the individual that night. Typically, staff will then work with the landlord the next day to resolve the crisis and try to maintain the individual's housing.

### **LEVELS OF CARE**

CONTRACTOR's FSP Program will utilize a multiple tiered model with three levels of care to ensure maximum flexibility for individuals to move seamlessly between levels, as clinically indicated. Provision of these three different levels of service within the FSP model allows for more individualized treatment and for better engagement and retention. The level system allows for individuals to move along at a pace that makes sense for them and their specific needs, incorporating successes in their recovery journey as they step down from one level to another. It also provides individuals and FSP staff with clear parameters for goal achievement to ensure that individuals are moving along in treatment at an appropriate pace.

The three tiers/levels of care are:

- **FSP**
- **Heightened FSP**
- **Intensive FSP**

**Intensive FSP services** will be designed to meet FSP fidelity standards, including staffing levels and frequency/intensity of services. Individuals at the Intensive FSP level of care will have at least four (4) contacts per week, with group participation as determined by the ISSP. Each Intensive FSP level individual will receive at least 120 minutes of face-to-face service per week. Since individuals will typically be working on different areas of the ISSP such as symptom management, education, etc., each individual will typically be working with more than one team member in any given week (e.g., the nurse for ongoing medication monitoring, PSC for linkages, etc.) The Treatment Team will meet with individuals in person and/or on the phone as often as necessary to maintain them in the community and to avoid hospitalizations or a higher level of care. The team will work with individuals who are progressing toward the achievement of the goals in their ISSP to decrease the intensity of services. However, the team will consistently maintain contact with individuals and each individual will be discussed at the morning meeting. Therefore,

the team will always be able to step in quickly to avoid symptoms worsening and to prevent minor problems from escalating into crises.

**Heightened FSP** will be similar to the Intensive FSP level in terms of intensity of services. Individuals at this level will receive services based on their individual needs with an average of three (3) weekly contacts, at least one of which will be face-to-face for a minimum of 90 minutes of face-to-face service per week. The frequency of individual services and individual clinical counseling will thus be less than at the Intensive FSP level of care. Services provided will begin to lay the groundwork for participation in more and varied types of groups to assist in addressing individual-identified issues. For example, an individual may participate in individual counseling at the Heightened FSP level using Trauma Focused CBT to build a foundation for participation in Seeking Safety once they have transitioned down to FSP.

**FSP** individuals will have at least two (2) individual contacts per week, one of which will be face-to-face for a minimum of 60 minutes per week. Although services will be less frequent than at the Heightened FSP or Intensive FSP level, intensity and frequency will still be individualized to meet each individual's needs, including identifying the services that the individual will participate in at the FSP level, and responding promptly to any individual who has a crisis or event that necessitates immediate response, including increasing services or moving up a level of care until such time as the individual is re-stabilized and moving forward toward Individual Plan goal attainment.

A primary difference between services provided at the Intensive FSP level of care and those provided at the Heightened FSP and FSP level of care will be the frequency/intensity of services which will be increasing lower as the individual moves towards the FSP level. The frequency of individual services and individual clinical counseling will be less intense and there will be more wraparound services as individuals step down through the levels of services. For example, individuals in the FSP level will have demonstrated improved capacity toward identifying strengths and barriers.

**Intensive FSP criteria:** individuals must meet DSM-V criteria for a SMI diagnosis. They must meet medical necessity and have significant impairment (e.g., paranoid and hearing voices, cannot leave the house, etc.) that impair their functioning. The individual must be a consistent utilizer of emergency or crisis services due to assessed impairments in one of five domains: living arrangement (without permanent safe living situation), employment (without regular, sustainable income), daily activities (life is organized around survival needs), social relationships (estrangement from family/healthy supports), and health (co-occurring untreated, unmanaged medical conditions).

**Heightened FSP criteria:** individuals will have a chronic SMI diagnosis, who are unstable or in crisis but with less impairment than those at the Intensive FSP level of DART. They may have limited social skills, serious impairments across all life domains (including physical health problems), and histories of trauma. Many will face imminent risk of hospitalization, incarceration, and homelessness, and/or are frequent utilizers of emergency psychiatric services many of whom have acute and long-term institutionalization backgrounds who are often difficult to engage in services, yet can succeed in the community with sufficient linkage, structure, and support.

**FSP criteria:** Individuals with an SMI diagnosis who, through moving through the Intensive FSP and Heightened FSP levels of care, are beginning to explore their needs across all life domains who are open to exploring the resolution of barriers to a healthier lifestyle such as permanent, safe and stable housing, education/vocation, daily activities, lack of support system, and less than optimum health.

### **Transitions Among Levels of Care:**

Individuals in the CONTRACTOR's DART Program will experience seamless transitions from one level of care to another within the DART program. It is CONTRACTOR's primary goal to ensure that individuals remain engaged and on track with pursuit of the individuals' Plan objectives toward a healthier, more satisfying life. CONTRACTOR's DART Program will utilize Reaching Recovery to track the degree of change across multiple domains of wellness. Each individual will be assisted to achieve a level of recovery, stability, and independence that will allow them to transition to the least restrictive level of care possible. In addition to Reaching Recovery, MHS DART will use the Recovery Needs Level (RNL) tool to determine the appropriate level of care for each individual. Some individuals may remain at the highest level of service for an extended period, others may demonstrate improvements in functioning that allow them to work with staff to titrate services down, moving to a lower level of care within the program. Other individuals may be assigned to a lower level of care within the program based on their initial assessment and RNL. All services will be tailored to the individual client's needs, wishes, and preferences.

CONTRACTOR's DART Program will implement the RNL tool every 90 days to determine the appropriate level of care for all individuals. In addition, staff will monitor individuals during their regular interactions, at all levels of care, to identify any potential crises or occurrences that may indicate that the individual needs a higher level of care or conversely is ready for a lower level of care as they demonstrate increased competency and higher skills levels in living successfully in the community, managing symptoms, etc.

As individuals move through the levels of care, staff will update the Plan of Care to reflect the services needed and the frequency and intensity of services with individuals. However, individuals may not be aware per se that they are being served in different levels of care, transitions should not impact the individual's perspective of where they are in their treatment trajectory. Rather individuals will experience working with staff on different services they need as they increase their competencies and work with staff to titrate down the frequency of services in preparation for stepping down to a lower level of care. Transitions will thus be seamless throughout all levels of care with individuals feeling no disruption or anxiety as they transition. Should individuals need to move to a higher level of service because of an increase in acuity of symptoms or circumstances, they will experience this as an increase in intensity of services and the addition of services as needed, rather than a formal transition.

### **PROGRAM OBJECTIVES AND OUTCOMES**

CONTRACTOR will utilize its electronic health systems, including Avatar, to collect data to track metrics which inform individual outcomes.

1. 80% of individuals will demonstrate improved adult stability and decreased incarceration and psychiatric hospitalization as evidenced by information from Key Event Tracking (KET) and 3Ms;
2. All individuals will have improved Consumer Recovery Measures scores.
3. 95% of individuals will demonstrate a positive individual services experience as evidenced by annual individual survey data reflecting scores of satisfied and very satisfied with services received.

4. All participants will have demonstrated decreased criminogenic risks/needs as evidenced by the Level of Service Inventory-Revised (LSI-R).

For the Intensive FSP tier within the DART programs, CONTRACTOR will meet outcomes in each of the Commission on Accreditation of Rehabilitation Facilities (CARF) domains and has included more than one performance indicator for each of the four domains.

**Effectiveness:**

1. Individuals served will experience a reduction in recidivism events (incarcerations, homelessness, crisis or inpatient hospitalization admissions) to no more than six (6) events within the first six (6) months after admission compared to events prior to admission as evidenced by reports of the KETs completed for each individual whenever a key event takes place.
2. There will be a reduction of key events for recidivism tracked as:
  - a. A reduction in engagement in three (3) or less key recidivism events (incarcerations, homelessness, crisis or inpatient hospitalization admissions) during 6-12 months in the program compared to events prior to admission, as evidenced by reports of the KETs completed for each individual whenever a key event takes place.
  - b. A reduction in engagement in no more than one (1) key recidivism event (incarcerations, homelessness, crisis or inpatient hospitalization admissions) during 13-18 months in the program compared to events prior to admission, as evidenced by reports of the KETs completed for each individual whenever a key event takes place.
3. The DART Program will show at least 75% reduction in inpatient psychiatric hospitalizations after being admitted to program services compared to inpatient days utilized the year prior to program admissions, as evidenced by the end of year Data Collection and Reporting (DCR) system report.
4. The DART Program will show at least 75% reduction in incarceration days after being admitted to program services compared to inpatient days utilized the years prior to program admissions, as evidenced by the end of year DCR report.
5. The DART Program will show at least 75% reduction in days of homelessness compared to events prior to admission, unless housing assistance is declined, as evidenced by the end of year DCR report.
6. The DART Program will show at least 75% reduction in crisis episodes compared to episodes prior to program admission as evidenced by the end of year DCR report.
7. The DART Program will demonstrate a significant increase in individual functioning, as evidenced by the above outcomes #3-6.

The DART Program Manager will ensure that reports are run monthly from the DCR system and will review these reports to ensure that the program is on track to meet overall outcomes.

**Efficiency:**

1. The DART Program direct services productivity rate is expected by CONTRACTOR to be at a minimum of 65% and will be reported in writing by the Program Manager at regularly scheduled meetings with DBH. Productivity is reviewed during the monthly meeting between the Program Manager and Program Supervisors/Team Leads.
2. Individuals in independent supportive housing and lower levels of housing such as Room and Board will develop a plan to provide for their own housing costs. The team will work with individuals on payment issues. Individuals will assume responsibility for housing cost, when ready and as appropriate. A report regarding individual plans for housing costs will be submitted annually.
3. The DART Program will conduct a RNL assessment tool within 24 hours of initial appointment to assess for appropriate level of care and will conduct the ASAM within 72 hours of initial appointment to assess for the appropriate level of care for individuals with substance use disorder, as evidenced by the RNL's entered into COUNTY's current EHR system, "Avatar" and ASAM's internally monitored by the Program Supervisor.

**Access:**

1. Within 24 hours of referral receipt, DART will make contact to schedule intake and enrollment; Initial appointments will be scheduled within 24 -72 hours from initial contact; If individual declines contact, DART will document accordingly and notify referral source, as evidenced by access logs delivered each month to DBH Managed Care.
2. Within 90 days of admission to DART, at least 95% of individuals who do not have Supplemental Security Income (SSI) will have completed an SSI application, as evidenced by progress notes, a receipt in the individual's file, and the tracking log.
3. Within 60 days of admission to DART, at least 95% of individuals will be linked to general relief to establish supplemental income, as evidenced by progress notes, a receipt in the individual's file, and the tracking log.
4. Within six (6) months of being admitted to DART, at least 95% of individuals served will have linkage to and documentation of a Primary Care Physician, as evidenced by the tracking log.
5. No individuals admitted to DART will be referred to or placed on conservatorship while admitted for DART FSP Program services who were not previously in the conservatorship process, as evidenced by lack of a referral for conservatorship in the individual file and progress notes.
6. Within 30 days of enrollment, at least 95% of individuals will have participated in forming their individualized personal service care plan, as evidenced by the personal service care plan in the individual's file.
7. Within 120 days of enrollment, at least 95% of individuals will be provided/linked to supported employment activities, if desired, as evidenced by a referral placed in the team meeting binder and a progress note.



**Satisfaction:**

1. DART will develop a satisfaction survey that is approved by DBH's MHSa Coordinator, or designee, and will comply with mandated State performance outcomes and quality improvement reports/outcomes. At a minimum, 75% percent of individuals will report their satisfaction with program services through the DART FSP Program twice annual survey and the annual DBH surveys of individuals and families, as evidenced by the survey reports.
2. The DART Program will provide individuals with the Consumer Recovery Measure (CRM) to assess satisfaction in hope, social, growth, safety and symptom management within fourteen (14) days of admission and administer on a quarterly basis. The DART Program will demonstrate an increase in all categories within the first 6 – 12 months of services, as evidenced by the CRM report.
3. The DART Program will conduct a Recovery Measure Inventory (RMI) in reference to the individuals served to assess satisfaction in hope, social, growth, safety and symptom management from the provider perspective within fourteen (14) days of admission and repeat on a quarterly basis. The DART Program will show an increase in all categories within the first 6 – 12 months of services, as evidenced by the RMI report.

**Satisfaction Survey:**

The DART Program will regularly implement Program Satisfaction - Consumer (PS-C) tools designed to track, measure, and evaluate individual, family, and community-partner satisfaction. The PSC will be provided to the individual and family separately every six (6) months and during the discharge process. The PSC is a 20-item scaled questionnaire that asks the individual and family about their experience with the CONTRACTOR's service, specific providers, ease of use, flexibility and satisfaction of results. The California Brief Multi-Cultural Competency Scale (CBMCS) will be e-mailed annually to all staff to complete anonymously and submit to the Program Manager. Results are used to identify areas of training need, and to update the program's Cultural Competency Plan. The Program Satisfaction – Community Partner (PS-CP) tool will be provided to partners who collaborate with the program. The Program Manager regularly reviews these tools, recording them no less than quarterly into the PS Report regularly submitted to the CONTRACTOR's Vice President of Clinical Services who collaborates with the Program Manager to build on identified strengths and mitigate identified concerns.

**Outcome Tracking for the FSP levels of care:**

**Effectiveness**

1. Psychiatric Hospitalizations: Frequency of hospitalizations will be reduced for each individual. Through individual self-report tool, Consumer Recovery Measures, each individual will show a 70% reduction in hospitalization after one year of receiving services or upon discharge.
2. Homelessness: Frequency of homelessness will be reduced for each individual. Each individual will show an 80% reduction in days spent homeless after one year of receiving services or upon discharge. Each individual will obtain and maintain stable housing after one year or receiving services or upon discharge.

3. **Housing:** Each individual will be linked to the appropriate level of housing support, reflective of their individual needs. Each individual in need of housing will receive assistance in housing placement and support—including emergency housing—contingent upon level of need and independent functioning. Each individual shall have stable and sustained housing upon discharge.
4. **Reaching Recovery:** The DART Program will utilize Reaching Recovery to track the degree of change across multiple domains of wellness. Each individual will be assisted to achieve a level of recovery, stability, and independence that will allow them to transition to the least restrictive level of care possible.
5. **Client-Directed:** Personal wellness goals will be included in each client's ISSP. Goals will be evaluated, monitored, and adjusted regularly and written reports will be submitted quarterly.
6. **Direct Services Productivity Rate:** The DART Program services productivity rate will be at a minimum of 65%.
7. **Supplemental Security Income:** Within six (6) months of enrollment, 99% of individuals without SSI will have made SSI applications and a written report regarding these goals will be submitted semi-annually.

### **Efficiency**

**Cost per Client:** The DART Program will efficiently use resources and maintain or minimize costs per client.

### **Access**

**Length of Time from Transition from Level of Care to First Services Provided within the Next Level of Care:** Clients will begin receiving services within 24 hours of being transitioned to or from any level of care.

### **Satisfaction**

**Consumer Perception Survey:** The DART Program will gauge satisfaction of individuals and collect data for service planning and quality improvement. The Consumer Perception Survey is conducted by DBH every six (6) months over a 1-week period. The DART Program staff will encourage individuals to participate in completing the survey with the goal of a 75% satisfaction rate for each domain.

## **FULL SERVICE PARTNERSHIP SERVICE DELIVERY MODEL**

Full Service Partnerships (FSP) are designed as a partnership between enrollees and the service provider. The FSP service delivery ethic incorporates recovery and cultural competence into the services and supports offered to consumers. In this partnership, the service provider commits to do "whatever it takes" and to "meet the client where they are" in order to assist the enrollee achieve their personal recovery/resiliency and wellness goals.

### **1. The Target Population is consistent with the population identified in the Fresno County MHS Community Planning Process.**

The target population must meet requirements for SMI/SED diagnosis, and must address reduction of specific ethnic disparities, as indicated in the MHS Community Services and Supports proposal.

The target population will include clients who are not currently served ***and*** meet one or more of the following criteria:

- Homeless.
- At risk of homelessness – such as youth aging out of foster care or persons coming out of jail.
- Involved in the criminal justice system (including adults with child protection issues).
- Frequent users of hospital and emergency room services.

***or*** are so underserved that they are at risk of:

- Homelessness – such as persons living in institutions or nursing homes.
- Criminal justice involvement.
- Institutionalization.

Diagnoses that serve as criteria for inclusion in the target population will be based on definitions found in California Welfare and Institutions Code Section 5600.3 defining seriously emotionally disturbed mental disorder or serious mental disorder. The operational definition of "diagnosis" for programs serving the chronically homeless may also include: co-occurring disorders, personality disorders, general anxiety/mood disorders, and Post Traumatic Stress Disorder.

### **2. FSP Program Components:**

**All MHS FSP Programs must include the following in their program descriptions:**

- **Providers who are part of the multidisciplinary, community based "treatment" teams serve as an ally to the consumer's recovery process.** The partnership allows clients and family members opportunities for informed choice.
  - The team description must demonstrate commitment and capacity to do "whatever it takes" to assist the enrolled member, specifically:
    - Low staff to client ratio (approximately 1:12 or the ratio that has been specified in the RFP's scope of work).
    - 24/7 availability of the multidisciplinary team.
    - Team culture is created where each member of the team knows each client and the clients are familiar with each member of the team.
    - Members of the team speak the client's language, are familiar with community resources that reflect the healing beliefs of the client's culture, and are positioned to assist the client make meaningful connection with those resources.

- Crisis response comes from a person known to the client.
  - Staff is given the administrative flexibility and flex-funding to connect consumers with non-mental health services and same day needs. Examples include: housing; primary care; dual disorder services; education services and supports; vocational services and supports; payee services/benefits advocacy; community recreational activities (YMCA classes, libraries, movie theaters, etc.); social services; food; transportation; and clothing.
  - Availability of Integrated Dual Diagnosis Treatment or other dual recovery intervention that will provide effective treatment for the target population.
- **Outreach and engagement.** The team's outreach and engagement strategy must be voluntary and driven by the values of client culture. This means that consumers will be engaged "where they are" in terms of their community location, their need for clinical and non-clinical services/supports and their phase of recovery. Outreach workers will have culturally competent language skills and will function as an ally to the consumer's decision to receive services. Peer Support will be included in the outreach and engagement of new clients.
  - **Procedures for enrollment and dis-enrollment will be easily understood, clearly communicated and non-coercive.** Enrollment is voluntary. A condition of enrollment is that the client indicates that they want services from the assertive-community treatment model team.
  - **Each adult, older adult, and transition age youth enrollee must have a Personal Service Coordinator (PSC).** The PSC is an ally to the enrollee and acts as a "single point of responsibility" within the multidisciplinary team for coordinating services and supports.

*"Personal Service Coordinators (PSCs) for adults – case managers for children and youth – must have a caseload that is low enough so that: (1) their availability to the individual and family is appropriate to their service needs, (2) they are able to provide intensive services and supports when needed, and (3) they can give the individual served and/or family member considerable personal attention...PSCs/case managers must be culturally competent, and know the community resources of the client's racial ethnic community."* (Source: DMH Planning Requirements, Section III Identifying Populations for Full Service Partnerships, Aug 2005)

- **Each enrollee must have an Integrated Services and Supports Plan (ISSP) that is developed with their Personal Services Coordinator.** This ISSP is a planning tool that builds on the consumer's strengths. It includes goals and provides a map of the steps that the enrollee identifies as necessary to move along his/her recovery path.

*"Integrated Services and Supports Plans must operationalize the five fundamental concepts (identified in section three of this exhibit) and should reflect community collaboration, be culturally competent, be client/family driven with a wellness/recovery/resiliency focus and they must provide an integrated service experience for the client/family. In addition, the ISSP will be person/child-centered, and give individuals and their families' sufficient information to allow them to make informed choices about the services in which they participate. Services should also include linkage to, or provision of, all needed services or benefits as defined by the client and or family in consultation with the PSC/case manager. This includes the capability of increasing or decreasing service intensity as needed."* (Source: DMH Planning

Requirements, Section III Identifying Populations for Full Service Partnerships, Aug 2005)

- **Peer support services will be made available to the client.** At least two staff (a minimum of 1 FTE) who act in peer support roles will be employed in each MHSAs program.
  - The enrollee is given significant access to peer recovery and self-help services. Tools such as Advanced Directives are made available to adult and older adult clients, and Wellness Recovery Action Plans (WRAP) are made available to adult, transition age youth and older adult clients.
  - Peer Counselors are included as equal partners in the multidisciplinary team, and play a critical role in developing the recovery culture and client orientation of the team.

**3. The Five (5) Core MHSAs Concepts are embedded in each program.**

**Concept 1: Recovery/Resiliency Orientation:** FSPs will embody the values of recovery and resiliency (i.e., hope, personal responsibility, self-advocacy, choice, respect) and the program principles of recovery and resiliency, including:

- Client-driven goal setting and Individualized Services and Supports Plans.
- Providers are allies to the client's recovery process.
- A harm-reduction approach to substance use that encourages recovery and abstinence but does not penalize consumers or withdraw help from them if they are using.
- A built in understanding and expectation of setbacks as part of recovery.
- Links to a range of services that are part of the consumers "pathway to wellness" (i.e., employment, health care, peer support, housing, medications, food and clothing).

**Concept 2: Cultural Competence Orientation:** The program's structure, staffing and service delivery values will reflect the cultural values and orientation of the program's target populations.

The FSP program will embody principals of cultural competence including:

- Diverse staff, representative of the primary ethnic groups to be reached through the program.
- Staff trained regarding common access barriers for racial and ethnic groups targeted (including the impact of housing discrimination).
- Links to community-based organizations that share the healing beliefs and practices of ethnic communities served by the FSP.

The FSP program must also be able to deal with gender and sexual orientation diversity. Training in sensitivity to gender and sexuality issues is a key component for staff on the team.

**Concept 3: Community Collaboration:** FSP Collaborations ensure that community resources are made available to enrollees. These collaborations include subcontracts between the vendor and other agencies, memoranda of understanding with community non-profits and businesses regarding providing services to clients, and informal relationships built between FSP staff and community stakeholders that result in improved access and decreased discrimination.

**Concept 4: Client/Family Driven program:** In FSPs, the Integrated Services and Supports Plan (ISSP) is used by adult clients and families of children and youth to identify their needs and preferences which lead to the services and supports that will be most effective for them. Providers work in full partnership with clients to develop these ISSPs. Their needs and preferences drive the policy and financing decisions that affect them.

**Concept 5: Integrated Service Experience:** FSP programs were incorporated into the MHSA to ensure that these dollars funded “integrated service experiences”. This means that services are “seamless” to clients and that clients do not have to negotiate multiple agencies and funding sources to get critical needs met and to move towards recovery and develop resiliency. Services are delivered, or at a minimum, coordinated through a single agency or a system of care. The integrated service experience centers on the individual/family, uses a strength-based approach, and includes multi-agency programs and joint planning to best address the individual/family’s needs using the full range of community-based treatment, case management, and interagency system components required by children/transition age youth/adults/older adults.

# Fresno County Department of Behavioral Health

## Guiding Principles of Care Delivery

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### **DBH VISION:**

Health and well-being for our community.

### **DBH MISSION:**

DBH, in partnership with our diverse community, is dedicated to providing quality, culturally responsive, behavioral health services to promote wellness, recovery, and resiliency for individuals and families in our community.

### **DBH GOALS:**

Quadruple Aim

- Deliver quality care
- Maximize resources while focusing on efficiency
- Provide an excellent care experience
- Promote workforce well-being

### **GUIDING PRINCIPLES OF CARE DELIVERY:**

The DBH 11 principles of care delivery define and guide a system that strives for excellence in the provision of behavioral health services where the values of wellness, resiliency, and recovery are central to the development of programs, services, and workforce. The principles provide the clinical framework that influences decision-making on all aspects of care delivery including program design and implementation, service delivery, training of the workforce, allocation of resources, and measurement of outcomes.

#### 1. Principle One - Timely Access & Integrated Services

- Individuals and families are connected with services in a manner that is streamlined, effective, and seamless
- Collaborative care coordination occurs across agencies, plans for care are integrated, and whole person care considers all life domains such as health, education, employment, housing, and spirituality
- Barriers to access and treatment are identified and addressed
- Excellent customer service ensures individuals and families are transitioned from one point of care to another without disruption of care

# Fresno County Department of Behavioral Health

## Guiding Principles of Care Delivery

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### 2. Principle Two - Strengths-based

- Positive change occurs within the context of genuine trusting relationships
- Individuals, families, and communities are resourceful and resilient in the way they solve problems
- Hope and optimism is created through identification of, and focus on, the unique abilities of individuals and families

### 3. Principle Three - Person-driven and Family-driven

- Self-determination and self-direction are the foundations for recovery
- Individuals and families optimize their autonomy and independence by leading the process, including the identification of strengths, needs, and preferences
- Providers contribute clinical expertise, provide options, and support individuals and families in informed decision making, developing goals and objectives, and identifying pathways to recovery
- Individuals and families partner with their provider in determining the services and supports that would be most effective and helpful and they exercise choice in the services and supports they receive

### 4. Principle Four - Inclusive of Natural Supports

- The person served identifies and defines family and other natural supports to be included in care
- Individuals and families speak for themselves
- Natural support systems are vital to successful recovery and the maintaining of ongoing wellness; these supports include personal associations and relationships typically developed in the community that enhance a person's quality of life
- Providers assist individuals and families in developing and utilizing natural supports.

### 5. Principle Five - Clinical Significance and Evidence Based Practices (EBP)

- Services are effective, resulting in a noticeable change in daily life that is measurable.
- Clinical practice is informed by best available research evidence, best clinical expertise, and values and preferences of those we serve
- Other clinically significant interventions such as innovative, promising, and emerging practices are embraced



# Fresno County Department of Behavioral Health

## Guiding Principles of Care Delivery

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### 6. Principle Six - Culturally Responsive

- Values, traditions, and beliefs specific to an individual's or family's culture(s) are valued and referenced in the path of wellness, resilience, and recovery
- Services are culturally grounded, congruent, and personalized to reflect the unique cultural experience of each individual and family
- Providers exhibit the highest level of cultural humility and sensitivity to the self-identified culture(s) of the person or family served in striving to achieve the greatest competency in care delivery

### 7. Principle Seven - Trauma-informed and Trauma-responsive

- The widespread impacts of all types of trauma are recognized and the various potential paths for recovery from trauma are understood
- Signs and symptoms of trauma in individuals, families, staff, and others are recognized and persons receive trauma-informed responses
- Physical, psychological and emotional safety for individuals, families, and providers is emphasized

### 8. Principle Eight - Co-occurring Capable

- Services are reflective of whole-person care; providers understand the influence of bio-psycho-social factors and the interactions between physical health, mental health, and substance use disorders
- Treatment of substance use disorders and mental health disorders are integrated; a provider or team may deliver treatment for mental health and substance use disorders at the same time

### 9. Principle Nine - Stages of Change, Motivation, and Harm Reduction

- Interventions are motivation-based and adapted to the person's stage of change
- Progression through stages of change are supported through positive working relationships and alliances that are motivating
- Providers support individuals and families to develop strategies aimed at reducing negative outcomes of substance misuse through a harm reduction approach
- Each individual defines their own recovery and recovers at their own pace when provided with sufficient time and support

# **Fresno County Department of Behavioral Health**

## **Guiding Principles of Care Delivery**

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### 10. Principle Ten - Continuous Quality Improvement and Outcomes-Driven

- Individual and program outcomes are collected and evaluated for quality and efficacy
- Strategies are implemented to achieve a system of continuous quality improvement and improved performance outcomes
- Providers participate in ongoing professional development activities needed for proficiency in practice and implementation of treatment models

### 11. Principle Eleven - Health and Wellness Promotion, Illness and Harm Prevention, and Stigma Reduction

- The rights of all people are respected
- Behavioral health is recognized as integral to individual and community well-being
- Promotion of health and wellness is interwoven throughout all aspects of DBH services
- Specific strategies to prevent illness and harm are implemented at the individual, family, program, and community levels
- Stigma is actively reduced by promoting awareness, accountability, and positive change in attitudes, beliefs, practices, and policies within all systems
- The vision of health and well-being for our community is continually addressed through collaborations between providers, individuals, families, and community members

**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Turning Point of Central Ca, Inc. | Fresno FSP Program Site #1**  
**FY 2019 - 2020 No Ramp-up | 06/01/20 - 08/30/20**

**PROGRAM EXPENSES**

1000: SALARIES & BENEFITS					
Employee Salaries					
Acct #	Position	FTE	Admin	Direct	Total
1101				\$ -	\$ -
1102				-	-
1103				-	-
1104				-	-
1105				-	-
1106				-	-
1107				-	-
1108				-	-
1109				-	-
1110				-	-
1111				-	-
1112				-	-
1113				-	-
1114				-	-
1115				-	-
1116				-	-
1117				-	-
1118			-	-	-
1119			-	-	-
1120			-	-	-
1121			-	-	-
1122			-	-	-
1123			-	-	-
1124			-	-	-
1125			-	-	-
1126			-	-	-
1127			-	-	-
1128			-	-	-
1129			-	-	-
1130			-	-	-
1131			-	-	-
<b>Personnel Salaries Subtotal</b>		<b>0.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>
Employee Benefits					
Acct #	Description		Admin	Direct	Total
1201	Retirement		\$ -		\$ -
1202	Worker's Compensation		-		-
1203	Health Insurance		-		-
1204	API Benefits		-		-
1205	Other (Specify)		-		-
1206	Other (Specify)		-		-
<b>Employee Benefits Subtotal:</b>			<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>

<b>Payroll Taxes &amp; Expenses:</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1301	OASDI	\$ -		\$ -
1302	FICA/MEDICARE	-		-
1303	SUI	-		-
1304	Other (Specify)	-		-
1305	Other (Specify)	-		-
1306	Other (Specify)	-	-	-
<b>Payroll Taxes &amp; Expenses Subtotal:</b>		<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>
<b>EMPLOYEE SALARIES &amp; BENEFITS TOTAL:</b>		<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>

<b>2000: CLIENT SUPPORT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
2001	Child Care	\$ -
2002	Client Housing Support	-
2003	Client Transportation & Support	-
2004	Clothing, Food, & Hygiene	-
2005	Education Support	-
2006	Employment Support	-
2007	Household Items for Clients	-
2008	Medication Supports	-
2009	Program Supplies - Medical	-
2010	Utility Vouchers	-
2011	Other (Specify)	-
2012	Other (Specify)	-
2013	Other (Specify)	-
2014	Other (Specify)	-
2015	Other (Specify)	-
2016	Other (Specify)	-
<b>DIRECT CLIENT CARE TOTAL</b>		<b>\$ -</b>

<b>3000: OPERATING EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
3001	Telecommunications	
3002	Printing/Postage	
3003	Office, Household & Program Supplies	
3004	Advertising	
3005	Staff Development & Training	
3006	Staff Mileage	
3007	Subscriptions & Memberships	
3008	Vehicle Maintenance	
3009	Program Enhancement	
3010	Staff Meetings	
3011	Recruitment	
3012	Employee-Employer Relations	
<b>OPERATING EXPENSES TOTAL:</b>		<b>\$ -</b>

<b>4000: FACILITIES &amp; EQUIPMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
4001	Building Maintenance	
4002	Rent/Lease Building	
4003	Rent/Lease Equipment	
4004	Rent/Lease Vehicles	
4005	Security	
4006	Utilities	
4007	Equipment Maintenance	
4008	Liability Insurance	
4009	Other (Specify)	
4010	Other (Specify)	-
<b>FACILITIES/EQUIPMENT TOTAL:</b>		<b>\$ -</b>

5000: SPECIAL EXPENSES		
Acct #	Line Item Description	Amount
5001	Consultant (Network & Data Management)	\$ -
5002	HMIS (Health Management Information System)	-
5003	Contractual/Consulting Services (Specify)	-
5004	Translation Services	-
5005	Other (Specify)	-
5006	Other (Specify)	-
5007	Other (Specify)	-
5008	Other (Specify)	-
<b>SPECIAL EXPENSES TOTAL:</b>		<b>\$ -</b>

6000: ADMINISTRATIVE EXPENSES		
Acct #	Line Item Description	Amount
6001	Administrative Overhead	
6002	Professional Liability Insurance	
6003	Accounting/Bookkeeping	
6004	External Audit	
6005	Insurance (Specify):	
6006	Payroll Services	
6007	Depreciation (Provider-Owned Equipment to be Used for Program Purposes)	
6008	Other (Specify)	
6009	Other (Specify)	
6010	Other (Specify)	-
6011	Other (Specify)	-
6012	Other (Specify)	-
<b>ADMINISTRATIVE EXPENSES TOTAL</b>		<b>\$ -</b>

7000: FIXED ASSETS		
Acct #	Line Item Description	Amount
7001	Computer Equipment & Software	
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	
7003	Furniture & Fixtures	
7004	Leasehold/Tenant/Building Improvements	
7005	Other Assets over \$500 with Lifespan of 2 Years +	
7006	Assets over \$5,000/unit (Specify)	
7007	Other (Specify)	
7008	Other (Specify)	
<b>FIXED ASSETS EXPENSES TOTAL</b>		<b>\$ -</b>

<b>TOTAL PROGRAM EXPENSES</b>		<b>\$ -</b>
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**PROGRAM FUNDING SOURCES**

<b>8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)</b>				
<b>Acct #</b>	<b>Line Item Description</b>	<b>Service Units</b>	<b>Rate</b>	<b>Amount</b>
8001	Mental Health Services	0	-	\$ -
8002	Case Management	0	-	-
8003	Crisis Services	0	-	-
8004	Medication Support	0	-	-
8005	Collateral	0	-	-
8006	Plan Development	0	-	-
8007	Assessment	0	-	-
8008	Rehabilitation	0	-	-
<b>Estimated Specialty Mental Health Services Billing Totals:</b>		<b>0</b>		<b>\$ -</b>
Estimated % of Clients who are Medi-Cal Beneficiaries				0%
Estimated Total Cost of Specialty Mental Health Services Provided to Medi-Cal Beneficiaries				-
Federal Financial Participation (FFP) %			0%	-
<b>MEDI-CAL FFP TOTAL</b>				<b>\$ -</b>

<b>8100 - SUBSTANCE USE DISORDER FUNDS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8101	Drug Medi-Cal	\$ -
8102	SABG	\$ -
<b>SUBSTANCE USE DISORDER FUNDS TOTAL</b>		<b>\$ -</b>

<b>8200 - REALIGNMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8201	Realignment	\$ -
<b>REALIGNMENT TOTAL</b>		<b>\$ -</b>

<b>8300 - MENTAL HEALTH SERVICE ACT (MHSA)</b>			
<b>Acct #</b>	<b>MHSA Component</b>	<b>MHSA Program Name</b>	<b>Amount</b>
8301	CSS - Community Services & Supports		\$ -
8302	PEI - Prevention & Early Intervention		-
8303	INN - Innovations		-
8304	WET - Workforce Education & Training		-
8305	CFTN - Capital Facilities & Technology		-
<b>MHSA TOTAL</b>			<b>\$ -</b>

<b>8400 - OTHER REVENUE</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8401	Client Fees	\$ -
8402	Client Insurance	-
8403	Grants (Specify)	-
8404	Other (Specify)	-
8405	Other (Specify)	-
<b>OTHER REVENUE TOTAL</b>		<b>\$ -</b>

<b>TOTAL PROGRAM FUNDING SOURCES:</b>			<b>\$ -</b>
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**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Turning Point of Central Ca, Inc. | Fresno FSP Program Site #1**  
**FY 2019 - 2020 No Ramp-up | 06/01/20 - 08/30/20 Budget Narrative**

PROGRAM EXPENSE				
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE	
<b>1000: SALARIES &amp; BENEFITS</b>		-		
<b>Employee Salaries</b>				
1101	0	-		
1102	0	-		
1103	0	-		
1104	0	-		
1105	0	-		
1106	0	-		
1107	0	-		
1108	0	-		
1109	0	-		
1110	0	-		
1111	0	-		
1112	0	-		
1113	0	-		
1114	0	-		
1115	0	-		
1116	0	-		
1117	0	-		
1118	0	-		
1119	0	-		
1120	0	-		
1121	0	-		
1122	0	-		
1123	0	-		
1124	0	-		
1125	0	-		
1126	0	-		
1127	0	-		
1128	0	-		
1129	0	-		
1130	0	-		
1131	0	-		
<b>Employee Benefits</b>				
1201	Retirement	-		
1202	Worker's Compensation	-		
1203	Health Insurance	-		
1204	API Benefits	-		
1205	Other (Specify)	-		
1206	Other (Specify)	-		
<b>Payroll Taxes &amp; Expenses:</b>				
1301	OASDI	-		
1302	FICA/MEDICARE	-		
1303	SUI	-		
1304	Other (Specify)	-		
1305	Other (Specify)	-		
1306	Other (Specify)	-		
<b>2000: CLIENT SUPPORT</b>		-		
2001	Child Care	-		
2002	Client Housing Support	-		
2003	Client Transportation & Support	-		
2004	Clothing, Food, & Hygiene	-		
2005	Education Support	-		
2006	Employment Support	-		
2007	Household Items for Clients	-		
2008	Medication Supports	-		
2009	Program Supplies - Medical	-		
2010	Utility Vouchers	-		
2011	Other (Specify)	-		
2012	Other (Specify)	-		
2013	Other (Specify)	-		
2014	Other (Specify)	-		
2015	Other (Specify)	-		
2016	Other (Specify)	-		



PROGRAM EXPENSE				
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE	
<b>3000: OPERATING EXPENSES</b> -				
3001	Telecommunications	-		
3002	Printing/Postage	-		
3003	Office, Household & Program Supplies	-		
3004	Advertising	-		
3005	Staff Development & Training	-		
3006	Staff Mileage	-		
3007	Subscriptions & Memberships	-		
3008	Vehicle Maintenance	-		
3009	Program Enhancement	-		
3010	Staff Meetings	-		
3011	Recruitment	-		
3012	Employee-Employer Relations	-		
<b>4000: FACILITIES &amp; EQUIPMENT</b> -				
4001	Building Maintenance	-		
4002	Rent/Lease Building	-		
4003	Rent/Lease Equipment	-		
4004	Rent/Lease Vehicles	-		
4005	Security	-		
4006	Utilities	-		
4007	Equipment Maintenance	-		
4008	Liability Insurance	-		
4009	Other (Specify)	-		
4010	Other (Specify)	-		
<b>5000: SPECIAL EXPENSES</b> -				
5001	Consultant (Network & Data Management)	-		
5002	HMIS (Health Management Information System)	-		
5003	Contractual/Consulting Services (Specify)	-		
5004	Translation Services	-		
5005	Other (Specify)	-		
5006	Other (Specify)	-		
5007	Other (Specify)	-		
5008	Other (Specify)	-		
<b>6000: ADMINISTRATIVE EXPENSES</b> -				
6001	Administrative Overhead	-		
6002	Professional Liability Insurance	-		
6003	Accounting/Bookkeeping	-		
6004	External Audit	-		
6005	Insurance (Specify):	-		
6006	Payroll Services	-		
6007	Depreciation (Provider-Owned Equipment to be Used for Program Purposes)	-		
6008	Other (Specify)	-		
6009	Other (Specify)	-		
6010	Other (Specify)	-		
6011	Other (Specify)	-		
6012	Other (Specify)	-		
<b>7000: FIXED ASSETS</b> -				
7001	Computer Equipment & Software	-		
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	-		
7003	Furniture & Fixtures	-		
7004	Leasehold/Tenant/Building Improvements	-		
7005	Other Assets over \$500 with Lifespan of 2 Years +	-		
7006	Assets over \$5,000/unit (Specify)	-		
7007	Other (Specify)	-		
7008	Other (Specify)	-		

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>PROGRAM FUNDING SOURCES</b>			
<b>8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)</b>			
ACCT #	LINE ITEM	PROVIDE DETAILS OF METHODOLOGY(IES) USED IN DETERMINING MEDI-CAL SERVICE RATES AND/OR SERVICE UNITS, IF APPLICABLE AND/OR AS REQUIRED BY THE RFP.	
8001	Mental Health Services		
8002	Case Management		
8003	Crisis Services		
8004	Medication Support		
8005	Collateral		
8006	Plan Development		
8007	Assessment		
8008	Rehabilitation		

**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Turning Point of Central Ca, Inc. | Fresno FSP Program Site #1**  
**FY 2020 - 2021 | 09/01/20 - 06/30/21**

**PROGRAM EXPENSES**

1000: SALARIES & BENEFITS					
Employee Salaries					
Acct #	Position	FTE	Admin	Direct	Total
1101	PROGRAM DIRECTOR	0.50	\$ -	\$ 40,037	\$ 40,037
1102	ASST. PROGRAM DIRECTOR	1.00	-	76,211	76,211
1103	ADMIN. ASSISTANT	0.50	-	19,983	19,983
1104	BILLER	0.50	-	18,113	18,113
1105	BOOKKEEPER	0.50	-	18,653	18,653
1106	CRIMINAL JUSTICE REHAB SPECIALIST (CM)	2.00	-	81,520	81,520
1107	DUAL DIAGNOSIS SPECIALIST (CM)	3.00	-	122,280	122,280
1108	ED & EM REHAB SPECIALIST (CM)	3.00	-	122,280	122,280
1109	HOUSING COORDINATOR	1.00	-	40,760	40,760
1110	INTAKE SPECIALIST	0.50	-	20,992	20,992
1111	LVN	3.00	-	125,948	125,948
1112	MENTAL HEALTH PROFESSIONAL	4.00	-	294,860	294,860
1113	PEER SUPPORT SPECIALIST	2.00	-	52,910	52,910
1114	PERSONAL SERVICE COORDINATOR (CM)	4.00	-	150,703	150,703
1115	PSC SUPERVISOR	1.00	-	56,441	56,441
1116	REGISTERED NURSE	0.50	-	36,858	36,858
1117	SECRETARY	1.00	-	27,785	27,785
1118			-	-	-
1119			-	-	-
1120			-	-	-
1121			-	-	-
1122			-	-	-
1123			-	-	-
1124			-	-	-
1125			-	-	-
1126			-	-	-
1127			-	-	-
1128			-	-	-
1129			-	-	-
1130			-	-	-
1131			-	-	-
<b>Personnel Salaries Subtotal</b>		<b>28.00</b>	<b>\$ -</b>	<b>\$ 1,306,334</b>	<b>\$ 1,306,334</b>

<b>Employee Benefits</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1201	Retirement	\$ -	\$ 21,313	\$ 21,313
1202	Worker's Compensation	-	23,288	23,288
1203	Health Insurance	-	201,320	201,320
1204	API Benefits	-	433	433
1205	Other (Specify)	-	-	-
1206	Other (Specify)	-	-	-
<b>Employee Benefits Subtotal:</b>		<b>\$ -</b>	<b>\$ 246,354</b>	<b>\$ 246,354</b>
<b>Payroll Taxes &amp; Expenses:</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1301	OASDI	\$ -	\$ -	\$ -
1302	FICA/MEDICARE	-	-	-
1303	SUI	-	4,760	4,760
1304	Other: Accrued Paid Leave Moved to Admin Overhead	-	142,001	142,001
1305	Other (Specify)	-	-	-
1306	Other (Specify)	-	-	-
<b>Payroll Taxes &amp; Expenses Subtotal:</b>		<b>\$ -</b>	<b>\$ 146,761</b>	<b>\$ 146,761</b>
<b>EMPLOYEE SALARIES &amp; BENEFITS TOTAL:</b>		<b>\$ -</b>	<b>\$ 1,699,449</b>	<b>\$ 1,699,449</b>

<b>2000: CLIENT SUPPORT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
2001	Child Care	\$ -
2002	Client Housing Support	353,817
2003	Client Transportation & Support	10,833
2004	Clothing, Food, & Hygiene	16,667
2005	Education Support	3,600
2006	Employment Support	1,667
2007	Household Items for Clients	-
2008	Medication Supports	50,000
2009	Program Supplies - Medical	6,000
2010	Utility Vouchers	10,800
2011	Client Building Maintenance	1,667
2012	Client Therapy	1,200
2013	Client Activities / Recreation	12,500
2014	Client Personal Needs	1,800
2015	Other (Specify)	-
2016	Other (Specify)	-
<b>DIRECT CLIENT CARE TOTAL</b>		<b>\$ 470,551</b>

<b>3000: OPERATING EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
3001	Telecommunications	\$ 12,000
3002	Printing/Postage	11,000
3003	Office, Household & Program Supplies	26,333
3004	Advertising	-
3005	Staff Development & Training	14,500
3006	Staff Mileage	12,500
3007	Subscriptions & Memberships	1,667
3008	Vehicle Maintenance / Gas / Insurance	33,500
3009	Program Enhancement	-
3010	Staff Meetings	6,000
3011	Recruitment	3,000
3012	Employee-Employer Relations	4,167
<b>OPERATING EXPENSES TOTAL:</b>		<b>\$ 124,667</b>

<b>4000: FACILITIES &amp; EQUIPMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
4001	Building Maintenance	\$ 6,250
4002	Rent/Lease Building	68,333
4003	Rent/Lease Equipment	1,667
4004	Rent/Lease Vehicles	29,750
4005	Security	3,000
4006	Utilities	31,000
4007	Equipment Maintenance	2,000
4008	Liability Insurance	5,917
4009	Other (Specify)	-
4010	Other (Specify)	-
<b>FACILITIES/EQUIPMENT TOTAL:</b>		<b>\$ 147,917</b>

<b>5000: SPECIAL EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
5001	Consultant (Network & Data Management)	\$ -
5002	HMIS (Health Management Information System)	23,333
5003	Contractual/Consulting Services : Consultant	14,333
5004	Translation Services	3,333
5005	Contractual/Consulting Services : Psychiatrist	187,500
5006	Other (Specify)	-
5007	Other (Specify)	-
5008	Other (Specify)	-
<b>SPECIAL EXPENSES TOTAL:</b>		<b>\$ 228,499</b>

<b>6000: ADMINISTRATIVE EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
6001	Administrative Overhead	\$ 529,157
6002	Professional Liability Insurance	-
6003	Accounting/Bookkeeping	-
6004	External Audit	3,000
6005	Insurance (Specify):	-
6006	Payroll Services	-
6007	Depreciation <i>(Provider-Owned Equipment to be Used for Program Purposes)</i>	9,000
6008	Other: Bank Fees	2,000
6009	Other: Legal Expense	1,000
6010	Other: Licenses	3,667
6011	Other (Specify)	-
6012	Other (Specify)	-
<b>ADMINISTRATIVE EXPENSES TOTAL</b>		<b>\$ 547,824</b>

<b>7000: FIXED ASSETS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
7001	Computer Equipment & Software	\$ -
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	-
7003	Furniture & Fixtures	2,400
7004	Leasehold/Tenant/Building Improvements	3,600
7005	Other Assets over \$500 with Lifespan of 2 Years +	-
7006	Assets over \$5,000/unit (Specify)	-
7007	Other (Specify)	-
7008	Other (Specify)	-
<b>FIXED ASSETS EXPENSES TOTAL</b>		<b>\$ 6,000</b>

<b>TOTAL PROGRAM EXPENSES</b>		<b>\$ 3,224,907</b>
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**PROGRAM FUNDING SOURCES**

<b>8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)</b>				
<b>Acct #</b>	<b>Line Item Description</b>	<b>Service Units</b>	<b>Rate</b>	<b>Amount</b>
8001	Mental Health Services	59,581	2.91	\$ 173,381
8002	Case Management	25,478	1.99	50,701
8003	Crisis Services	1,144	3.20	3,661
8004	Medication Support	104,289	5.27	549,603
8005	Collateral	3,993	2.91	11,620
8006	Plan Development	6,179	2.91	17,981
8007	Assessment	11,511	2.91	33,497
8008	Rehabilitation	462,666	2.91	1,346,358
<b>Estimated Specialty Mental Health Services Billing Totals:</b>		<b>674,841</b>		<b>\$ 2,186,801</b>
Estimated % of Clients who are Medi-Cal Beneficiaries				100%
Estimated Total Cost of Specialty Mental Health Services Provided to Medi-Cal Beneficiaries				2,186,801
Federal Financial Participation (FFP) %			79%	1,727,573
<b>MEDI-CAL FFP TOTAL</b>				<b>\$ 1,727,573</b>

<b>8100 - SUBSTANCE USE DISORDER FUNDS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8101	Drug Medi-Cal	\$ -
8102	SABG	\$ -
<b>SUBSTANCE USE DISORDER FUNDS TOTAL</b>		<b>\$ -</b>

<b>8200 - REALIGNMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8201	Realignment	\$ (0)
<b>REALIGNMENT TOTAL</b>		<b>\$ (0)</b>

<b>8300 - MENTAL HEALTH SERVICE ACT (MHSA)</b>			
<b>Acct #</b>	<b>MHSA Component</b>	<b>MHSA Program Name</b>	<b>Amount</b>
8301	CSS - Community Services & Supports		\$ 1,464,834
8302	PEI - Prevention & Early Intervention		-
8303	INN - Innovations		-
8304	WET - Workforce Education & Training		-
8305	CFTN - Capital Facilities & Technology		-
<b>MHSA TOTAL</b>			<b>\$ 1,464,834</b>

<b>8400 - OTHER REVENUE</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8401	Client Fees	\$ 32,500
8402	Client Insurance	-
8403	Grants (Specify)	-
8404	Other (Specify)	-
8405	Other (Specify)	-
<b>OTHER REVENUE TOTAL</b>		<b>\$ 32,500</b>

**TOTAL PROGRAM FUNDING SOURCES: \$ 3,224,907**

**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Turning Point of Central Ca, Inc. | Fresno FSP Program Site #1**  
**FY 2020 - 2021 | 09/01/20 - 06/30/21 Budget Narrative**

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>1000: SALARIES &amp; BENEFITS</b>		<b>1,699,449</b>	
<b>Employee Salaries</b>		<b>1,306,334</b>	
1101	PROGRAM DIRECTOR	40,037	The Program Director currently oversees the program, hiring, training and supervising staff.
1102	ASST. PROGRAM DIRECTOR	76,211	The Assitant Program Director will supervise staff and assist the Program Director for that location
1103	ADMIN. ASSISTANT	19,983	The administrative assistant will oversee the support staff at both locations and will help with all support staff duties.
1104	BILLER	18,113	The biller will be responsible for billing into Avatar, billing all insurance claims and run reports as necessary for the program.
1105	BOOKKEEPER	18,653	The bookkeeper is responsible for processing all invoices for the program or programs and will send all information to the corporate office. They will handle petty cash, client fees and other bookkeeping needs for the program.
1106	CRIMINAL JUSTICE REHAB SPECIALIST (CM)	81,520	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in providing services to those involved in the criminal justice system and program liaison for Behavioral Health Court and the Federal Wellness Court
1107	DUAL DIAGNOSIS SPECIALIST (CM)	122,280	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in supporting and providing services for those who suffer from a co-occurring diagnosis.
1108	ED & EM REHAB SPECIALIST (CM)	122,280	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in linking and providing services to those interested in engagement in employment and education services.
1109	HOUSING COORDINATOR	40,760	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in identifying, linking and assisting clients in obtaining various housing such as a R&B, supportive housing, etc.
1110	INTAKE SPECIALIST	20,992	Reviews all referrals, contacting referral source and coordinating intake services to enroll in FSP program. The specialist also assists client in applying for additional benefits, such as General Relief, Social Security Benefits, Medi-cal, etc.
1111	LVN	125,948	Assists psychiatrist providing vital intake, coordination of medications, provides medication support and education, provides injections and consults with all staff in ensuring medication education and compliance
1112	MENTAL HEALTH PROFESSIONAL	294,860	Provides mental health assessment, assessing for Medical Necessity, assists client in identifying treatment plan goals according to diagnosis. MHP also provides individual and group therapy as client requests, while also providing program support to assist clients in crisis.
1113	PEER SUPPORT SPECIALIST	52,910	Provides support to clients, utilizing lived mental health experience to relate to clients, while assisting in activities with clients, run peer ran groups, meeting with clients during appointments providing support as needed.



PROGRAM EXPENSE				
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE	
1114	PERSONAL SERVICE COORDINATOR (CM)	150,703	Each FSP client will have a single point of responsibility through an assigned Personal Service Coordinator/case manager. The Personal Service Coordinator (PSC) works as a part of a treatment team in achieving the goals and objectives of the program to ensure quality of care for client participants. With case management being one of the primary methods of delivering services, each client shall be assigned a primary Personal Service Coordinator who will be responsible to see that the client's needs are met, as identified in the Plan of Care and the Individual Service and Support Plan (ISSP). They are able to provide intensive services and supports when needed, and they can give the client and/or family member considerable personal attention. The PSC will provide instruction modeling and support one-on-one in the course of daily events in the natural setting to manage day-to-day life and promote increased efficacy and self-sufficiency. This "hands on" approach will be utilized during the PSCs interaction with client's for 'en vivo' support, such as managing symptoms while preparing a budget, going to the doctor's office, the grocery store, in their home and maintaining their environment. Clients will learn at their own pace and with as much help as is needed by their personal service coordinator. A teaching/coaching approach will be used that empowers the client to gain mastery and take responsibility. Transportation and assistance in accessing other resources will be ensured by the PSC. All PSCs maintain their own case load of clients for whom they are the primary contact. Additionally, some of the PSC positions also include specialty training (housing, employment, education, criminal justice, substance use disorder) and will provide those specialty services to clients who are not on their caseload and can benefit from that expertise.	
1115	PSC SUPERVISOR	56,441	Provides supervision to all PSCs/Mental Health Specialists to ensure client care, maintain compliance with Turning Point policies and procedures. Supervisor also assisting in training new staff and reporting to the Assistant Program Director.	
1116	REGISTERED NURSE	36,858	Provides oversight over the LVNs/LPTs to ensure client care, maintaining compliance with Turning Point policies and procedures, providing training and ensuring accurate charting in accordance with Medi-cal.	
1117	SECRETARY	27,785	Provides direct services to the program by data entry, phone calls, checking in clients, etc.	
1118	0	-		
1119	0	-		
1120	0	-		
1121	0	-		
1122	0	-		
1123	0	-		
1124	0	-		
1125	0	-		
1126	0	-		
1127	0	-		
1128	0	-		
1129	0	-		
1130	0	-		
1131	0	-		
<b>Employee Benefits</b>		<b>246,354</b>		
1201	Retirement	21,313	Cost of Agency contribution to employee retirement plans.	
1202	Worker's Compensation	23,288	Cost of workers compensation insurance.	
1203	Health Insurance	201,320	Agency cost for health, dental and vision insurance	
1204	API Benefits	433	Employee assistance program	
1205	Other (Specify)	-		
1206	Other (Specify)	-		
<b>Payroll Taxes &amp; Expenses:</b>		<b>146,761</b>		
1301	OASDI	-		
1302	FICA/MEDICARE	-	Employer portion of F.I.C.A. taxes charged to the Agency by the Internal Revenue Service. F.I.C.A. is comprised of "Old-Age, Survivors, and Disability Insurance" (OASDI), plus "Hospital Insurance" (Medicare).	
1303	SUI	4,760	Employer portion of S.U.I. taxes charged to the Agency by the various states in which wages are paid.	
1304	Other: Accrued Paid Leave Moved to Admin Overhead	142,001	The monetary value of staff Paid Leave hours as they accrue on a monthly basis	
1305	Other (Specify)	-		
1306	Other (Specify)	-		

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>2000: CLIENT SUPPORT</b>		<b>470,551</b>	
2001	Child Care	-	
2002	Client Housing Support	353,817	Cost of rent, housing assistance and deposit paid on behalf of client. (Examples: first/last month deposit, late fees, monthly rent, hotel charges, room & board, board & care, etc.)
2003	Client Transportation & Support	10,833	Cost for client transportation. (Examples: bus tokens/passes, taxi, other public transportation, bicycles, etc.)
2004	Clothing, Food, & Hygiene	16,667	Cost of client hygiene supplies and non-work related clothing. (Examples: clothes, shoes, soap, toothpaste, deodorant, grooming supplies, diapers, etc.)
2005	Education Support	3,600	Cost of course fees and educational materials distributed to clients and prospective clients. Including court ordered educational class.
2006	Employment Support	1,667	Cost of client pre-employment preparation and employment retention. (Examples: job search and interview attire, work boots and tools required for employment, etc.)
2007	Household Items for Clients	-	
2008	Medication Supports	50,000	Cost of medical supplies or treatment/medical expense for a specific client. (Examples: co-pays*, prescription/lab work not covered by insurance, over-the-counter medications*, first aid kit/supplies for client's use at home, etc.) *if allowable per contract
2009	Program Supplies - Medical	6,000	Cost of medical supplies to be used by staff or clients at the program location to meet program objective. Such items are to remain at the program location and not sent home with the client. Such items include, but are not limited to first aid kits, blood pressure monitor, latex gloves, syringes, hazard disposal service, over-the-counter medication*, etc. *if allowable per contract.
2010	Utility Vouchers	10,800	Cost of client utility bills and/or security deposits.
2011	Client Building Maintenance	1,667	Cost of building repair or maintenance paid for on client's behalf. (Examples: handyman work, plumbing, drywall, roofing, etc.)
2012	Client Therapy	1,200	Cost of therapy services not covered by insurance and therapeutic supplies for clients to use outside of the program. (Examples: exercise videos/equipment, relaxation audio/visual recordings, artistic expression supplies, etc.)
2013	Client Activities / Recreation	12,500	Cost for client activities & recreation events. (Examples: cable bill, food/drinks/utensils/decorations needed for a specific client event, incentive rewards, admission fees to events, etc.)
2014	Client Personal Needs	1,800	Cost of supplying clients with necessary personal items not detailed in other accounts. (Examples: birth certificate, DMV fee for ID or license, clients household cleaning products/house supplies/kitchen supplies for their own home, pots/pans/dishes, linens, paper towels and child related expenses such as car seat/stroller/play pin, etc.)
2015	Other (Specify)	-	
2016	Other (Specify)	-	

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>3000: OPERATING EXPENSES</b>		<b>124,667</b>	
3001	Telecommunications	12,000	Cost of electronic communications. (Examples: internet, phone, fax, cell phones, etc.)
3002	Printing/Postage	11,000	Cost of custom copying/printing charges (Examples: letterhead, business forms, business cards, flyers, brochures, signs, etc.) and Postage and elivery, including delivery by the USPS, UPS, FEDEX and other courier services
3003	Office, Household & Program Supplies	26,333	Cost of items normally used in an office setting. (Examples: pens, pencils, paper tablets,
3004	Advertising	-	
3005	Staff Development & Training	14,500	Cost of employee training courses and materials.
3006	Staff Mileage	12,500	Cost of employee mileage reimbursement paid in accordance with FPM section 1005.
3007	Subscriptions & Memberships	1,667	Cost of membership dues and subscriptions. (Examples: magazine, newspaper, memberships, etc.)
3008	Vehicle Maintenance / Gas / Insurance	33,500	Cost of vehicle maintenance. Including cost of parts, supplies and labor associated with maintenance and repair of vehicles used by Agency programs. Cost of gas in Vehicles and Insurance
3009	Program Enhancement	-	
3010	Staff Meetings	6,000	Cost of room rental and supplies necessary for staff meetings.
3011	Recruitment	3,000	Cost of advertising and other employee recruitment expenses. (Examples: newspaper ad, urine screening, background check, etc.)
3012	Employee-Employer Relations	4,167	Cost relating to improvement of working conditions, employer/employee relations and employee morale. (Examples: Company picnic items, florist, etc.)

<b>4000: FACILITIES &amp; EQUIPMENT</b>		<b>147,917</b>	
4001	Building Maintenance	6,250	Cost of Agency building repairs and maintenance. (Examples: electrical work, A/C and heating, hood cleaning, plumbing, etc.) This account should not be used if a specific outside labor contractor is doing an identifiable project.
4002	Rent/Lease Building	68,333	Cost of rent/lease payments made for building leases from outside sources.
4003	Rent/Lease Equipment	1,667	Cost of rent/lease payments made for furniture and equipment leases.
4004	Rent/Lease Vehicles	29,750	Rental cost of vehicles and lease of agency vehicles.
4005	Security	3,000	Cost of installation, maintenance and monthly service fees for building alarms and other security measures. (Examples: security/surveillance equipment, service and installation, safes, etc.)
4006	Utilities	31,000	Cost of service for power, gas, water, sewer, garbage, etc.
4007	Equipment Maintenance	2,000	Cost of equipment and furniture repair and maintenance. (Examples: high capacity copier/printer/scanner, replacement parts such as hard drive, laptop battery, monitor/printer/phone cord, drum, power strip, surge protector, video card, etc.)
4008	Liability Insurance	5,917	
4009	Other (Specify)	-	
4010	Other (Specify)	-	

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>5000: SPECIAL EXPENSES</b>		<b>228,499</b>	
5001	Consultant (Network & Data Management)	-	
5002	HMIS (Health Management Information System)	23,333	Avatar Costs
5003	Contractual/Consulting Services : Consultant	14,333	These accounts are assigned to record various professional services provided by contracted sources working as independent agents. (IT Consultations, EHR Consultation, External Consultation, Clinical Supervisors who are not Staffed under the Personnel & Salaries)
5004	Translation Services	3,333	Paid to an outside vendor for translation / interpreter services
5005	Contractual/Consulting Services : Psychiatrist	187,500	These accounts are assigned to record various professional services provided by contracted Psychiatrist working as independent agents.
5006	Other (Specify)	-	
5007	Other (Specify)	-	
5008	Other (Specify)	-	

<b>6000: ADMINISTRATIVE EXPENSES</b>		<b>547,824</b>	
6001	Administrative Overhead	529,157	Support of our cooperate and regional offices such as processing invoices, payroll, cost reports, etc. Accrued Paid Leave moved/added to Admin Overhead. Accrual Paid Leave cannot be listed in Salaries and Benefits Per DBH
6002	Professional Liability Insurance	-	
6003	Accounting/Bookkeeping	-	
6004	External Audit	3,000	Cost of outside audit fees.
6005	Insurance (Specify):	-	
6006	Payroll Services	-	
6007	Depreciation (Provider-Owned Equipment to be Used for Program Purposes)	9,000	This account should be charged for the depreciation expense of the Agency's tangible assets.
6008	Other: Bank Fees	2,000	Cost of bank fees charged to Agency account.
6009	Other: Legal Expense	1,000	Cost of outside legal fees
6010	Other: Licenses	3,667	Cost in obtaining and renewing licenses and permits.
6011	Other (Specify)	-	Cost of membership dues and subscriptions.
6012	Other (Specify)	-	

<b>7000: FIXED ASSETS</b>		<b>6,000</b>	
7001	Computer Equipment & Software	-	
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	-	
7003	Furniture & Fixtures	2,400	Purchase of furniture and fixtures as needed
7004	Leasehold/Tenant/Building Improvements	3,600	Improvements to the building as needed that isn't covered by the landlord
7005	Other Assets over \$500 with Lifespan of 2 Years +	-	
7006	Assets over \$5,000/unit (Specify)	-	
7007	Other (Specify)	-	
7008	Other (Specify)	-	

PROGRAM FUNDING SOURCES		
8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)		
ACCT #	LINE ITEM	PROVIDE DETAILS OF METHODOLOGY(IES) USED IN DETERMINING MEDI-CAL SERVICE RATES AND/OR SERVICE UNITS, IF APPLICABLE AND/OR AS REQUIRED BY THE RFP.
8001	Mental Health Services	We based our rates and units on current program usage
8002	Case Management	We based our rates and units on current program usage
8003	Crisis Services	We based our rates and units on current program usage
8004	Medication Support	We based our rates and units on current program usage
8005	Collateral	We based our rates and units on current program usage
8006	Plan Development	We based our rates and units on current program usage
8007	Assessment	We based our rates and units on current program usage
8008	Rehabilitation	We based our rates and units on current program usage

**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Turning Point of Central Ca, Inc. | Fresno FSP Program Site #1**  
**FY 2021 - 2022 | 07/01/21 - 06/30/22**

**PROGRAM EXPENSES**

1000: SALARIES & BENEFITS					
Employee Salaries					
Acct #	Position	FTE	Admin	Direct	Total
1101	PROGRAM DIRECTOR	0.50	\$ -	\$ 50,446	\$ 50,446
1102	ASST. PROGRAM DIRECTOR	1.00	-	96,026	96,026
1103	ADMIN. ASSISTANT	0.50	-	25,178	25,178
1104	BILLER	0.50	-	22,822	22,822
1105	BOOKKEEPER	0.50	-	23,502	23,502
1106	CRIMINAL JUSTICE REHAB SPECIALIST (CM)	2.00	-	102,716	102,716
1107	DUAL DIAGNOSIS SPECIALIST (CM)	3.00	-	154,073	154,073
1108	ED & EM REHAB SPECIALIST (CM)	3.00	-	154,073	154,073
1109	HOUSING COORDINATOR	1.00	-	51,358	51,358
1110	INTAKE SPECIALIST	0.50	-	26,449	26,449
1111	LVN	3.00	-	158,694	158,694
1112	MENTAL HEALTH PROFESSIONAL	4.00	-	371,524	371,524
1113	PEER SUPPORT SPECIALIST	2.00	-	66,667	66,667
1114	PERSONAL SERVICE COORDINATOR (CM)	4.00	-	189,887	189,887
1115	PSC SUPERVISOR	1.00	-	71,116	71,116
1116	REGISTERED NURSE	0.50	-	46,441	46,441
1117	SECRETARY	1.00	-	35,010	35,010
1118			-	-	-
1119			-	-	-
1120			-	-	-
1121			-	-	-
1122			-	-	-
1123			-	-	-
1124			-	-	-
1125			-	-	-
1126			-	-	-
1127			-	-	-
1128			-	-	-
1129			-	-	-
1130			-	-	-
1131			-	-	-
<b>Personnel Salaries Subtotal</b>		<b>28.00</b>	<b>\$ -</b>	<b>\$ 1,645,982</b>	<b>\$ 1,645,982</b>

<b>Employee Benefits</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1201	Retirement	\$ -	\$ 26,855	\$ 26,855
1202	Worker's Compensation	-	29,343	29,343
1203	Health Insurance	-	253,664	253,664
1204	API Benefits	-	545	545
1205	Other (Specify)	-	-	-
1206	Other (Specify)	-	-	-
<b>Employee Benefits Subtotal:</b>		<b>\$ -</b>	<b>\$ 310,407</b>	<b>\$ 310,407</b>
<b>Payroll Taxes &amp; Expenses:</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1301	OASDI	\$ -	\$ -	\$ -
1302	FICA/MEDICARE	-	136,897	136,897
1303	SUI	-	5,998	5,998
1304	Other: Accrued Paid Leave Moved to Admin Overhead	-	-	-
1305	Other (Specify)	-	-	-
1306	Other (Specify)	-	-	-
<b>Payroll Taxes &amp; Expenses Subtotal:</b>		<b>\$ -</b>	<b>\$ 142,895.00</b>	<b>\$ 142,895.00</b>
<b>EMPLOYEE SALARIES &amp; BENEFITS TOTAL:</b>		<b>\$ -</b>	<b>\$ 2,099,284</b>	<b>\$ 2,099,284</b>

<b>2000: CLIENT SUPPORT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
2001	Child Care	\$ -
2002	Client Housing Support	437,400
2003	Client Transportation & Support	13,400
2004	Clothing, Food, & Hygiene	20,650
2005	Education Support	4,450
2006	Employment Support	2,100
2007	Household Items for Clients	-
2008	Medication Supports	61,800
2009	Program Supplies - Medical	7,450
2010	Utility Vouchers	13,350
2011	Client Building Maintenance	2,100
2012	Client Therapy	1,500
2013	Client Activities / Recreation	15,450
2014	Client Personal Needs	2,250
2015	Other (Specify)	-
2016	Other (Specify)	-
<b>DIRECT CLIENT CARE TOTAL</b>		<b>\$ 581,900</b>

<b>3000: OPERATING EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
3001	Telecommunications	\$ 14,850
3002	Printing/Postage	13,650
3003	Office, Household & Program Supplies	32,750
3004	Advertising	-
3005	Staff Development & Training	17,950
3006	Staff Mileage	15,450
3007	Subscriptions & Memberships	2,000
3008	Vehicle Maintenance / Gas / Insurance	41,500
3009	Program Enhancement	-
3010	Staff Meetings	7,450
3011	Recruitment	3,750
3012	Employee-Employer Relations	5,150
<b>OPERATING EXPENSES TOTAL:</b>		<b>\$ 154,500</b>

<b>4000: FACILITIES &amp; EQUIPMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
4001	Building Maintenance	\$ 7,750
4002	Rent/Lease Building	84,550
4003	Rent/Lease Equipment	2,000
4004	Rent/Lease Vehicles	36,800
4005	Security	3,750
4006	Utilities	38,350
4007	Equipment Maintenance	2,500
4008	Liability Insurance	7,350
4009	Other (Specify)	-
4010	Other (Specify)	-
<b>FACILITIES/EQUIPMENT TOTAL:</b>		<b>\$ 183,050</b>

<b>5000: SPECIAL EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
5001	Consultant (Network & Data Management)	\$ -
5002	HMIS (Health Management Information System)	28,900
5003	Contractual/Consulting Services : Consultant	17,750
5004	Translation Services	4,150
5005	Contractual/Consulting Services : Psychiatrist	231,750
5006	Other (Specify)	-
5007	Other (Specify)	-
5008	Other (Specify)	-
<b>SPECIAL EXPENSES TOTAL:</b>		<b>\$ 282,550</b>

<b>6000: ADMINISTRATIVE EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
6001	Administrative Overhead	\$ 705,363
6002	Professional Liability Insurance	-
6003	Accounting/Bookkeeping	-
6004	External Audit	3,750
6005	Insurance (Specify):	-
6006	Payroll Services	-
6007	Depreciation <i>(Provider-Owned Equipment to be Used for Program Purposes)</i>	11,150
6008	Other: Bank Fees	2,500
6009	Other: Legal Expense	1,250
6010	Other: Licenses	4,500
6011	Other (Specify)	-
6012	Other (Specify)	-
<b>ADMINISTRATIVE EXPENSES TOTAL</b>		<b>\$ 728,513</b>

<b>7000: FIXED ASSETS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
7001	Computer Equipment & Software	\$ -
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	-
7003	Furniture & Fixtures	2,500
7004	Leasehold/Tenant/Building Improvements	3,750
7005	Other Assets over \$500 with Lifespan of 2 Years +	-
7006	Assets over \$5,000/unit (Specify)	-
7007	Other (Specify)	-
7008	Other (Specify)	-
<b>FIXED ASSETS EXPENSES TOTAL</b>		<b>\$ 6,250</b>

<b>TOTAL PROGRAM EXPENSES</b>		<b>\$ 4,036,047</b>
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**PROGRAM FUNDING SOURCES**

<b>8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)</b>				
<b>Acct #</b>	<b>Line Item Description</b>	<b>Service Units</b>	<b>Rate</b>	<b>Amount</b>
8001	Mental Health Services	76,502	2.91	\$ 222,621
8002	Case Management	32,715	1.99	65,103
8003	Crisis Services	1,470	3.20	4,704
8004	Medication Support	133,907	5.27	705,690
8005	Collateral	5,128	2.91	14,922
8006	Plan Development	7,935	2.91	23,091
8007	Assessment	14,780	2.91	43,010
8008	Rehabilitation	594,063	2.91	1,728,723
<b>Estimated Specialty Mental Health Services Billing Totals:</b>		<b>866,500</b>		<b>\$ 2,807,864</b>
Estimated % of Clients who are Medi-Cal Beneficiaries				100%
Estimated Total Cost of Specialty Mental Health Services Provided to Medi-Cal Beneficiaries				2,807,864
Federal Financial Participation (FFP) %			79%	2,218,213
<b>MEDI-CAL FFP TOTAL</b>				<b>\$ 2,218,213</b>

<b>8100 - SUBSTANCE USE DISORDER FUNDS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8101	Drug Medi-Cal	\$ -
8102	SABG	\$ -
<b>SUBSTANCE USE DISORDER FUNDS TOTAL</b>		<b>\$ -</b>

<b>8200 - REALIGNMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8201	Realignment	\$ 0
<b>REALIGNMENT TOTAL</b>		<b>\$ 0</b>

<b>8300 - MENTAL HEALTH SERVICE ACT (MHSA)</b>			
<b>Acct #</b>	<b>MHSA Component</b>	<b>MHSA Program Name</b>	<b>Amount</b>
8301	CSS - Community Services & Supports		\$ 1,778,834
8302	PEI - Prevention & Early Intervention		-
8303	INN - Innovations		-
8304	WET - Workforce Education & Training		-
8305	CFTN - Capital Facilities & Technology		-
<b>MHSA TOTAL</b>			<b>\$ 1,778,834</b>

<b>8400 - OTHER REVENUE</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8401	Client Fees	\$ 39,000
8402	Client Insurance	-
8403	Grants (Specify)	-
8404	Other (Specify)	-
8405	Other (Specify)	-
<b>OTHER REVENUE TOTAL</b>		<b>\$ 39,000</b>

**TOTAL PROGRAM FUNDING SOURCES: \$ 4,036,047**

**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Turning Point of Central Ca, Inc. | Fresno FSP Program Site #1**  
**FY 2021 - 2022 | 07/01/21 - 06/30/22 Budget Narrative**

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>1000: SALARIES &amp; BENEFITS</b>		<b>2,099,284</b>	
<b>Employee Salaries</b>		<b>1,645,982</b>	
1101	PROGRAM DIRECTOR	50,446	The Program Director currently oversees the program, hiring, training and supervising staff.
1102	ASST. PROGRAM DIRECTOR	96,026	The Assitant Program Director will supervise staff and assist the Program Director for that location
1103	ADMIN. ASSISTANT	25,178	The administrative assistant will oversee the support staff at both locations and will help with all support staff duties.
1104	BILLER	22,822	The biller will be responsible for billing into Avatar, billing all insurance claims and run reports as necessary for the program.
1105	BOOKKEEPER	23,502	The bookkeeper is responsible for processing all invoices for the program or programs and will send all information to the corporate office. They will handle petty cash, client fees and other bookkeeping needs for the program.
1106	CRIMINAL JUSTICE REHAB SPECIALIST (CM)	102,716	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in providing services to those involved in the criminal justice system and program liaison for Behavioral Health Court and the Federal Wellness Court
1107	DUAL DIAGNOSIS SPECIALIST (CM)	154,073	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in supporting and providing services for those who suffer from a co-occurring diagnosis.
1108	ED & EM REHAB SPECIALIST (CM)	154,073	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in linking and providing services to those interested in engagement in employment and education services.
1109	HOUSING COORDINATOR	51,358	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in identifying, linking and assisting clients in obtaining various housing such as a R&B, supportive housing, etc.
1110	INTAKE SPECIALIST	26,449	Reviews all referrals, contacting referral source and coordinating intake services to enrol in FSP program. The specialist also assists client in applying for additional benefits, such as General Relief, Social Security Benefits, Medi-cal, etc.
1111	LVN	158,694	Assists psychiatrist providing vital intake, coordination of medications, provides medication support and education, provides injections and consults with all staff in ensuring medication education and compliance
1112	MENTAL HEALTH PROFESSIONAL	371,524	Provides mental health assessment, assessing for Medical Necessity, assists client in identifying treatment plan goals according to diagnosis. MHP also provides individual and group therapy as client requests, while also providing program support to assist clients in crisis.
1113	PEER SUPPORT SPECIALIST	66,667	Provides support to clients, utilizing lived mental health experience to relate to clients, while assisting in activities with clients, run peer ran groups, meeting with clients during appointments providing support as needed.

PROGRAM EXPENSE				
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE	
1114	PERSONAL SERVICE COORDINATOR (CM)	189,887	Each FSP client will have a single point of responsibility through an assigned Personal Service Coordinator/case manager. The Personal Service Coordinator (PSC) works as a part of a treatment team in achieving the goals and objectives of the program to ensure quality of care for client participants. With case management being one of the primary methods of delivering services, each client shall be assigned a primary Personal Service Coordinator who will be responsible to see that the client's needs are met, as identified in the Plan of Care and the Individual Service and Support Plan (ISSP). They are able to provide intensive services and supports when needed, and they can give the client and/or family member considerable personal attention. The PSC will provide instruction modeling and support one-on-one in the course of daily events in the natural setting to manage day-to-day life and promote increased efficacy and self-sufficiency. This "hands on" approach will be utilized during the PSCs interaction with client's for 'en vivo' support, such as managing symptoms while preparing a budget, going to the doctor's office, the grocery store, in their home and maintaining their environment. Clients will learn at their own pace and with as much help as is needed by their personal service coordinator. A teaching/coaching approach will be used that empowers the client to gain mastery and take responsibility. Transportation and assistance in accessing other resources will be ensured by the PSC. All PSCs maintain their own case load of clients for whom they are the primary contact. Additionally, some of the PSC positions also include specialty training (housing, employment, education, criminal justice, substance use disorder) and will provide those specialty services to clients who are not on their caseload and can benefit from that expertise.	
1115	PSC SUPERVISOR	71,116	Provides supervision to all PSCs/Mental Health Specialists to ensure client care, maintain compliance with Turning Point policies and procedures. Supervisor also assisting in training new staff and reporting to the Assistant Program Director.	
1116	REGISTERED NURSE	46,441	Provides oversight over the LVNs/LPTs to ensure client care, maintaining compliance with Turning Point policies and procedures, providing training and ensuring accurate charting in accordance with Medi-cal.	
1117	SECRETARY	35,010	Provides direct services to the program by data entry, phone calls, checking in clients, etc.	
1118	0	-		
1119	0	-		
1120	0	-		
1121	0	-		
1122	0	-		
1123	0	-		
1124	0	-		
1125	0	-		
1126	0	-		
1127	0	-		
1128	0	-		
1129	0	-		
1130	0	-		
1131	0	-		
<b>Employee Benefits</b>		<b>310,407</b>		
1201	Retirement	26,855	Cost of Agency contribution to employee retirement plans.	
1202	Worker's Compensation	29,343	Cost of workers compensation insurance.	
1203	Health Insurance	253,664	Agency cost for health, dental and vision insurance	
1204	API Benefits	545	Employee assistance program	
1205	Other (Specify)	-		
1206	Other (Specify)	-		
<b>Payroll Taxes &amp; Expenses:</b>		<b>142,895</b>		
1301	OASDI	-		
1302	FICA/MEDICARE	136,897	Employer portion of F.I.C.A. taxes charged to the Agency by the Internal Revenue Service. F.I.C.A. is comprised of "Old-Age, Survivors, and Disability Insurance" (OASDI), plus "Hospital Insurance" (Medicare).	
1303	SUI	5,998	Employer portion of S.U.I. taxes charged to the Agency by the various states in which wages are paid.	
1304	Other: Accrued Paid Leave Moved to Admin	-	The monetary value of staff Paid Leave hours as they accrue on a monthly basis	
1305	Other (Specify)	-		
1306	Other (Specify)	-		

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>2000: CLIENT SUPPORT</b>		<b>581,900</b>	
2001	Child Care	-	
2002	Client Housing Support	437,400	Cost of rent, housing assistance and deposit paid on behalf of client. (Examples: first/last month deposit, late fees, monthly rent, hotel charges, room & board, board & care, etc.)
2003	Client Transportation & Support	13,400	Cost for client transportation. (Examples: bus tokens/passes, taxi, other public transportation, bicycles, etc.)
2004	Clothing, Food, & Hygiene	20,650	Cost of client hygiene supplies and non-work related clothing. (Examples: clothes, shoes, soap, toothpaste, deodorant, grooming supplies, diapers, etc.)
2005	Education Support	4,450	Cost of course fees and educational materials distributed to clients and prospective clients. Including court ordered educational class.
2006	Employment Support	2,100	Cost of client pre-employment preparation and employment retention. (Examples: job search and interview attire, work boots and tools required for employment, etc.)
2007	Household Items for Clients	-	
2008	Medication Supports	61,800	Cost of medical supplies or treatment/medical expense for a specific client. (Examples: co-pays*, prescription/lab work not covered by insurance, over-the-counter medications*, first aid kit/supplies for client's use at home, etc.) *if allowable per contract
2009	Program Supplies - Medical	7,450	Cost of medical supplies to be used by staff or clients at the program location to meet program objective. Such items are to remain at the program location and not sent home with the client. Such items include, but are not limited to first aid kits, blood pressure monitor, latex gloves, syringes, hazard disposal service, over-the-counter medication*, etc. *if allowable per contract.
2010	Utility Vouchers	13,350	Cost of client utility bills and/or security deposits.
2011	Client Building Maintenance	2,100	Cost of building repair or maintenance paid for on client's behalf. (Examples: handyman work, plumbing, drywall, roofing, etc.)
2012	Client Therapy	1,500	Cost of therapy services not covered by insurance and therapeutic supplies for clients to use outside of the program. (Examples: exercise videos/equipment, relaxation audio/visual recordings, artistic expression supplies, etc.)
2013	Client Activities / Recreation	15,450	Cost for client activities & recreation events. (Examples: cable bill, food/drinks/utensils/decorations needed for a specific client event, incentive rewards, admission fees to events, etc.)
2014	Client Personal Needs	2,250	Cost of supplying clients with necessary personal items not detailed in other accounts. (Examples: birth certificate, DMV fee for ID or license, clients household cleaning products/house supplies/kitchen supplies for their own home, pots/pans/dishes, linens, paper towels and child related expenses such as car seat/stroller/play pin, etc.)
2015	Other (Specify)	-	
2016	Other (Specify)	-	

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>3000: OPERATING EXPENSES</b>		<b>154,500</b>	
3001	Telecommunications	14,850	Cost of electronic communications. (Examples: internet, phone, fax, cell phones, etc.)
3002	Printing/Postage	13,650	Cost of custom copying/printing charges (Examples: letterhead, business forms, business cards, flyers, brochures, signs, etc.) and Postage and delivery, including delivery by the USPS, UPS, FEDEX and other courier services
3003	Office, Household & Program Supplies	32,750	Cost of items normally used in an office setting. (Examples: pens, pencils, paper tablets, paper clips, notepads, staples, non-electric staplers/hole punchers/calculators, and other items normally used in an office setting.) House Supplies, Cost of supplies used by staff during their scheduled work hours. These items are normally used to operate the building at the program location. These items are to remain at program location and not sent home with client. (Examples: pots, pans, pot holders, kitchen towels, curtains, detergent, Clorox for clothes, can opener, dishes, furnace filter, decorations, linens, etc.), Program Supplies, Cost of any items normally used by clients to meet program objectives while receiving services. These items are to remain at the program location and not sent home with the client. Such items include, but are not limited to video tapes, printed handouts, desk reference books, research material, curriculum, puzzles, board games, therapeutic/meditative supplies and other items that are specifically designed and used to accomplish program goals.
3004	Advertising	-	
3005	Staff Development & Training	17,950	Cost of employee training courses and materials.
3006	Staff Mileage	15,450	Cost of employee mileage reimbursement paid in accordance with FPM section 1005.
3007	Subscriptions & Memberships	2,000	Cost of membership dues and subscriptions. (Examples: magazine, newspaper, memberships, etc.)
3008	Vehicle Maintenance / Gas / Insurance	41,500	Cost of vehicle maintenance. Including cost of parts, supplies and labor associated with maintenance and repair of vehicles used by Agency programs. Cost of gas in Vehicles and Insurance
3009	Program Enhancement	-	
3010	Staff Meetings	7,450	Cost of room rental and supplies necessary for staff meetings.
3011	Recruitment	3,750	Cost of advertising and other employee recruitment expenses. (Examples: newspaper ad, urine screening, background check, etc.)
3012	Employee-Employer Relations	5,150	Cost relating to improvement of working conditions, employer/employee relations and employee morale. (Examples: Company picnic items, florist, etc.)
<b>4000: FACILITIES &amp; EQUIPMENT</b>		<b>183,050</b>	
4001	Building Maintenance	7,750	Cost of Agency building repairs and maintenance. (Examples: electrical work, A/C and heating, hood cleaning, plumbing, etc.) This account should not be used if a specific outside labor contractor is doing an identifiable project.
4002	Rent/Lease Building	84,550	Cost of rent/lease payments made for building leases from outside sources.
4003	Rent/Lease Equipment	2,000	Cost of rent/lease payments made for furniture and equipment leases.
4004	Rent/Lease Vehicles	36,800	Rental cost of vehicles and lease of agency vehicles.
4005	Security	3,750	Cost of installation, maintenance and monthly service fees for building alarms and other security measures. (Examples: security/surveillance equipment, service and installation, safes, etc.)
4006	Utilities	38,350	Cost of service for power, gas, water, sewer, garbage, etc.
4007	Equipment Maintenance	2,500	Cost of equipment and furniture repair and maintenance. (Examples: high capacity copier/printer/scanner, replacement parts such as hard drive, laptop battery, monitor/printer/phone cord, drum, power strip, surge protector, video card, etc.)
4008	Liability Insurance	7,350	
4009	Other (Specify)	-	
4010	Other (Specify)	-	

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>5000: SPECIAL EXPENSES</b>		<b>282,550</b>	
5001	Consultant (Network & Data Management)	-	
5002	HMIS (Health Management Information System)	28,900	Avatar Costs
5003	Contractual/Consulting Services : Consultant	17,750	These accounts are assigned to record various professional services provided by contracted sources working as independent agents. (IT Consultations, EHR Consultation, External Consultation, Clinical Supervisors who are not Staffed under the Personnel & Salaries)
5004	Translation Services	4,150	Paid to an outside vendor for translation / interpreter services
5005	Contractual/Consulting Services : Psychiatrist	231,750	These accounts are assigned to record various professional services provided by contracted Psychiatrist working as independent agents.
5006	Other (Specify)	-	
5007	Other (Specify)	-	
5008	Other (Specify)	-	

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>6000: ADMINISTRATIVE EXPENSES</b>		<b>728,513</b>	
6001	Administrative Overhead	705,363	Support of our cooperate and regional offices such as processing invoices, payroll, cost reports, etc. Accrued Paid Leave moved/added to Admin Overhead. Accrual Paid Leave cannot be listed in Salaries and Benefits Per DBH
6002	Professional Liability Insurance	-	
6003	Accounting/Bookkeeping	-	
6004	External Audit	3,750	Cost of outside audit fees.
6005	Insurance (Specify):	-	
6006	Payroll Services	-	
6007	Depreciation (Provider-Owned Equipment to be Used for Program Purposes)	11,150	This account should be charged for the depreciation expense of the Agency's tangible assets.
6008	Other: Bank Fees	2,500	Cost of bank fees charged to Agency account.
6009	Other: Legal Expense	1,250	Cost of outside legal fees
6010	Other: Licenses	4,500	Cost in obtaining and renewing licenses and permits.
6011	Other (Specify)	-	Cost of membership dues and subscriptions.
6012	Other (Specify)	-	

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>7000: FIXED ASSETS</b>		<b>6,250</b>	
7001	Computer Equipment & Software	-	
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	-	
7003	Furniture & Fixtures	2,500	Purchase of furniture and fixtures as needed
7004	Leasehold/Tenant/Building Improvements	3,750	Improvements to the building as needed that isn't covered by the landlord
7005	Other Assets over \$500 with Lifespan of 2 Years +	-	
7006	Assets over \$5,000/unit (Specify)	-	
7007	Other (Specify)	-	
7008	Other (Specify)	-	

PROGRAM FUNDING SOURCES			
8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)			
ACCT #	LINE ITEM	PROVIDE DETAILS OF METHODOLOGY(IES) USED IN DETERMINING MEDI-CAL SERVICE RATES AND/OR SERVICE UNITS, IF APPLICABLE AND/OR AS REQUIRED BY THE RFP.	
8001	Mental Health Services	We based our rates and units on current program usage	
8002	Case Management	We based our rates and units on current program usage	
8003	Crisis Services	We based our rates and units on current program usage	
8004	Medication Support	We based our rates and units on current program usage	
8005	Collateral	We based our rates and units on current program usage	
8006	Plan Development	We based our rates and units on current program usage	
8007	Assessment	We based our rates and units on current program usage	
8008	Rehabilitation	We based our rates and units on current program usage	

**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Turning Point of Central Ca, Inc. | Fresno FSP Program Site #1**  
**FY 2022 - 2023 | 07/01/22 - 06/30/23**

**PROGRAM EXPENSES**

1000: SALARIES & BENEFITS					
Employee Salaries					
Acct #	Position	FTE	Admin	Direct	Total
1101	PROGRAM DIRECTOR	0.50	\$ -	\$ 52,969	\$ 52,969
1102	ASST. PROGRAM DIRECTOR	1.00	-	100,828	100,828
1103	ADMIN. ASSISTANT	0.50	-	26,437	26,437
1104	BILLER	0.50	-	23,964	23,964
1105	BOOKKEEPER	0.50	-	24,678	24,678
1106	CRIMINAL JUSTICE REHAB SPECIALIST (CM)	2.00	-	107,852	107,852
1107	DUAL DIAGNOSIS SPECIALIST (CM)	3.00	-	161,777	161,777
1108	ED & EM REHAB SPECIALIST (CM)	3.00	-	161,777	161,777
1109	HOUSING COORDINATOR	1.00	-	53,926	53,926
1110	INTAKE SPECIALIST	0.50	-	27,772	27,772
1111	LVN	3.00	-	166,629	166,629
1112	MENTAL HEALTH PROFESSIONAL	4.00	-	390,101	390,101
1113	PEER SUPPORT SPECIALIST	2.00	-	70,001	70,001
1114	PERSONAL SERVICE COORDINATOR (CM)	4.00	-	199,381	199,381
1115	PSC SUPERVISOR	1.00	-	74,672	74,672
1116	REGISTERED NURSE	0.50	-	48,763	48,763
1117	SECRETARY	1.00	-	36,760	36,760
1118			-	-	-
1119			-	-	-
1120			-	-	-
1121			-	-	-
1122			-	-	-
1123			-	-	-
1124			-	-	-
1125			-	-	-
1126			-	-	-
1127			-	-	-
1128			-	-	-
1129			-	-	-
1130			-	-	-
1131			-	-	-
<b>Personnel Salaries Subtotal</b>		<b>28.00</b>	<b>\$ -</b>	<b>\$ 1,728,287</b>	<b>\$ 1,728,287</b>

<b>Employee Benefits</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1201	Retirement	\$ -	\$ 28,198	\$ 28,198
1202	Worker's Compensation	-	30,811	30,811
1203	Health Insurance	-	266,348	266,348
1204	API Benefits	-	573	573
1205	Other (Specify)	-	-	-
1206	Other (Specify)	-	-	-
<b>Employee Benefits Subtotal:</b>		<b>\$ -</b>	<b>\$ 325,930</b>	<b>\$ 325,930</b>
<b>Payroll Taxes &amp; Expenses:</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1301	OASDI	\$ -	\$ -	\$ -
1302	FICA/MEDICARE	-	143,742	143,742
1303	SUI	-	6,298	6,298
1304	Other: Accrued Paid Leave Moved to Admin Overhead	-	-	-
1305	Other (Specify)	-	-	-
1306	Other (Specify)	-	-	-
<b>Payroll Taxes &amp; Expenses Subtotal:</b>		<b>\$ -</b>	<b>\$ 150,040</b>	<b>\$ 150,040</b>
<b>EMPLOYEE SALARIES &amp; BENEFITS TOTAL:</b>		<b>\$ -</b>	<b>\$ 2,204,257</b>	<b>\$ 2,204,257</b>



<b>2000: CLIENT SUPPORT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
2001	Child Care	\$ -
2002	Client Housing Support	450,650
2003	Client Transportation & Support	13,850
2004	Clothing, Food, & Hygiene	21,300
2005	Education Support	4,600
2006	Employment Support	2,200
2007	Household Items for Clients	-
2008	Medication Supports	63,700
2009	Program Supplies - Medical	7,700
2010	Utility Vouchers	13,800
2011	Client Building Maintenance	2,200
2012	Client Therapy	1,550
2013	Client Activities / Recreation	15,950
2014	Client Personal Needs	2,350
2015	Other (Specify)	-
2016	Other (Specify)	-
<b>DIRECT CLIENT CARE TOTAL</b>		<b>\$ 599,850</b>

<b>3000: OPERATING EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
3001	Telecommunications	\$ 15,300
3002	Printing/Postage	14,100
3003	Office, Household & Program Supplies	33,900
3004	Advertising	-
3005	Staff Development & Training	18,500
3006	Staff Mileage	15,950
3007	Subscriptions & Memberships	2,000
3008	Vehicle Maintenance / Gas / Insurance	42,850
3009	Program Enhancement	-
3010	Staff Meetings	7,700
3011	Recruitment	3,900
3012	Employee-Employer Relations	5,350
<b>OPERATING EXPENSES TOTAL:</b>		<b>\$ 159,550</b>

<b>4000: FACILITIES &amp; EQUIPMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
4001	Building Maintenance	\$ 8,000
4002	Rent/Lease Building	87,150
4003	Rent/Lease Equipment	2,000
4004	Rent/Lease Vehicles	37,950
4005	Security	3,900
4006	Utilities	39,550
4007	Equipment Maintenance	2,600
4008	Liability Insurance	7,600
4009	Other (Specify)	-
4010	Other (Specify)	-
<b>FACILITIES/EQUIPMENT TOTAL:</b>		<b>\$ 188,750</b>

<b>5000: SPECIAL EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
5001	Consultant (Network & Data Management)	\$ -
5002	HMIS (Health Management Information System)	29,850
5003	Contractual/Consulting Services : Consultant	18,300
5004	Translation Services	4,300
5005	Contractual/Consulting Services : Psychiatrist	238,750
5006	Other (Specify)	-
5007	Other (Specify)	-
5008	Other (Specify)	-
<b>SPECIAL EXPENSES TOTAL:</b>		<b>\$ 291,200</b>

<b>6000: ADMINISTRATIVE EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
6001	Administrative Overhead	\$ 737,151
6002	Professional Liability Insurance	-
6003	Accounting/Bookkeeping	-
6004	External Audit	3,900
6005	Insurance (Specify):	-
6006	Payroll Services	-
6007	Depreciation <i>(Provider-Owned Equipment to be Used for Program Purposes)</i>	11,500
6008	Other: Bank Fees	2,600
6009	Other: Legal Expense	1,300
6010	Other: Licenses	4,600
6011	Other (Specify)	-
6012	Other (Specify)	-
<b>ADMINISTRATIVE EXPENSES TOTAL</b>		<b>\$ 761,051</b>

<b>7000: FIXED ASSETS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
7001	Computer Equipment & Software	\$ -
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	-
7003	Furniture & Fixtures	2,600
7004	Leasehold/Tenant/Building Improvements	3,900
7005	Other Assets over \$500 with Lifespan of 2 Years +	-
7006	Assets over \$5,000/unit (Specify)	-
7007	Other (Specify)	-
7008	Other (Specify)	-
<b>FIXED ASSETS EXPENSES TOTAL</b>		<b>\$ 6,500</b>

<b>TOTAL PROGRAM EXPENSES</b>		<b>\$ 4,211,158</b>
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**PROGRAM FUNDING SOURCES**

<b>8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)</b>				
<b>Acct #</b>	<b>Line Item Description</b>	<b>Service Units</b>	<b>Rate</b>	<b>Amount</b>
8001	Mental Health Services	82,240	2.91	\$ 239,318
8002	Case Management	35,169	1.99	69,986
8003	Crisis Services	1,580	3.20	5,056
8004	Medication Support	143,951	5.27	758,622
8005	Collateral	5,513	2.91	16,043
8006	Plan Development	8,530	2.91	24,822
8007	Assessment	15,889	2.91	46,237
8008	Rehabilitation	638,618	2.91	1,858,378
<b>Estimated Specialty Mental Health Services Billing Totals:</b>		<b>931,490</b>		<b>\$ 3,018,463</b>
Estimated % of Clients who are Medi-Cal Beneficiaries				100%
Estimated Total Cost of Specialty Mental Health Services Provided to Medi-Cal Beneficiaries				3,018,463
Federal Financial Participation (FFP) %			79%	2,384,586
<b>MEDI-CAL FFP TOTAL</b>				<b>\$ 2,384,586</b>

<b>8100 - SUBSTANCE USE DISORDER FUNDS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8101	Drug Medi-Cal	\$ -
8102	SABG	\$ -
<b>SUBSTANCE USE DISORDER FUNDS TOTAL</b>		<b>\$ -</b>

<b>8200 - REALIGNMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8201	Realignment	\$ 0
<b>REALIGNMENT TOTAL</b>		<b>\$ 0</b>

<b>8300 - MENTAL HEALTH SERVICE ACT (MHSA)</b>			
<b>Acct #</b>	<b>MHSA Component</b>	<b>MHSA Program Name</b>	<b>Amount</b>
8301	CSS - Community Services & Supports		\$ 1,787,572
8302	PEI - Prevention & Early Intervention		-
8303	INN - Innovations		-
8304	WET - Workforce Education & Training		-
8305	CFTN - Capital Facilities & Technology		-
<b>MHSA TOTAL</b>			<b>\$ 1,787,572</b>

<b>8400 - OTHER REVENUE</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8401	Client Fees	\$ 39,000
8402	Client Insurance	-
8403	Grants (Specify)	-
8404	Other (Specify)	-
8405	Other (Specify)	-
<b>OTHER REVENUE TOTAL</b>		<b>\$ 39,000</b>

**TOTAL PROGRAM FUNDING SOURCES: \$ 4,211,158**

**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Turning Point of Central Ca, Inc. | Fresno FSP Program Site #1**  
**FY 2022 - 2023 | 07/01/22 - 06/30/23 Budget Narrative**

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>1000: SALARIES &amp; BENEFITS</b>		<b>2,204,257</b>	
<b>Employee Salaries</b>		<b>1,728,287</b>	
1101	PROGRAM DIRECTOR	52,969	The Program Director currently oversees the program, hiring, training and supervising staff.
1102	ASST. PROGRAM DIRECTOR	100,828	The Assitant Program Director will supervise staff and assist the Program Director for that location
1103	ADMIN. ASSISTANT	26,437	The administrative assistant will oversee the support staff at both locations and will help with all support staff duties.
1104	BILLER	23,964	The biller will be responsible for billing into Avatar, billing all insurance claims and run reports as necessary for the program.
1105	BOOKKEEPER	24,678	The bookkeeper is responsible for processing all invoices for the program or programs and will send all information to the corporate office. They will handle petty cash, client fees and other bookkeeping needs for the program.
1106	CRIMINAL JUSTICE REHAB SPECIALIST (CM)	107,852	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in providing services to those involved in the criminal justice system and program liaison for Behavioral Health Court and the Federal Wellness Court
1107	DUAL DIAGNOSIS SPECIALIST (CM)	161,777	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in supporting and providing services for those who suffer from a co-occurring diagnosis.
1108	ED & EM REHAB SPECIALIST (CM)	161,777	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in linking and providing services to those interested in engagement in employment and education services.
1109	HOUSING COORDINATOR	53,926	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in identifying, linking and assisting clients in obtaining various housing such as a R&B, supportive housing, etc.
1110	INTAKE SPECIALIST	27,772	Reviews all referrals, contacting referral source and coordinating intake services to enroll in FSP program. The specialist also assists client in applying for additional benefits, such as General Relief, Social Security Benefits, Medi-cal, etc.
1111	LVN	166,629	Assists psychiatrist providing vital intake, coordination of medications, provides medication support and education, provides injections and consults with all staff in ensuring medication education and compliance
1112	MENTAL HEALTH PROFESSIONAL	390,101	Provides mental health assessment, assessing for Medical Necessity, assists client in identifying treatment plan goals according to diagnosis. MHP also provides individual and group therapy as client requests, while also providing program support to assist clients in crisis.
1113	PEER SUPPORT SPECIALIST	70,001	Provides support to clients, utilizing lived mental health experience to relate to clients, while assisting in activities with clients, run peer ran groups, meeting with clients during appointments providing support as needed.

PROGRAM EXPENSE				
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE	
1114	PERSONAL SERVICE COORDINATOR (CM)	199,381	Each FSP client will have a single point of responsibility through an assigned Personal Service Coordinator/case manager. The Personal Service Coordinator (PSC) works as a part of a treatment team in achieving the goals and objectives of the program to ensure quality of care for client participants. With case management being one of the primary methods of delivering services, each client shall be assigned a primary Personal Service Coordinator who will be responsible to see that the client's needs are met, as identified in the Plan of Care and the Individual Service and Support Plan (ISSP). They are able to provide intensive services and supports when needed, and they can give the client and/or family member considerable personal attention. The PSC will provide instruction modeling and support one-on-one in the course of daily events in the natural setting to manage day-to-day life and promote increased efficacy and self-sufficiency. This "hands on" approach will be utilized during the PSCs interaction with client's for 'en vivo' support, such as managing symptoms while preparing a budget, going to the doctor's office, the grocery store, in their home and maintaining their environment. Clients will learn at their own pace and with as much help as is needed by their personal service coordinator. A teaching/coaching approach will be used that empowers the client to gain mastery and take responsibility. Transportation and assistance in accessing other resources will be ensured by the PSC. All PSCs maintain their own case load of clients for whom they are the primary contact. Additionally, some of the PSC positions also include specialty training (housing, employment, education, criminal justice, substance use disorder) and will provide those specialty services to clients who are not on their caseload and can benefit from that expertise.	
1115	PSC SUPERVISOR	74,672	Provides supervision to all PSCs/Mental Health Specialists to ensure client care, maintain compliance with Turning Point policies and procedures. Supervisor also assisting in training new staff and reporting to the Assistant Program Director.	
1116	REGISTERED NURSE	48,763	Provides oversight over the LVNs/LPTs to ensure client care, maintaining compliance with Turning Point policies and procedures, providing training and ensuring accurate charting in accordance with Medi-cal.	
1117	SECRETARY	36,760	Provides direct services to the program by data entry, phone calls, checking in clients, etc.	
1118	0	-		
1119	0	-		
1120	0	-		
1121	0	-		
1122	0	-		
1123	0	-		
1124	0	-		
1125	0	-		
1126	0	-		
1127	0	-		
1128	0	-		
1129	0	-		
1130	0	-		
1131	0	-		
<b>Employee Benefits</b>		<b>325,930</b>		
1201	Retirement	28,198	Cost of Agency contribution to employee retirement plans.	
1202	Worker's Compensation	30,811	Cost of workers compensation insurance.	
1203	Health Insurance	266,348	Agency cost for health, dental and vision insurance	
1204	API Benefits	573	Employee assistance program	
1205	Other (Specify)	-		
1206	Other (Specify)	-		
<b>Payroll Taxes &amp; Expenses:</b>		<b>150,040</b>		
1301	OASDI	-		
1302	FICA/MEDICARE	143,742	Employer portion of F.I.C.A. taxes charged to the Agency by the Internal Revenue Service. F.I.C.A. is comprised of "Old-Age, Survivors, and Disability Insurance" (OASDI), plus "Hospital Insurance" (Medicare).	
1303	SUI	6,298	Employer portion of S.U.I. taxes charged to the Agency by the various states in which wages are paid.	
1304	Other: Accrued Paid Leave Moved to Admin Overhead	-	The monetary value of staff Paid Leave hours as they accrue on a monthly basis	
1305	Other (Specify)	-		
1306	Other (Specify)	-		

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>2000: CLIENT SUPPORT</b>		<b>599,850</b>	
2001	Child Care	-	
2002	Client Housing Support	450,650	Cost of rent, housing assistance and deposit paid on behalf of client. (Examples: first/last month deposit, late fees, monthly rent, hotel charges, room & board, board & care, etc.)
2003	Client Transportation & Support	13,850	Cost for client transportation. (Examples: bus tokens/passes, taxi, other public transportation, bicycles, etc.)
2004	Clothing, Food, & Hygiene	21,300	Cost of client hygiene supplies and non-work related clothing. (Examples: clothes, shoes, soap, toothpaste, deodorant, grooming supplies, diapers, etc.)
2005	Education Support	4,600	Cost of course fees and educational materials distributed to clients and prospective clients. Including court ordered educational class.
2006	Employment Support	2,200	Cost of client pre-employment preparation and employment retention. (Examples: job search and interview attire, work boots and tools required for employment, etc.)
2007	Household Items for Clients	-	
2008	Medication Supports	63,700	Cost of medical supplies or treatment/medical expense for a specific client. (Examples: co-pays*, prescription/lab work not covered by insurance, over-the-counter medications*, first aid kit/supplies for client's use at home, etc.) *if allowable per contract
2009	Program Supplies - Medical	7,700	Cost of medical supplies to be used by staff or clients at the program location to meet program objective. Such items are to remain at the program location and not sent home with the client. Such items include, but are not limited to first aid kits, blood pressure monitor, latex gloves, syringes, hazard disposal service, over-the-counter medication*, etc. *if allowable per contract.
2010	Utility Vouchers	13,800	Cost of client utility bills and/or security deposits.
2011	Client Building Maintenance	2,200	Cost of building repair or maintenance paid for on client's behalf. (Examples: handyman work, plumbing, drywall, roofing, etc.)
2012	Client Therapy	1,550	Cost of therapy services not covered by insurance and therapeutic supplies for clients to use outside of the program. (Examples: exercise videos/equipment, relaxation audio/visual recordings, artistic expression supplies, etc.)
2013	Client Activities / Recreation	15,950	Cost for client activities & recreation events. (Examples: cable bill, food/drinks/utensils/decorations needed for a specific client event, incentive rewards, admission fees to events, etc.)
2014	Client Personal Needs	2,350	Cost of supplying clients with necessary personal items not detailed in other accounts. (Examples: birth certificate, DMV fee for ID or license, clients household cleaning products/house supplies/kitchen supplies for their own home, pots/pans/dishes, linens, paper towels and child related expenses such as car seat/stroller/play pin, etc.)
2015	Other (Specify)	-	
2016	Other (Specify)	-	

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>3000: OPERATING EXPENSES</b>		<b>159,550</b>	
3001	Telecommunications	15,300	Cost of electronic communications. (Examples: internet, phone, fax, cell phones, etc.)
3002	Printing/Postage	14,100	Cost of custom copying/printing charges (Examples: letterhead, business forms, business cards, flyers, brochures, signs, etc.) and Postage and delivery, including delivery by the USPS, UPS, FEDEX and other courier services
3003	Office, Household & Program Supplies	33,900	Cost of items normally used in an office setting. (Examples: pens, pencils, paper tablets, paper clips, notepads, staples, non-electric staplers/hole punchers/calculators, and other items normally used in an office setting.) House Supplies, Cost of supplies used by staff during their scheduled work hours. These items are normally used to operate the building at the program location. These items are to remain at program location and not sent home with client. (Examples: pots, pans, pot holders, kitchen towels, curtains, detergent, Clorox for clothes, can opener, dishes, furnace filter, decorations, linens, etc.), Program Supplies, Cost of any items normally used by clients to meet program objectives while receiving services. These items are to remain at the program location and not sent home with the client. Such items include, but are not limited to video tapes, printed handouts, desk reference books, research material, curriculum, puzzles, board games, therapeutic/meditative supplies and other items that are specifically designed and used to accomplish program goals.
3004	Advertising	-	
3005	Staff Development & Training	18,500	Cost of employee training courses and materials.
3006	Staff Mileage	15,950	Cost of employee mileage reimbursement paid in accordance with FPM section 1005.
3007	Subscriptions & Memberships	2,000	Cost of membership dues and subscriptions. (Examples: magazine, newspaper, memberships, etc.)
3008	Vehicle Maintenance / Gas / Insurance	42,850	Cost of vehicle maintenance. Including cost of parts, supplies and labor associated with maintenance and repair of vehicles used by Agency programs. Cost of gas in Vehicles and Insurance
3009	Program Enhancement	-	
3010	Staff Meetings	7,700	Cost of room rental and supplies necessary for staff meetings.
3011	Recruitment	3,900	Cost of advertising and other employee recruitment expenses. (Examples: newspaper ad, urine screening, background check, etc.)
3012	Employee-Employer Relations	5,350	Cost relating to improvement of working conditions, employer/employee relations and employee morale. (Examples: Company picnic items, florist, etc.)

<b>4000: FACILITIES &amp; EQUIPMENT</b>		<b>188,750</b>	
4001	Building Maintenance	8,000	Cost of Agency building repairs and maintenance. (Examples: electrical work, A/C and heating, hood cleaning, plumbing, etc.) This account should not be used if a specific outside labor contractor is doing an identifiable project.
4002	Rent/Lease Building	87,150	Cost of rent/lease payments made for building leases from outside sources.
4003	Rent/Lease Equipment	2,000	Cost of rent/lease payments made for furniture and equipment leases.
4004	Rent/Lease Vehicles	37,950	Rental cost of vehicles and lease of agency vehicles.
4005	Security	3,900	Cost of installation, maintenance and monthly service fees for building alarms and other security measures. (Examples: security/surveillance equipment, service and installation, safes, etc.)
4006	Utilities	39,550	Cost of service for power, gas, water, sewer, garbage, etc.
4007	Equipment Maintenance	2,600	Cost of equipment and furniture repair and maintenance. (Examples: high capacity copier/printer/scanner, replacement parts such as hard drive, laptop battery, monitor/printer/phone cord, drum, power strip, surge protector, video card, etc.)
4008	Liability Insurance	7,600	
4009	Other (Specify)	-	
4010	Other (Specify)	-	

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>5000: SPECIAL EXPENSES</b>		<b>291,200</b>	
5001	Consultant (Network & Data Management)	-	
5002	HMIS (Health Management Information System)	29,850	Avatar Costs
5003	Contractual/Consulting Services : Consultant	18,300	These accounts are assigned to record various professional services provided by contracted sources working as independent agents. (IT Consultations, EHR Consultation, External Consultation, Clinical Supervisors who are not Staffed under the Personnel & Salaries)
5004	Translation Services	4,300	Paid to an outside vendor for translation / interpreter services
5005	Contractual/Consulting Services : Psychiatrist	238,750	These accounts are assigned to record various professional services provided by contracted Psychiatrist working as independent agents.
5006	Other (Specify)	-	
5007	Other (Specify)	-	
5008	Other (Specify)	-	

<b>6000: ADMINISTRATIVE EXPENSES</b>		<b>761,051</b>	
6001	Administrative Overhead	737,151	Support of our cooperate and regional offices such as processing invoices, payroll, cost reports, etc. Accrued Paid Leave moved/added to Admin Overhead. Accrual Paid Leave cannot be listed in Salaries and Benefits Per DBH
6002	Professional Liability Insurance	-	
6003	Accounting/Bookkeeping	-	
6004	External Audit	3,900	Cost of outside audit fees.
6005	Insurance (Specify):	-	
6006	Payroll Services	-	
6007	Depreciation (Provider-Owned Equipment to be Used for Program Purposes)	11,500	This account should be charged for the depreciation expense of the Agency's tangible assets.
6008	Other: Bank Fees	2,600	Cost of bank fees charged to Agency account.
6009	Other: Legal Expense	1,300	Cost of outside legal fees
6010	Other: Licenses	4,600	Cost in obtaining and renewing licenses and permits.
6011	Other (Specify)	-	Cost of membership dues and subscriptions.
6012	Other (Specify)	-	

<b>7000: FIXED ASSETS</b>		<b>6,500</b>	
7001	Computer Equipment & Software	-	
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	-	
7003	Furniture & Fixtures	2,600	Purchase of furniture and fixtures as needed
7004	Leasehold/Tenant/Building Improvements	3,900	Improvements to the building as needed that isn't covered by the landlord
7005	Other Assets over \$500 with Lifespan of 2 Years +	-	
7006	Assets over \$5,000/unit (Specify)	-	
7007	Other (Specify)	-	
7008	Other (Specify)	-	

PROGRAM FUNDING SOURCES		
8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)		
ACCT #	LINE ITEM	PROVIDE DETAILS OF METHODOLOGY(IES) USED IN DETERMINING MEDI-CAL SERVICE RATES AND/OR SERVICE UNITS, IF APPLICABLE AND/OR AS REQUIRED BY THE RFP.
8001	Mental Health Services	We based our rates and units on current program usage
8002	Case Management	We based our rates and units on current program usage
8003	Crisis Services	We based our rates and units on current program usage
8004	Medication Support	We based our rates and units on current program usage
8005	Collateral	We based our rates and units on current program usage
8006	Plan Development	We based our rates and units on current program usage
8007	Assessment	We based our rates and units on current program usage
8008	Rehabilitation	We based our rates and units on current program usage



**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Turning Point of Central Ca, Inc. | Fresno FSP Program Site #1**  
**FY 2023 - 2024 | 07/01/23 - 06/30/24**

**PROGRAM EXPENSES**

1000: SALARIES & BENEFITS					
Employee Salaries					
Acct #	Position	FTE	Admin	Direct	Total
1101	PROGRAM DIRECTOR	0.50	\$ -	\$ 55,617	\$ 55,617
1102	ASST. PROGRAM DIRECTOR	1.00	-	105,869	105,869
1103	ADMIN. ASSISTANT	0.50	-	27,759	27,759
1104	BILLER	0.50	-	25,162	25,162
1105	BOOKKEEPER	0.50	-	25,912	25,912
1106	CRIMINAL JUSTICE REHAB SPECIALIST (CM)	2.00	-	113,245	113,245
1107	DUAL DIAGNOSIS SPECIALIST (CM)	3.00	-	169,866	169,866
1108	ED & EM REHAB SPECIALIST (CM)	3.00	-	169,866	169,866
1109	HOUSING COORDINATOR	1.00	-	56,623	56,623
1110	INTAKE SPECIALIST	0.50	-	29,161	29,161
1111	LVN	3.00	-	174,961	174,961
1112	MENTAL HEALTH PROFESSIONAL	4.00	-	409,606	409,606
1113	PEER SUPPORT SPECIALIST	2.00	-	73,501	73,501
1114	PERSONAL SERVICE COORDINATOR (CM)	4.00	-	209,351	209,351
1115	PSC SUPERVISOR	1.00	-	78,406	78,406
1116	REGISTERED NURSE	0.50	-	51,202	51,202
1117	SECRETARY	1.00	-	38,598	38,598
1118			-	-	-
1119			-	-	-
1120			-	-	-
1121			-	-	-
1122			-	-	-
1123			-	-	-
1124			-	-	-
1125			-	-	-
1126			-	-	-
1127			-	-	-
1128			-	-	-
1129			-	-	-
1130			-	-	-
1131			-	-	-
<b>Personnel Salaries Subtotal</b>		<b>28.00</b>	<b>\$ -</b>	<b>\$ 1,814,705</b>	<b>\$ 1,814,705</b>

<b>Employee Benefits</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1201	Retirement	\$ -	\$ 29,608	\$ 29,608
1202	Worker's Compensation	-	32,352	32,352
1203	Health Insurance	-	279,666	279,666
1204	API Benefits	-	602	602
1205	Other (Specify)	-	-	-
1206	Other (Specify)	-	-	-
<b>Employee Benefits Subtotal:</b>		<b>\$ -</b>	<b>\$ 342,228</b>	<b>\$ 342,228</b>
<b>Payroll Taxes &amp; Expenses:</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1301	OASDI	\$ -	\$ 27,634	\$ 27,634
1302	FICA/MEDICARE	-	123,296	123,296
1303	SUI	-	6,613	6,613
1304	Other: Accrued Paid Leave Moved to Admin Overhead	-	-	-
1305	Other (Specify)	-	-	-
1306	Other (Specify)	-	-	-
<b>Payroll Taxes &amp; Expenses Subtotal:</b>		<b>\$ -</b>	<b>\$ 157,543</b>	<b>\$ 157,543</b>
<b>EMPLOYEE SALARIES &amp; BENEFITS TOTAL:</b>		<b>\$ -</b>	<b>\$ 2,314,476</b>	<b>\$ 2,314,476</b>

<b>2000: CLIENT SUPPORT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
2001	Child Care	\$ -
2002	Client Housing Support	464,170
2003	Client Transportation & Support	14,266
2004	Clothing, Food, & Hygiene	21,939
2005	Education Support	4,738
2006	Employment Support	2,266
2007	Household Items for Clients	-
2008	Medication Supports	65,611
2009	Program Supplies - Medical	7,931
2010	Utility Vouchers	14,214
2011	Client Building Maintenance	2,266
2012	Client Therapy	1,597
2013	Client Activities / Recreation	16,429
2014	Client Personal Needs	2,421
2015	Other (Specify)	-
2016	Other (Specify)	-
<b>DIRECT CLIENT CARE TOTAL</b>		<b>\$ 617,848</b>

<b>3000: OPERATING EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
3001	Telecommunications	\$ 15,759
3002	Printing/Postage	14,523
3003	Office, Household & Program Supplies	34,977
3004	Advertising	-
3005	Staff Development & Training	19,055
3006	Staff Mileage	16,429
3007	Subscriptions & Memberships	2,000
3008	Vehicle Maintenance / Gas / Insurance	44,136
3009	Program Enhancement	-
3010	Staff Meetings	7,931
3011	Recruitment	4,017
3012	Employee-Employer Relations	5,511
<b>OPERATING EXPENSES TOTAL:</b>		<b>\$ 164,338</b>

<b>4000: FACILITIES &amp; EQUIPMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
4001	Building Maintenance	\$ 8,240
4002	Rent/Lease Building	89,825
4003	Rent/Lease Equipment	2,000
4004	Rent/Lease Vehicles	39,089
4005	Security	4,017
4006	Utilities	40,737
4007	Equipment Maintenance	2,678
4008	Liability Insurance	7,828
4009	Other (Specify)	-
4010	Other (Specify)	-
<b>FACILITIES/EQUIPMENT TOTAL:</b>		<b>\$ 194,414</b>

<b>5000: SPECIAL EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
5001	Consultant (Network & Data Management)	\$ -
5002	HMIS (Health Management Information System)	30,806
5003	Contractual/Consulting Services : Consultant	18,849
5004	Translation Services	4,429
5005	Contractual/Consulting Services : Psychiatrist	245,913
5006	Other (Specify)	-
5007	Other (Specify)	-
5008	Other (Specify)	-
<b>SPECIAL EXPENSES TOTAL:</b>		<b>\$ 299,997</b>

<b>6000: ADMINISTRATIVE EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
6001	Administrative Overhead	\$ 770,200
6002	Professional Liability Insurance	-
6003	Accounting/Bookkeeping	-
6004	External Audit	4,017
6005	Insurance (Specify):	-
6006	Payroll Services	-
6007	Depreciation <i>(Provider-Owned Equipment to be Used for Program Purposes)</i>	11,845
6008	Other: Bank Fees	2,678
6009	Other: Legal Expense	1,339
6010	Other: Licenses	4,678
6011	Other (Specify)	-
6012	Other (Specify)	-
<b>ADMINISTRATIVE EXPENSES TOTAL</b>		<b>\$ 794,757</b>

<b>7000: FIXED ASSETS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
7001	Computer Equipment & Software	\$ 50,489
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	24,000
7003	Furniture & Fixtures	2,678
7004	Leasehold/Tenant/Building Improvements	4,017
7005	Other Assets over \$500 with Lifespan of 2 Years +	-
7006	Assets over \$5,000/unit (Specify)	-
7007	Other (Specify)	-
7008	Other (Specify)	-
<b>FIXED ASSETS EXPENSES TOTAL</b>		<b>\$ 81,184</b>

<b>TOTAL PROGRAM EXPENSES</b>		<b>\$ 4,467,014</b>
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**PROGRAM FUNDING SOURCES**

<b>8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)</b>				
<b>Acct #</b>	<b>Line Item Description</b>	<b>Service Units</b>	<b>Rate</b>	<b>Amount</b>
8001	Mental Health Services	88,360	3.02	\$ 266,847
8002	Case Management	37,785	2.05	77,459
8003	Crisis Services	1,697	3.22	5,464
8004	Medication Support	154,662	5.30	819,709
8005	Collateral	5,923	3.02	17,887
8006	Plan Development	9,164	3.02	27,675
8007	Assessment	17,071	3.02	51,554
8008	Rehabilitation	686,143	3.02	2,072,152
<b>Estimated Specialty Mental Health Services Billing Totals:</b>		<b>1,000,805</b>		<b>\$ 3,338,748</b>
Estimated % of Clients who are Medi-Cal Beneficiaries				100%
Estimated Total Cost of Specialty Mental Health Services Provided to Medi-Cal Beneficiaries				3,338,748
Federal Financial Participation (FFP) %			79%	2,637,611
<b>MEDI-CAL FFP TOTAL</b>				<b>\$ 2,637,611</b>

<b>8100 - SUBSTANCE USE DISORDER FUNDS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8101	Drug Medi-Cal	\$ -
8102	SABG	\$ -
<b>SUBSTANCE USE DISORDER FUNDS TOTAL</b>		<b>\$ -</b>

<b>8200 - REALIGNMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8201	Realignment	\$ (0)
<b>REALIGNMENT TOTAL</b>		<b>\$ (0)</b>

<b>8300 - MENTAL HEALTH SERVICE ACT (MHSA)</b>			
<b>Acct #</b>	<b>MHSA Component</b>	<b>MHSA Program Name</b>	<b>Amount</b>
8301	CSS - Community Services & Supports		\$ 1,790,403
8302	PEI - Prevention & Early Intervention		-
8303	INN - Innovations		-
8304	WET - Workforce Education & Training		-
8305	CFTN - Capital Facilities & Technology		-
<b>MHSA TOTAL</b>			<b>\$ 1,790,403</b>

<b>8400 - OTHER REVENUE</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8401	Client Fees	\$ 39,000
8402	Client Insurance	-
8403	Grants (Specify)	-
8404	Other (Specify)	-
8405	Other (Specify)	-
<b>OTHER REVENUE TOTAL</b>		<b>\$ 39,000</b>

**TOTAL PROGRAM FUNDING SOURCES: \$ 4,467,014**

**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Turning Point of Central Ca, Inc. | Fresno FSP Program Site #1**  
**FY 2023 - 2024 | 07/01/23 - 06/30/24 Budget Narrative**

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>1000: SALARIES &amp; BENEFITS</b>		<b>2,314,476</b>	
<b>Employee Salaries</b>		<b>1,814,705</b>	
1101	PROGRAM DIRECTOR	55,617	The Program Director currently oversees the program, hiring, training and supervising staff.
1102	ASST. PROGRAM DIRECTOR	105,869	The Assitant Program Director will supervise staff and assist the Program Director for that location
1103	ADMIN. ASSISTANT	27,759	The administrative assistant will oversee the support staff at both locations and will help with all support staff duties.
1104	BILLER	25,162	The biller will be responsible for billing into Avatar, billing all insurance claims and run reports as necessary for the program.
1105	BOOKKEEPER	25,912	The bookkeeper is responsible for processing all invoices for the program or programs and will send all information to the corporate office. They will handle petty cash, client fees and other bookkeeping needs for the program.
1106	CRIMINAL JUSTICE REHAB SPECIALIST (CM)	113,245	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in providing services to those involved in the criminal justice system and program liaison for Behavioral Health Court and the Federal Wellness Court
1107	DUAL DIAGNOSIS SPECIALIST (CM)	169,866	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in supporting and providing services for those who suffer from a co-occurring diagnosis.
1108	ED & EM REHAB SPECIALIST (CM)	169,866	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in linking and providing services to those interested in engagement in employment and education services.
1109	HOUSING COORDINATOR	56,623	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in identifying, linking and assisting clients in obtaining various housing such as a R&B, supportive housing, etc.
1110	INTAKE SPECIALIST	29,161	Reviews all referrals, contacting referral source and coordinating intake services to enroll in FSP program. The specialist also assists client in applying for additional benefits, such as General Relief, Social Security Benefits, Medi-cal, etc.
1111	LVN	174,961	Assists psychiatrist providing vital intake, coordination of medications, provides medication support and education, provides injections and consults with all staff in ensuring medication education and compliance
1112	MENTAL HEALTH PROFESSIONAL	409,606	Provides mental health assessment, assessing for Medical Necessity, assists client in identifying treatment plan goals according to diagnosis. MHP also provides individual and group therapy as client requests, while also providing program support to assist clients in crisis.
1113	PEER SUPPORT SPECIALIST	73,501	Provides support to clients, utilizing lived mental health experience to relate to clients, while assisting in activities with clients, run peer ran groups, meeting with clients during appointments providing support as needed.

PROGRAM EXPENSE				
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE	
1114	PERSONAL SERVICE COORDINATOR (CM)	209,351	Each FSP client will have a single point of responsibility through an assigned Personal Service Coordinator/case manager. The Personal Service Coordinator (PSC) works as a part of a treatment team in achieving the goals and objectives of the program to ensure quality of care for client participants. With case management being one of the primary methods of delivering services, each client shall be assigned a primary Personal Service Coordinator who will be responsible to see that the client's needs are met, as identified in the Plan of Care and the Individual Service and Support Plan (ISSP). They are able to provide intensive services and supports when needed, and they can give the client and/or family member considerable personal attention. The PSC will provide instruction modeling and support one-on-one in the course of daily events in the natural setting to manage day-to-day life and promote increased efficacy and self-sufficiency. This "hands on" approach will be utilized during the PSCs interaction with client's for 'en vivo' support, such as managing symptoms while preparing a budget, going to the doctor's office, the grocery store, in their home and maintaining their environment. Clients will learn at their own pace and with as much help as is needed by their personal service coordinator. A teaching/coaching approach will be used that empowers the client to gain mastery and take responsibility. Transportation and assistance in accessing other resources will be ensured by the PSC. All PSCs maintain their own case load of clients for whom they are the primary contact. Additionally, some of the PSC positions also include specialty training (housing, employment, education, criminal justice, substance use disorder) and will provide those specialty services to clients who are not on their caseload and can benefit from that expertise.	
1115	PSC SUPERVISOR	78,406	Provides supervision to all PSCs/Mental Health Specialists to ensure client care, maintain compliance with Turning Point policies and procedures. Supervisor also assisting in training new staff and reporting to the Assistant Program Director.	
1116	REGISTERED NURSE	51,202	Provides oversight over the LVNs/LPTs to ensure client care, maintaining compliance with Turning Point policies and procedures, providing training and ensuring accurate charting in accordance with Medi-cal.	
1117	SECRETARY	38,598	Provides direct services to the program by data entry, phone calls, checking in clients, etc.	
1118	0	-		
1119	0	-		
1120	0	-		
1121	0	-		
1122	0	-		
1123	0	-		
1124	0	-		
1125	0	-		
1126	0	-		
1127	0	-		
1128	0	-		
1129	0	-		
1130	0	-		
1131	0	-		
<b>Employee Benefits</b>		<b>342,228</b>		
1201	Retirement	29,608	Cost of Agency contribution to employee retirement plans.	
1202	Worker's Compensation	32,352	Cost of workers compensation insurance.	
1203	Health Insurance	279,666	Agency cost for health, dental and vision insurance	
1204	API Benefits	602	Employee assistance program	
1205	Other (Specify)	-		
1206	Other (Specify)	-		
<b>Payroll Taxes &amp; Expenses:</b>		<b>157,543</b>		
1301	OASDI	27,634		
1302	FICA/MEDICARE	123,296	Employer portion of F.I.C.A. taxes charged to the Agency by the Internal Revenue Service. F.I.C.A. is comprised of "Old-Age, Survivors, and Disability Insurance" (OASDI), plus "Hospital Insurance" (Medicare).	
1303	SUI	6,613	Employer portion of S.U.I. taxes charged to the Agency by the various states in which wages are paid.	
1304	Other: Accrued Paid Leave Moved to Admin Overhead	-	The monetary value of staff Paid Leave hours as they accrue on a monthly basis	
1305	Other (Specify)	-		
1306	Other (Specify)	-		

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>2000: CLIENT SUPPORT</b>		<b>617,848</b>	
2001	Child Care	-	
2002	Client Housing Support	464,170	Cost of rent, housing assistance and deposit paid on behalf of client. (Examples: first/last month deposit, late fees, monthly rent, hotel charges, room & board, board & care, etc.)
2003	Client Transportation & Support	14,266	Cost for client transportation. (Examples: bus tokens/passes, taxi, other public transportation, bicycles, etc.)
2004	Clothing, Food, & Hygiene	21,939	Cost of client hygiene supplies and non-work related clothing. (Examples: clothes, shoes, soap, toothpaste, deodorant, grooming supplies, diapers, etc.)
2005	Education Support	4,738	Cost of course fees and educational materials distributed to clients and prospective clients. Including court ordered educational class.
2006	Employment Support	2,266	Cost of client pre-employment preparation and employment retention. (Examples: job search and interview attire, work boots and tools required for employment, etc.)
2007	Household Items for Clients	-	
2008	Medication Supports	65,611	Cost of medical supplies or treatment/medical expense for a specific client. (Examples: co-pays*, prescription/lab work not covered by insurance, over-the-counter medications*, first aid kit/supplies for client's use at home, etc.) *if allowable per contract
2009	Program Supplies - Medical	7,931	Cost of medical supplies to be used by staff or clients at the program location to meet program objective. Such items are to remain at the program location and not sent home with the client. Such items include, but are not limited to first aid kits, blood pressure monitor, latex gloves, syringes, hazard disposal service, over-the-counter medication*, etc. *if allowable per contract.
2010	Utility Vouchers	14,214	Cost of client utility bills and/or security deposits.
2011	Client Building Maintenance	2,266	Cost of building repair or maintenance paid for on client's behalf. (Examples: handyman work, plumbing, drywall, roofing, etc.)
2012	Client Therapy	1,597	Cost of therapy services not covered by insurance and therapeutic supplies for clients to use outside of the program. (Examples: exercise videos/equipment, relaxation audio/visual recordings, artistic expression supplies, etc.)
2013	Client Activities / Recreation	16,429	Cost for client activities & recreation events. (Examples: cable bill, food/drinks/utensils/decorations needed for a specific client event, incentive rewards, admission fees to events, etc.)
2014	Client Personal Needs	2,421	Cost of supplying clients with necessary personal items not detailed in other accounts. (Examples: birth certificate, DMV fee for ID or license, clients household cleaning products/house supplies/kitchen supplies for their own home, pots/pans/dishes, linens, paper towels and child related expenses such as car seat/stroller/play pin, etc.)
2015	Other (Specify)	-	
2016	Other (Specify)	-	



PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>3000: OPERATING EXPENSES</b>		<b>164,338</b>	
3001	Telecommunications	15,759	Cost of electronic communications. (Examples: internet, phone, fax, cell phones, etc.)
3002	Printing/Postage	14,523	Cost of custom copying/printing charges (Examples: letterhead, business forms, business cards, flyers, brochures, signs, etc.) and Postage and delivery, including delivery by the USPS, UPS, FEDEX and other courier services
3003	Office, Household & Program Supplies	34,977	Cost of items normally used in an office setting. (Examples: pens, pencils, paper tablets, paper clips, notepads, staples, non-electric staplers/hole punchers/calculators, and other items normally used in an office setting.) House Supplies, Cost of supplies used by staff during their scheduled work hours. These items are normally used to operate the building at the program location. These items are to remain at program location and not sent home with client. (Examples: pots, pans, pot holders, kitchen towels, curtains, detergent, Clorox for clothes, can opener, dishes, furnace filter, decorations, linens, etc.), Program Supplies, Cost of any items normally used by clients to meet program objectives while receiving services. These items are to remain at the program location and not sent home with the client. Such items include, but are not limited to video tapes, printed handouts, desk reference books, research material, curriculum, puzzles, board games, therapeutic/meditative supplies and other items that are specifically designed and used to accomplish program goals.
3004	Advertising	-	
3005	Staff Development & Training	19,055	Cost of employee training courses and materials.
3006	Staff Mileage	16,429	Cost of employee mileage reimbursement paid in accordance with FPM section 1005.
3007	Subscriptions & Memberships	2,000	Cost of membership dues and subscriptions. (Examples: magazine, newspaper, memberships, etc.)
3008	Vehicle Maintenance / Gas / Insurance	44,136	Cost of vehicle maintenance. Including cost of parts, supplies and labor associated with maintenance and repair of vehicles used by Agency programs. Cost of gas in Vehicles and Insurance
3009	Program Enhancement	-	
3010	Staff Meetings	7,931	Cost of room rental and supplies necessary for staff meetings.
3011	Recruitment	4,017	Cost of advertising and other employee recruitment expenses. (Examples: newspaper ad, urine screening, background check, etc.)
3012	Employee-Employer Relations	5,511	Cost relating to improvement of working conditions, employer/employee relations and employee morale. (Examples: Company picnic items, florist, etc.)
<b>4000: FACILITIES &amp; EQUIPMENT</b>		<b>194,414</b>	
4001	Building Maintenance	8,240	Cost of Agency building repairs and maintenance. (Examples: electrical work, A/C and heating, hood cleaning, plumbing, etc.) This account should not be used if a specific outside labor contractor is doing an identifiable project.
4002	Rent/Lease Building	89,825	Cost of rent/lease payments made for building leases from outside sources.
4003	Rent/Lease Equipment	2,000	Cost of rent/lease payments made for furniture and equipment leases.
4004	Rent/Lease Vehicles	39,089	Rental cost of vehicles and lease of agency vehicles.
4005	Security	4,017	Cost of installation, maintenance and monthly service fees for building alarms and other security measures. (Examples: security/surveillance equipment, service and installation, safes, etc.)
4006	Utilities	40,737	Cost of service for power, gas, water, sewer, garbage, etc.
4007	Equipment Maintenance	2,678	Cost of equipment and furniture repair and maintenance. (Examples: high capacity copier/printer/scanner, replacement parts such as hard drive, laptop battery, monitor/printer/phone cord, drum, power strip, surge protector, video card, etc.)
4008	Liability Insurance	7,828	
4009	Other (Specify)	-	
4010	Other (Specify)	-	

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>5000: SPECIAL EXPENSES</b>		<b>299,997</b>	
5001	Consultant (Network & Data Management)	-	
5002	HMIS (Health Management Information System)	30,806	Avatar Costs
5003	Contractual/Consulting Services : Consultant	18,849	These accounts are assigned to record various professional services provided by contracted sources working as independent agents. (IT Consultations, EHR Consultation, External Consultation, Clinical Supervisors who are not Staffed under the Personnel & Salaries)
5004	Translation Services	4,429	Paid to an outside vendor for translation / interpreter services
5005	Contractual/Consulting Services : Psychiatrist	245,913	These accounts are assigned to record various professional services provided by contracted Psychiatrist working as independent agents.
5006	Other (Specify)	-	
5007	Other (Specify)	-	
5008	Other (Specify)	-	

<b>6000: ADMINISTRATIVE EXPENSES</b>		<b>794,757</b>	
6001	Administrative Overhead	770,200	Support of our cooperate and regional offices such as processing invoices, payroll, cost reports, etc. Accrued Paid Leave moved/added to Admin Overhead. Accrual Paid Leave cannot be listed in Salaries and Benefits Per DBH
6002	Professional Liability Insurance	-	
6003	Accounting/Bookkeeping	-	
6004	External Audit	4,017	Cost of outside audit fees.
6005	Insurance (Specify):	-	
6006	Payroll Services	-	
6007	Depreciation (Provider-Owned Equipment to be Used for Program Purposes)	11,845	This account should be charged for the depreciation expense of the Agency's tangible assets.
6008	Other: Bank Fees	2,678	Cost of bank fees charged to Agency account.
6009	Other: Legal Expense	1,339	Cost of outside legal fees
6010	Other: Licenses	4,678	Cost in obtaining and renewing licenses and permits.
6011	Other (Specify)	-	Cost of membership dues and subscriptions.
6012	Other (Specify)	-	

<b>7000: FIXED ASSETS</b>		<b>81,184</b>	
7001	Computer Equipment & Software	50,489	Computers / printers / software needed since computers will be obsolete from being purchased nearly 5 years ago
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	24,000	Copier replacement, cell phones that have aged out.
7003	Furniture & Fixtures	2,678	Purchase of furniture and fixtures as needed
7004	Leasehold/Tenant/Building Improvements	4,017	Improvements to the building as needed that isn't covered by the landlord
7005	Other Assets over \$500 with Lifespan of 2 Years +	-	
7006	Assets over \$5,000/unit (Specify)	-	
7007	Other (Specify)	-	
7008	Other (Specify)	-	

PROGRAM FUNDING SOURCES			
8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)			
ACCT #	LINE ITEM	PROVIDE DETAILS OF METHODOLOGY(IES) USED IN DETERMINING MEDI-CAL SERVICE RATES AND/OR SERVICE UNITS, IF APPLICABLE AND/OR AS REQUIRED BY THE RFP.	
8001	Mental Health Services	We based our rates and units on current program usage	
8002	Case Management	We based our rates and units on current program usage	
8003	Crisis Services	We based our rates and units on current program usage	
8004	Medication Support	We based our rates and units on current program usage	
8005	Collateral	We based our rates and units on current program usage	
8006	Plan Development	We based our rates and units on current program usage	
8007	Assessment	We based our rates and units on current program usage	
8008	Rehabilitation	We based our rates and units on current program usage	

**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Turning Point of Central Ca, Inc. | Fresno FSP Program Site #1**  
**FY 2024 - 2025 | 07/01/24 - 06/30/25**

**PROGRAM EXPENSES**

1000: SALARIES & BENEFITS					
Employee Salaries					
Acct #	Position	FTE	Admin	Direct	Total
1101	PROGRAM DIRECTOR	0.50	\$ -	\$ 58,398	\$ 58,398
1102	ASST. PROGRAM DIRECTOR	1.00	-	111,163	111,163
1103	ADMIN. ASSISTANT	0.50	-	29,147	29,147
1104	BILLER	0.50	-	26,421	26,421
1105	BOOKKEEPER	0.50	-	27,208	27,208
1106	CRIMINAL JUSTICE REHAB SPECIALIST (CM)	2.00	-	118,907	118,907
1107	DUAL DIAGNOSIS SPECIALIST (CM)	3.00	-	178,360	178,360
1108	ED & EM REHAB SPECIALIST (CM)	3.00	-	178,360	178,360
1109	HOUSING COORDINATOR	1.00	-	59,454	59,454
1110	INTAKE SPECIALIST	0.50	-	30,619	30,619
1111	LVN	3.00	-	183,709	183,709
1112	MENTAL HEALTH PROFESSIONAL	4.00	-	430,087	430,087
1113	PEER SUPPORT SPECIALIST	2.00	-	77,177	77,177
1114	PERSONAL SERVICE COORDINATOR (CM)	4.00	-	219,819	219,819
1115	PSC SUPERVISOR	1.00	-	82,326	82,326
1116	REGISTERED NURSE	0.50	-	53,762	53,762
1117	SECRETARY	1.00	-	40,528	40,528
1118			-	-	-
1119			-	-	-
1120			-	-	-
1121			-	-	-
1122			-	-	-
1123			-	-	-
1124			-	-	-
1125			-	-	-
1126			-	-	-
1127			-	-	-
1128			-	-	-
1129			-	-	-
1130			-	-	-
1131			-	-	-
<b>Personnel Salaries Subtotal</b>		<b>28.00</b>	<b>\$ -</b>	<b>\$ 1,905,445</b>	<b>\$ 1,905,445</b>

<b>Employee Benefits</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1201	Retirement	\$ -	\$ 31,088	\$ 31,088
1202	Worker's Compensation	-	33,970	33,970
1203	Health Insurance	-	293,649	293,649
1204	API Benefits	-	632	632
1205	Other (Specify)	-	-	-
1206	Other (Specify)	-	-	-
<b>Employee Benefits Subtotal:</b>		<b>\$ -</b>	<b>\$ 359,339</b>	<b>\$ 359,339</b>
<b>Payroll Taxes &amp; Expenses:</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1301	OASDI	\$ -	\$ 29,016	\$ 29,016
1302	FICA/MEDICARE	-	129,461	129,461
1303	SUI	-	6,944	6,944
1304	Other: Accrued Paid Leave Moved to Admin Overhead	-	-	-
1305	Other (Specify)	-	-	-
1306	Other (Specify)	-	-	-
<b>Payroll Taxes &amp; Expenses Subtotal:</b>		<b>\$ -</b>	<b>\$ 165,421</b>	<b>\$ 165,421</b>
<b>EMPLOYEE SALARIES &amp; BENEFITS TOTAL:</b>		<b>\$ -</b>	<b>\$ 2,430,205</b>	<b>\$ 2,430,205</b>

<b>2000: CLIENT SUPPORT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
2001	Child Care	\$ -
2002	Client Housing Support	478,096
2003	Client Transportation & Support	14,694
2004	Clothing, Food, & Hygiene	22,598
2005	Education Support	4,881
2006	Employment Support	2,334
2007	Household Items for Clients	-
2008	Medication Supports	67,580
2009	Program Supplies - Medical	8,169
2010	Utility Vouchers	14,641
2011	Client Building Maintenance	2,334
2012	Client Therapy	1,645
2013	Client Activities / Recreation	16,922
2014	Client Personal Needs	2,494
2015	Other (Specify)	-
2016	Other (Specify)	-
<b>DIRECT CLIENT CARE TOTAL</b>		<b>\$ 636,388</b>

<b>3000: OPERATING EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
3001	Telecommunications	\$ 16,232
3002	Printing/Postage	14,960
3003	Office, Household & Program Supplies	36,089
3004	Advertising	-
3005	Staff Development & Training	19,627
3006	Staff Mileage	16,922
3007	Subscriptions & Memberships	2,000
3008	Vehicle Maintenance / Gas / Insurance	45,463
3009	Program Enhancement	-
3010	Staff Meetings	8,169
3011	Recruitment	4,138
3012	Employee-Employer Relations	5,676
<b>OPERATING EXPENSES TOTAL:</b>		<b>\$ 169,276</b>

<b>4000: FACILITIES &amp; EQUIPMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
4001	Building Maintenance	\$ 8,488
4002	Rent/Lease Building	92,580
4003	Rent/Lease Equipment	2,000
4004	Rent/Lease Vehicles	40,262
4005	Security	4,138
4006	Utilities	41,959
4007	Equipment Maintenance	2,759
4008	Liability Insurance	8,063
4009	Other (Specify)	-
4010	Other (Specify)	-
<b>FACILITIES/EQUIPMENT TOTAL:</b>		<b>\$ 200,249</b>

<b>5000: SPECIAL EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
5001	Consultant (Network & Data Management)	\$ -
5002	HMIS (Health Management Information System)	31,790
5003	Contractual/Consulting Services : Consultant	19,416
5004	Translation Services	4,562
5005	Contractual/Consulting Services : Psychiatrist	253,290
5006	Other (Specify)	-
5007	Other (Specify)	-
5008	Other (Specify)	-
<b>SPECIAL EXPENSES TOTAL:</b>		<b>\$ 309,058</b>

<b>6000: ADMINISTRATIVE EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
6001	Administrative Overhead	\$ 804,791
6002	Professional Liability Insurance	-
6003	Accounting/Bookkeeping	-
6004	External Audit	4,138
6005	Insurance (Specify):	-
6006	Payroll Services	-
6007	Depreciation <i>(Provider-Owned Equipment to be Used for Program Purposes)</i>	12,201
6008	Other: Bank Fees	2,760
6009	Other: Legal Expense	1,380
6010	Other: Licenses	4,759
6011	Other (Specify)	-
6012	Other (Specify)	-
<b>ADMINISTRATIVE EXPENSES TOTAL</b>		<b>\$ 830,029</b>

<b>7000: FIXED ASSETS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
7001	Computer Equipment & Software	\$ -
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	-
7003	Furniture & Fixtures	2,759
7004	Leasehold/Tenant/Building Improvements	4,138
7005	Other Assets over \$500 with Lifespan of 2 Years +	-
7006	Assets over \$5,000/unit (Specify)	-
7007	Other (Specify)	-
7008	Other (Specify)	-
<b>FIXED ASSETS EXPENSES TOTAL</b>		<b>\$ 6,897</b>

<b>TOTAL PROGRAM EXPENSES</b>		<b>\$ 4,582,102</b>
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**PROGRAM FUNDING SOURCES**

<b>8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)</b>				
<b>Acct #</b>	<b>Line Item Description</b>	<b>Service Units</b>	<b>Rate</b>	<b>Amount</b>
8001	Mental Health Services	95,090	2.91	\$ 276,712
8002	Case Management	40,664	1.99	80,921
8003	Crisis Services	1,827	3.20	5,846
8004	Medication Support	166,443	5.27	877,155
8005	Collateral	6,374	2.91	18,548
8006	Plan Development	9,862	2.91	28,698
8007	Assessment	18,371	2.91	53,460
8008	Rehabilitation	738,407	2.91	2,148,764
<b>Estimated Specialty Mental Health Services Billing Totals:</b>		<b>1,077,038</b>		<b>\$ 3,490,105</b>
Estimated % of Clients who are Medi-Cal Beneficiaries				100%
Estimated Total Cost of Specialty Mental Health Services Provided to Medi-Cal Beneficiaries				3,490,105
Federal Financial Participation (FFP) %			79%	2,757,183
<b>MEDI-CAL FFP TOTAL</b>				<b>\$ 2,757,183</b>

<b>8100 - SUBSTANCE USE DISORDER FUNDS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8101	Drug Medi-Cal	\$ -
8102	SABG	\$ -
<b>SUBSTANCE USE DISORDER FUNDS TOTAL</b>		<b>\$ -</b>

<b>8200 - REALIGNMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8201	Realignment	\$ 0
<b>REALIGNMENT TOTAL</b>		<b>\$ 0</b>

<b>8300 - MENTAL HEALTH SERVICE ACT (MHSA)</b>			
<b>Acct #</b>	<b>MHSA Component</b>	<b>MHSA Program Name</b>	<b>Amount</b>
8301	CSS - Community Services & Supports		\$ 1,785,919
8302	PEI - Prevention & Early Intervention		-
8303	INN - Innovations		-
8304	WET - Workforce Education & Training		-
8305	CFTN - Capital Facilities & Technology		-
<b>MHSA TOTAL</b>			<b>\$ 1,785,919</b>

<b>8400 - OTHER REVENUE</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8401	Client Fees	\$ 39,000
8402	Client Insurance	-
8403	Grants (Specify)	-
8404	Other (Specify)	-
8405	Other (Specify)	-
<b>OTHER REVENUE TOTAL</b>		<b>\$ 39,000</b>

**TOTAL PROGRAM FUNDING SOURCES: \$ 4,582,102**

**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Turning Point of Central Ca, Inc. | Fresno FSP Program Site #1**  
**FY 2024 - 2025 | 07/01/24 - 06/30/25 Budget Narrative**

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>1000: SALARIES &amp; BENEFITS</b>		<b>2,430,205</b>	
<b>Employee Salaries</b>		<b>1,905,445</b>	
1101	PROGRAM DIRECTOR	58,398	The Program Director currently oversees the program, hiring, training and supervising staff.
1102	ASST. PROGRAM DIRECTOR	111,163	The Assitant Program Director will supervise staff and assist the Program Director for that location
1103	ADMIN. ASSISTANT	29,147	The administrative assistant will oversee the support staff at both locations and will help with all support staff duties.
1104	BILLER	26,421	The biller will be responsible for billing into Avatar, billing all insurance claims and run reports as necessary for the program.
1105	BOOKKEEPER	27,208	The bookkeeper is responsible for processing all invoices for the program or programs and will send all information to the corporate office. They will handle petty cash, client fees and other bookkeeping needs for the program.
1106	CRIMINAL JUSTICE REHAB SPECIALIST (CM)	118,907	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in providing services to those involved in the criminal justice system and program liaison for Behavioral Health Court and the Federal Wellness Court
1107	DUAL DIAGNOSIS SPECIALIST (CM)	178,360	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in supporting and providing services for those who suffer from a co-occurring diagnosis.
1108	ED & EM REHAB SPECIALIST (CM)	178,360	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in linking and providing services to those interested in engagement in employment and education services.
1109	HOUSING COORDINATOR	59,454	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in identifying, linking and assisting clients in obtaining various housing such as a R&B, supportive housing, etc.
1110	INTAKE SPECIALIST	30,619	Reviews all referrals, contacting referral source and coordinating intake services to enrol in FSP program. The specialist also assists client in applying for additional benefits, such as General Relief, Social Security Benefits, Medi-cal, etc.
1111	LVN	183,709	Assists psychiatrist providing vital intake, coordination of medications, provides medication support and education, provides injections and consults with all staff in ensuring medication education and compliance
1112	MENTAL HEALTH PROFESSIONAL	430,087	Provides mental health assessment, assessing for Medical Necessity, assists client in identifying treatment plan goals according to diagnosis. MHP also provides individual and group therapy as client requests, while also providing program support to assist clients in crisis.
1113	PEER SUPPORT SPECIALIST	77,177	Provides support to clients, utilizing lived mental health experience to relate to clients, while assisting in activities with clients, run peer ran groups, meeting with clients during appointments providing support as needed.



PROGRAM EXPENSE				
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE	
1114	PERSONAL SERVICE COORDINATOR (CM)	219,819	Each FSP client will have a single point of responsibility through an assigned Personal Service Coordinator/case manager. The Personal Service Coordinator (PSC) works as a part of a treatment team in achieving the goals and objectives of the program to ensure quality of care for client participants. With case management being one of the primary methods of delivering services, each client shall be assigned a primary Personal Service Coordinator who will be responsible to see that the client's needs are met, as identified in the Plan of Care and the Individual Service and Support Plan (ISSP). They are able to provide intensive services and supports when needed, and they can give the client and/or family member considerable personal attention. The PSC will provide instruction modeling and support one-on-one in the course of daily events in the natural setting to manage day-to-day life and promote increased efficacy and self-sufficiency. This "hands on" approach will be utilized during the PSCs interaction with client's for 'en vivo' support, such as managing symptoms while preparing a budget, going to the doctor's office, the grocery store, in their home and maintaining their environment. Clients will learn at their own pace and with as much help as is needed by their personal service coordinator. A teaching/coaching approach will be used that empowers the client to gain mastery and take responsibility. Transportation and assistance in accessing other resources will be ensured by the PSC. All PSCs maintain their own case load of clients for whom they are the primary contact. Additionally, some of the PSC positions also include specialty training (housing, employment, education, criminal justice, substance use disorder) and will provide those specialty services to clients who are not on their caseload and can benefit from that expertise.	
1115	PSC SUPERVISOR	82,326	Provides supervision to all PSCs/Mental Health Specialists to ensure client care, maintain compliance with Turning Point policies and procedures. Supervisor also assisting in training new staff and reporting to the Assistant Program Director.	
1116	REGISTERED NURSE	53,762	Provides oversight over the LVNs/LPTs to ensure client care, maintaining compliance with Turning Point policies and procedures, providing training and ensuring accurate charting in accordance with Medi-cal.	
1117	SECRETARY	40,528	Provides direct services to the program by data entry, phone calls, checking in clients, etc.	
1118	0	-		
1119	0	-		
1120	0	-		
1121	0	-		
1122	0	-		
1123	0	-		
1124	0	-		
1125	0	-		
1126	0	-		
1127	0	-		
1128	0	-		
1129	0	-		
1130	0	-		
1131	0	-		
<b>Employee Benefits</b>		<b>359,339</b>		
1201	Retirement	31,088	Cost of Agency contribution to employee retirement plans.	
1202	Worker's Compensation	33,970	Cost of workers compensation insurance.	
1203	Health Insurance	293,649	Agency cost for health, dental and vision insurance	
1204	API Benefits	632	Employee assistance program	
1205	Other (Specify)	-		
1206	Other (Specify)	-		
<b>Payroll Taxes &amp; Expenses:</b>		<b>165,421</b>		
1301	OASDI	29,016		
1302	FICA/MEDICARE	129,461	Employer portion of F.I.C.A. taxes charged to the Agency by the Internal Revenue Service. F.I.C.A. is comprised of "Old-Age, Survivors, and Disability Insurance" (OASDI), plus "Hospital Insurance" (Medicare).	
1303	SUI	6,944	Employer portion of S.U.I. taxes charged to the Agency by the various states in which wages are paid.	
1304	Other: Accrued Paid Leave Moved to Admin Overhead	-	The monetary value of staff Paid Leave hours as they accrue on a monthly basis	
1305	Other (Specify)	-		
1306	Other (Specify)	-		

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>2000: CLIENT SUPPORT</b>		<b>636,388</b>	
2001	Child Care	-	
2002	Client Housing Support	478,096	Cost of rent, housing assistance and deposit paid on behalf of client. (Examples: first/last month deposit, late fees, monthly rent, hotel charges, room & board, board & care, etc.)
2003	Client Transportation & Support	14,694	Cost for client transportation. (Examples: bus tokens/passes, taxi, other public transportation, bicycles, etc.)
2004	Clothing, Food, & Hygiene	22,598	Cost of client hygiene supplies and non-work related clothing. (Examples: clothes, shoes, soap, toothpaste, deodorant, grooming supplies, diapers, etc.)
2005	Education Support	4,881	Cost of course fees and educational materials distributed to clients and prospective clients. Including court ordered educational class.
2006	Employment Support	2,334	Cost of client pre-employment preparation and employment retention. (Examples: job search and interview attire, work boots and tools required for employment, etc.)
2007	Household Items for Clients	-	
2008	Medication Supports	67,580	Cost of medical supplies or treatment/medical expense for a specific client. (Examples: co-pays*, prescription/lab work not covered by insurance, over-the-counter medications*, first aid kit/supplies for client's use at home, etc.) *if allowable per contract
2009	Program Supplies - Medical	8,169	Cost of medical supplies to be used by staff or clients at the program location to meet program objective. Such items are to remain at the program location and not sent home with the client. Such items include, but are not limited to first aid kits, blood pressure monitor, latex gloves, syringes, hazard disposal service, over-the-counter medication*, etc. *if allowable per contract.
2010	Utility Vouchers	14,641	Cost of client utility bills and/or security deposits.
2011	Client Building Maintenance	2,334	Cost of building repair or maintenance paid for on client's behalf. (Examples: handyman work, plumbing, drywall, roofing, etc.)
2012	Client Therapy	1,645	Cost of therapy services not covered by insurance and therapeutic supplies for clients to use outside of the program. (Examples: exercise videos/equipment, relaxation audio/visual recordings, artistic expression supplies, etc.)
2013	Client Activities / Recreation	16,922	Cost for client activities & recreation events. (Examples: cable bill, food/drinks/utensils/decorations needed for a specific client event, incentive rewards, admission fees to events, etc.)
2014	Client Personal Needs	2,494	Cost of supplying clients with necessary personal items not detailed in other accounts. (Examples: birth certificate, DMV fee for ID or license, clients household cleaning products/house supplies/kitchen supplies for their own home, pots/pans/dishes, linens, paper towels and child related expenses such as car seat/stroller/play pin, etc.)
2015	Other (Specify)	-	
2016	Other (Specify)	-	

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>3000: OPERATING EXPENSES</b>		<b>169,276</b>	
3001	Telecommunications	16,232	Cost of electronic communications. (Examples: internet, phone, fax, cell phones, etc.)
3002	Printing/Postage	14,960	Cost of custom copying/printing charges (Examples: letterhead, business forms, business cards, flyers, brochures, signs, etc.) and Postage and delivery, including delivery by the USPS, UPS, FEDEX and other courier services
3003	Office, Household & Program Supplies	36,089	Cost of items normally used in an office setting. (Examples: pens, pencils, paper tablets, paper clips, notepads, staples, non-electric staplers/hole punchers/calculators, and other items normally used in an office setting.) House Supplies, Cost of supplies used by staff during their scheduled work hours. These items are normally used to operate the building at the program location. These items are to remain at program location and not sent home with client. (Examples: pots, pans, pot holders, kitchen towels, curtains, detergent, Clorox for clothes, can opener, dishes, furnace filter, decorations, linens, etc.), Program Supplies, Cost of any items normally used by clients to meet program objectives while receiving services. These items are to remain at the program location and not sent home with the client. Such items include, but are not limited to video tapes, printed handouts, desk reference books, research material, curriculum, puzzles, board games, therapeutic/meditative supplies and other items that are specifically designed and used to accomplish program goals.
3004	Advertising	-	
3005	Staff Development & Training	19,627	Cost of employee training courses and materials.
3006	Staff Mileage	16,922	Cost of employee mileage reimbursement paid in accordance with FPM section 1005.
3007	Subscriptions & Memberships	2,000	Cost of membership dues and subscriptions. (Examples: magazine, newspaper, memberships, etc.)
3008	Vehicle Maintenance / Gas / Insurance	45,463	Cost of vehicle maintenance. Including cost of parts, supplies and labor associated with maintenance and repair of vehicles used by Agency programs. Cost of gas in Vehicles and Insurance
3009	Program Enhancement	-	
3010	Staff Meetings	8,169	Cost of room rental and supplies necessary for staff meetings.
3011	Recruitment	4,138	Cost of advertising and other employee recruitment expenses. (Examples: newspaper ad, urine screening, background check, etc.)
3012	Employee-Employer Relations	5,676	Cost relating to improvement of working conditions, employer/employee relations and employee morale. (Examples: Company picnic items, florist, etc.)

<b>4000: FACILITIES &amp; EQUIPMENT</b>		<b>200,249</b>	
4001	Building Maintenance	8,488	Cost of Agency building repairs and maintenance. (Examples: electrical work, A/C and heating, hood cleaning, plumbing, etc.) This account should not be used if a specific outside labor contractor is doing an identifiable project.
4002	Rent/Lease Building	92,580	Cost of rent/lease payments made for building leases from outside sources.
4003	Rent/Lease Equipment	2,000	Cost of rent/lease payments made for furniture and equipment leases.
4004	Rent/Lease Vehicles	40,262	Rental cost of vehicles and lease of agency vehicles.
4005	Security	4,138	Cost of installation, maintenance and monthly service fees for building alarms and other security measures. (Examples: security/surveillance equipment, service and installation, safes, etc.)
4006	Utilities	41,959	Cost of service for power, gas, water, sewer, garbage, etc.
4007	Equipment Maintenance	2,759	Cost of equipment and furniture repair and maintenance. (Examples: high capacity copier/printer/scanner, replacement parts such as hard drive, laptop battery, monitor/printer/phone cord, drum, power strip, surge protector, video card, etc.)
4008	Liability Insurance	8,063	
4009	Other (Specify)	-	
4010	Other (Specify)	-	

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>5000: SPECIAL EXPENSES</b>		<b>309,058</b>	
5001	Consultant (Network & Data Management)	-	
5002	HMIS (Health Management Information System)	31,790	Avatar Costs
5003	Contractual/Consulting Services : Consultant	19,416	These accounts are assigned to record various professional services provided by contracted sources working as independent agents. (IT Consultations, EHR Consultation, External Consultation, Clinical Supervisors who are not Staffed under the Personnel & Salaries)
5004	Translation Services	4,562	Paid to an outside vendor for translation / interpreter services
5005	Contractual/Consulting Services : Psychiatrist	253,290	These accounts are assigned to record various professional services provided by contracted Psychiatrist working as independent agents.
5006	Other (Specify)	-	
5007	Other (Specify)	-	
5008	Other (Specify)	-	

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>6000: ADMINISTRATIVE EXPENSES</b>		<b>830,029</b>	
6001	Administrative Overhead	804,791	Support of our cooperate and regional offices such as processing invoices, payroll, cost reports, etc. Accrued Paid Leave moved/added to Admin Overhead. Accrual Paid Leave cannot be listed in Salaries and Benefits Per DBH
6002	Professional Liability Insurance	-	
6003	Accounting/Bookkeeping	-	
6004	External Audit	4,138	Cost of outside audit fees.
6005	Insurance (Specify):	-	
6006	Payroll Services	-	
6007	Depreciation (Provider-Owned Equipment to be Used for Program Purposes)	12,201	This account should be charged for the depreciation expense of the Agency's tangible assets.
6008	Other: Bank Fees	2,760	Cost of bank fees charged to Agency account.
6009	Other: Legal Expense	1,380	Cost of outside legal fees
6010	Other: Licenses	4,759	Cost in obtaining and renewing licenses and permits.
6011	Other (Specify)	-	Cost of membership dues and subscriptions.
6012	Other (Specify)	-	

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>7000: FIXED ASSETS</b>		<b>6,897</b>	
7001	Computer Equipment & Software	-	
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	-	
7003	Furniture & Fixtures	2,759	Purchase of furniture and fixtures as needed
7004	Leasehold/Tenant/Building Improvements	4,138	Improvements to the building as needed that isn't covered by the landlord
7005	Other Assets over \$500 with Lifespan of 2 Years +	-	
7006	Assets over \$5,000/unit (Specify)	-	
7007	Other (Specify)	-	
7008	Other (Specify)	-	

PROGRAM FUNDING SOURCES			
8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)			
ACCT #	LINE ITEM	PROVIDE DETAILS OF METHODOLOGY(IES) USED IN DETERMINING MEDI-CAL SERVICE RATES AND/OR SERVICE UNITS, IF APPLICABLE AND/OR AS REQUIRED BY THE RFP.	
8001	Mental Health Services	We based our rates and units on current program usage	
8002	Case Management	We based our rates and units on current program usage	
8003	Crisis Services	We based our rates and units on current program usage	
8004	Medication Support	We based our rates and units on current program usage	
8005	Collateral	We based our rates and units on current program usage	
8006	Plan Development	We based our rates and units on current program usage	
8007	Assessment	We based our rates and units on current program usage	
8008	Rehabilitation	We based our rates and units on current program usage	

**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Turning Point of Central Ca, Inc. | Fresno FSP Program Site #2**  
**FY 2019 - 2020 Ramp-up | 06/01/20 - 08/30/20**

**PROGRAM EXPENSES**

1000: SALARIES & BENEFITS					
Employee Salaries					
Acct #	Position	FTE	Admin	Direct	Total
1101	PROGRAM DIRECTOR	0.50		\$ 1,998	\$ 1,998
1102	ASST. PROGRAM DIRECTOR	1.00		15,242	15,242
1103	ADMIN. ASSISTANT	0.50		3,996	3,996
1104	BILLER	0.50		3,623	3,623
1105	BOOKKEEPER	0.50		3,730	3,730
1106	CRIMINAL JUSTICE REHAB SPECIALIST (CM)	2.00		16,304	16,304
1107	DUAL DIAGNOSIS SPECIALIST (CM)	3.00		24,456	24,456
1108	ED & EM REHAB SPECIALIST (CM)	3.00		24,456	24,456
1109	HOUSING COORDINATOR	1.00		8,152	8,152
1110	INTAKE SPECIALIST	0.50		4,198	4,198
1111	LVN	3.00		25,190	25,190
1112	MENTAL HEALTH PROFESSIONAL	4.00		58,972	58,972
1113	PEER SUPPORT SPECIALIST	2.00		10,582	10,582
1114	PERSONAL SERVICE COORDINATOR (CM)	4.00		30,141	30,141
1115	PSC SUPERVISOR	1.00		11,288	11,288
1116	REGISTERED NURSE	0.50		7,372	7,372
1117	SECRETARY	1.00		5,557	5,557
1118			-	-	-
1119			-	-	-
1120			-	-	-
1121			-	-	-
1122			-	-	-
1123			-	-	-
1124			-	-	-
1125			-	-	-
1126			-	-	-
1127			-	-	-
1128			-	-	-
1129			-	-	-
1130			-	-	-
1131			-	-	-
<b>Personnel Salaries Subtotal</b>		<b>28.00</b>	<b>\$ -</b>	<b>\$ 255,257</b>	<b>\$ 255,257</b>

<b>Employee Benefits</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1201	Retirement	\$ -	\$ 4,263	\$ 4,263
1202	Worker's Compensation	-	4,658	4,658
1203	Health Insurance	-	40,351	40,351
1204	API Benefits	-		-
1205	Other (Specify)	-		-
1206	Other (Specify)	-	-	-
<b>Employee Benefits Subtotal:</b>		<b>\$ -</b>	<b>\$ 49,272</b>	<b>\$ 49,272</b>
<b>Payroll Taxes &amp; Expenses:</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1301	OASDI	\$ -	\$ -	\$ -
1302	FICA/MEDICARE/ OASDI	-	21,729	21,729
1303	SUI	-	952	952
1304	Other: Accrued Paid Leave Moved to Admin Overhead	-	-	-
1305	Other (Specify)	-		-
1306	Other (Specify)	-	-	-
<b>Payroll Taxes &amp; Expenses Subtotal:</b>		<b>\$ -</b>	<b>\$ 22,681</b>	<b>\$ 22,681</b>
<b>EMPLOYEE SALARIES &amp; BENEFITS TOTAL:</b>		<b>\$ -</b>	<b>\$ 327,210</b>	<b>\$ 327,210</b>

<b>2000: CLIENT SUPPORT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
2001	Child Care	\$ -
2002	Client Housing Support	-
2003	Client Transportation & Support	-
2004	Clothing, Food, & Hygiene	-
2005	Education Support	-
2006	Employment Support	-
2007	Household Items for Clients	-
2008	Medication Supports	-
2009	Program Supplies - Medical	-
2010	Utility Vouchers	-
2011	Other (Specify)	-
2012	Other (Specify)	-
2013	Other (Specify)	-
2014	Other (Specify)	-
2015	Other (Specify)	-
2016	Other (Specify)	-
<b>DIRECT CLIENT CARE TOTAL</b>		<b>\$ -</b>

<b>3000: OPERATING EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
3001	Telecommunications	\$ 14,800
3002	Printing/Postage	1,600
3003	Office, Household & Program Supplies	5,000
3004	Advertising	-
3005	Staff Development & Training	-
3006	Staff Mileage	1,000
3007	Subscriptions & Memberships	-
3008	Vehicle Maintenance	-
3009	Program Enhancement	-
3010	Staff Meetings	-
3011	Recruitment	3,000
3012	Employee-Employer Relations	-
<b>OPERATING EXPENSES TOTAL:</b>		<b>\$ 25,400</b>

<b>4000: FACILITIES &amp; EQUIPMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
4001	Building Maintenance	\$ 1,200
4002	Rent/Lease Building	28,000
4003	Rent/Lease Equipment	800
4004	Rent/Lease Vehicles	-
4005	Security	1,200
4006	Utilities	12,400
4007	Equipment Maintenance	800
4008	Liability Insurance	2,366
4009	Other (Specify)	-
4010	Other (Specify)	-
<b>FACILITIES/EQUIPMENT TOTAL:</b>		<b>\$ 46,766</b>

<b>5000: SPECIAL EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
5001	Consultant (Network & Data Management)	\$ -
5002	HMIS (Health Management Information System)	-
5003	Contractual/Consulting Services (Specify)	-
5004	Translation Services	-
5005	Other (Specify)	-
5006	Other (Specify)	-
5007	Other (Specify)	-
5008	Other (Specify)	-
<b>SPECIAL EXPENSES TOTAL:</b>		<b>\$ -</b>

<b>6000: ADMINISTRATIVE EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
6001	Administrative Overhead	\$ 111,325
6002	Professional Liability Insurance	
6003	Accounting/Bookkeeping	
6004	External Audit	
6005	Insurance (Specify):	
6006	Payroll Services	
6007	Depreciation <i>(Provider-Owned Equipment to be Used for Program Purposes)</i>	
6008	Other (Specify)	
6009	Other (Specify)	
6010	Other (Specify)	-
6011	Other (Specify)	-
6012	Other (Specify)	-
<b>ADMINISTRATIVE EXPENSES TOTAL</b>		<b>\$ 111,325</b>

<b>7000: FIXED ASSETS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
7001	Computer Equipment & Software	\$ 41,400
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	12,000
7003	Furniture & Fixtures	53,650
7004	Leasehold/Tenant/Building Improvements	20,000
7005	Other Assets over \$500 with Lifespan of 2 Years +	-
7006	Assets over \$5,000/unit (Specify)	-
7007	Other (Specify)	-
7008	Other (Specify)	-
<b>FIXED ASSETS EXPENSES TOTAL</b>		<b>\$ 127,050</b>

<b>TOTAL PROGRAM EXPENSES</b>		<b>\$ 637,751</b>
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**PROGRAM FUNDING SOURCES**

<b>8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)</b>				
<b>Acct #</b>	<b>Line Item Description</b>	<b>Service Units</b>	<b>Rate</b>	<b>Amount</b>
8001	Mental Health Services	0	-	\$ -
8002	Case Management	0	-	-
8003	Crisis Services	0	-	-
8004	Medication Support	0	-	-
8005	Collateral	0	-	-
8006	Plan Development	0	-	-
8007	Assessment	0	-	-
8008	Rehabilitation	0	-	-
<b>Estimated Specialty Mental Health Services Billing Totals:</b>		<b>0</b>		<b>\$ -</b>
Estimated % of Clients who are Medi-Cal Beneficiaries				0%
Estimated Total Cost of Specialty Mental Health Services Provided to Medi-Cal Beneficiaries				-
Federal Financial Participation (FFP) %			0%	-
<b>MEDI-CAL FFP TOTAL</b>				<b>\$ -</b>

<b>8100 - SUBSTANCE USE DISORDER FUNDS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8101	Drug Medi-Cal	\$ -
8102	SABG	\$ -
<b>SUBSTANCE USE DISORDER FUNDS TOTAL</b>		<b>\$ -</b>

<b>8200 - REALIGNMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8201	Realignment	\$ -
<b>REALIGNMENT TOTAL</b>		<b>\$ -</b>

<b>8300 - MENTAL HEALTH SERVICE ACT (MHSA)</b>			
<b>Acct #</b>	<b>MHSA Component</b>	<b>MHSA Program Name</b>	<b>Amount</b>
8301	CSS - Community Services & Supports	Adult FSP	\$ 637,751
8302	PEI - Prevention & Early Intervention		-
8303	INN - Innovations		-
8304	WET - Workforce Education & Training		-
8305	CFTN - Capital Facilities & Technology		-
<b>MHSA TOTAL</b>			<b>\$ 637,751</b>

<b>8400 - OTHER REVENUE</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8401	Client Fees	\$ -
8402	Client Insurance	-
8403	Grants (Specify)	-
8404	Other (Specify)	-
8405	Other (Specify)	-
<b>OTHER REVENUE TOTAL</b>		<b>\$ -</b>

**TOTAL PROGRAM FUNDING SOURCES: \$ 637,751**

**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Turning Point of Central Ca, Inc. | Fresno FSP Program Site #2**  
**FY 2019 - 2020 Ramp-up | 06/01/20 - 08/30/20 Budget Narrative**

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>1000: SALARIES &amp; BENEFITS</b>		<b>327,210</b>	
<b>Employee Salaries</b>		<b>255,257</b>	
1101	PROGRAM DIRECTOR	1,998	The Program Director currently oversees the program, hiring, training and supervising staff.
1102	ASST. PROGRAM DIRECTOR	15,242	The Assitant Program Director will supervise staff and assist the Program Director for that location
1103	ADMIN. ASSISTANT	3,996	The administrative assistant will oversee the support staff at both locations and will help with all support staff duties.
1104	BILLER	3,623	The biller will be responsible for billing into Avatar, billing all insurance claims and run reports as necessary for the program.
1105	BOOKKEEPER	3,730	The bookkeeper is responsible for processing all invoices for the program or programs and will send all information to the corporate office. They will handle petty cash, client fees and other bookkeeping needs for the program.
1106	CRIMINAL JUSTICE REHAB SPECIALIST (CM)	16,304	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in providing services to those involved in the criminal justice system and program liaison for Behavioral Health Court and the Federal Wellness Court
1107	DUAL DIAGNOSIS SPECIALIST (CM)	24,456	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in supporting and providing services for those who suffer from a co-occurring diagnosis.
1108	ED & EM REHAB SPECIALIST (CM)	24,456	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in linking and providing services to those interested in engagement in employment and education services.
1109	HOUSING COORDINATOR	8,152	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in identifying, linking and assisting clients in obtaining various housing such as a R&B, supportive housing, etc.
1110	INTAKE SPECIALIST	4,198	Reviews all referrals, contacting referral source and coordinating intake services to enroll in FSP program. The specialist also assists client in applying for additional benefits, such as General Relief, Social Security Benefits, Medi-cal, etc.
1111	LVN	25,190	Assists psychiatrist providing vital intake, coordination of medications, provides medication support and education, provides injections and consults with all staff in ensuring medication education and compliance
1112	MENTAL HEALTH PROFESSIONAL	58,972	Provides mental health assessment, assessing for Medical Necessity, assists client in identifying treatment plan goals according to diagnosis. MHP also provides individual and group therapy as client requests, while also providing program support to assist clients in crisis.
1113	PEER SUPPORT SPECIALIST	10,582	Provides support to clients, utilizing lived mental health experience to relate to clients, while assisting in activities with clients, run peer ran groups, meeting with clients during appointments providing support as needed.

PROGRAM EXPENSE				
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE	
1114	PERSONAL SERVICE COORDINATOR (CM)	30,141	Each FSP client will have a single point of responsibility through an assigned Personal Service Coordinator/case manager. The Personal Service Coordinator (PSC) works as a part of a treatment team in achieving the goals and objectives of the program to ensure quality of care for client participants. With case management being one of the primary methods of delivering services, each client shall be assigned a primary Personal Service Coordinator who will be responsible to see that the client's needs are met, as identified in the Plan of Care and the Individual Service and Support Plan (ISSP). They are able to provide intensive services and supports when needed, and they can give the client and/or family member considerable personal attention. The PSC will provide instruction modeling and support one-on-one in the course of daily events in the natural setting to manage day-to-day life and promote increased efficacy and self-sufficiency. This "hands on" approach will be utilized during the PSCs interaction with client's for 'en vivo' support, such as managing symptoms while preparing a budget, going to the doctor's office, the grocery store, in their home and maintaining their environment. Clients will learn at their own pace and with as much help as is needed by their personal service coordinator. A teaching/coaching approach will be used that empowers the client to gain mastery and take responsibility. Transportation and assistance in accessing other resources will be ensured by the PSC. All PSCs maintain their own case load of clients for whom they are the primary contact. Additionally, some of the PSC positions also include specialty training (housing, employment, education, criminal justice, substance use disorder) and will provide those specialty services to clients who are not on their caseload and can benefit from that expertise.	
1115	PSC SUPERVISOR	11,288	Provides supervision to all PSCs/Mental Health Specialists to ensure client care, maintain compliance with Turning Point policies and procedures. Supervisor also assisting in training new staff and reporting to the Assistant Program Director.	
1116	REGISTERED NURSE	7,372	Provides oversight over the LVNs/LPTs to ensure client care, maintaining compliance with Turning Point policies and procedures, providing training and ensuring accurate charting in accordance with Medi-cal.	
1117	SECRETARY	5,557	Provides direct services to the program by data entry, phone calls, checking in clients, etc.	
1118	0	-		
1119	0	-		
1120	0	-		
1121	0	-		
1122	0	-		
1123	0	-		
1124	0	-		
1125	0	-		
1126	0	-		
1127	0	-		
1128	0	-		
1129	0	-		
1130	0	-		
1131	0	-		
<b>Employee Benefits</b>		<b>49,272</b>		
1201	Retirement	4,263	Cost of Agency contribution to employee retirement plans.	
1202	Worker's Compensation	4,658	Cost of workers compensation insurance.	
1203	Health Insurance	40,351	Agency cost for health, dental and vision insurance	
1204	API Benefits	-		
1205	Other (Specify)	-		
1206	Other (Specify)	-		
<b>Payroll Taxes &amp; Expenses:</b>		<b>22,681</b>		
1301	OASDI	-	Employer portion of F.I.C.A. taxes charged to the Agency by the Internal Revenue Service. F.I.C.A. is comprised of "Old-Age, Survivors, and Disability Insurance" (OASDI), plus "Hospital Insurance" (Medicare).	
1302	FICA/MEDICARE/ OASDI	21,729	Employer portion of S.U.I. taxes charged to the Agency by the various states in which wages are paid.	
1303	SUI	952	The monetary value of staff Paid Leave hours as they accrue on a monthly basis	
1304	Other: Accrued Paid Leave Moved to Admin Overhead	-		
1305	Other (Specify)	-		
1306	Other (Specify)	-		

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>2000: CLIENT SUPPORT</b>			
		-	
2001	Child Care	-	
2002	Client Housing Support	-	
2003	Client Transportation & Support	-	
2004	Clothing, Food, & Hygiene	-	
2005	Education Support	-	
2006	Employment Support	-	
2007	Household Items for Clients	-	
2008	Medication Supports	-	
2009	Program Supplies - Medical	-	
2010	Utility Vouchers	-	
2011	Other (Specify)	-	
2012	Other (Specify)	-	
2013	Other (Specify)	-	
2014	Other (Specify)	-	
2015	Other (Specify)	-	
2016	Other (Specify)	-	

3000: OPERATING EXPENSES		25,400	
3001	Telecommunications	14,800	Cost of electronic communications. (Examples: internet, phone, fax, cell phones, etc.)
3002	Printing/Postage	1,600	Cost of custom copying/printing charges (Examples: letterhead, business forms, business cards, flyers, brochures, signs, etc.) and Postage and elivery, including delivery by the USPS, UPS, FEDEX and other courier services
3003	Office, Household & Program Supplies	5,000	Cost of items normally used in an office setting. (Examples: pens, pencils, paper tablets, paper clips, notepads, staples, non-electric staplers/hole punchers/calculators, and other items normally used in an office setting.) House Supplies, Cost of supplies used by staff during their scheduled work hours. These items are normally used to operate the building at the program location. These items are to remain at program location and not sent home with client. (Examples: pots, pans, pot holders, kitchen towels, curtains, detergent, Clorox for clothes, can opener, dishes, furnace filter, decorations, linens, etc.), Program Supplies, Cost of any items normally used by clients to meet program objectives while receiving services. These items are to remain at the program location and not sent home with the client. Such items include, but are not limited to video tapes, printed handouts, desk reference books, research material, curriculum, puzzles, board games, therapeutic/meditative supplies and other items that are specifically designed and used to accomplish program goals.
3004	Advertising	-	
3005	Staff Development & Training	-	Cost of employee training courses and materials.
3006	Staff Mileage	1,000	Cost of employee mileage reimbursement paid in accordance with FPM section 1005.
3007	Subscriptions & Memberships	-	
3008	Vehicle Maintenance	-	
3009	Program Enhancement	-	
3010	Staff Meetings	-	
3011	Recruitment	3,000	Cost of advertising and other employee recruitment expenses. (Examples: newspaper ad, urine screening, background check, etc.)
3012	Employee-Employer Relations	-	

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>4000: FACILITIES &amp; EQUIPMENT</b>		<b>46,766</b>	
4001	Building Maintenance	1,200	Cost of Agency building repairs and maintenance. (Examples: electrical work, A/C and heating, hood cleaning, plumbing, etc.) This account should not be used if a specific outside labor contractor is doing an identifiable project.
4002	Rent/Lease Building	28,000	Cost of rent/lease payments made for building leases from outside sources.
4003	Rent/Lease Equipment	800	Cost of rent/lease payments made for furniture and equipment leases.
4004	Rent/Lease Vehicles	-	Rental cost of vehicles and lease of agency vehicles.
4005	Security	1,200	Cost of installation, maintenance and monthly service fees for building alarms and other security measures. (Examples: security/surveillance equipment, service and installation, safes, etc.)
4006	Utilities	12,400	Cost of service for power, gas, water, sewer, garbage, etc.
4007	Equipment Maintenance	800	Cost of equipment and furniture repair and maintenance. (Examples: high capacity copier/printer/scanner, replacement parts such as hard drive, laptop battery, monitor/printer/phone cord, drum, power strip, surge protector, video card, etc.)
4008	Liability Insurance	2,366	
4009	Other (Specify)	-	
4010	Other (Specify)	-	
<b>5000: SPECIAL EXPENSES</b>		<b>-</b>	
5001	Consultant (Network & Data Management)	-	
5002	HMIS (Health Management Information System)	-	
5003	Contractual/Consulting Services (Specify)	-	
5004	Translation Services	-	
5005	Other (Specify)	-	
5006	Other (Specify)	-	
5007	Other (Specify)	-	
5008	Other (Specify)	-	
<b>6000: ADMINISTRATIVE EXPENSES</b>		<b>111,325</b>	
6001	Administrative Overhead	111,325	Support of our cooperate and regional offices such as processing invoices, payroll, cost reports, etc. Accrued Paid Leave moved/added to Admin Overhead. Accrual Paid Leave cannot be listed in Salaries and Benefits Per DBH
6002	Professional Liability Insurance	-	
6003	Accounting/Bookkeeping	-	
6004	External Audit	-	
6005	Insurance (Specify):	-	
6006	Payroll Services	-	
6007	Depreciation (Provider-Owned Equipment to be Used for Program Purposes)	-	
6008	Other (Specify)	-	
6009	Other (Specify)	-	
6010	Other (Specify)	-	
6011	Other (Specify)	-	
6012	Other (Specify)	-	

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>7000: FIXED ASSETS</b>		<b>127,050</b>	
7001	Computer Equipment & Software	41,400	Computers / printers / software needed since computers will be obsolete from being purchased nearly 5 years ago
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	12,000	Copier replacement, cell phones that have aged out.
7003	Furniture & Fixtures	53,650	Purchase of furniture and fixtures as needed
7004	Leasehold/Tenant/Building Improvements	20,000	Improvements to the building as needed that isn't covered by the landlord
7005	Other Assets over \$500 with Lifespan of 2 Years +	-	
7006	Assets over \$5,000/unit (Specify)	-	
7007	Other (Specify)	-	
7008	Other (Specify)	-	

PROGRAM FUNDING SOURCES		
8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)		
ACCT #	LINE ITEM	PROVIDE DETAILS OF METHODOLOGY(IES) USED IN DETERMINING MEDI-CAL SERVICE RATES AND/OR SERVICE UNITS, IF APPLICABLE AND/OR AS REQUIRED BY THE RFP.
8001	Mental Health Services	
8002	Case Management	
8003	Crisis Services	
8004	Medication Support	
8005	Collateral	
8006	Plan Development	
8007	Assessment	
8008	Rehabilitation	

**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Turning Point of Central Ca, Inc. | Fresno FSP Program Site #2**  
**FY 2020 - 2021 | 09/01/20 - 06/30/21**

**PROGRAM EXPENSES**

1000: SALARIES & BENEFITS					
Employee Salaries					
Acct #	Position	FTE	Admin	Direct	Total
1101	PROGRAM DIRECTOR	0.50	\$ -	\$ 40,037	\$ 40,037
1102	ASST. PROGRAM DIRECTOR	1.00	-	76,211	76,211
1103	ADMIN. ASSISTANT	0.50	-	19,983	19,983
1104	BILLER	0.50	-	18,113	18,113
1105	BOOKKEEPER	0.50	-	18,653	18,653
1106	CRIMINAL JUSTICE REHAB SPECIALIST (CM)	2.00	-	81,520	81,520
1107	DUAL DIAGNOSIS SPECIALIST (CM)	3.00	-	122,280	122,280
1108	ED & EM REHAB SPECIALIST (CM)	3.00	-	122,280	122,280
1109	HOUSING COORDINATOR	1.00	-	40,760	40,760
1110	INTAKE SPECIALIST	0.50	-	20,992	20,992
1111	LVN	3.00	-	125,948	125,948
1112	MENTAL HEALTH PROFESSIONAL	4.00	-	294,860	294,860
1113	PEER SUPPORT SPECIALIST	2.00	-	52,910	52,910
1114	PERSONAL SERVICE COORDINATOR (CM)	4.00	-	150,703	150,703
1115	PSC SUPERVISOR	1.00	-	56,441	56,441
1116	REGISTERED NURSE	0.50	-	36,858	36,858
1117	SECRETARY	1.00	-	27,785	27,785
1118			-	-	-
1119			-	-	-
1120			-	-	-
1121			-	-	-
1122			-	-	-
1123			-	-	-
1124			-	-	-
1125			-	-	-
1126			-	-	-
1127			-	-	-
1128			-	-	-
1129			-	-	-
1130			-	-	-
1131			-	-	-
<b>Personnel Salaries Subtotal</b>		<b>28.00</b>	<b>\$ -</b>	<b>\$ 1,306,334</b>	<b>\$ 1,306,334</b>

<b>Employee Benefits</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1201	Retirement	\$ -	\$ 21,313	\$ 21,313
1202	Worker's Compensation	-	23,288	23,288
1203	Health/ Dental Insurance	-	201,320	201,320
1204	API Benefits	-	433	433
1205	Other (Specify)	-	-	-
1206	Other (Specify)	-	-	-
<b>Employee Benefits Subtotal:</b>		<b>\$ -</b>	<b>\$ 246,354</b>	<b>\$ 246,354</b>
<b>Payroll Taxes &amp; Expenses:</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1301	OASDI	\$ -	\$ -	\$ -
1302	FICA/MEDICARE / OASDI	-	108,648	108,648
1303	SUI	-	4,760	4,760
1304	Other: Accrued Paid Leave Moved to Admin Overhead	-	-	-
1305	Other (Specify)	-	-	-
1306	Other (Specify)	-	-	-
<b>Payroll Taxes &amp; Expenses Subtotal:</b>		<b>\$ -</b>	<b>\$ 113,408</b>	<b>\$ 113,408</b>
<b>EMPLOYEE SALARIES &amp; BENEFITS TOTAL:</b>		<b>\$ -</b>	<b>\$ 1,666,096</b>	<b>\$ 1,666,096</b>

<b>2000: CLIENT SUPPORT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
2001	Child Care	\$ -
2002	Client Housing Support	353,817
2003	Client Transportation & Support	10,833
2004	Clothing, Food, & Hygiene	16,667
2005	Education Support	3,600
2006	Employment Support	1,667
2007	Household Items for Clients	-
2008	Medication Supports	50,000
2009	Program Supplies - Medical	6,000
2010	Utility Vouchers	10,800
2011	Client Building Maintenance	1,667
2012	Client Therapy	1,200
2013	Client Activities / Recreation	12,500
2014	Client Personal Needs	1,800
2015	Other (Specify)	-
2016	Other (Specify)	-
<b>DIRECT CLIENT CARE TOTAL</b>		<b>\$ 470,551</b>



<b>3000: OPERATING EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
3001	Telecommunications	\$ 12,000
3002	Printing/Postage	11,000
3003	Office, Household & Program Supplies	26,333
3004	Advertising	-
3005	Staff Development & Training	14,500
3006	Staff Mileage	12,500
3007	Subscriptions & Memberships	1,667
3008	Vehicle Maintenance / Gas / Insurance	33,500
3009	Program Enhancement	-
3010	Staff Meetings	6,000
3011	Recruitment	3,000
3012	Employee-Employer Relations	4,167
<b>OPERATING EXPENSES TOTAL:</b>		<b>\$ 124,667</b>

<b>4000: FACILITIES &amp; EQUIPMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
4001	Building Maintenance	\$ 6,250
4002	Rent/Lease Building	68,333
4003	Rent/Lease Equipment	1,667
4004	Rent/Lease Vehicles	29,750
4005	Security	3,000
4006	Utilities	31,000
4007	Equipment Maintenance	2,000
4008	Liability Insurance	5,917
4009	Other (Specify)	-
4010	Other (Specify)	-
<b>FACILITIES/EQUIPMENT TOTAL:</b>		<b>\$ 147,917</b>

<b>5000: SPECIAL EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
5001	Consultant (Network & Data Management)	\$ -
5002	HMIS (Health Management Information System)	23,333
5003	Contractual/Consulting Services : Consultant	14,333
5004	Translation Services	3,333
5005	Contractual/Consulting Services : Psychiatrist	187,500
5006	Other (Specify)	-
5007	Other (Specify)	-
5008	Other (Specify)	-
<b>SPECIAL EXPENSES TOTAL:</b>		<b>\$ 228,499</b>

<b>6000: ADMINISTRATIVE EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
6001	Administrative Overhead	\$ 562,510
6002	Professional Liability Insurance	-
6003	Accounting/Bookkeeping	-
6004	External Audit	3,000
6005	Insurance (Specify):	-
6006	Payroll Services	-
6007	Depreciation <i>(Provider-Owned Equipment to be Used for Program Purposes)</i>	9,000
6008	Other: Bank Fees	2,000
6009	Other: Legal Expense	1,000
6010	Other: Licenses	3,667
6011	Other (Specify)	-
6012	Other (Specify)	-
<b>ADMINISTRATIVE EXPENSES TOTAL</b>		<b>\$ 581,177</b>

<b>7000: FIXED ASSETS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
7001	Computer Equipment & Software	\$ -
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	-
7003	Furniture & Fixtures	2,400
7004	Leasehold/Tenant/Building Improvements	3,600
7005	Other Assets over \$500 with Lifespan of 2 Years +	-
7006	Assets over \$5,000/unit (Specify)	-
7007	Other (Specify)	-
7008	Other (Specify)	-
<b>FIXED ASSETS EXPENSES TOTAL</b>		<b>\$ 6,000</b>

<b>TOTAL PROGRAM EXPENSES</b>		<b>\$ 3,224,907</b>
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**PROGRAM FUNDING SOURCES**

<b>8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)</b>				
<b>Acct #</b>	<b>Line Item Description</b>	<b>Service Units</b>	<b>Rate</b>	<b>Amount</b>
8001	Mental Health Services	59,581	2.91	\$ 173,381
8002	Case Management	25,478	1.99	50,701
8003	Crisis Services	1,144	3.20	3,661
8004	Medication Support	104,289	5.27	549,603
8005	Collateral	3,993	2.91	11,620
8006	Plan Development	6,179	2.91	17,981
8007	Assessment	11,511	2.91	33,497
8008	Rehabilitation	462,666	2.91	1,346,358
<b>Estimated Specialty Mental Health Services Billing Totals:</b>		<b>674,841</b>		<b>\$ 2,186,801</b>
Estimated % of Clients who are Medi-Cal Beneficiaries				100%
Estimated Total Cost of Specialty Mental Health Services Provided to Medi-Cal Beneficiaries				2,186,801
Federal Financial Participation (FFP) %			79%	1,727,573
<b>MEDI-CAL FFP TOTAL</b>				<b>\$ 1,727,573</b>

<b>8100 - SUBSTANCE USE DISORDER FUNDS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8101	Drug Medi-Cal	\$ -
8102	SABG	\$ -
<b>SUBSTANCE USE DISORDER FUNDS TOTAL</b>		<b>\$ -</b>

<b>8200 - REALIGNMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8201	Realignment	\$ (0)
<b>REALIGNMENT TOTAL</b>		<b>\$ (0)</b>

<b>8300 - MENTAL HEALTH SERVICE ACT (MHSA)</b>			
<b>Acct #</b>	<b>MHSA Component</b>	<b>MHSA Program Name</b>	<b>Amount</b>
8301	CSS - Community Services & Supports		\$ 1,464,834
8302	PEI - Prevention & Early Intervention		-
8303	INN - Innovations		-
8304	WET - Workforce Education & Training		-
8305	CFTN - Capital Facilities & Technology		-
<b>MHSA TOTAL</b>			<b>\$ 1,464,834</b>

<b>8400 - OTHER REVENUE</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8401	Client Fees	\$ 32,500
8402	Client Insurance	-
8403	Grants (Specify)	-
8404	Other (Specify)	-
8405	Other (Specify)	-
<b>OTHER REVENUE TOTAL</b>		<b>\$ 32,500</b>

**TOTAL PROGRAM FUNDING SOURCES: \$ 3,224,907**

**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Turning Point of Central Ca, Inc. | Fresno FSP Program Site #2**  
**FY 2020 - 2021 | 09/01/20 - 06/30/21 Budget Narrative**

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>1000: SALARIES &amp; BENEFITS</b>		<b>1,666,096</b>	
<b>Employee Salaries</b>		<b>1,306,334</b>	
1101	PROGRAM DIRECTOR	40,037	The Program Director currently oversees the program, hiring, training and supervising staff.
1102	ASST. PROGRAM DIRECTOR	76,211	The Assitant Program Director will supervise staff and assist the Program Director for that location
1103	ADMIN. ASSISTANT	19,983	The administrative assistant will oversee the support staff at both locations and will help with all support staff duties.
1104	BILLER	18,113	The biller will be responsible for billing into Avatar, billing all insurance claims and run reports as necessary for the program.
1105	BOOKKEEPER	18,653	The bookkeeper is responsible for processing all invoices for the program or programs and will send all information to the corporate office. They will handle petty cash, client fees and other bookkeeping needs for the program.
1106	CRIMINAL JUSTICE REHAB SPECIALIST (CM)	81,520	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in providing services to those involved in the criminal justice system and program liaison for Behavioral Health Court and the Federal Wellness Court
1107	DUAL DIAGNOSIS SPECIALIST (CM)	122,280	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in supporting and providing services for those who suffer from a co-occurring diagnosis.
1108	ED & EM REHAB SPECIALIST (CM)	122,280	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in linking and providing services to those interested in engagement in employment and education services.
1109	HOUSING COORDINATOR	40,760	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in identifying, linking and assisting clients in obtaining various housing such as a R&B, supportive housing, etc.
1110	INTAKE SPECIALIST	20,992	Reviews all referrals, contacting referral source and coordinating intake services to enroll in FSP program. The specialist also assists client in applying for additional benefits, such as General Relief, Social Security Benefits, Medi-cal, etc.
1111	LVN	125,948	Assists psychiatrist providing vital intake, coordination of medications, provides medication support and education, provides injections and consults with all staff in ensuring medication education and compliance
1112	MENTAL HEALTH PROFESSIONAL	294,860	Provides mental health assessment, assessing for Medical Necessity, assists client in identifying treatment plan goals according to diagnosis. MHP also provides individual and group therapy as client requests, while also providing program support to assist clients in crisis.
1113	PEER SUPPORT SPECIALIST	52,910	Provides support to clients, utilizing lived mental health experience to relate to clients, while assisting in activities with clients, run peer ran groups, meeting with clients during appointments providing support as needed.

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
1114	PERSONAL SERVICE COORDINATOR (CM)	150,703	Each FSP client will have a single point of responsibility through an assigned Personal Service Coordinator/case manager. The Personal Service Coordinator (PSC) works as a part of a treatment team in achieving the goals and objectives of the program to ensure quality of care for client participants. With case management being one of the primary methods of delivering services, each client shall be assigned a primary Personal Service Coordinator who will be responsible to see that the client's needs are met, as identified in the Plan of Care and the Individual Service and Support Plan (ISSP). They are able to provide intensive services and supports when needed, and they can give the client and/or family member considerable personal attention. The PSC will provide instruction modeling and support one-on-one in the course of daily events in the natural setting to manage day-to-day life and promote increased efficacy and self-sufficiency. This "hands on" approach will be utilized during the PSCs interaction with client's for 'en vivo' support, such as managing symptoms while preparing a budget, going to the doctor's office, the grocery store, in their home and maintaining their environment. Clients will learn at their own pace and with as much help as is needed by their personal service coordinator. A teaching/coaching approach will be used that empowers the client to gain mastery and take responsibility. Transportation and assistance in accessing other resources will be ensured by the PSC. All PSCs maintain their own case load of clients for whom they are the primary contact. Additionally, some of the PSC positions also include specialty training (housing, employment, education, criminal justice, substance use disorder) and will provide those specialty services to clients who are not on their caseload and can benefit from that expertise.
1115	PSC SUPERVISOR	56,441	Provides supervision to all PSCs/Mental Health Specialists to ensure client care, maintain compliance with Turning Point policies and procedures. Supervisor also assisting in training new staff and reporting to the Assistant Program Director.
1116	REGISTERED NURSE	36,858	Provides oversight over the LVNs/LPTs to ensure client care, maintaining compliance with Turning Point policies and procedures, providing training and ensuring accurate charting in accordance with Medi-cal.
1117	SECRETARY	27,785	Provides direct services to the program by data entry, phone calls, checking in clients, etc.
1118	0	-	
1119	0	-	
1120	0	-	
1121	0	-	
1122	0	-	
1123	0	-	
1124	0	-	
1125	0	-	
1126	0	-	
1127	0	-	
1128	0	-	
1129	0	-	
1130	0	-	
1131	0	-	
<b>Employee Benefits</b>		<b>246,354</b>	
1201	Retirement	21,313	Cost of Agency contribution to employee retirement plans.
1202	Worker's Compensation	23,288	Cost of workers compensation insurance.
1203	Health/ Dental Insurance	201,320	Agency cost for health, dental and vision insurance
1204	API Benefits	433	Employee assistance program
1205	Other (Specify)	-	
1206	Other (Specify)	-	
<b>Payroll Taxes &amp; Expenses:</b>		<b>113,408</b>	
1301	OASDI	-	
1302	FICA/MEDICARE / OASDI	108,648	Employer portion of F.I.C.A. taxes charged to the Agency by the Internal Revenue Service. F.I.C.A. is comprised of "Old-Age, Survivors, and Disability Insurance" (OASDI), plus "Hospital Insurance" (Medicare).
1303	SUI	4,760	Employer portion of S.U.I. taxes charged to the Agency by the various states in which wages are paid.
1304	Other: Accrued Paid Leave Moved to Admin Overhead	-	The monetary value of staff Paid Leave hours as they accrue on a monthly basis
1305	Other (Specify)	-	
1306	Other (Specify)	-	

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>2000: CLIENT SUPPORT</b>		<b>470,551</b>	
2001	Child Care	-	
2002	Client Housing Support	353,817	Cost of rent, housing assistance and deposit paid on behalf of client. (Examples: first/last month deposit, late fees, monthly rent, hotel charges, room & board, board & care, etc.)
2003	Client Transportation & Support	10,833	Cost for client transportation. (Examples: bus tokens/passes, taxi, other public transportation, bicycles, etc.)
2004	Clothing, Food, & Hygiene	16,667	Cost of client hygiene supplies and non-work related clothing. (Examples: clothes, shoes, soap, toothpaste, deodorant, grooming supplies, diapers, etc.)
2005	Education Support	3,600	Cost of course fees and educational materials distributed to clients and prospective clients. Including court ordered educational class.
2006	Employment Support	1,667	Cost of client pre-employment preparation and employment retention. (Examples: job search and interview attire, work boots and tools required for employment, etc.)
2007	Household Items for Clients	-	
2008	Medication Supports	50,000	Cost of medical supplies or treatment/medical expense for a specific client. (Examples: co-pays*, prescription/lab work not covered by insurance, over-the-counter medications*, first aid kit/supplies for client's use at home, etc.) *if allowable per contract
2009	Program Supplies - Medical	6,000	Cost of medical supplies to be used by staff or clients at the program location to meet program objective. Such items are to remain at the program location and not sent home with the client. Such items include, but are not limited to first aid kits, blood pressure monitor, latex gloves, syringes, hazard disposal service, over-the-counter medication*, etc. *if allowable per contract.
2010	Utility Vouchers	10,800	Cost of client utility bills and/or security deposits.
2011	Client Building Maintenance	1,667	Cost of building repair or maintenance paid for on client's behalf. (Examples: handyman work, plumbing, drywall, roofing, etc.)
2012	Client Therapy	1,200	Cost of therapy services not covered by insurance and therapeutic supplies for clients to use outside of the program. (Examples: exercise videos/equipment, relaxation audio/visual recordings, artistic expression supplies, etc.)
2013	Client Activities / Recreation	12,500	Cost for client activities & recreation events. (Examples: cable bill, food/drinks/utensils/decorations needed for a specific client event, incentive rewards, admission fees to events, etc.)
2014	Client Personal Needs	1,800	Cost of supplying clients with necessary personal items not detailed in other accounts. (Examples: birth certificate, DMV fee for ID or license, clients household cleaning products/house supplies/kitchen supplies for their own home, pots/pans/dishes, linens, paper towels and child related expenses such as car seat/stroller/play pin, etc.)
2015	Other (Specify)	-	
2016	Other (Specify)	-	

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>3000: OPERATING EXPENSES</b>		<b>124,667</b>	
3001	Telecommunications	12,000	Cost of electronic communications. (Examples: internet, phone, fax, cell phones, etc.)
3002	Printing/Postage	11,000	Cost of custom copying/printing charges (Examples: letterhead, business forms, business cards, flyers, brochures, signs, etc.) and Postage and delivery, including delivery by the USPS, UPS, FEDEX and other courier services
3003	Office, Household & Program Supplies	26,333	Cost of items normally used in an office setting. (Examples: pens, pencils, paper tablets, paper clips, notepads, staples, non-electric staplers/hole punchers/calculators, and other items normally used in an office setting.) House Supplies, Cost of supplies used by staff during their scheduled work hours. These items are normally used to operate the building at the program location. These items are to remain at program location and not sent home with client. (Examples: pots, pans, pot holders, kitchen towels, curtains, detergent, Clorox for clothes, can opener, dishes, furnace filter, decorations, linens, etc.), Program Supplies, Cost of any items normally used by clients to meet program objectives while receiving services. These items are to remain at the program location and not sent home with the client. Such items include, but are not limited to video tapes, printed handouts, desk reference books, research material, curriculum, puzzles, board games, therapeutic/meditative supplies and other items that are specifically designed and used to accomplish program goals.
3004	Advertising	-	
3005	Staff Development & Training	14,500	Cost of employee training courses and materials.
3006	Staff Mileage	12,500	Cost of employee mileage reimbursement paid in accordance with FPM section 1005.
3007	Subscriptions & Memberships	1,667	Cost of membership dues and subscriptions. (Examples: magazine, newspaper, memberships, etc.)
3008	Vehicle Maintenance / Gas / Insurance	33,500	Cost of vehicle maintenance. Including cost of parts, supplies and labor associated with maintenance and repair of vehicles used by Agency programs. Cost of gas in Vehicles and Insurance
3009	Program Enhancement	-	
3010	Staff Meetings	6,000	Cost of room rental and supplies necessary for staff meetings.
3011	Recruitment	3,000	Cost of advertising and other employee recruitment expenses. (Examples: newspaper ad, urine screening, background check, etc.)
3012	Employee-Employer Relations	4,167	Cost relating to improvement of working conditions, employer/employee relations and employee morale. (Examples: Company picnic items, florist, etc.)

4000: FACILITIES & EQUIPMENT			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>4000: FACILITIES &amp; EQUIPMENT</b>		<b>147,917</b>	
4001	Building Maintenance	6,250	Cost of Agency building repairs and maintenance. (Examples: electrical work, A/C and heating, hood cleaning, plumbing, etc.) This account should not be used if a specific outside labor contractor is doing an identifiable project.
4002	Rent/Lease Building	68,333	Cost of rent/lease payments made for building leases from outside sources.
4003	Rent/Lease Equipment	1,667	Cost of rent/lease payments made for furniture and equipment leases.
4004	Rent/Lease Vehicles	29,750	Rental cost of vehicles and lease of agency vehicles.
4005	Security	3,000	Cost of installation, maintenance and monthly service fees for building alarms and other security measures. (Examples: security/surveillance equipment, service and installation, safes, etc.)
4006	Utilities	31,000	Cost of service for power, gas, water, sewer, garbage, etc.
4007	Equipment Maintenance	2,000	Cost of equipment and furniture repair and maintenance. (Examples: high capacity copier/printer/scanner, replacement parts such as hard drive, laptop battery, monitor/printer/phone cord, drum, power strip, surge protector, video card, etc.)
4008	Liability Insurance	5,917	
4009	Other (Specify)	-	
4010	Other (Specify)	-	

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>5000: SPECIAL EXPENSES</b>		<b>228,499</b>	
5001	Consultant (Network & Data Management)	-	
5002	HMIS (Health Management Information System)	23,333	Avatar Costs
5003	Contractual/Consulting Services : Consultant	14,333	These accounts are assigned to record various professional services provided by contracted sources working as independent agents. (IT Consultations, EHR Consultation, External Consultation, Clinical Supervisors who are not Staffed under the Personnel & Salaries)
5004	Translation Services	3,333	Paid to an outside vendor for translation / interpreter services
5005	Contractual/Consulting Services : Psychiatrist	187,500	These accounts are assigned to record various professional services provided by contracted Psychiatrist working as independent agents.
5006	Other (Specify)	-	
5007	Other (Specify)	-	
5008	Other (Specify)	-	

<b>6000: ADMINISTRATIVE EXPENSES</b>		<b>581,177</b>	
6001	Administrative Overhead	562,510	Support of our cooperate and regional offices such as processing invoices, payroll, cost reports, etc. Accrued Paid Leave moved/added to Admin Overhead. Accrual Paid Leave cannot be listed in Salaries and Benefits Per DBH
6002	Professional Liability Insurance	-	
6003	Accounting/Bookkeeping	-	
6004	External Audit	3,000	Cost of outside audit fees.
6005	Insurance (Specify):	-	
6006	Payroll Services	-	
6007	Depreciation (Provider-Owned Equipment to be Used for Program Purposes)	9,000	This account should be charged for the depreciation expense of the Agency's tangible assets.
6008	Other: Bank Fees	2,000	Cost of bank fees charged to Agency account.
6009	Other: Legal Expense	1,000	Cost of outside legal fees
6010	Other: Licenses	3,667	Cost in obtaining and renewing licenses and permits.
6011	Other (Specify)	-	Cost of membership dues and subscriptions.
6012	Other (Specify)	-	

<b>7000: FIXED ASSETS</b>		<b>6,000</b>	
7001	Computer Equipment & Software	-	
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	-	
7003	Furniture & Fixtures	2,400	Purchase of furniture and fixtures as needed
7004	Leasehold/Tenant/Building Improvements	3,600	Improvements to the building as needed that isn't covered by the landlord
7005	Other Assets over \$500 with Lifespan of 2 Years +	-	
7006	Assets over \$5,000/unit (Specify)	-	
7007	Other (Specify)	-	
7008	Other (Specify)	-	

PROGRAM FUNDING SOURCES		
8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)		
ACCT #	LINE ITEM	PROVIDE DETAILS OF METHODOLOGY(IES) USED IN DETERMINING MEDI-CAL SERVICE RATES AND/OR SERVICE UNITS, IF APPLICABLE AND/OR AS REQUIRED BY THE RFP.
8001	Mental Health Services	We based our rates and units on current program usage
8002	Case Management	We based our rates and units on current program usage
8003	Crisis Services	We based our rates and units on current program usage
8004	Medication Support	We based our rates and units on current program usage
8005	Collateral	We based our rates and units on current program usage
8006	Plan Development	We based our rates and units on current program usage
8007	Assessment	We based our rates and units on current program usage
8008	Rehabilitation	We based our rates and units on current program usage



**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Turning Point of Central Ca, Inc. | Fresno FSP Program Site #2**  
**FY 2021 - 2022 | 07/01/21 - 06/30/22**

**PROGRAM EXPENSES**

1000: SALARIES & BENEFITS					
Employee Salaries					
Acct #	Position	FTE	Admin	Direct	Total
1101	PROGRAM DIRECTOR	0.50	\$ -	\$ 50,446	\$ 50,446
1102	ASST. PROGRAM DIRECTOR	1.00	-	96,026	96,026
1103	ADMIN. ASSISTANT	0.50	-	25,178	25,178
1104	BILLER	0.50	-	22,822	22,822
1105	BOOKKEEPER	0.50	-	23,502	23,502
1106	CRIMINAL JUSTICE REHAB SPECIALIST (CM)	2.00	-	102,716	102,716
1107	DUAL DIAGNOSIS SPECIALIST (CM)	3.00	-	154,073	154,073
1108	ED & EM REHAB SPECIALIST (CM)	3.00	-	154,073	154,073
1109	HOUSING COORDINATOR	1.00	-	51,358	51,358
1110	INTAKE SPECIALIST	0.50	-	26,449	26,449
1111	LVN	3.00	-	158,694	158,694
1112	MENTAL HEALTH PROFESSIONAL	4.00	-	371,524	371,524
1113	PEER SUPPORT SPECIALIST	2.00	-	66,667	66,667
1114	PERSONAL SERVICE COORDINATOR (CM)	4.00	-	189,887	189,887
1115	PSC SUPERVISOR	1.00	-	71,116	71,116
1116	REGISTERED NURSE	0.50	-	46,441	46,441
1117	SECRETARY	1.00	-	35,010	35,010
1118			-	-	-
1119			-	-	-
1120			-	-	-
1121			-	-	-
1122			-	-	-
1123			-	-	-
1124			-	-	-
1125			-	-	-
1126			-	-	-
1127			-	-	-
1128			-	-	-
1129			-	-	-
1130			-	-	-
1131			-	-	-
<b>Personnel Salaries Subtotal</b>		<b>28.00</b>	<b>\$ -</b>	<b>\$ 1,645,982</b>	<b>\$ 1,645,982</b>

<b>Employee Benefits</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1201	Retirement	\$ -	\$ 26,855	\$ 26,855
1202	Worker's Compensation	-	29,343	29,343
1203	Health/ Dental Insurance	-	253,664	253,664
1204	API Benefits	-	545	545
1205	Other (Specify)	-	-	-
1206	Other (Specify)	-	-	-
<b>Employee Benefits Subtotal:</b>		<b>\$ -</b>	<b>\$ 310,407</b>	<b>\$ 310,407</b>
<b>Payroll Taxes &amp; Expenses:</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1301	OASDI	\$ -	\$ -	\$ -
1302	FICA/MEDICARE / OASDI	-	136,897	136,897
1303	SUI	-	5,998	5,998
1304	Other: Accrued Paid Leave Moved to Admin Overhead	-	-	-
1305	Other (Specify)	-	-	-
1306	Other (Specify)	-	-	-
<b>Payroll Taxes &amp; Expenses Subtotal:</b>		<b>\$ -</b>	<b>\$ 142,895.00</b>	<b>\$ 142,895.00</b>
<b>EMPLOYEE SALARIES &amp; BENEFITS TOTAL:</b>		<b>\$ -</b>	<b>\$ 2,099,284</b>	<b>\$ 2,099,284</b>

<b>2000: CLIENT SUPPORT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
2001	Child Care	\$ -
2002	Client Housing Support	437,400
2003	Client Transportation & Support	13,400
2004	Clothing, Food, & Hygiene	20,650
2005	Education Support	4,450
2006	Employment Support	2,100
2007	Household Items for Clients	-
2008	Medication Supports	61,800
2009	Program Supplies - Medical	7,450
2010	Utility Vouchers	13,350
2011	Client Building Maintenance	2,100
2012	Client Therapy	1,500
2013	Client Activities / Recreation	15,450
2014	Client Personal Needs	2,250
2015	Other (Specify)	-
2016	Other (Specify)	-
<b>DIRECT CLIENT CARE TOTAL</b>		<b>\$ 581,900</b>

<b>3000: OPERATING EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
3001	Telecommunications	\$ 14,850
3002	Printing/Postage	13,650
3003	Office, Household & Program Supplies	32,750
3004	Advertising	-
3005	Staff Development & Training	17,950
3006	Staff Mileage	15,450
3007	Subscriptions & Memberships	2,000
3008	Vehicle Maintenance / Gas / Insurance	41,500
3009	Program Enhancement	-
3010	Staff Meetings	7,450
3011	Recruitment	3,750
3012	Employee-Employer Relations	5,150
<b>OPERATING EXPENSES TOTAL:</b>		<b>\$ 154,500</b>

<b>4000: FACILITIES &amp; EQUIPMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
4001	Building Maintenance	\$ 7,750
4002	Rent/Lease Building	84,550
4003	Rent/Lease Equipment	2,000
4004	Rent/Lease Vehicles	36,800
4005	Security	3,750
4006	Utilities	38,350
4007	Equipment Maintenance	2,500
4008	Liability Insurance	7,350
4009	Other (Specify)	-
4010	Other (Specify)	-
<b>FACILITIES/EQUIPMENT TOTAL:</b>		<b>\$ 183,050</b>

<b>5000: SPECIAL EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
5001	Consultant (Network & Data Management)	\$ -
5002	HMIS (Health Management Information System)	28,900
5003	Contractual/Consulting Services : Consultant	17,750
5004	Translation Services	4,150
5005	Contractual/Consulting Services : Psychiatrist	231,750
5006	Other (Specify)	-
5007	Other (Specify)	-
5008	Other (Specify)	-
<b>SPECIAL EXPENSES TOTAL:</b>		<b>\$ 282,550</b>

<b>6000: ADMINISTRATIVE EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
6001	Administrative Overhead	\$ 705,363
6002	Professional Liability Insurance	-
6003	Accounting/Bookkeeping	-
6004	External Audit	3,750
6005	Insurance (Specify):	-
6006	Payroll Services	-
6007	Depreciation <i>(Provider-Owned Equipment to be Used for Program Purposes)</i>	11,150
6008	Other: Bank Fees	2,500
6009	Other: Legal Expense	1,250
6010	Other: Licenses	4,500
6011	Other (Specify)	-
6012	Other (Specify)	-
<b>ADMINISTRATIVE EXPENSES TOTAL</b>		<b>\$ 728,513</b>

<b>7000: FIXED ASSETS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
7001	Computer Equipment & Software	\$ -
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	-
7003	Furniture & Fixtures	2,500
7004	Leasehold/Tenant/Building Improvements	3,750
7005	Other Assets over \$500 with Lifespan of 2 Years +	-
7006	Assets over \$5,000/unit (Specify)	-
7007	Other (Specify)	-
7008	Other (Specify)	-
<b>FIXED ASSETS EXPENSES TOTAL</b>		<b>\$ 6,250</b>

<b>TOTAL PROGRAM EXPENSES</b>		<b>\$ 4,036,047</b>
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**PROGRAM FUNDING SOURCES**

<b>8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)</b>				
<b>Acct #</b>	<b>Line Item Description</b>	<b>Service Units</b>	<b>Rate</b>	<b>Amount</b>
8001	Mental Health Services	76,502	2.91	\$ 222,621
8002	Case Management	32,715	1.99	65,103
8003	Crisis Services	1,470	3.20	4,704
8004	Medication Support	133,907	5.27	705,690
8005	Collateral	5,128	2.91	14,922
8006	Plan Development	7,935	2.91	23,091
8007	Assessment	14,780	2.91	43,010
8008	Rehabilitation	594,063	2.91	1,728,723
<b>Estimated Specialty Mental Health Services Billing Totals:</b>		<b>866,500</b>		<b>\$ 2,807,864</b>
Estimated % of Clients who are Medi-Cal Beneficiaries				100%
Estimated Total Cost of Specialty Mental Health Services Provided to Medi-Cal Beneficiaries				2,807,864
Federal Financial Participation (FFP) %			79%	2,218,213
<b>MEDI-CAL FFP TOTAL</b>				<b>\$ 2,218,213</b>

<b>8100 - SUBSTANCE USE DISORDER FUNDS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8101	Drug Medi-Cal	\$ -
8102	SABG	\$ -
<b>SUBSTANCE USE DISORDER FUNDS TOTAL</b>		<b>\$ -</b>

<b>8200 - REALIGNMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8201	Realignment	\$ 0
<b>REALIGNMENT TOTAL</b>		<b>\$ 0</b>

<b>8300 - MENTAL HEALTH SERVICE ACT (MHSA)</b>			
<b>Acct #</b>	<b>MHSA Component</b>	<b>MHSA Program Name</b>	<b>Amount</b>
8301	CSS - Community Services & Supports		\$ 1,778,834
8302	PEI - Prevention & Early Intervention		-
8303	INN - Innovations		-
8304	WET - Workforce Education & Training		-
8305	CFTN - Capital Facilities & Technology		-
<b>MHSA TOTAL</b>			<b>\$ 1,778,834</b>

<b>8400 - OTHER REVENUE</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8401	Client Fees	\$ 39,000
8402	Client Insurance	-
8403	Grants (Specify)	-
8404	Other (Specify)	-
8405	Other (Specify)	-
<b>OTHER REVENUE TOTAL</b>		<b>\$ 39,000</b>

**TOTAL PROGRAM FUNDING SOURCES: \$ 4,036,047**

**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Turning Point of Central Ca, Inc. | Fresno FSP Program Site #2**  
**FY 2021 - 2022 | 07/01/21 - 06/30/22 Budget Narrative**

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>1000: SALARIES &amp; BENEFITS</b>		<b>2,099,284</b>	
<b>Employee Salaries</b>		<b>1,645,982</b>	
1101	PROGRAM DIRECTOR	50,446	The Program Director currently oversees the program, hiring, training and supervising staff.
1102	ASST. PROGRAM DIRECTOR	96,026	The Assitant Program Director will supervise staff and assist the Program Director for that location
1103	ADMIN. ASSISTANT	25,178	The administrative assistant will oversee the support staff at both locations and will help with all support staff duties.
1104	BILLER	22,822	The biller will be responsible for billing into Avatar, billing all insurance claims and run reports as necessary for the program.
1105	BOOKKEEPER	23,502	The bookkeeper is responsible for processing all invoices for the program or programs and will send all information to the corporate office. They will handle petty cash, client fees and other bookkeeping needs for the program.
1106	CRIMINAL JUSTICE REHAB SPECIALIST (CM)	102,716	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in providing services to those involved in the criminal justice system and program liaison for Behavioral Health Court and the Federal Wellness Court
1107	DUAL DIAGNOSIS SPECIALIST (CM)	154,073	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in supporting and providing services for those who suffer from a co-occurring diagnosis.
1108	ED & EM REHAB SPECIALIST (CM)	154,073	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in linking and providing services to those interested in engagement in employment and education services.
1109	HOUSING COORDINATOR	51,358	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in identifying, linking and assisting clients in obtaining various housing such as a R&B, supportive housing, etc.
1110	INTAKE SPECIALIST	26,449	Reviews all referrals, contacting referral source and coordinating intake services to enrol in FSP program. The specialist also assists client in applying for additional benefits, such as General Relief, Social Security Benefits, Medi-cal, etc.
1111	LVN	158,694	Assists psychiatrist providing vital intake, coordination of medications, provides medication support and education, provides injections and consults with all staff in ensuring medication education and compliance
1112	MENTAL HEALTH PROFESSIONAL	371,524	Provides mental health assessment, assessing for Medical Necessity, assists client in identifying treatment plan goals according to diagnosis. MHP also provides individual and group therapy as client requests, while also providing program support to assist clients in crisis.
1113	PEER SUPPORT SPECIALIST	66,667	Provides support to clients, utilizing lived mental health experience to relate to clients, while assisting in activities with clients, run peer ran groups, meeting with clients during appointments providing support as needed.

PROGRAM EXPENSE				
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE	
1114	PERSONAL SERVICE COORDINATOR (CM)	189,887	Each FSP client will have a single point of responsibility through an assigned Personal Service Coordinator/case manager. The Personal Service Coordinator (PSC) works as a part of a treatment team in achieving the goals and objectives of the program to ensure quality of care for client participants. With case management being one of the primary methods of delivering services, each client shall be assigned a primary Personal Service Coordinator who will be responsible to see that the client's needs are met, as identified in the Plan of Care and the Individual Service and Support Plan (ISSP). They are able to provide intensive services and supports when needed, and they can give the client and/or family member considerable personal attention. The PSC will provide instruction modeling and support one-on-one in the course of daily events in the natural setting to manage day-to-day life and promote increased efficacy and self-sufficiency. This "hands on" approach will be utilized during the PSCs interaction with client's for 'en vivo' support, such as managing symptoms while preparing a budget, going to the doctor's office, the grocery store, in their home and maintaining their environment. Clients will learn at their own pace and with as much help as is needed by their personal service coordinator. A teaching/coaching approach will be used that empowers the client to gain mastery and take responsibility. Transportation and assistance in accessing other resources will be ensured by the PSC. All PSCs maintain their own case load of clients for whom they are the primary contact. Additionally, some of the PSC positions also include specialty training (housing, employment, education, criminal justice, substance use disorder) and will provide those specialty services to clients who are not on their caseload and can benefit from that expertise.	
1115	PSC SUPERVISOR	71,116	Provides supervision to all PSCs/Mental Health Specialists to ensure client care, maintain compliance with Turning Point policies and procedures. Supervisor also assisting in training new staff and reporting to the Assistant Program Director.	
1116	REGISTERED NURSE	46,441	Provides oversight over the LVNs/LPTs to ensure client care, maintaining compliance with Turning Point policies and procedures, providing training and ensuring accurate charting in accordance with Medi-cal.	
1117	SECRETARY	35,010	Provides direct services to the program by data entry, phone calls, checking in clients, etc.	
1118	0	-		
1119	0	-		
1120	0	-		
1121	0	-		
1122	0	-		
1123	0	-		
1124	0	-		
1125	0	-		
1126	0	-		
1127	0	-		
1128	0	-		
1129	0	-		
1130	0	-		
1131	0	-		
<b>Employee Benefits</b>		<b>310,407</b>		
1201	Retirement	26,855	Cost of Agency contribution to employee retirement plans.	
1202	Worker's Compensation	29,343	Cost of workers compensation insurance.	
1203	Health/ Dental Insurance	253,664	Agency cost for health, dental and vision insurance	
1204	API Benefits	545	Employee assistance program	
1205	Other (Specify)	-		
1206	Other (Specify)	-		
<b>Payroll Taxes &amp; Expenses:</b>		<b>142,895</b>		
1301	OASDI	-		
1302	FICA/MEDICARE / OASDI	136,897	Employer portion of F.I.C.A. taxes charged to the Agency by the Internal Revenue Service. F.I.C.A. is comprised of "Old-Age, Survivors, and Disability Insurance" (OASDI), plus "Hospital Insurance" (Medicare).	
1303	SUI	5,998	Employer portion of S.U.I. taxes charged to the Agency by the various states in which wages are paid.	
1304	Other: Accrued Paid Leave Moved to Admin Overhead	-	The monetary value of staff Paid Leave hours as they accrue on a monthly basis	
1305	Other (Specify)	-		
1306	Other (Specify)	-		

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>2000: CLIENT SUPPORT</b>		<b>581,900</b>	
2001	Child Care	-	
2002	Client Housing Support	437,400	Cost of rent, housing assistance and deposit paid on behalf of client. (Examples: first/last
2003	Client Transportation & Support	13,400	Cost for client transportation. (Examples: bus tokens/passes, taxi, other public transportation, bicycles, etc.)
2004	Clothing, Food, & Hygiene	20,650	Cost of client hygiene supplies and non-work related clothing. (Examples: clothes, shoes, soap, toothpaste, deodorant, grooming supplies, diapers, etc.)
2005	Education Support	4,450	Cost of course fees and educational materials distributed to clients and prospective clients. Including court ordered educational class.
2006	Employment Support	2,100	Cost of client pre-employment preparation and employment retention. (Examples: job search and interview attire, work boots and tools required for employment, etc.)
2007	Household Items for Clients	-	
2008	Medication Supports	61,800	Cost of medical supplies or treatment/medical expense for a specific client. (Examples: co-pays*, prescription/lab work not covered by insurance, over-the-counter medications*, first aid kit/supplies for client's use at home, etc.) *if allowable per contract
2009	Program Supplies - Medical	7,450	Cost of medical supplies to be used by staff or clients at the program location to meet program objective. Such items are to remain at the program location and not sent home with the client. Such items include, but are not limited to first aid kits, blood pressure monitor, latex gloves, syringes, hazard disposal service, over-the-counter medication*, etc. *if allowable per contract.
2010	Utility Vouchers	13,350	Cost of client utility bills and/or security deposits.
2011	Client Building Maintenance	2,100	Cost of building repair or maintenance paid for on client's behalf. (Examples: handyman work, plumbing, drywall, roofing, etc.)
2012	Client Therapy	1,500	Cost of therapy services not covered by insurance and therapeutic supplies for clients to use outside of the program. (Examples: exercise videos/equipment, relaxation audio/visual recordings, artistic expression supplies, etc.)
2013	Client Activities / Recreation	15,450	Cost for client activities & recreation events. (Examples: cable bill, food/drinks/utensils/decorations needed for a specific client event, incentive rewards, admission fees to events, etc.)
2014	Client Personal Needs	2,250	Cost of supplying clients with necessary personal items not detailed in other accounts. (Examples: birth certificate, DMV fee for ID or license, clients household cleaning products/house supplies/kitchen supplies for their own home, pots/pans/dishes, linens, paper towels and child related expenses such as car seat/stroller/play pin, etc.)
2015	Other (Specify)	-	
2016	Other (Specify)	-	



PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>3000: OPERATING EXPENSES</b>		<b>154,500</b>	
3001	Telecommunications	14,850	Cost of electronic communications. (Examples: internet, phone, fax, cell phones, etc.)
3002	Printing/Postage	13,650	Cost of custom copying/printing charges (Examples: letterhead, business forms, business cards, flyers, brochures, signs, etc.) and Postage and delivery, including delivery by the USPS, UPS, FEDEX and other courier services
3003	Office, Household & Program Supplies	32,750	Cost of items normally used in an office setting. (Examples: pens, pencils, paper tablets, paper clips, notepads, staples, non-electric staplers/hole punchers/calculators, and other items normally used in an office setting.) House Supplies, Cost of supplies used by staff during their scheduled work hours. These items are normally used to operate the building at the program location. These items are to remain at program location and not sent home with client. (Examples: pots, pans, pot holders, kitchen towels, curtains, detergent, Clorox for clothes, can opener, dishes, furnace filter, decorations, linens, etc.), Program Supplies, Cost of any items normally used by clients to meet program objectives while receiving services. These items are to remain at the program location and not sent home with the client. Such items include, but are not limited to video tapes, printed handouts, desk reference books, research material, curriculum, puzzles, board games, therapeutic/meditative supplies and other items that are specifically designed and used to accomplish program goals.
3004	Advertising	-	
3005	Staff Development & Training	17,950	Cost of employee training courses and materials.
3006	Staff Mileage	15,450	Cost of employee mileage reimbursement paid in accordance with FPM section 1005.
3007	Subscriptions & Memberships	2,000	Cost of membership dues and subscriptions. (Examples: magazine, newspaper, memberships, etc.)
3008	Vehicle Maintenance / Gas / Insurance	41,500	Cost of vehicle maintenance. Including cost of parts, supplies and labor associated with maintenance and repair of vehicles used by Agency programs. Cost of gas in Vehicles and Insurance
3009	Program Enhancement	-	
3010	Staff Meetings	7,450	Cost of room rental and supplies necessary for staff meetings.
3011	Recruitment	3,750	Cost of advertising and other employee recruitment expenses. (Examples: newspaper ad, urine screening, background check, etc.)
3012	Employee-Employer Relations	5,150	Cost relating to improvement of working conditions, employer/employee relations and employee morale. (Examples: Company picnic items, florist, etc.)
<b>4000: FACILITIES &amp; EQUIPMENT</b>		<b>183,050</b>	
4001	Building Maintenance	7,750	Cost of Agency building repairs and maintenance. (Examples: electrical work, A/C and heating, hood cleaning, plumbing, etc.) This account should not be used if a specific outside labor contractor is doing an identifiable project.
4002	Rent/Lease Building	84,550	Cost of rent/lease payments made for building leases from outside sources.
4003	Rent/Lease Equipment	2,000	Cost of rent/lease payments made for furniture and equipment leases.
4004	Rent/Lease Vehicles	36,800	Rental cost of vehicles and lease of agency vehicles.
4005	Security	3,750	Cost of installation, maintenance and monthly service fees for building alarms and other security measures. (Examples: security/surveillance equipment, service and installation, safes, etc.)
4006	Utilities	38,350	Cost of service for power, gas, water, sewer, garbage, etc.
4007	Equipment Maintenance	2,500	Cost of equipment and furniture repair and maintenance. (Examples: high capacity copier/printer/scanner, replacement parts such as hard drive, laptop battery, monitor/printer/phone cord, drum, power strip, surge protector, video card, etc.)
4008	Liability Insurance	7,350	
4009	Other (Specify)	-	
4010	Other (Specify)	-	

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>5000: SPECIAL EXPENSES</b>		<b>282,550</b>	
5001	Consultant (Network & Data Management)	-	
5002	HMIS (Health Management Information System)	28,900	Avatar Costs
5003	Contractual/Consulting Services : Consultant	17,750	These accounts are assigned to record various professional services provided by contracted sources working as independent agents. (IT Consultations, EHR Consultation, External Consultation, Clinical Supervisors who are not Staffed under the Personnel & Salaries)
5004	Translation Services	4,150	Paid to an outside vendor for translation / interpreter services
5005	Contractual/Consulting Services : Psychiatrist	231,750	These accounts are assigned to record various professional services provided by contracted Psychiatrist working as independent agents.
5006	Other (Specify)	-	
5007	Other (Specify)	-	
5008	Other (Specify)	-	

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>6000: ADMINISTRATIVE EXPENSES</b>		<b>728,513</b>	
6001	Administrative Overhead	705,363	Support of our cooperate and regional offices such as processing invoices, payroll, cost reports, etc. Accrued Paid Leave moved/added to Admin Overhead. Accrual Paid Leave cannot be listed in Salaries and Benefits Per DBH
6002	Professional Liability Insurance	-	
6003	Accounting/Bookkeeping	-	
6004	External Audit	3,750	Cost of outside audit fees.
6005	Insurance (Specify):	-	
6006	Payroll Services	-	
6007	Depreciation (Provider-Owned Equipment to be Used for Program Purposes)	11,150	This account should be charged for the depreciation expense of the Agency's tangible assets.
6008	Other: Bank Fees	2,500	Cost of bank fees charged to Agency account.
6009	Other: Legal Expense	1,250	Cost of outside legal fees
6010	Other: Licenses	4,500	Cost in obtaining and renewing licenses and permits.
6011	Other (Specify)	-	Cost of membership dues and subscriptions.
6012	Other (Specify)	-	

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>7000: FIXED ASSETS</b>		<b>6,250</b>	
7001	Computer Equipment & Software	-	
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	-	
7003	Furniture & Fixtures	2,500	Purchase of furniture and fixtures as needed
7004	Leasehold/Tenant/Building Improvements	3,750	Improvements to the building as needed that isn't covered by the landlord
7005	Other Assets over \$500 with Lifespan of 2 Years +	-	
7006	Assets over \$5,000/unit (Specify)	-	
7007	Other (Specify)	-	
7008	Other (Specify)	-	

PROGRAM FUNDING SOURCES			
8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)			
ACCT #	LINE ITEM	PROVIDE DETAILS OF METHODOLOGY(IES) USED IN DETERMINING MEDI-CAL SERVICE RATES AND/OR SERVICE UNITS, IF APPLICABLE AND/OR AS REQUIRED BY THE RFP.	
8001	Mental Health Services	We based our rates and units on current program usage	
8002	Case Management	We based our rates and units on current program usage	
8003	Crisis Services	We based our rates and units on current program usage	
8004	Medication Support	We based our rates and units on current program usage	
8005	Collateral	We based our rates and units on current program usage	
8006	Plan Development	We based our rates and units on current program usage	
8007	Assessment	We based our rates and units on current program usage	
8008	Rehabilitation	We based our rates and units on current program usage	

**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Turning Point of Central Ca, Inc. | Fresno FSP Program Site #2**  
**FY 2022 - 2023 | 07/01/22 - 06/30/23**

**PROGRAM EXPENSES**

1000: SALARIES & BENEFITS					
Employee Salaries					
Acct #	Position	FTE	Admin	Direct	Total
1101	PROGRAM DIRECTOR	0.50	\$ -	\$ 52,969	\$ 52,969
1102	ASST. PROGRAM DIRECTOR	1.00	-	100,828	100,828
1103	ADMIN. ASSISTANT	0.50	-	26,437	26,437
1104	BILLER	0.50	-	23,964	23,964
1105	BOOKKEEPER	0.50	-	24,678	24,678
1106	CRIMINAL JUSTICE REHAB SPECIALIST (CM)	2.00	-	107,852	107,852
1107	DUAL DIAGNOSIS SPECIALIST (CM)	3.00	-	161,777	161,777
1108	ED & EM REHAB SPECIALIST (CM)	3.00	-	161,777	161,777
1109	HOUSING COORDINATOR	1.00	-	53,926	53,926
1110	INTAKE SPECIALIST	0.50	-	27,772	27,772
1111	LVN	3.00	-	166,629	166,629
1112	MENTAL HEALTH PROFESSIONAL	4.00	-	390,101	390,101
1113	PEER SUPPORT SPECIALIST	2.00	-	70,001	70,001
1114	PERSONAL SERVICE COORDINATOR (CM)	4.00	-	199,381	199,381
1115	PSC SUPERVISOR	1.00	-	74,672	74,672
1116	REGISTERED NURSE	0.50	-	48,763	48,763
1117	SECRETARY	1.00	-	36,760	36,760
1118			-	-	-
1119			-	-	-
1120			-	-	-
1121			-	-	-
1122			-	-	-
1123			-	-	-
1124			-	-	-
1125			-	-	-
1126			-	-	-
1127			-	-	-
1128			-	-	-
1129			-	-	-
1130			-	-	-
1131			-	-	-
<b>Personnel Salaries Subtotal</b>		<b>28.00</b>	<b>\$ -</b>	<b>\$ 1,728,287</b>	<b>\$ 1,728,287</b>

<b>Employee Benefits</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1201	Retirement	\$ -	\$ 28,198	\$ 28,198
1202	Worker's Compensation	-	30,811	30,811
1203	Health/ Dental Insurance	-	266,348	266,348
1204	API Benefits	-	573	573
1205	Other (Specify)	-	-	-
1206	Other (Specify)	-	-	-
<b>Employee Benefits Subtotal:</b>		<b>\$ -</b>	<b>\$ 325,930</b>	<b>\$ 325,930</b>
<b>Payroll Taxes &amp; Expenses:</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1301	OASDI	\$ -	\$ -	\$ -
1302	FICA/MEDICARE / OASDI	-	143,742	143,742
1303	SUI	-	6,298	6,298
1304	Other: Accrued Paid Leave Moved to Admin Overhead	-	-	-
1305	Other (Specify)	-	-	-
1306	Other (Specify)	-	-	-
<b>Payroll Taxes &amp; Expenses Subtotal:</b>		<b>\$ -</b>	<b>\$ 150,040</b>	<b>\$ 150,040</b>
<b>EMPLOYEE SALARIES &amp; BENEFITS TOTAL:</b>		<b>\$ -</b>	<b>\$ 2,204,257</b>	<b>\$ 2,204,257</b>

<b>2000: CLIENT SUPPORT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
2001	Child Care	\$ -
2002	Client Housing Support	450,650
2003	Client Transportation & Support	13,850
2004	Clothing, Food, & Hygiene	21,300
2005	Education Support	4,600
2006	Employment Support	2,200
2007	Household Items for Clients	-
2008	Medication Supports	63,700
2009	Program Supplies - Medical	7,700
2010	Utility Vouchers	13,800
2011	Client Building Maintenance	2,200
2012	Client Therapy	1,550
2013	Client Activities / Recreation	15,950
2014	Client Personal Needs	2,350
2015	Other (Specify)	-
2016	Other (Specify)	-
<b>DIRECT CLIENT CARE TOTAL</b>		<b>\$ 599,850</b>

<b>3000: OPERATING EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
3001	Telecommunications	\$ 15,300
3002	Printing/Postage	14,100
3003	Office, Household & Program Supplies	33,900
3004	Advertising	-
3005	Staff Development & Training	18,500
3006	Staff Mileage	15,950
3007	Subscriptions & Memberships	2,000
3008	Vehicle Maintenance / Gas / Insurance	42,850
3009	Program Enhancement	-
3010	Staff Meetings	7,700
3011	Recruitment	3,900
3012	Employee-Employer Relations	5,350
<b>OPERATING EXPENSES TOTAL:</b>		<b>\$ 159,550</b>

<b>4000: FACILITIES &amp; EQUIPMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
4001	Building Maintenance	\$ 8,000
4002	Rent/Lease Building	87,150
4003	Rent/Lease Equipment	2,000
4004	Rent/Lease Vehicles	37,950
4005	Security	3,900
4006	Utilities	39,550
4007	Equipment Maintenance	2,600
4008	Liability Insurance	-
4009	Other (Specify)	-
4010	Other (Specify)	-
<b>FACILITIES/EQUIPMENT TOTAL:</b>		<b>\$ 181,150</b>

<b>5000: SPECIAL EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
5001	Consultant (Network & Data Management)	\$ -
5002	HMIS (Health Management Information System)	29,850
5003	Contractual/Consulting Services : Consultant	18,300
5004	Translation Services	4,300
5005	Contractual/Consulting Services : Psychiatrist	238,750
5006	Other (Specify)	-
5007	Other (Specify)	-
5008	Other (Specify)	-
<b>SPECIAL EXPENSES TOTAL:</b>		<b>\$ 291,200</b>

<b>6000: ADMINISTRATIVE EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
6001	Administrative Overhead	\$ 737,151
6002	Professional Liability Insurance	-
6003	Accounting/Bookkeeping	-
6004	External Audit	3,900
6005	Insurance (Specify):	7,600
6006	Payroll Services	-
6007	Depreciation <i>(Provider-Owned Equipment to be Used for Program Purposes)</i>	11,500
6008	Other: Bank Fees	2,600
6009	Other: Legal Expense	1,300
6010	Other: Licenses	4,600
6011	Other (Specify)	-
6012	Other (Specify)	-
<b>ADMINISTRATIVE EXPENSES TOTAL</b>		<b>\$ 768,651</b>

<b>7000: FIXED ASSETS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
7001	Computer Equipment & Software	\$ -
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	-
7003	Furniture & Fixtures	2,600
7004	Leasehold/Tenant/Building Improvements	3,900
7005	Other Assets over \$500 with Lifespan of 2 Years +	-
7006	Assets over \$5,000/unit (Specify)	-
7007	Other (Specify)	-
7008	Other (Specify)	-
<b>FIXED ASSETS EXPENSES TOTAL</b>		<b>\$ 6,500</b>

<b>TOTAL PROGRAM EXPENSES</b>		<b>\$ 4,211,158</b>
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**PROGRAM FUNDING SOURCES**

<b>8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)</b>				
<b>Acct #</b>	<b>Line Item Description</b>	<b>Service Units</b>	<b>Rate</b>	<b>Amount</b>
8001	Mental Health Services	82,240	2.91	\$ 239,318
8002	Case Management	35,169	1.99	69,986
8003	Crisis Services	1,580	3.20	5,056
8004	Medication Support	143,951	5.27	758,622
8005	Collateral	5,513	2.91	16,043
8006	Plan Development	8,530	2.91	24,822
8007	Assessment	15,889	2.91	46,237
8008	Rehabilitation	638,618	2.91	1,858,378
<b>Estimated Specialty Mental Health Services Billing Totals:</b>		<b>931,490</b>		<b>\$ 3,018,463</b>
Estimated % of Clients who are Medi-Cal Beneficiaries				100%
Estimated Total Cost of Specialty Mental Health Services Provided to Medi-Cal Beneficiaries				3,018,463
Federal Financial Participation (FFP) %			79%	2,384,586
<b>MEDI-CAL FFP TOTAL</b>				<b>\$ 2,384,586</b>

<b>8100 - SUBSTANCE USE DISORDER FUNDS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8101	Drug Medi-Cal	\$ -
8102	SABG	\$ -
<b>SUBSTANCE USE DISORDER FUNDS TOTAL</b>		<b>\$ -</b>

<b>8200 - REALIGNMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8201	Realignment	\$ 0
<b>REALIGNMENT TOTAL</b>		<b>\$ 0</b>

<b>8300 - MENTAL HEALTH SERVICE ACT (MHSA)</b>			
<b>Acct #</b>	<b>MHSA Component</b>	<b>MHSA Program Name</b>	<b>Amount</b>
8301	CSS - Community Services & Supports		\$ 1,787,572
8302	PEI - Prevention & Early Intervention		-
8303	INN - Innovations		-
8304	WET - Workforce Education & Training		-
8305	CFTN - Capital Facilities & Technology		-
<b>MHSA TOTAL</b>			<b>\$ 1,787,572</b>

<b>8400 - OTHER REVENUE</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8401	Client Fees	\$ 39,000
8402	Client Insurance	-
8403	Grants (Specify)	-
8404	Other (Specify)	-
8405	Other (Specify)	-
<b>OTHER REVENUE TOTAL</b>		<b>\$ 39,000</b>

**TOTAL PROGRAM FUNDING SOURCES: \$ 4,211,158**

**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Turning Point of Central Ca, Inc. | Fresno FSP Program Site #2**  
**FY 2022 - 2023 | 07/01/22 - 06/30/23 Budget Narrative**

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>1000: SALARIES &amp; BENEFITS</b>		<b>2,204,257</b>	
<b>Employee Salaries</b>		<b>1,728,287</b>	
1101	PROGRAM DIRECTOR	52,969	The Program Director currently oversees the program, hiring, training and supervising staff.
1102	ASST. PROGRAM DIRECTOR	100,828	The Assitant Program Director will supervise staff and assist the Program Director for that location
1103	ADMIN. ASSISTANT	26,437	The administrative assistant will oversee the support staff at both locations and will help with all support staff duties.
1104	BILLER	23,964	The biller will be responsible for billing into Avatar, billing all insurance claims and run reports as necessary for the program.
1105	BOOKKEEPER	24,678	The bookkeeper is responsible for processing all invoices for the program or programs and will send all information to the corporate office. They will handle petty cash, client fees and other bookkeeping needs for the program.
1106	CRIMINAL JUSTICE REHAB SPECIALIST (CM)	107,852	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in providing services to those involved in the criminal justice system and program liaison for Behavioral Health Court and the Federal Wellness Court
1107	DUAL DIAGNOSIS SPECIALIST (CM)	161,777	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in supporting and providing services for those who suffer from a co-occurring diagnosis.
1108	ED & EM REHAB SPECIALIST (CM)	161,777	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in linking and providing services to those interested in engagement in employment and education services.
1109	HOUSING COORDINATOR	53,926	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in identifying, linking and assisting clients in obtaining various housing such as a R&B, supportive housing, etc.
1110	INTAKE SPECIALIST	27,772	Reviews all referrals, contacting referral source and coordinating intake services to enroll in FSP program. The specialist also assists client in applying for additional benefits, such as General Relief, Social Security Benefits, Medi-cal, etc.
1111	LVN	166,629	Assists psychiatrist providing vital intake, coordination of medications, provides medication support and education, provides injections and consults with all staff in ensuring medication education and compliance
1112	MENTAL HEALTH PROFESSIONAL	390,101	Provides mental health assessment, assessing for Medical Necessity, assists client in identifying treatment plan goals according to diagnosis. MHP also provides individual and group therapy as client requests, while also providing program support to assist clients in crisis.
1113	PEER SUPPORT SPECIALIST	70,001	Provides support to clients, utilizing lived mental health experience to relate to clients, while assisting in activities with clients, run peer ran groups, meeting with clients during appointments providing support as needed.



PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
1114	PERSONAL SERVICE COORDINATOR (CM)	199,381	Each FSP client will have a single point of responsibility through an assigned Personal Service Coordinator/case manager. The Personal Service Coordinator (PSC) works as a part of a treatment team in achieving the goals and objectives of the program to ensure quality of care for client participants. With case management being one of the primary methods of delivering services, each client shall be assigned a primary Personal Service Coordinator who will be responsible to see that the client's needs are met, as identified in the Plan of Care and the Individual Service and Support Plan (ISSP). They are able to provide intensive services and supports when needed, and they can give the client and/or family member considerable personal attention. The PSC will provide instruction modeling and support one-on-one in the course of daily events in the natural setting to manage day-to-day life and promote increased efficacy and self-sufficiency. This "hands on" approach will be utilized during the PSCs interaction with client's for 'en vivo' support, such as managing symptoms while preparing a budget, going to the doctor's office, the grocery store, in their home and maintaining their environment. Clients will learn at their own pace and with as much help as is needed by their personal service coordinator. A teaching/coaching approach will be used that empowers the client to gain mastery and take responsibility. Transportation and assistance in accessing other resources will be ensured by the PSC. All PSCs maintain their own case load of clients for whom they are the primary contact. Additionally, some of the PSC positions also include specialty training (housing, employment, education, criminal justice, substance use disorder) and will provide those specialty services to clients who are not on their caseload and can benefit from that expertise.
1115	PSC SUPERVISOR	74,672	Provides supervision to all PSCs/Mental Health Specialists to ensure client care, maintain compliance with Turning Point policies and procedures. Supervisor also assisting in training new staff and reporting to the Assistant Program Director.
1116	REGISTERED NURSE	48,763	Provides oversight over the LVNs/LPTs to ensure client care, maintaining compliance with Turning Point policies and procedures, providing training and ensuring accurate charting in accordance with Medi-cal.
1117	SECRETARY	36,760	Provides direct services to the program by data entry, phone calls, checking in clients, etc.
1118	0	-	
1119	0	-	
1120	0	-	
1121	0	-	
1122	0	-	
1123	0	-	
1124	0	-	
1125	0	-	
1126	0	-	
1127	0	-	
1128	0	-	
1129	0	-	
1130	0	-	
1131	0	-	
<b>Employee Benefits</b>		<b>325,930</b>	
1201	Retirement	28,198	Cost of Agency contribution to employee retirement plans.
1202	Worker's Compensation	30,811	Cost of workers compensation insurance.
1203	Health/ Dental Insurance	266,348	Agency cost for health, dental and vision insurance
1204	API Benefits	573	Employee assistance program
1205	Other (Specify)	-	
1206	Other (Specify)	-	
<b>Payroll Taxes &amp; Expenses:</b>		<b>150,040</b>	
1301	OASDI	-	
1302	FICA/MEDICARE / OASDI	143,742	Employer portion of F.I.C.A. taxes charged to the Agency by the Internal Revenue Service. F.I.C.A. is comprised of "Old-Age, Survivors, and Disability Insurance" (OASDI), plus "Hospital Insurance" (Medicare).
1303	SUI	6,298	Employer portion of S.U.I. taxes charged to the Agency by the various states in which wages are paid.
1304	Other: Accrued Paid Leave Moved to Admin Overhead	-	The monetary value of staff Paid Leave hours as they accrue on a monthly basis
1305	Other (Specify)	-	
1306	Other (Specify)	-	

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>2000: CLIENT SUPPORT</b>		<b>599,850</b>	
2001	Child Care	-	
2002	Client Housing Support	450,650	Cost of rent, housing assistance and deposit paid on behalf of client. (Examples: first/last month deposit, late fees, monthly rent, hotel charges, room & board, board & care, etc.)
2003	Client Transportation & Support	13,850	Cost for client transportation. (Examples: bus tokens/passes, taxi, other public transportation, bicycles, etc.)
2004	Clothing, Food, & Hygiene	21,300	Cost of client hygiene supplies and non-work related clothing. (Examples: clothes, shoes, soap, toothpaste, deodorant, grooming supplies, diapers, etc.)
2005	Education Support	4,600	Cost of course fees and educational materials distributed to clients and prospective clients. Including court ordered educational class.
2006	Employment Support	2,200	Cost of client pre-employment preparation and employment retention. (Examples: job search and interview attire, work boots and tools required for employment, etc.)
2007	Household Items for Clients	-	
2008	Medication Supports	63,700	Cost of medical supplies or treatment/medical expense for a specific client. (Examples: co-pays*, prescription/lab work not covered by insurance, over-the-counter medications*, first aid kit/supplies for client's use at home, etc.) *if allowable per contract
2009	Program Supplies - Medical	7,700	Cost of medical supplies to be used by staff or clients at the program location to meet program objective. Such items are to remain at the program location and not sent home with the client. Such items include, but are not limited to first aid kits, blood pressure monitor, latex gloves, syringes, hazard disposal service, over-the-counter medication*, etc. *if allowable per contract.
2010	Utility Vouchers	13,800	Cost of client utility bills and/or security deposits.
2011	Client Building Maintenance	2,200	Cost of building repair or maintenance paid for on client's behalf. (Examples: handyman work, plumbing, drywall, roofing, etc.)
2012	Client Therapy	1,550	Cost of therapy services not covered by insurance and therapeutic supplies for clients to use outside of the program. (Examples: exercise videos/equipment, relaxation audio/visual recordings, artistic expression supplies, etc.)
2013	Client Activities / Recreation	15,950	Cost for client activities & recreation events. (Examples: cable bill, food/drinks/utensils/decorations needed for a specific client event, incentive rewards, admission fees to events, etc.)
2014	Client Personal Needs	2,350	Cost of supplying clients with necessary personal items not detailed in other accounts. (Examples: birth certificate, DMV fee for ID or license, clients household cleaning products/house supplies/kitchen supplies for their own home, pots/pans/dishes, linens, paper towels and child related expenses such as car seat/stroller/play pin, etc.)
2015	Other (Specify)	-	
2016	Other (Specify)	-	

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>3000: OPERATING EXPENSES</b>		<b>159,550</b>	
3001	Telecommunications	15,300	Cost of electronic communications. (Examples: internet, phone, fax, cell phones, etc.)
3002	Printing/Postage	14,100	Cost of custom copying/printing charges (Examples: letterhead, business forms, business cards, flyers, brochures, signs, etc.) and Postage and delivery, including delivery by the USPS, UPS, FEDEX and other courier services
3003	Office, Household & Program Supplies	33,900	Cost of items normally used in an office setting. (Examples: pens, pencils, paper tablets, paper clips, notepads, staples, non-electric staplers/hole punchers/calculators, and other items normally used in an office setting.) House Supplies, Cost of supplies used by staff during their scheduled work hours. These items are normally used to operate the building at the program location. These items are to remain at program location and not sent home with client. (Examples: pots, pans, pot holders, kitchen towels, curtains, detergent, Clorox for clothes, can opener, dishes, furnace filter, decorations, linens, etc.), Program Supplies, Cost of any items normally used by clients to meet program objectives while receiving services. These items are to remain at the program location and not sent home with the client. Such items include, but are not limited to video tapes, printed handouts, desk reference books, research material, curriculum, puzzles, board games, therapeutic/meditative supplies and other items that are specifically designed and used to accomplish program goals.
3004	Advertising	-	
3005	Staff Development & Training	18,500	Cost of employee training courses and materials.
3006	Staff Mileage	15,950	Cost of employee mileage reimbursement paid in accordance with FPM section 1005.
3007	Subscriptions & Memberships	2,000	Cost of membership dues and subscriptions. (Examples: magazine, newspaper, memberships, etc.)
3008	Vehicle Maintenance / Gas / Insurance	42,850	Cost of vehicle maintenance. Including cost of parts, supplies and labor associated with maintenance and repair of vehicles used by Agency programs. Cost of gas in Vehicles and Insurance
3009	Program Enhancement	-	
3010	Staff Meetings	7,700	Cost of room rental and supplies necessary for staff meetings.
3011	Recruitment	3,900	Cost of advertising and other employee recruitment expenses. (Examples: newspaper ad, urine screening, background check, etc.)
3012	Employee-Employer Relations	5,350	Cost relating to improvement of working conditions, employer/employee relations and employee morale. (Examples: Company picnic items, florist, etc.)
<b>4000: FACILITIES &amp; EQUIPMENT</b>		<b>181,150</b>	
4001	Building Maintenance	8,000	Cost of Agency building repairs and maintenance. (Examples: electrical work, A/C and heating, hood cleaning, plumbing, etc.) This account should not be used if a specific outside labor contractor is doing an identifiable project.
4002	Rent/Lease Building	87,150	Cost of rent/lease payments made for building leases from outside sources.
4003	Rent/Lease Equipment	2,000	Cost of rent/lease payments made for furniture and equipment leases.
4004	Rent/Lease Vehicles	37,950	Rental cost of vehicles and lease of agency vehicles.
4005	Security	3,900	Cost of installation, maintenance and monthly service fees for building alarms and other security measures. (Examples: security/surveillance equipment, service and installation, safes, etc.)
4006	Utilities	39,550	Cost of service for power, gas, water, sewer, garbage, etc.
4007	Equipment Maintenance	2,600	Cost of equipment and furniture repair and maintenance. (Examples: high capacity copier/printer/scanner, replacement parts such as hard drive, laptop battery, monitor/printer/phone cord, drum, power strip, surge protector, video card, etc.)
4008	Liability Insurance	-	
4009	Other (Specify)	-	
4010	Other (Specify)	-	

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>5000: SPECIAL EXPENSES</b>		<b>291,200</b>	
5001	Consultant (Network & Data Management)	-	
5002	HMIS (Health Management Information System)	29,850	Avatar Costs
5003	Contractual/Consulting Services : Consultant	18,300	These accounts are assigned to record various professional services provided by contracted sources working as independent agents. (IT Consultations, EHR Consultation, External Consultation, Clinical Supervisors who are not Staffed under the Personnel & Salaries)
5004	Translation Services	4,300	Paid to an outside vendor for translation / interpreter services
5005	Contractual/Consulting Services : Psychiatrist	238,750	These accounts are assigned to record various professional services provided by contracted Psychiatrist working as independent agents.
5006	Other (Specify)	-	
5007	Other (Specify)	-	
5008	Other (Specify)	-	

<b>6000: ADMINISTRATIVE EXPENSES</b>		<b>768,651</b>	
6001	Administrative Overhead	737,151	Support of our cooperate and regional offices such as processing invoices, payroll, cost reports, etc. Accrued Paid Leave moved/added to Admin Overhead. Accrual Paid Leave cannot be listed in Salaries and Benefits Per DBH
6002	Professional Liability Insurance	-	
6003	Accounting/Bookkeeping	-	
6004	External Audit	3,900	Cost of outside audit fees.
6005	Insurance (Specify):	7,600	
6006	Payroll Services	-	
6007	Depreciation (Provider-Owned Equipment to be Used for Program Purposes)	11,500	This account should be charged for the depreciation expense of the Agency's tangible assets.
6008	Other: Bank Fees	2,600	Cost of bank fees charged to Agency account.
6009	Other: Legal Expense	1,300	Cost of outside legal fees
6010	Other: Licenses	4,600	Cost in obtaining and renewing licenses and permits.
6011	Other (Specify)	-	Cost of membership dues and subscriptions.
6012	Other (Specify)	-	

<b>7000: FIXED ASSETS</b>		<b>6,500</b>	
7001	Computer Equipment & Software	-	
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	-	
7003	Furniture & Fixtures	2,600	Purchase of furniture and fixtures as needed
7004	Leasehold/Tenant/Building Improvements	3,900	Improvements to the building as needed that isn't covered by the landlord
7005	Other Assets over \$500 with Lifespan of 2 Years +	-	
7006	Assets over \$5,000/unit (Specify)	-	
7007	Other (Specify)	-	
7008	Other (Specify)	-	

PROGRAM FUNDING SOURCES		
8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)		
ACCT #	LINE ITEM	PROVIDE DETAILS OF METHODOLOGY(IES) USED IN DETERMINING MEDI-CAL SERVICE RATES AND/OR SERVICE UNITS, IF APPLICABLE AND/OR AS REQUIRED BY THE RFP.
8001	Mental Health Services	We based our rates and units on current program usage
8002	Case Management	We based our rates and units on current program usage
8003	Crisis Services	We based our rates and units on current program usage
8004	Medication Support	We based our rates and units on current program usage
8005	Collateral	We based our rates and units on current program usage
8006	Plan Development	We based our rates and units on current program usage
8007	Assessment	We based our rates and units on current program usage
8008	Rehabilitation	We based our rates and units on current program usage

**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Turning Point of Central Ca, Inc. | Fresno FSP Program Site #2**  
**FY 2023 - 2024 | 07/01/23 - 06/30/24**

**PROGRAM EXPENSES**

1000: SALARIES & BENEFITS					
Employee Salaries					
Acct #	Position	FTE	Admin	Direct	Total
1101	PROGRAM DIRECTOR	0.50	\$ -	\$ 55,617	\$ 55,617
1102	ASST. PROGRAM DIRECTOR	1.00	-	105,869	105,869
1103	ADMIN. ASSISTANT	0.50	-	27,759	27,759
1104	BILLER	0.50	-	25,162	25,162
1105	BOOKKEEPER	0.50	-	25,912	25,912
1106	CRIMINAL JUSTICE REHAB SPECIALIST (CM)	2.00	-	113,245	113,245
1107	DUAL DIAGNOSIS SPECIALIST (CM)	3.00	-	169,866	169,866
1108	ED & EM REHAB SPECIALIST (CM)	3.00	-	169,866	169,866
1109	HOUSING COORDINATOR	1.00	-	56,623	56,623
1110	INTAKE SPECIALIST	0.50	-	29,161	29,161
1111	LVN	3.00	-	174,961	174,961
1112	MENTAL HEALTH PROFESSIONAL	4.00	-	409,606	409,606
1113	PEER SUPPORT SPECIALIST	2.00	-	73,501	73,501
1114	PERSONAL SERVICE COORDINATOR (CM)	4.00	-	209,351	209,351
1115	PSC SUPERVISOR	1.00	-	78,406	78,406
1116	REGISTERED NURSE	0.50	-	51,202	51,202
1117	SECRETARY	1.00	-	38,598	38,598
1118			-	-	-
1119			-	-	-
1120			-	-	-
1121			-	-	-
1122			-	-	-
1123			-	-	-
1124			-	-	-
1125			-	-	-
1126			-	-	-
1127			-	-	-
1128			-	-	-
1129			-	-	-
1130			-	-	-
1131			-	-	-
<b>Personnel Salaries Subtotal</b>		<b>28.00</b>	<b>\$ -</b>	<b>\$ 1,814,705</b>	<b>\$ 1,814,705</b>

<b>Employee Benefits</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1201	Retirement	\$ -	\$ -	\$ -
1202	Worker's Compensation	-	61,960	61,960
1203	Health/ Dental Insurance	-	279,666	279,666
1204	API Benefits	-	602	602
1205	Other (Specify)	-	-	-
1206	Other (Specify)	-	-	-
<b>Employee Benefits Subtotal:</b>		<b>\$ -</b>	<b>\$ 342,228</b>	<b>\$ 342,228</b>
<b>Payroll Taxes &amp; Expenses:</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1301	OASDI	\$ -	\$ 27,634	\$ 27,634
1302	FICA/MEDICARE / OASDI	-	123,296	123,296
1303	SUI	-	6,613	6,613
1304	Other: Accrued Paid Leave Moved to Admin Overhead	-	-	-
1305	Other (Specify)	-	-	-
1306	Other (Specify)	-	-	-
<b>Payroll Taxes &amp; Expenses Subtotal:</b>		<b>\$ -</b>	<b>\$ 157,543</b>	<b>\$ 157,543</b>
<b>EMPLOYEE SALARIES &amp; BENEFITS TOTAL:</b>		<b>\$ -</b>	<b>\$ 2,314,476</b>	<b>\$ 2,314,476</b>

<b>2000: CLIENT SUPPORT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
2001	Child Care	\$ -
2002	Client Housing Support	464,170
2003	Client Transportation & Support	14,266
2004	Clothing, Food, & Hygiene	21,939
2005	Education Support	4,738
2006	Employment Support	2,266
2007	Household Items for Clients	-
2008	Medication Supports	65,611
2009	Program Supplies - Medical	7,931
2010	Utility Vouchers	14,214
2011	Client Building Maintenance	2,266
2012	Client Therapy	1,597
2013	Client Activities / Recreation	16,429
2014	Client Personal Needs	2,421
2015	Other (Specify)	-
2016	Other (Specify)	-
<b>DIRECT CLIENT CARE TOTAL</b>		<b>\$ 617,848</b>

<b>3000: OPERATING EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
3001	Telecommunications	\$ 15,759
3002	Printing/Postage	14,523
3003	Office, Household & Program Supplies	34,977
3004	Advertising	-
3005	Staff Development & Training	19,055
3006	Staff Mileage	16,429
3007	Subscriptions & Memberships	2,000
3008	Vehicle Maintenance / Gas / Insurance	44,136
3009	Program Enhancement	-
3010	Staff Meetings	7,931
3011	Recruitment	4,017
3012	Employee-Employer Relations	5,511
<b>OPERATING EXPENSES TOTAL:</b>		<b>\$ 164,338</b>

<b>4000: FACILITIES &amp; EQUIPMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
4001	Building Maintenance	\$ 8,240
4002	Rent/Lease Building	89,825
4003	Rent/Lease Equipment	2,000
4004	Rent/Lease Vehicles	39,089
4005	Security	4,017
4006	Utilities	40,737
4007	Equipment Maintenance	2,678
4008	Liability Insurance	7,828
4009	Other (Specify)	-
4010	Other (Specify)	-
<b>FACILITIES/EQUIPMENT TOTAL:</b>		<b>\$ 194,414</b>

<b>5000: SPECIAL EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
5001	Consultant (Network & Data Management)	\$ -
5002	HMIS (Health Management Information System)	30,806
5003	Contractual/Consulting Services : Consultant	18,849
5004	Translation Services	4,429
5005	Contractual/Consulting Services : Psychiatrist	245,913
5006	Other (Specify)	-
5007	Other (Specify)	-
5008	Other (Specify)	-
<b>SPECIAL EXPENSES TOTAL:</b>		<b>\$ 299,997</b>

<b>6000: ADMINISTRATIVE EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
6001	Administrative Overhead	\$ 770,200
6002	Professional Liability Insurance	-
6003	Accounting/Bookkeeping	-
6004	External Audit	4,017
6005	Insurance (Specify):	-
6006	Payroll Services	-
6007	Depreciation <i>(Provider-Owned Equipment to be Used for Program Purposes)</i>	11,845
6008	Other: Bank Fees	2,678
6009	Other: Legal Expense	1,339
6010	Other: Licenses	4,678
6011	Other (Specify)	-
6012	Other (Specify)	-
<b>ADMINISTRATIVE EXPENSES TOTAL</b>		<b>\$ 794,757</b>

<b>7000: FIXED ASSETS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
7001	Computer Equipment & Software	\$ -
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	-
7003	Furniture & Fixtures	2,678
7004	Leasehold/Tenant/Building Improvements	4,017
7005	Other Assets over \$500 with Lifespan of 2 Years +	-
7006	Assets over \$5,000/unit (Specify)	-
7007	Other (Specify)	-
7008	Other (Specify)	-
<b>FIXED ASSETS EXPENSES TOTAL</b>		<b>\$ 6,695</b>

<b>TOTAL PROGRAM EXPENSES</b>		<b>\$ 4,392,525</b>
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**PROGRAM FUNDING SOURCES**

<b>8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)</b>				
<b>Acct #</b>	<b>Line Item Description</b>	<b>Service Units</b>	<b>Rate</b>	<b>Amount</b>
8001	Mental Health Services	88,360	2.91	\$ 257,128
8002	Case Management	37,785	1.99	75,192
8003	Crisis Services	1,697	3.20	5,430
8004	Medication Support	154,662	5.27	815,069
8005	Collateral	5,923	2.91	17,236
8006	Plan Development	9,164	2.91	26,667
8007	Assessment	17,071	2.91	49,677
8008	Rehabilitation	686,143	2.91	1,996,676
<b>Estimated Specialty Mental Health Services Billing Totals:</b>		<b>1,000,805</b>		<b>\$ 3,243,075</b>
Estimated % of Clients who are Medi-Cal Beneficiaries				100%
Estimated Total Cost of Specialty Mental Health Services Provided to Medi-Cal Beneficiaries				3,243,075
Federal Financial Participation (FFP) %			79%	2,562,029
<b>MEDI-CAL FFP TOTAL</b>				<b>\$ 2,562,029</b>

<b>8100 - SUBSTANCE USE DISORDER FUNDS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8101	Drug Medi-Cal	\$ -
8102	SABG	\$ -
<b>SUBSTANCE USE DISORDER FUNDS TOTAL</b>		<b>\$ -</b>

<b>8200 - REALIGNMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8201	Realignment	\$ (0)
<b>REALIGNMENT TOTAL</b>		<b>\$ (0)</b>

<b>8300 - MENTAL HEALTH SERVICE ACT (MHSA)</b>			
<b>Acct #</b>	<b>MHSA Component</b>	<b>MHSA Program Name</b>	<b>Amount</b>
8301	CSS - Community Services & Supports		\$ 1,791,496
8302	PEI - Prevention & Early Intervention		-
8303	INN - Innovations		-
8304	WET - Workforce Education & Training		-
8305	CFTN - Capital Facilities & Technology		-
<b>MHSA TOTAL</b>			<b>\$ 1,791,496</b>

<b>8400 - OTHER REVENUE</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8401	Client Fees	\$ 39,000
8402	Client Insurance	-
8403	Grants (Specify)	-
8404	Other (Specify)	-
8405	Other (Specify)	-
<b>OTHER REVENUE TOTAL</b>		<b>\$ 39,000</b>

**TOTAL PROGRAM FUNDING SOURCES: \$ 4,392,525**

**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Turning Point of Central Ca, Inc. | Fresno FSP Program Site #2**  
**FY 2023 - 2024 | 07/01/23 - 06/30/24 Budget Narrative**

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>1000: SALARIES &amp; BENEFITS</b>		<b>2,314,476</b>	
<b>Employee Salaries</b>		<b>1,814,705</b>	
1101	PROGRAM DIRECTOR	55,617	The Program Director currently oversees the program, hiring, training and supervising staff.
1102	ASST. PROGRAM DIRECTOR	105,869	The Assitant Program Director will supervise staff and assist the Program Director for that location
1103	ADMIN. ASSISTANT	27,759	The administrative assistant will oversee the support staff at both locations and will help with all support staff duties.
1104	BILLER	25,162	The biller will be responsible for billing into Avatar, billing all insurance claims and run reports as necessary for the program.
1105	BOOKKEEPER	25,912	The bookkeeper is responsible for processing all invoices for the program or programs and will send all information to the corporate office. They will handle petty cash, client fees and other bookkeeping needs for the program.
1106	CRIMINAL JUSTICE REHAB SPECIALIST (CM)	113,245	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in providing services to those involved in the criminal justice system and program liaison for Behavioral Health Court and the Federal Wellness Court
1107	DUAL DIAGNOSIS SPECIALIST (CM)	169,866	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in supporting and providing services for those who suffer from a co-occurring diagnosis.
1108	ED & EM REHAB SPECIALIST (CM)	169,866	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in linking and providing services to those interested in engagement in employment and education services.
1109	HOUSING COORDINATOR	56,623	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in identifying, linking and assisting clients in obtaining various housing such as a R&B, supportive housing, etc.
1110	INTAKE SPECIALIST	29,161	Reviews all referrals, contacting referral source and coordinating intake services to enroll in FSP program. The specialist also assists client in applying for additional benefits, such as General Relief, Social Security Benefits, Medi-cal, etc.
1111	LVN	174,961	Assists psychiatrist providing vital intake, coordination of medications, provides medication support and education, provides injections and consults with all staff in ensuring medication education and compliance
1112	MENTAL HEALTH PROFESSIONAL	409,606	Provides mental health assessment, assessing for Medical Necessity, assists client in identifying treatment plan goals according to diagnosis. MHP also provides individual and group therapy as client requests, while also providing program support to assist clients in crisis.
1113	PEER SUPPORT SPECIALIST	73,501	Provides support to clients, utilizing lived mental health experience to relate to clients, while assisting in activities with clients, run peer ran groups, meeting with clients during appointments providing support as needed.

PROGRAM EXPENSE				
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE	
1114	PERSONAL SERVICE COORDINATOR (CM)	209,351	Each FSP client will have a single point of responsibility through an assigned Personal Service Coordinator/case manager. The Personal Service Coordinator (PSC) works as a part of a treatment team in achieving the goals and objectives of the program to ensure quality of care for client participants. With case management being one of the primary methods of delivering services, each client shall be assigned a primary Personal Service Coordinator who will be responsible to see that the client's needs are met, as identified in the Plan of Care and the Individual Service and Support Plan (ISSP). They are able to provide intensive services and supports when needed, and they can give the client and/or family member considerable personal attention. The PSC will provide instruction modeling and support one-on-one in the course of daily events in the natural setting to manage day-to-day life and promote increased efficacy and self-sufficiency. This "hands on" approach will be utilized during the PSCs interaction with client's for 'en vivo' support, such as managing symptoms while preparing a budget, going to the doctor's office, the grocery store, in their home and maintaining their environment. Clients will learn at their own pace and with as much help as is needed by their personal service coordinator. A teaching/coaching approach will be used that empowers the client to gain mastery and take responsibility. Transportation and assistance in accessing other resources will be ensured by the PSC. All PSCs maintain their own case load of clients for whom they are the primary contact. Additionally, some of the PSC positions also include specialty training (housing, employment, education, criminal justice, substance use disorder) and will provide those specialty services to clients who are not on their caseload and can benefit from that expertise.	
1115	PSC SUPERVISOR	78,406	Provides supervision to all PSCs/Mental Health Specialists to ensure client care, maintain compliance with Turning Point policies and procedures. Supervisor also assisting in training new staff and reporting to the Assistant Program Director.	
1116	REGISTERED NURSE	51,202	Provides oversight over the LVNs/LPTs to ensure client care, maintaining compliance with Turning Point policies and procedures, providing training and ensuring accurate charting in accordance with Medi-cal.	
1117	SECRETARY	38,598	Provides direct services to the program by data entry, phone calls, checking in clients, etc.	
1118	0	-		
1119	0	-		
1120	0	-		
1121	0	-		
1122	0	-		
1123	0	-		
1124	0	-		
1125	0	-		
1126	0	-		
1127	0	-		
1128	0	-		
1129	0	-		
1130	0	-		
1131	0	-		
<b>Employee Benefits</b>		<b>342,228</b>		
1201	Retirement	-	Cost of Agency contribution to employee retirement plans.	
1202	Worker's Compensation	61,960	Cost of workers compensation insurance.	
1203	Health/ Dental Insurance	279,666	Agency cost for health, dental and vision insurance	
1204	API Benefits	602	Employee assistance program	
1205	Other (Specify)	-		
1206	Other (Specify)	-		
<b>Payroll Taxes &amp; Expenses:</b>		<b>157,543</b>		
1301	OASDI	27,634		
1302	FICA/MEDICARE / OASDI	123,296	Employer portion of F.I.C.A. taxes charged to the Agency by the Internal Revenue Service. F.I.C.A. is comprised of "Old-Age, Survivors, and Disability Insurance" (OASDI), plus "Hospital Insurance" (Medicare).	
1303	SUI	6,613	Employer portion of S.U.I. taxes charged to the Agency by the various states in which wages are paid.	
1304	Other: Accrued Paid Leave Moved to Admin Overhead	-	The monetary value of staff Paid Leave hours as they accrue on a monthly basis	
1305	Other (Specify)	-		
1306	Other (Specify)	-		

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>2000: CLIENT SUPPORT</b>		<b>617,848</b>	
2001	Child Care	-	
2002	Client Housing Support	464,170	Cost of rent, housing assistance and deposit paid on behalf of client. (Examples: first/last month deposit, late fees, monthly rent, hotel charges, room & board, board & care, etc.)
2003	Client Transportation & Support	14,266	Cost for client transportation. (Examples: bus tokens/passes, taxi, other public transportation, bicycles, etc.)
2004	Clothing, Food, & Hygiene	21,939	Cost of client hygiene supplies and non-work related clothing. (Examples: clothes, shoes, soap, toothpaste, deodorant, grooming supplies, diapers, etc.)
2005	Education Support	4,738	Cost of course fees and educational materials distributed to clients and prospective clients. Including court ordered educational class.
2006	Employment Support	2,266	Cost of client pre-employment preparation and employment retention. (Examples: job search and interview attire, work boots and tools required for employment, etc.)
2007	Household Items for Clients	-	
2008	Medication Supports	65,611	Cost of medical supplies or treatment/medical expense for a specific client. (Examples: co-pays*, prescription/lab work not covered by insurance, over-the-counter medications*, first aid kit/supplies for client's use at home, etc.) *if allowable per contract
2009	Program Supplies - Medical	7,931	Cost of medical supplies to be used by staff or clients at the program location to meet program objective. Such items are to remain at the program location and not sent home with the client. Such items include, but are not limited to first aid kits, blood pressure monitor, latex gloves, syringes, hazard disposal service, over-the-counter medication*, etc. *if allowable per contract.
2010	Utility Vouchers	14,214	Cost of client utility bills and/or security deposits.
2011	Client Building Maintenance	2,266	Cost of building repair or maintenance paid for on client's behalf. (Examples: handyman work, plumbing, drywall, roofing, etc.)
2012	Client Therapy	1,597	Cost of therapy services not covered by insurance and therapeutic supplies for clients to use outside of the program. (Examples: exercise videos/equipment, relaxation audio/visual recordings, artistic expression supplies, etc.)
2013	Client Activities / Recreation	16,429	Cost for client activities & recreation events. (Examples: cable bill, food/drinks/utensils/decorations needed for a specific client event, incentive rewards, admission fees to events, etc.)
2014	Client Personal Needs	2,421	Cost of supplying clients with necessary personal items not detailed in other accounts. (Examples: birth certificate, DMV fee for ID or license, clients household cleaning products/house supplies/kitchen supplies for their own home, pots/pans/dishes, linens, paper towels and child related expenses such as car seat/stroller/play pin, etc.)
2015	Other (Specify)	-	
2016	Other (Specify)	-	

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>3000: OPERATING EXPENSES</b>		<b>164,338</b>	
3001	Telecommunications	15,759	Cost of electronic communications. (Examples: internet, phone, fax, cell phones, etc.)
3002	Printing/Postage	14,523	Cost of custom copying/printing charges (Examples: letterhead, business forms, business cards, flyers, brochures, signs, etc.) and Postage and elivery, including delivery by the USPS, UPS, FEDEX and other courier services
3003	Office, Household & Program Supplies	34,977	Cost of items normally used in an office setting. (Examples: pens, pencils, paper tablets, paper clips, notepads, staples, non-electric staplers/hole punchers/calculators, and other items normally used in an office setting.) House Supplies, Cost of supplies used by staff during their scheduled work hours. These items are normally used to operate the building at the program location. These items are to remain at program location and not sent home with client. (Examples: pots, pans, pot holders, kitchen towels, curtains, detergent, Clorox for clothes, can opener, dishes, furnace filter, decorations, linens, etc.), Program Supplies, Cost of any items normally used by clients to meet program objectives while receiving services. These items are to remain at the program location and not sent home with the client. Such items include, but are not limited to video tapes, printed handouts, desk reference books, research material, curriculum, puzzles, board games, therapeutic/meditative supplies and other items that are specifically designed and used to accomplish program goals.
3004	Advertising	-	
3005	Staff Development & Training	19,055	Cost of employee training courses and materials.
3006	Staff Mileage	16,429	Cost of employee mileage reimbursement paid in accordance with FPM section 1005.
3007	Subscriptions & Memberships	2,000	Cost of membership dues and subscriptions. (Examples: magazine, newspaper, memberships, etc.)
3008	Vehicle Maintenance / Gas / Insurance	44,136	Cost of vehicle maintenance. Including cost of parts, supplies and labor associated with maintenance and repair of vehicles used by Agency programs. Cost of gas in Vehicles and Insurance
3009	Program Enhancement	-	
3010	Staff Meetings	7,931	Cost of room rental and supplies necessary for staff meetings.
3011	Recruitment	4,017	Cost of advertising and other employee recruitment expenses. (Examples: newspaper ad, urine screening, background check, etc.)
3012	Employee-Employer Relations	5,511	Cost relating to improvement of working conditions, employer/employee relations and employee morale. (Examples: Company picnic items, florist, etc.)
<b>4000: FACILITIES &amp; EQUIPMENT</b>		<b>194,414</b>	
4001	Building Maintenance	8,240	Cost of Agency building repairs and maintenance. (Examples: electrical work, A/C and heating, hood cleaning, plumbing, etc.) This account should not be used if a specific outside labor contractor is doing an identifiable project.
4002	Rent/Lease Building	89,825	Cost of rent/lease payments made for building leases from outside sources.
4003	Rent/Lease Equipment	2,000	Cost of rent/lease payments made for furniture and equipment leases.
4004	Rent/Lease Vehicles	39,089	Rental cost of vehicles and lease of agency vehicles.
4005	Security	4,017	Cost of installation, maintenance and monthly service fees for building alarms and other security measures. (Examples: security/surveillance equipment, service and installation, safes, etc.)
4006	Utilities	40,737	Cost of service for power, gas, water, sewer, garbage, etc.
4007	Equipment Maintenance	2,678	Cost of equipment and furniture repair and maintenance. (Examples: high capacity copier/printer/scanner, replacement parts such as hard drive, laptop battery, monitor/printer/phone cord, drum, power strip, surge protector, video card, etc.)
4008	Liability Insurance	7,828	
4009	Other (Specify)	-	
4010	Other (Specify)	-	

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>5000: SPECIAL EXPENSES</b>		<b>299,997</b>	
5001	Consultant (Network & Data Management)	-	
5002	HMIS (Health Management Information System)	30,806	Avatar Costs
5003	Contractual/Consulting Services : Consultant	18,849	These accounts are assigned to record various professional services provided by contracted sources working as independent agents. (IT Consultations, EHR Consultation, External Consultation, Clinical Supervisors who are not Staffed under the Personnel & Salaries)
5004	Translation Services	4,429	Paid to an outside vendor for translation / interpreter services
5005	Contractual/Consulting Services : Psychiatrist	245,913	These accounts are assigned to record various professional services provided by contracted Psychiatrist working as independent agents.
5006	Other (Specify)	-	
5007	Other (Specify)	-	
5008	Other (Specify)	-	

<b>6000: ADMINISTRATIVE EXPENSES</b>		<b>794,757</b>	
6001	Administrative Overhead	770,200	Support of our cooperate and regional offices such as processing invoices, payroll, cost reports, etc. Accrued Paid Leave moved/added to Admin Overhead. Accrual Paid Leave cannot be listed in Salaries and Benefits Per DBH
6002	Professional Liability Insurance	-	
6003	Accounting/Bookkeeping	-	
6004	External Audit	4,017	Cost of outside audit fees.
6005	Insurance (Specify):	-	
6006	Payroll Services	-	
6007	Depreciation (Provider-Owned Equipment to be Used for Program Purposes)	11,845	This account should be charged for the depreciation expense of the Agency's tangible assets.
6008	Other: Bank Fees	2,678	Cost of bank fees charged to Agency account.
6009	Other: Legal Expense	1,339	Cost of outside legal fees
6010	Other: Licenses	4,678	Cost in obtaining and renewing licenses and permits.
6011	Other (Specify)	-	Cost of membership dues and subscriptions.
6012	Other (Specify)	-	

<b>7000: FIXED ASSETS</b>		<b>6,695</b>	
7001	Computer Equipment & Software	-	
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	-	
7003	Furniture & Fixtures	2,678	Purchase of furniture and fixtures as needed
7004	Leasehold/Tenant/Building Improvements	4,017	Improvements to the building as needed that isn't covered by the landlord
7005	Other Assets over \$500 with Lifespan of 2 Years +	-	
7006	Assets over \$5,000/unit (Specify)	-	
7007	Other (Specify)	-	
7008	Other (Specify)	-	

PROGRAM FUNDING SOURCES		
8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)		
ACCT #	LINE ITEM	PROVIDE DETAILS OF METHODOLOGY(IES) USED IN DETERMINING MEDI-CAL SERVICE RATES AND/OR SERVICE UNITS, IF APPLICABLE AND/OR AS REQUIRED BY THE RFP.
8001	Mental Health Services	We based our rates and units on current program usage
8002	Case Management	We based our rates and units on current program usage
8003	Crisis Services	We based our rates and units on current program usage
8004	Medication Support	We based our rates and units on current program usage
8005	Collateral	We based our rates and units on current program usage
8006	Plan Development	We based our rates and units on current program usage
8007	Assessment	We based our rates and units on current program usage
8008	Rehabilitation	We based our rates and units on current program usage

**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Turning Point of Central Ca, Inc. | Fresno FSP Program Site #2**  
**FY 2024 - 2025 | 07/01/24 - 06/30/25**

**PROGRAM EXPENSES**

1000: SALARIES & BENEFITS					
Employee Salaries					
Acct #	Position	FTE	Admin	Direct	Total
1101	PROGRAM DIRECTOR	0.50	\$ -	\$ 58,398	\$ 58,398
1102	ASST. PROGRAM DIRECTOR	1.00	-	111,163	111,163
1103	ADMIN. ASSISTANT	0.50	-	29,147	29,147
1104	BILLER	0.50	-	26,421	26,421
1105	BOOKKEEPER	0.50	-	27,208	27,208
1106	CRIMINAL JUSTICE REHAB SPECIALIST (CM)	2.00	-	118,907	118,907
1107	DUAL DIAGNOSIS SPECIALIST (CM)	3.00	-	178,360	178,360
1108	ED & EM REHAB SPECIALIST (CM)	3.00	-	178,360	178,360
1109	HOUSING COORDINATOR	1.00	-	59,454	59,454
1110	INTAKE SPECIALIST	0.50	-	30,619	30,619
1111	LVN	3.00	-	183,709	183,709
1112	MENTAL HEALTH PROFESSIONAL	4.00	-	430,087	430,087
1113	PEER SUPPORT SPECIALIST	2.00	-	77,177	77,177
1114	PERSONAL SERVICE COORDINATOR (CM)	4.00	-	219,819	219,819
1115	PSC SUPERVISOR	1.00	-	82,326	82,326
1116	REGISTERED NURSE	0.50	-	53,762	53,762
1117	SECRETARY	1.00	-	40,528	40,528
1118			-	-	-
1119			-	-	-
1120			-	-	-
1121			-	-	-
1122			-	-	-
1123			-	-	-
1124			-	-	-
1125			-	-	-
1126			-	-	-
1127			-	-	-
1128			-	-	-
1129			-	-	-
1130			-	-	-
1131			-	-	-
<b>Personnel Salaries Subtotal</b>		<b>28.00</b>	<b>\$ -</b>	<b>\$ 1,905,445</b>	<b>\$ 1,905,445</b>

<b>Employee Benefits</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1201	Retirement	\$ -	\$ -	\$ -
1202	Worker's Compensation	-	65,058	65,058
1203	Health/ Dental Insurance	-	293,649	293,649
1204	API Benefits	-	632	632
1205	Other (Specify)	-	-	-
1206	Other (Specify)	-	-	-
<b>Employee Benefits Subtotal:</b>		<b>\$ -</b>	<b>\$ 359,339</b>	<b>\$ 359,339</b>
<b>Payroll Taxes &amp; Expenses:</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1301	OASDI	\$ -	\$ 29,016	\$ 29,016
1302	FICA/MEDICARE / OASDI	-	129,461	129,461
1303	SUI	-	6,944	6,944
1304	Other: Accrued Paid Leave Moved to Admin Overhead	-	-	-
1305	Other (Specify)	-	-	-
1306	Other (Specify)	-	-	-
<b>Payroll Taxes &amp; Expenses Subtotal:</b>		<b>\$ -</b>	<b>\$ 165,421</b>	<b>\$ 165,421</b>
<b>EMPLOYEE SALARIES &amp; BENEFITS TOTAL:</b>		<b>\$ -</b>	<b>\$ 2,430,205</b>	<b>\$ 2,430,205</b>

<b>2000: CLIENT SUPPORT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
2001	Child Care	\$ -
2002	Client Housing Support	478,096
2003	Client Transportation & Support	14,694
2004	Clothing, Food, & Hygiene	22,598
2005	Education Support	4,881
2006	Employment Support	2,334
2007	Household Items for Clients	-
2008	Medication Supports	67,580
2009	Program Supplies - Medical	8,169
2010	Utility Vouchers	14,641
2011	Client Building Maintenance	2,334
2012	Client Therapy	1,645
2013	Client Activities / Recreation	16,922
2014	Client Personal Needs	2,494
2015	Other (Specify)	-
2016	Other (Specify)	-
<b>DIRECT CLIENT CARE TOTAL</b>		<b>\$ 636,388</b>



<b>3000: OPERATING EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
3001	Telecommunications	\$ 16,232
3002	Printing/Postage	14,960
3003	Office, Household & Program Supplies	36,089
3004	Advertising	-
3005	Staff Development & Training	19,627
3006	Staff Mileage	16,922
3007	Subscriptions & Memberships	2,000
3008	Vehicle Maintenance / Gas / Insurance	45,463
3009	Program Enhancement	-
3010	Staff Meetings	8,169
3011	Recruitment	4,138
3012	Employee-Employer Relations	5,676
<b>OPERATING EXPENSES TOTAL:</b>		<b>\$ 169,276</b>

<b>4000: FACILITIES &amp; EQUIPMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
4001	Building Maintenance	\$ 8,488
4002	Rent/Lease Building	92,580
4003	Rent/Lease Equipment	2,000
4004	Rent/Lease Vehicles	40,262
4005	Security	4,138
4006	Utilities	41,959
4007	Equipment Maintenance	2,759
4008	Liability Insurance	8,063
4009	Other (Specify)	-
4010	Other (Specify)	-
<b>FACILITIES/EQUIPMENT TOTAL:</b>		<b>\$ 200,249</b>

<b>5000: SPECIAL EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
5001	Consultant (Network & Data Management)	\$ -
5002	HMIS (Health Management Information System)	31,790
5003	Contractual/Consulting Services : Consultant	19,416
5004	Translation Services	4,562
5005	Contractual/Consulting Services : Psychiatrist	253,290
5006	Other (Specify)	-
5007	Other (Specify)	-
5008	Other (Specify)	-
<b>SPECIAL EXPENSES TOTAL:</b>		<b>\$ 309,058</b>

<b>6000: ADMINISTRATIVE EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
6001	Administrative Overhead	\$ 804,791
6002	Professional Liability Insurance	-
6003	Accounting/Bookkeeping	-
6004	External Audit	4,138
6005	Insurance (Specify):	-
6006	Payroll Services	-
6007	Depreciation <i>(Provider-Owned Equipment to be Used for Program Purposes)</i>	12,201
6008	Other: Bank Fees	2,760
6009	Other: Legal Expense	1,380
6010	Other: Licenses	4,759
6011	Other (Specify)	-
6012	Other (Specify)	-
<b>ADMINISTRATIVE EXPENSES TOTAL</b>		<b>\$ 830,029</b>

<b>7000: FIXED ASSETS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
7001	Computer Equipment & Software	\$ 53,200
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	24,929
7003	Furniture & Fixtures	2,759
7004	Leasehold/Tenant/Building Improvements	4,138
7005	Other Assets over \$500 with Lifespan of 2 Years +	-
7006	Assets over \$5,000/unit (Specify)	-
7007	Other (Specify)	-
7008	Other (Specify)	-
<b>FIXED ASSETS EXPENSES TOTAL</b>		<b>\$ 85,026</b>

<b>TOTAL PROGRAM EXPENSES</b>		<b>\$ 4,660,231</b>
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**PROGRAM FUNDING SOURCES**

<b>8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)</b>				
<b>Acct #</b>	<b>Line Item Description</b>	<b>Service Units</b>	<b>Rate</b>	<b>Amount</b>
8001	Mental Health Services	95,090	3.02	\$ 287,172
8002	Case Management	40,664	2.05	83,361
8003	Crisis Services	1,827	3.22	5,883
8004	Medication Support	166,443	5.30	882,148
8005	Collateral	6,374	3.02	19,249
8006	Plan Development	9,862	3.02	29,783
8007	Assessment	18,371	3.02	55,480
8008	Rehabilitation	738,407	3.02	2,229,989
<b>Estimated Specialty Mental Health Services Billing Totals:</b>		<b>1,077,038</b>		<b>\$ 3,593,066</b>
Estimated % of Clients who are Medi-Cal Beneficiaries				100%
Estimated Total Cost of Specialty Mental Health Services Provided to Medi-Cal Beneficiaries				3,593,066
Federal Financial Participation (FFP) %			79%	2,838,522
<b>MEDI-CAL FFP TOTAL</b>				<b>\$ 2,838,522</b>

<b>8100 - SUBSTANCE USE DISORDER FUNDS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8101	Drug Medi-Cal	\$ -
8102	SABG	\$ -
<b>SUBSTANCE USE DISORDER FUNDS TOTAL</b>		<b>\$ -</b>

<b>8200 - REALIGNMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8201	Realignment	\$ (0)
<b>REALIGNMENT TOTAL</b>		<b>\$ (0)</b>

<b>8300 - MENTAL HEALTH SERVICE ACT (MHSA)</b>			
<b>Acct #</b>	<b>MHSA Component</b>	<b>MHSA Program Name</b>	<b>Amount</b>
8301	CSS - Community Services & Supports		\$ 1,782,709
8302	PEI - Prevention & Early Intervention		-
8303	INN - Innovations		-
8304	WET - Workforce Education & Training		-
8305	CFTN - Capital Facilities & Technology		-
<b>MHSA TOTAL</b>			<b>\$ 1,782,709</b>

<b>8400 - OTHER REVENUE</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8401	Client Fees	\$ 39,000
8402	Client Insurance	-
8403	Grants (Specify)	-
8404	Other (Specify)	-
8405	Other (Specify)	-
<b>OTHER REVENUE TOTAL</b>		<b>\$ 39,000</b>

**TOTAL PROGRAM FUNDING SOURCES: \$ 4,660,231**

**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Turning Point of Central Ca, Inc. | Fresno FSP Program Site #2**  
**FY 2024 - 2025 | 07/01/24 - 06/30/25 Budget Narrative**

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>1000: SALARIES &amp; BENEFITS</b>		<b>2,430,205</b>	
<b>Employee Salaries</b>		<b>1,905,445</b>	
1101	PROGRAM DIRECTOR	58,398	The Program Director currently oversees the program, hiring, training and supervising staff.
1102	ASST. PROGRAM DIRECTOR	111,163	The Assitant Program Director will supervise staff and assist the Program Director for that location
1103	ADMIN. ASSISTANT	29,147	The administrative assistant will oversee the support staff at both locations and will help with all support staff duties.
1104	BILLER	26,421	The biller will be responsible for billing into Avatar, billing all insurance claims and run reports as necessary for the program.
1105	BOOKKEEPER	27,208	The bookkeeper is responsible for processing all invoices for the program or programs and will send all information to the corporate office. They will handle petty cash, client fees and other bookkeeping needs for the program.
1106	CRIMINAL JUSTICE REHAB SPECIALIST (CM)	118,907	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in providing services to those involved in the criminal justice system and program liaison for Behavioral Health Court and the Federal Wellness Court
1107	DUAL DIAGNOSIS SPECIALIST (CM)	178,360	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in supporting and providing services for those who suffer from a co-occurring diagnosis.
1108	ED & EM REHAB SPECIALIST (CM)	178,360	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in linking and providing services to those interested in engagement in employment and education services.
1109	HOUSING COORDINATOR	59,454	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in identifying, linking and assisting clients in obtaining various housing such as a R&B, supportive housing, etc.
1110	INTAKE SPECIALIST	30,619	Reviews all referrals, contacting referral source and coordinating intake services to enrol in FSP program. The specialist also assists client in applying for additional benefits, such as General Relief, Social Security Benefits, Medi-cal, etc.
1111	LVN	183,709	Assists psychiatrist providing vital intake, coordination of medications, provides medication support and education, provides injections and consults with all staff in ensuring medication education and compliance
1112	MENTAL HEALTH PROFESSIONAL	430,087	Provides mental health assessment, assessing for Medical Necessity, assists client in identifying treatment plan goals according to diagnosis. MHP also provides individual and group therapy as client requests, while also providing program support to assist clients in crisis.
1113	PEER SUPPORT SPECIALIST	77,177	Provides support to clients, utilizing lived mental health experience to relate to clients, while assisting in activities with clients, run peer ran groups, meeting with clients during appointments providing support as needed.

PROGRAM EXPENSE				
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE	
1114	PERSONAL SERVICE COORDINATOR (CM)	219,819	Each FSP client will have a single point of responsibility through an assigned Personal Service Coordinator/case manager. The Personal Service Coordinator (PSC) works as a part of a treatment team in achieving the goals and objectives of the program to ensure quality of care for client participants. With case management being one of the primary methods of delivering services, each client shall be assigned a primary Personal Service Coordinator who will be responsible to see that the client's needs are met, as identified in the Plan of Care and the Individual Service and Support Plan (ISSP). They are able to provide intensive services and supports when needed, and they can give the client and/or family member considerable personal attention. The PSC will provide instruction modeling and support one-on-one in the course of daily events in the natural setting to manage day-to-day life and promote increased efficacy and self-sufficiency. This "hands on" approach will be utilized during the PSCs interaction with client's for 'en vivo' support, such as managing symptoms while preparing a budget, going to the doctor's office, the grocery store, in their home and maintaining their environment. Clients will learn at their own pace and with as much help as is needed by their personal service coordinator. A teaching/coaching approach will be used that empowers the client to gain mastery and take responsibility. Transportation and assistance in accessing other resources will be ensured by the PSC. All PSCs maintain their own case load of clients for whom they are the primary contact. Additionally, some of the PSC positions also include specialty training (housing, employment, education, criminal justice, substance use disorder) and will provide those specialty services to clients who are not on their caseload and can benefit from that expertise.	
1115	PSC SUPERVISOR	82,326	Provides supervision to all PSCs/Mental Health Specialists to ensure client care, maintain compliance with Turning Point policies and procedures. Supervisor also assisting in training new staff and reporting to the Assistant Program Director.	
1116	REGISTERED NURSE	53,762	Provides oversight over the LVNs/LPTs to ensure client care, maintaining compliance with Turning Point policies and procedures, providing training and ensuring accurate charting in accordance with Medi-cal.	
1117	SECRETARY	40,528	Provides direct services to the program by data entry, phone calls, checking in clients, etc.	
1118	0	-		
1119	0	-		
1120	0	-		
1121	0	-		
1122	0	-		
1123	0	-		
1124	0	-		
1125	0	-		
1126	0	-		
1127	0	-		
1128	0	-		
1129	0	-		
1130	0	-		
1131	0	-		
<b>Employee Benefits</b>		<b>359,339</b>		
1201	Retirement	-	Cost of Agency contribution to employee retirement plans.	
1202	Worker's Compensation	65,058	Cost of workers compensation insurance.	
1203	Health/ Dental Insurance	293,649	Agency cost for health, dental and vision insurance	
1204	API Benefits	632	Employee assistance program	
1205	Other (Specify)	-		
1206	Other (Specify)	-		
<b>Payroll Taxes &amp; Expenses:</b>		<b>165,421</b>		
1301	OASDI	29,016		
1302	FICA/MEDICARE / OASDI	129,461	Employer portion of F.I.C.A. taxes charged to the Agency by the Internal Revenue Service. F.I.C.A. is comprised of "Old-Age, Survivors, and Disability Insurance" (OASDI), plus "Hospital Insurance" (Medicare).	
1303	SUI	6,944	Employer portion of S.U.I. taxes charged to the Agency by the various states in which wages are paid.	
1304	Other: Accrued Paid Leave Moved to Admin Overhead	-	The monetary value of staff Paid Leave hours as they accrue on a monthly basis	
1305	Other (Specify)	-		
1306	Other (Specify)	-		

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>2000: CLIENT SUPPORT</b>		<b>636,388</b>	
2001	Child Care	-	
2002	Client Housing Support	478,096	Cost of rent, housing assistance and deposit paid on behalf of client. (Examples: first/last month deposit, late fees, monthly rent, hotel charges, room & board, board & care, etc.)
2003	Client Transportation & Support	14,694	Cost for client transportation. (Examples: bus tokens/passes, taxi, other public transportation, bicycles, etc.)
2004	Clothing, Food, & Hygiene	22,598	Cost of client hygiene supplies and non-work related clothing. (Examples: clothes, shoes, soap, toothpaste, deodorant, grooming supplies, diapers, etc.)
2005	Education Support	4,881	Cost of course fees and educational materials distributed to clients and prospective clients. Including court ordered educational class.
2006	Employment Support	2,334	Cost of client pre-employment preparation and employment retention. (Examples: job search and interview attire, work boots and tools required for employment, etc.)
2007	Household Items for Clients	-	
2008	Medication Supports	67,580	Cost of medical supplies or treatment/medical expense for a specific client. (Examples: co-pays*, prescription/lab work not covered by insurance, over-the-counter medications*, first aid kit/supplies for client's use at home, etc.) *if allowable per contract
2009	Program Supplies - Medical	8,169	Cost of medical supplies to be used by staff or clients at the program location to meet program objective. Such items are to remain at the program location and not sent home with the client. Such items include, but are not limited to first aid kits, blood pressure monitor, latex gloves, syringes, hazard disposal service, over-the-counter medication*, etc. *if allowable per contract.
2010	Utility Vouchers	14,641	Cost of client utility bills and/or security deposits.
2011	Client Building Maintenance	2,334	Cost of building repair or maintenance paid for on client's behalf. (Examples: handyman work, plumbing, drywall, roofing, etc.)
2012	Client Therapy	1,645	Cost of therapy services not covered by insurance and therapeutic supplies for clients to use outside of the program. (Examples: exercise videos/equipment, relaxation audio/visual recordings, artistic expression supplies, etc.)
2013	Client Activities / Recreation	16,922	Cost for client activities & recreation events. (Examples: cable bill, food/drinks/utensils/decorations needed for a specific client event, incentive rewards, admission fees to events, etc.)
2014	Client Personal Needs	2,494	Cost of supplying clients with necessary personal items not detailed in other accounts. (Examples: birth certificate, DMV fee for ID or license, clients household cleaning products/house supplies/kitchen supplies for their own home, pots/pans/dishes, linens, paper towels and child related expenses such as car seat/stroller/play pin, etc.)
2015	Other (Specify)	-	
2016	Other (Specify)	-	

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>3000: OPERATING EXPENSES</b>		<b>169,276</b>	
3001	Telecommunications	16,232	Cost of electronic communications. (Examples: internet, phone, fax, cell phones, etc.)
3002	Printing/Postage	14,960	Cost of custom copying/printing charges (Examples: letterhead, business forms, business cards, flyers, brochures, signs, etc.) and Postage and delivery, including delivery by the USPS, UPS, FEDEX and other courier services
3003	Office, Household & Program Supplies	36,089	Cost of items normally used in an office setting. (Examples: pens, pencils, paper tablets, paper clips, notepads, staples, non-electric staplers/hole punchers/calculators, and other items normally used in an office setting.) House Supplies, Cost of supplies used by staff during their scheduled work hours. These items are normally used to operate the building at the program location. These items are to remain at program location and not sent home with client. (Examples: pots, pans, pot holders, kitchen towels, curtains, detergent, Clorox for clothes, can opener, dishes, furnace filter, decorations, linens, etc.), Program Supplies, Cost of any items normally used by clients to meet program objectives while receiving services. These items are to remain at the program location and not sent home with the client. Such items include, but are not limited to video tapes, printed handouts, desk reference books, research material, curriculum, puzzles, board games, therapeutic/meditative supplies and other items that are specifically designed and used to accomplish program goals.
3004	Advertising	-	
3005	Staff Development & Training	19,627	Cost of employee training courses and materials.
3006	Staff Mileage	16,922	Cost of employee mileage reimbursement paid in accordance with FPM section 1005.
3007	Subscriptions & Memberships	2,000	Cost of membership dues and subscriptions. (Examples: magazine, newspaper, memberships, etc.)
3008	Vehicle Maintenance / Gas / Insurance	45,463	Cost of vehicle maintenance. Including cost of parts, supplies and labor associated with maintenance and repair of vehicles used by Agency programs. Cost of gas in Vehicles and Insurance
3009	Program Enhancement	-	
3010	Staff Meetings	8,169	Cost of room rental and supplies necessary for staff meetings.
3011	Recruitment	4,138	Cost of advertising and other employee recruitment expenses. (Examples: newspaper ad, urine screening, background check, etc.)
3012	Employee-Employer Relations	5,676	Cost relating to improvement of working conditions, employer/employee relations and employee morale. (Examples: Company picnic items, florist, etc.)

<b>4000: FACILITIES &amp; EQUIPMENT</b>		<b>200,249</b>	
4001	Building Maintenance	8,488	Cost of Agency building repairs and maintenance. (Examples: electrical work, A/C and heating, hood cleaning, plumbing, etc.) This account should not be used if a specific outside labor contractor is doing an identifiable project.
4002	Rent/Lease Building	92,580	Cost of rent/lease payments made for building leases from outside sources.
4003	Rent/Lease Equipment	2,000	Cost of rent/lease payments made for furniture and equipment leases.
4004	Rent/Lease Vehicles	40,262	Rental cost of vehicles and lease of agency vehicles.
4005	Security	4,138	Cost of installation, maintenance and monthly service fees for building alarms and other security measures. (Examples: security/surveillance equipment, service and installation, safes, etc.)
4006	Utilities	41,959	Cost of service for power, gas, water, sewer, garbage, etc.
4007	Equipment Maintenance	2,759	Cost of equipment and furniture repair and maintenance. (Examples: high capacity copier/printer/scanner, replacement parts such as hard drive, laptop battery, monitor/printer/phone cord, drum, power strip, surge protector, video card, etc.)
4008	Liability Insurance	8,063	
4009	Other (Specify)	-	
4010	Other (Specify)	-	

<b>PROGRAM EXPENSE</b>			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE

<b>5000: SPECIAL EXPENSES</b>		<b>309,058</b>	
5001	Consultant (Network & Data Management)	-	
5002	HMIS (Health Management Information System)	31,790	Avatar Costs
5003	Contractual/Consulting Services : Consultant	19,416	These accounts are assigned to record various professional services provided by contracted sources working as independent agents. (IT Consultations, EHR Consultation, External Consultation, Clinical Supervisors who are not Staffed under the Personnel & Salaries)
5004	Translation Services	4,562	Paid to an outside vendor for translation / interpreter services
5005	Contractual/Consulting Services : Psychiatrist	253,290	These accounts are assigned to record various professional services provided by contracted Psychiatrist working as independent agents.
5006	Other (Specify)	-	
5007	Other (Specify)	-	
5008	Other (Specify)	-	

<b>6000: ADMINISTRATIVE EXPENSES</b>		<b>830,029</b>	
6001	Administrative Overhead	804,791	Support of our cooperate and regional offices such as processing invoices, payroll, cost reports, etc. Accrued Paid Leave moved/added to Admin Overhead. Accrual Paid Leave cannot be listed in Salaries and Benefits Per DBH
6002	Professional Liability Insurance	-	
6003	Accounting/Bookkeeping	-	
6004	External Audit	4,138	Cost of outside audit fees.
6005	Insurance (Specify):	-	
6006	Payroll Services	-	
6007	Depreciation (Provider-Owned Equipment to be Used for Program Purposes)	12,201	This account should be charged for the depreciation expense of the Agency's tangible assets.
6008	Other: Bank Fees	2,760	Cost of bank fees charged to Agency account.
6009	Other: Legal Expense	1,380	Cost of outside legal fees
6010	Other: Licenses	4,759	Cost in obtaining and renewing licenses and permits.
6011	Other (Specify)	-	Cost of membership dues and subscriptions.
6012	Other (Specify)	-	

<b>7000: FIXED ASSETS</b>		<b>85,026</b>	
7001	Computer Equipment & Software	53,200	Computers / printers / software needed since computers will be obsolete from being purchased nearly 5 years ago
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	24,929	Copier replacement, cell phones that have aged out.
7003	Furniture & Fixtures	2,759	Purchase of furniture and fixtures as needed
7004	Leasehold/Tenant/Building Improvements	4,138	Improvements to the building as needed that isn't covered by the landlord
7005	Other Assets over \$500 with Lifespan of 2 Years +	-	
7006	Assets over \$5,000/unit (Specify)	-	
7007	Other (Specify)	-	
7008	Other (Specify)	-	

<b>PROGRAM FUNDING SOURCES</b>			
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<b>8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)</b>			
ACCT #	LINE ITEM	PROVIDE DETAILS OF METHODOLOGY(IES) USED IN DETERMINING MEDI-CAL SERVICE RATES AND/OR SERVICE UNITS, IF APPLICABLE AND/OR AS REQUIRED BY THE RFP.	
8001	Mental Health Services	We based our rates and units on current program usage	
8002	Case Management	We based our rates and units on current program usage	
8003	Crisis Services	We based our rates and units on current program usage	
8004	Medication Support	We based our rates and units on current program usage	
8005	Collateral	We based our rates and units on current program usage	
8006	Plan Development	We based our rates and units on current program usage	
8007	Assessment	We based our rates and units on current program usage	
8008	Rehabilitation	We based our rates and units on current program usage	



**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Turning Point of Central Ca, Inc. | Fresno FSP Program Site #3 (Optional Site)**  
**FY 2020 - 2021 Ramp-up | 05/01/20 - 06/30/21**

**PROGRAM EXPENSES**

1000: SALARIES & BENEFITS					
Employee Salaries					
Acct #	Position	FTE	Admin	Direct	Total
1101	PROGRAM DIRECTOR	0.50		\$ 8,408	\$ 8,408
1102	ASST. PROGRAM DIRECTOR	1.00		16,004	16,004
1103	ADMIN. ASSISTANT	0.50		4,196	4,196
1104	BILLER	0.50		3,804	3,804
1105	BOOKKEEPER	0.50		3,917	3,917
1106	CRIMINAL JUSTICE REHAB SPECIALIST (CM)	2.00		17,119	17,119
1107	DUAL DIAGNOSIS SPECIALIST (CM)	3.00		25,679	25,679
1108	ED & EM REHAB SPECIALIST (CM)	3.00		25,679	25,679
1109	HOUSING COORDINATOR	1.00		8,560	8,560
1110	INTAKE SPECIALIST	0.50		4,408	4,408
1111	LVN	3.00		26,449	26,449
1112	MENTAL HEALTH PROFESSIONAL	4.00		61,921	61,921
1113	PEER SUPPORT SPECIALIST	2.00		11,111	11,111
1114	PERSONAL SERVICE COORDINATOR (CM)	4.00		31,648	31,648
1115	PSC SUPERVISOR	1.00		11,853	11,853
1116	REGISTERED NURSE	0.50		7,740	7,740
1117	SECRETARY	1.00		5,835	5,835
1118			-	-	-
1119			-	-	-
1120			-	-	-
1121			-	-	-
1122			-	-	-
1123			-	-	-
1124			-	-	-
1125			-	-	-
1126			-	-	-
1127			-	-	-
1128			-	-	-
1129			-	-	-
1130			-	-	-
1131			-	-	-
<b>Personnel Salaries Subtotal</b>		<b>28.00</b>	<b>\$ -</b>	<b>\$ 274,330</b>	<b>\$ 274,330</b>

<b>Employee Benefits</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1201	Retirement	\$ -	\$ 4,476	\$ 4,476
1202	Worker's Compensation	-	4,891	4,891
1203	Health Insurance	-	42,277	42,277
1204	API Benefits	-	91	91
1205	Other (Specify)	-	-	-
1206	Other (Specify)	-	-	-
<b>Employee Benefits Subtotal:</b>		<b>\$ -</b>	<b>\$ 51,735</b>	<b>\$ 51,735</b>
<b>Payroll Taxes &amp; Expenses:</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1301	OASDI	\$ -	\$ -	\$ -
1302	FICA/MEDICARE/ OASDI	-	22,816	22,816
1303	SUI	-	1,000	1,000
1304	Other: Accrued Paid Leave Moved to Admin Overhead	-	-	-
1305	Other (Specify)	-	-	-
1306	Other (Specify)	-	-	-
<b>Payroll Taxes &amp; Expenses Subtotal:</b>		<b>\$ -</b>	<b>\$ 23,816</b>	<b>\$ 23,816</b>
<b>EMPLOYEE SALARIES &amp; BENEFITS TOTAL:</b>		<b>\$ -</b>	<b>\$ 349,881</b>	<b>\$ 349,881</b>

<b>2000: CLIENT SUPPORT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
2001	Child Care	\$ -
2002	Client Housing Support	-
2003	Client Transportation & Support	-
2004	Clothing, Food, & Hygiene	-
2005	Education Support	-
2006	Employment Support	-
2007	Household Items for Clients	-
2008	Medication Supports	-
2009	Program Supplies - Medical	-
2010	Utility Vouchers	-
2011	Other (Specify)	-
2012	Other (Specify)	-
2013	Other (Specify)	-
2014	Other (Specify)	-
2015	Other (Specify)	-
2016	Other (Specify)	-
<b>DIRECT CLIENT CARE TOTAL</b>		<b>\$ -</b>

<b>3000: OPERATING EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
3001	Telecommunications	\$ 14,800
3002	Printing/Postage	1,600
3003	Office, Household & Program Supplies	7,000
3004	Advertising	-
3005	Staff Development & Training	-
3006	Staff Mileage	1,000
3007	Subscriptions & Memberships	-
3008	Vehicle Maintenance	-
3009	Program Enhancement	-
3010	Staff Meetings	-
3011	Recruitment	3,000
3012	Employee-Employer Relations	-
<b>OPERATING EXPENSES TOTAL:</b>		<b>\$ 27,400</b>

<b>4000: FACILITIES &amp; EQUIPMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
4001	Building Maintenance	\$ 2,200
4002	Rent/Lease Building	28,000
4003	Rent/Lease Equipment	800
4004	Rent/Lease Vehicles	-
4005	Security	1,200
4006	Utilities	12,400
4007	Equipment Maintenance	800
4008	Liability Insurance	2,366
4009	Other (Specify)	-
4010	Other (Specify)	-
<b>FACILITIES/EQUIPMENT TOTAL:</b>		<b>\$ 47,766</b>

<b>5000: SPECIAL EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
5001	Consultant (Network & Data Management)	\$ -
5002	HMIS (Health Management Information System)	-
5003	Contractual/Consulting Services (Specify)	-
5004	Translation Services	-
5005	Other (Specify)	-
5006	Other (Specify)	-
5007	Other (Specify)	-
5008	Other (Specify)	-
<b>SPECIAL EXPENSES TOTAL:</b>		<b>\$ -</b>

<b>6000: ADMINISTRATIVE EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
6001	Administrative Overhead	\$ 121,058
6002	Professional Liability Insurance	
6003	Accounting/Bookkeeping	
6004	External Audit	
6005	Insurance (Specify):	
6006	Payroll Services	
6007	Depreciation <i>(Provider-Owned Equipment to be Used for Program Purposes)</i>	
6008	Other (Specify)	
6009	Other (Specify)	
6010	Other (Specify)	-
6011	Other (Specify)	-
6012	Other (Specify)	-
<b>ADMINISTRATIVE EXPENSES TOTAL</b>		<b>\$ 121,058</b>

<b>7000: FIXED ASSETS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
7001	Computer Equipment & Software	\$ 53,400
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	20,000
7003	Furniture & Fixtures	73,650
7004	Leasehold/Tenant/Building Improvements	30,000
7005	Other Assets over \$500 with Lifespan of 2 Years +	-
7006	Assets over \$5,000/unit (Specify)	-
7007	Other (Specify)	-
7008	Other (Specify)	-
<b>FIXED ASSETS EXPENSES TOTAL</b>		<b>\$ 177,050</b>

<b>TOTAL PROGRAM EXPENSES</b>		<b>\$ 723,155</b>
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**PROGRAM FUNDING SOURCES**

<b>8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)</b>				
<b>Acct #</b>	<b>Line Item Description</b>	<b>Service Units</b>	<b>Rate</b>	<b>Amount</b>
8001	Mental Health Services	0	-	\$ -
8002	Case Management	0	-	-
8003	Crisis Services	0	-	-
8004	Medication Support	0	-	-
8005	Collateral	0	-	-
8006	Plan Development	0	-	-
8007	Assessment	0	-	-
8008	Rehabilitation	0	-	-
<b>Estimated Specialty Mental Health Services Billing Totals:</b>		<b>0</b>		<b>\$ -</b>
Estimated % of Clients who are Medi-Cal Beneficiaries				0%
Estimated Total Cost of Specialty Mental Health Services Provided to Medi-Cal Beneficiaries				-
Federal Financial Participation (FFP) %			0%	-
<b>MEDI-CAL FFP TOTAL</b>				<b>\$ -</b>

<b>8100 - SUBSTANCE USE DISORDER FUNDS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8101	Drug Medi-Cal	\$ -
8102	SABG	\$ -
<b>SUBSTANCE USE DISORDER FUNDS TOTAL</b>		<b>\$ -</b>

<b>8200 - REALIGNMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8201	Realignment	\$ -
<b>REALIGNMENT TOTAL</b>		<b>\$ -</b>

<b>8300 - MENTAL HEALTH SERVICE ACT (MHSA)</b>			
<b>Acct #</b>	<b>MHSA Component</b>	<b>MHSA Program Name</b>	<b>Amount</b>
8301	CSS - Community Services & Supports		\$ 723,155
8302	PEI - Prevention & Early Intervention		-
8303	INN - Innovations		-
8304	WET - Workforce Education & Training		-
8305	CFTN - Capital Facilities & Technology		-
<b>MHSA TOTAL</b>			<b>\$ 723,155</b>

<b>8400 - OTHER REVENUE</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8401	Client Fees	\$ -
8402	Client Insurance	-
8403	Grants (Specify)	-
8404	Other (Specify)	-
8405	Other (Specify)	-
<b>OTHER REVENUE TOTAL</b>		<b>\$ -</b>

**TOTAL PROGRAM FUNDING SOURCES: \$ 723,155**

**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Turning Point of Central Ca, Inc. | Fresno FSP Program Site #3 (Optional Site)**  
**FY 2020 - 2021 Ramp-up | 05/01/20 - 06/30/21 Budget Narrative**

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>1000: SALARIES &amp; BENEFITS</b>		<b>349,881</b>	
<b>Employee Salaries</b>		<b>274,330</b>	
1101	PROGRAM DIRECTOR	8,408	The Program Director currently oversees the program, hiring, training and supervising staff.
1102	ASST. PROGRAM DIRECTOR	16,004	The Assitant Program Directorwill supervise staff and assist the Program Director for that location
1103	ADMIN. ASSISTANT	4,196	The administrative assistant will oversee the support staff at both locations and will help with all support staff duties.
1104	BILLER	3,804	The biller will be responsible for billing into Avatar, billing all insurance claims and run reports as necessary for the program.
1105	BOOKKEEPER	3,917	The bookkeeper is responsible for processing all invoices for the program or programs and will send all information to the corporate office. They will handle petty cash, client fees and other bookkeeping needs for the program.
1106	CRIMINAL JUSTICE REHAB SPECIALIST (CM)	17,119	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in providing services to those involved in the criminal justice system and program liaison for Behavioral Health Court and the Federal Wellness Court
1107	DUAL DIAGNOSIS SPECIALIST (CM)	25,679	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in supporting and providing services for those who suffer from a co-occurring diagnosis.
1108	ED & EM REHAB SPECIALIST (CM)	25,679	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in linking and providing services to those interested in engagement in employment and education services.
1109	HOUSING COORDINATOR	8,560	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in identifying, linking and assisting clients in obtaining various housing such as a R&B, supportive housing, etc.
1110	INTAKE SPECIALIST	4,408	Reviews all referrals, contacting referral source and coordinating intake services to enroll in FSP program. The specialist also assists client in applying for additional benefits, such as General Relief, Social Security Benefits, Medi-cal, etc.
1111	LVN	26,449	Assists psychiatrist providing vital intake, coordination of medications, provides medication support and education, provides injections and consults with all staff in ensuring medication education and compliance
1112	MENTAL HEALTH PROFESSIONAL	61,921	Provides mental health assessment, assessing for Medical Necessity, assists client in identifying treatment plan goals according to diagnosis. MHP also provides individual and group therapy as client requests, while also providing program support to assist clients in crisis.
1113	PEER SUPPORT SPECIALIST	11,111	Provides support to clients, utilizing lived mental health experience to relate to clients, while assisting in activities with clients, run peer ran groups, meeting with clients during appointments providing support as needed.

PROGRAM EXPENSE				
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE	
1114	PERSONAL SERVICE COORDINATOR (CM)	31,648	Each FSP client will have a single point of responsibility through an assigned Personal Service Coordinator/case manager. The Personal Service Coordinator (PSC) works as a part of a treatment team in achieving the goals and objectives of the program to ensure quality of care for client participants. With case management being one of the primary methods of delivering services, each client shall be assigned a primary Personal Service Coordinator who will be responsible to see that the client's needs are met, as identified in the Plan of Care and the Individual Service and Support Plan (ISSP). They are able to provide intensive services and supports when needed, and they can give the client and/or family member considerable personal attention. The PSC will provide instruction modeling and support one-on-one in the course of daily events in the natural setting to manage day-to-day life and promote increased efficacy and self-sufficiency. This "hands on" approach will be utilized during the PSCs interaction with client's for 'en vivo' support, such as managing symptoms while preparing a budget, going to the doctor's office, the grocery store, in their home and maintaining their environment. Clients will learn at their own pace and with as much help as is needed by their personal service coordinator. A teaching/coaching approach will be used that empowers the client to gain mastery and take responsibility. Transportation and assistance in accessing other resources will be ensured by the PSC. All PSCs maintain their own case load of clients for whom they are the primary contact. Additionally, some of the PSC positions also include specialty training (housing, employment, education, criminal justice, substance use disorder) and will provide those specialty services to clients who are not on their caseload and can benefit from that expertise.	
1115	PSC SUPERVISOR	11,853	Provides supervision to all PSCs/Mental Health Specialists to ensure client care, maintain compliance with Turning Point policies and procedures. Supervisor also assisting in training new staff and reporting to the Assistant Program Director.	
1116	REGISTERED NURSE	7,740	Provides oversight over the LVNs/LPTs to ensure client care, maintaining compliance with Turning Point policies and procedures, providing training and ensuring accurate charting in accordance with Medi-cal.	
1117	SECRETARY	5,835	Provides direct services to the program by data entry, phone calls, checking in clients, etc.	
1118	0	-		
1119	0	-		
1120	0	-		
1121	0	-		
1122	0	-		
1123	0	-		
1124	0	-		
1125	0	-		
1126	0	-		
1127	0	-		
1128	0	-		
1129	0	-		
1130	0	-		
1131	0	-		
<b>Employee Benefits</b>		<b>51,735</b>		
1201	Retirement	4,476	Cost of Agency contribution to employee retirement plans.	
1202	Worker's Compensation	4,891	Cost of workers compensation insurance.	
1203	Health Insurance	42,277	Agency cost for health, dental and vision insurance	
1204	API Benefits	91		
1205	Other (Specify)	-		
1206	Other (Specify)	-		
<b>Payroll Taxes &amp; Expenses:</b>		<b>23,816</b>		
1301	OASDI	-	Employer portion of F.I.C.A. taxes charged to the Agency by the Internal Revenue Service. F.I.C.A. is comprised of "Old-Age, Survivors, and Disability Insurance" (OASDI), plus "Hospital Insurance" (Medicare).	
1302	FICA/MEDICARE/ OASDI	22,816	Employer portion of S.U.I. taxes charged to the Agency by the various states in which wages are paid.	
1303	SUI	1,000	The monetary value of staff Paid Leave hours as they accrue on a monthly basis	
1304	Other: Accrued Paid Leave Moved to Admin Overhead	-		
1305	Other (Specify)	-		
1306	Other (Specify)	-		

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>2000: CLIENT SUPPORT</b>			
		-	
2001	Child Care	-	
2002	Client Housing Support	-	
2003	Client Transportation & Support	-	
2004	Clothing, Food, & Hygiene	-	
2005	Education Support	-	
2006	Employment Support	-	
2007	Household Items for Clients	-	
2008	Medication Supports	-	
2009	Program Supplies - Medical	-	
2010	Utility Vouchers	-	
2011	Other (Specify)	-	
2012	Other (Specify)	-	
2013	Other (Specify)	-	
2014	Other (Specify)	-	
2015	Other (Specify)	-	
2016	Other (Specify)	-	

3000: OPERATING EXPENSES		27,400	
3001	Telecommunications	14,800	Cost of electronic communications. (Examples: internet, phone, fax, cell phones, etc.)
3002	Printing/Postage	1,600	Cost of custom copying/printing charges (Examples: letterhead, business forms, business cards, flyers, brochures, signs, etc.) and Postage and elivery, including delivery by the USPS, UPS, FEDEX and other courier services
3003	Office, Household & Program Supplies	7,000	Cost of items normally used in an office setting. (Examples: pens, pencils, paper tablets, paper clips, notepads, staples, non-electric staplers/hole punchers/calculators, and other items normally used in an office setting.) House Supplies, Cost of supplies used by staff during their scheduled work hours. These items are normally used to operate the building at the program location. These items are to remain at program location and not sent home with client. (Examples: pots, pans, pot holders, kitchen towels, curtains, detergent, Clorox for clothes, can opener, dishes, furnace filter, decorations, linens, etc.), Program Supplies, Cost of any items normally used by clients to meet program objectives while receiving services. These items are to remain at the program location and not sent home with the client. Such items include, but are not limited to video tapes, printed handouts, desk reference books, research material, curriculum, puzzles, board games, therapeutic/meditative supplies and other items that are specifically designed and used to accomplish program goals.
3004	Advertising	-	
3005	Staff Development & Training	-	Cost of employee training courses and materials.
3006	Staff Mileage	1,000	Cost of employee mileage reimbursement paid in accordance with FPM section 1005.
3007	Subscriptions & Memberships	-	
3008	Vehicle Maintenance	-	
3009	Program Enhancement	-	
3010	Staff Meetings	-	
3011	Recruitment	3,000	Cost of advertising and other employee recruitment expenses. (Examples: newspaper ad, urine screening, background check, etc.)
3012	Employee-Employer Relations	-	



PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>4000: FACILITIES &amp; EQUIPMENT</b>		<b>47,766</b>	
4001	Building Maintenance	2,200	Cost of Agency building repairs and maintenance. (Examples: electrical work, A/C and heating, hood cleaning, plumbing, etc.) This account should not be used if a specific outside labor contractor is doing an identifiable project.
4002	Rent/Lease Building	28,000	Cost of rent/lease payments made for building leases from outside sources.
4003	Rent/Lease Equipment	800	Cost of rent/lease payments made for furniture and equipment leases.
4004	Rent/Lease Vehicles	-	Rental cost of vehicles and lease of agency vehicles.
4005	Security	1,200	Cost of installation, maintenance and monthly service fees for building alarms and other security measures. (Examples: security/surveillance equipment, service and installation, safes, etc.)
4006	Utilities	12,400	Cost of service for power, gas, water, sewer, garbage, etc.
4007	Equipment Maintenance	800	Cost of equipment and furniture repair and maintenance. (Examples: high capacity copier/printer/scanner, replacement parts such as hard drive, laptop battery, monitor/printer/phone cord, drum, power strip, surge protector, video card, etc.)
4008	Liability Insurance	2,366	
4009	Other (Specify)	-	
4010	Other (Specify)	-	
<b>5000: SPECIAL EXPENSES</b>		<b>-</b>	
5001	Consultant (Network & Data Management)	-	
5002	HMIS (Health Management Information System)	-	
5003	Contractual/Consulting Services (Specify)	-	
5004	Translation Services	-	
5005	Other (Specify)	-	
5006	Other (Specify)	-	
5007	Other (Specify)	-	
5008	Other (Specify)	-	

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>6000: ADMINISTRATIVE EXPENSES</b>		<b>121,058</b>	
6001	Administrative Overhead	121,058	Support of our cooperate and regional offices such as processing invoices, payroll, cost reports, etc. Accrued Paid Leave moved/added to Admin Overhead. Accrual Paid Leave cannot be listed in Salaries and Benefits Per DBH
6002	Professional Liability Insurance	-	
6003	Accounting/Bookkeeping	-	
6004	External Audit	-	
6005	Insurance (Specify):	-	
6006	Payroll Services	-	
6007	Depreciation (Provider-Owned Equipment to be Used for Program Purposes)	-	
6008	Other (Specify)	-	
6009	Other (Specify)	-	
6010	Other (Specify)	-	
6011	Other (Specify)	-	
6012	Other (Specify)	-	

<b>7000: FIXED ASSETS</b>		<b>177,050</b>	
7001	Computer Equipment & Software	53,400	Computers / printers / software needed since computers will be obsolete from being purchased nearly 5 years ago
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	20,000	Copier replacement, cell phones that have aged out.
7003	Furniture & Fixtures	73,650	Purchase of furniture and fixtures as needed
7004	Leasehold/Tenant/Building Improvements	30,000	Improvements to the building as needed that isn't covered by the landlord
7005	Other Assets over \$500 with Lifespan of 2 Years +	-	
7006	Assets over \$5,000/unit (Specify)	-	
7007	Other (Specify)	-	
7008	Other (Specify)	-	

PROGRAM FUNDING SOURCES			
8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)			
ACCT #	LINE ITEM	PROVIDE DETAILS OF METHODOLOGY(IES) USED IN DETERMINING MEDI-CAL SERVICE RATES AND/OR SERVICE UNITS, IF APPLICABLE AND/OR AS REQUIRED BY THE RFP.	
8001	Mental Health Services		
8002	Case Management		
8003	Crisis Services		
8004	Medication Support		
8005	Collateral		
8006	Plan Development		
8007	Assessment		
8008	Rehabilitation		

**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Turning Point of Central Ca, Inc. | Fresno FSP Program Site #3 (Optional Site)**  
**FY 2021 - 2022 | 07/01/21 - 06/30/22**

**PROGRAM EXPENSES**

1000: SALARIES & BENEFITS					
Employee Salaries					
Acct #	Position	FTE	Admin	Direct	Total
1101	PROGRAM DIRECTOR	0.50	\$ -	\$ 50,446	\$ 50,446
1102	ASST. PROGRAM DIRECTOR	1.00	-	96,026	96,026
1103	ADMIN. ASSISTANT	0.50	-	25,178	25,178
1104	BILLER	0.50	-	22,822	22,822
1105	BOOKKEEPER	0.50	-	23,502	23,502
1106	CRIMINAL JUSTICE REHAB SPECIALIST (CM)	2.00	-	102,716	102,716
1107	DUAL DIAGNOSIS SPECIALIST (CM)	3.00	-	154,073	154,073
1108	ED & EM REHAB SPECIALIST (CM)	3.00	-	154,073	154,073
1109	HOUSING COORDINATOR	1.00	-	51,358	51,358
1110	INTAKE SPECIALIST	0.50	-	26,449	26,449
1111	LVN	3.00	-	158,694	158,694
1112	MENTAL HEALTH PROFESSIONAL	4.00	-	371,524	371,524
1113	PEER SUPPORT SPECIALIST	2.00	-	66,667	66,667
1114	PERSONAL SERVICE COORDINATOR (CM)	4.00	-	189,887	189,887
1115	PSC SUPERVISOR	1.00	-	71,116	71,116
1116	REGISTERED NURSE	0.50	-	46,441	46,441
1117	SECRETARY	1.00	-	35,010	35,010
1118			-	-	-
1119			-	-	-
1120			-	-	-
1121			-	-	-
1122			-	-	-
1123			-	-	-
1124			-	-	-
1125			-	-	-
1126			-	-	-
1127			-	-	-
1128			-	-	-
1129			-	-	-
1130			-	-	-
1131			-	-	-
<b>Personnel Salaries Subtotal</b>		<b>28.00</b>	<b>\$ -</b>	<b>\$ 1,645,982</b>	<b>\$ 1,645,982</b>

<b>Employee Benefits</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1201	Retirement	\$ -	\$ 26,855	\$ 26,855
1202	Worker's Compensation	-	29,343	29,343
1203	Health/ Dental Insurance	-	253,664	253,664
1204	API Benefits	-	545	545
1205	Other (Specify)	-	-	-
1206	Other (Specify)	-	-	-
<b>Employee Benefits Subtotal:</b>		<b>\$ -</b>	<b>\$ 310,407</b>	<b>\$ 310,407</b>
<b>Payroll Taxes &amp; Expenses:</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1301	OASDI	\$ -	\$ -	\$ -
1302	FICA/MEDICARE / OASDI	-	136,897	136,897
1303	SUI	-	5,998	5,998
1304	Other: Accrued Paid Leave Moved to Admin Overhead	-	-	-
1305	Other (Specify)	-	-	-
1306	Other (Specify)	-	-	-
<b>Payroll Taxes &amp; Expenses Subtotal:</b>		<b>\$ -</b>	<b>\$ 142,895.00</b>	<b>\$ 142,895.00</b>
<b>EMPLOYEE SALARIES &amp; BENEFITS TOTAL:</b>		<b>\$ -</b>	<b>\$ 2,099,284</b>	<b>\$ 2,099,284</b>

<b>2000: CLIENT SUPPORT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
2001	Child Care	\$ -
2002	Client Housing Support	437,400
2003	Client Transportation & Support	13,400
2004	Clothing, Food, & Hygiene	20,650
2005	Education Support	4,450
2006	Employment Support	2,100
2007	Household Items for Clients	-
2008	Medication Supports	61,800
2009	Program Supplies - Medical	7,450
2010	Utility Vouchers	13,350
2011	Client Building Maintenance	2,100
2012	Client Therapy	1,500
2013	Client Activities / Recreation	15,450
2014	Client Personal Needs	2,250
2015	Other (Specify)	-
2016	Other (Specify)	-
<b>DIRECT CLIENT CARE TOTAL</b>		<b>\$ 581,900</b>

<b>3000: OPERATING EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
3001	Telecommunications	\$ 14,850
3002	Printing/Postage	13,650
3003	Office, Household & Program Supplies	32,750
3004	Advertising	-
3005	Staff Development & Training	17,950
3006	Staff Mileage	15,450
3007	Subscriptions & Memberships	2,000
3008	Vehicle Maintenance / Gas / Insurance	41,500
3009	Program Enhancement	-
3010	Staff Meetings	7,450
3011	Recruitment	3,750
3012	Employee-Employer Relations	5,150
<b>OPERATING EXPENSES TOTAL:</b>		<b>\$ 154,500</b>

<b>4000: FACILITIES &amp; EQUIPMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
4001	Building Maintenance	\$ 7,750
4002	Rent/Lease Building	84,550
4003	Rent/Lease Equipment	2,000
4004	Rent/Lease Vehicles	36,800
4005	Security	3,750
4006	Utilities	38,350
4007	Equipment Maintenance	2,500
4008	Liability Insurance	7,350
4009	Other (Specify)	-
4010	Other (Specify)	-
<b>FACILITIES/EQUIPMENT TOTAL:</b>		<b>\$ 183,050</b>

<b>5000: SPECIAL EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
5001	Consultant (Network & Data Management)	\$ -
5002	HMIS (Health Management Information System)	28,900
5003	Contractual/Consulting Services : Consultant	17,750
5004	Translation Services	4,150
5005	Contractual/Consulting Services : Psychiatrist	231,750
5006	Other (Specify)	-
5007	Other (Specify)	-
5008	Other (Specify)	-
<b>SPECIAL EXPENSES TOTAL:</b>		<b>\$ 282,550</b>

<b>6000: ADMINISTRATIVE EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
6001	Administrative Overhead	\$ 705,363
6002	Professional Liability Insurance	-
6003	Accounting/Bookkeeping	-
6004	External Audit	3,750
6005	Insurance (Specify):	-
6006	Payroll Services	-
6007	Depreciation <i>(Provider-Owned Equipment to be Used for Program Purposes)</i>	11,150
6008	Other: Bank Fees	2,500
6009	Other: Legal Expense	1,250
6010	Other: Licenses	4,500
6011	Other (Specify)	-
6012	Other (Specify)	-
<b>ADMINISTRATIVE EXPENSES TOTAL</b>		<b>\$ 728,513</b>

<b>7000: FIXED ASSETS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
7001	Computer Equipment & Software	\$ -
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	-
7003	Furniture & Fixtures	2,500
7004	Leasehold/Tenant/Building Improvements	3,750
7005	Other Assets over \$500 with Lifespan of 2 Years +	-
7006	Assets over \$5,000/unit (Specify)	-
7007	Other (Specify)	-
7008	Other (Specify)	-
<b>FIXED ASSETS EXPENSES TOTAL</b>		<b>\$ 6,250</b>

<b>TOTAL PROGRAM EXPENSES</b>		<b>\$ 4,036,047</b>
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**PROGRAM FUNDING SOURCES**

<b>8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)</b>				
<b>Acct #</b>	<b>Line Item Description</b>	<b>Service Units</b>	<b>Rate</b>	<b>Amount</b>
8001	Mental Health Services	76,502	2.91	\$ 222,621
8002	Case Management	32,715	1.99	65,103
8003	Crisis Services	1,470	3.20	4,704
8004	Medication Support	133,907	5.27	705,690
8005	Collateral	5,128	2.91	14,922
8006	Plan Development	7,935	2.91	23,091
8007	Assessment	14,780	2.91	43,010
8008	Rehabilitation	594,511	2.91	1,730,027
<b>Estimated Specialty Mental Health Services Billing Totals:</b>		<b>866,948</b>		<b>\$ 2,809,168</b>
Estimated % of Clients who are Medi-Cal Beneficiaries				100%
Estimated Total Cost of Specialty Mental Health Services Provided to Medi-Cal Beneficiaries				2,809,168
Federal Financial Participation (FFP) %			79%	2,219,242
<b>MEDI-CAL FFP TOTAL</b>				<b>\$ 2,219,242</b>

<b>8100 - SUBSTANCE USE DISORDER FUNDS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8101	Drug Medi-Cal	\$ -
8102	SABG	\$ -
<b>SUBSTANCE USE DISORDER FUNDS TOTAL</b>		<b>\$ -</b>

<b>8200 - REALIGNMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8201	Realignment	\$ (0)
<b>REALIGNMENT TOTAL</b>		<b>\$ (0)</b>

<b>8300 - MENTAL HEALTH SERVICE ACT (MHSA)</b>			
<b>Acct #</b>	<b>MHSA Component</b>	<b>MHSA Program Name</b>	<b>Amount</b>
8301	CSS - Community Services & Supports		\$ 1,777,805
8302	PEI - Prevention & Early Intervention		-
8303	INN - Innovations		-
8304	WET - Workforce Education & Training		-
8305	CFTN - Capital Facilities & Technology		-
<b>MHSA TOTAL</b>			<b>\$ 1,777,805</b>

<b>8400 - OTHER REVENUE</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8401	Client Fees	\$ 39,000
8402	Client Insurance	-
8403	Grants (Specify)	-
8404	Other (Specify)	-
8405	Other (Specify)	-
<b>OTHER REVENUE TOTAL</b>		<b>\$ 39,000</b>

**TOTAL PROGRAM FUNDING SOURCES: \$ 4,036,047**

**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Turning Point of Central Ca, Inc. | Fresno FSP Program Site #3 (Optional Site)**  
**FY 2021 - 2022 | 07/01/21 - 06/30/22 Budget Narrative**

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>1000: SALARIES &amp; BENEFITS</b>		<b>2,099,284</b>	
<b>Employee Salaries</b>		<b>1,645,982</b>	
1101	PROGRAM DIRECTOR	50,446	The Program Director currently oversees the program, hiring, training and supervising staff.
1102	ASST. PROGRAM DIRECTOR	96,026	The Assitant Program Director will supervise staff and assist the Program Director for that location
1103	ADMIN. ASSISTANT	25,178	The administrative assistant will oversee the support staff at both locations and will help with all support staff duties.
1104	BILLER	22,822	The biller will be responsible for billing into Avatar, billing all insurance claims and run reports as necessary for the program.
1105	BOOKKEEPER	23,502	The bookkeeper is responsible for processing all invoices for the program or programs and will send all information to the corporate office. They will handle petty cash, client fees and other bookkeeping needs for the program.
1106	CRIMINAL JUSTICE REHAB SPECIALIST (CM)	102,716	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in providing services to those involved in the criminal justice system and program liaison for Behavioral Health Court and the Federal Wellness Court
1107	DUAL DIAGNOSIS SPECIALIST (CM)	154,073	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in supporting and providing services for those who suffer from a co-occurring diagnosis.
1108	ED & EM REHAB SPECIALIST (CM)	154,073	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in linking and providing services to those interested in engagement in employment and education services.
1109	HOUSING COORDINATOR	51,358	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in identifying, linking and assisting clients in obtaining various housing such as a R&B, supportive housing, etc.
1110	INTAKE SPECIALIST	26,449	Reviews all referrals, contacting referral source and coordinating intake services to enrol in FSP program. The specialist also assists client in applying for additional benefits, such as General Relief, Social Security Benefits, Medi-cal, etc.
1111	LVN	158,694	Assists psychiatrist providing vital intake, coordination of medications, provides medication support and education, provides injections and consults with all staff in ensuring medication education and compliance
1112	MENTAL HEALTH PROFESSIONAL	371,524	Provides mental health assessment, assessing for Medical Necessity, assists client in identifying treatment plan goals according to diagnosis. MHP also provides individual and group therapy as client requests, while also providing program support to assist clients in crisis.
1113	PEER SUPPORT SPECIALIST	66,667	Provides support to clients, utilizing lived mental health experience to relate to clients, while assisting in activities with clients, run peer ran groups, meeting with clients during appointments providing support as needed.



PROGRAM EXPENSE				
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE	
1114	PERSONAL SERVICE COORDINATOR (CM)	189,887	Each FSP client will have a single point of responsibility through an assigned Personal Service Coordinator/case manager. The Personal Service Coordinator (PSC) works as a part of a treatment team in achieving the goals and objectives of the program to ensure quality of care for client participants. With case management being one of the primary methods of delivering services, each client shall be assigned a primary Personal Service Coordinator who will be responsible to see that the client's needs are met, as identified in the Plan of Care and the Individual Service and Support Plan (ISSP). They are able to provide intensive services and supports when needed, and they can give the client and/or family member considerable personal attention. The PSC will provide instruction modeling and support one-on-one in the course of daily events in the natural setting to manage day-to-day life and promote increased efficacy and self-sufficiency. This "hands on" approach will be utilized during the PSCs interaction with client's for 'en vivo' support, such as managing symptoms while preparing a budget, going to the doctor's office, the grocery store, in their home and maintaining their environment. Clients will learn at their own pace and with as much help as is needed by their personal service coordinator. A teaching/coaching approach will be used that empowers the client to gain mastery and take responsibility. Transportation and assistance in accessing other resources will be ensured by the PSC. All PSCs maintain their own case load of clients for whom they are the primary contact. Additionally, some of the PSC positions also include specialty training (housing, employment, education, criminal justice, substance use disorder) and will provide those specialty services to clients who are not on their caseload and can benefit from that expertise.	
1115	PSC SUPERVISOR	71,116	Provides supervision to all PSCs/Mental Health Specialists to ensure client care, maintain compliance with Turning Point policies and procedures. Supervisor also assisting in training new staff and reporting to the Assistant Program Director.	
1116	REGISTERED NURSE	46,441	Provides oversight over the LVNs/LPTs to ensure client care, maintaining compliance with Turning Point policies and procedures, providing training and ensuring accurate charting in accordance with Medi-cal.	
1117	SECRETARY	35,010	Provides direct services to the program by data entry, phone calls, checking in clients, etc.	
1118	0	-		
1119	0	-		
1120	0	-		
1121	0	-		
1122	0	-		
1123	0	-		
1124	0	-		
1125	0	-		
1126	0	-		
1127	0	-		
1128	0	-		
1129	0	-		
1130	0	-		
1131	0	-		
<b>Employee Benefits</b>		<b>310,407</b>		
1201	Retirement	26,855	Cost of Agency contribution to employee retirement plans.	
1202	Worker's Compensation	29,343	Cost of workers compensation insurance.	
1203	Health/ Dental Insurance	253,664	Agency cost for health, dental and vision insurance	
1204	API Benefits	545	Employee assistance program	
1205	Other (Specify)	-		
1206	Other (Specify)	-		
<b>Payroll Taxes &amp; Expenses:</b>		<b>142,895</b>		
1301	OASDI	-		
1302	FICA/MEDICARE / OASDI	136,897	Employer portion of F.I.C.A. taxes charged to the Agency by the Internal Revenue Service. F.I.C.A. is comprised of "Old-Age, Survivors, and Disability Insurance" (OASDI), plus "Hospital Insurance" (Medicare).	
1303	SUI	5,998	Employer portion of S.U.I. taxes charged to the Agency by the various states in which wages are paid.	
1304	Other: Accrued Paid Leave Moved to Admin Overhead	-	The monetary value of staff Paid Leave hours as they accrue on a monthly basis	
1305	Other (Specify)	-		
1306	Other (Specify)	-		

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>2000: CLIENT SUPPORT</b>		<b>581,900</b>	
2001	Child Care	-	
2002	Client Housing Support	437,400	Cost of rent, housing assistance and deposit paid on behalf of client. (Examples: first/last month deposit, late fees, monthly rent, hotel charges, room & board, board & care, etc.)
2003	Client Transportation & Support	13,400	Cost for client transportation. (Examples: bus tokens/passes, taxi, other public transportation, bicycles, etc.)
2004	Clothing, Food, & Hygiene	20,650	Cost of client hygiene supplies and non-work related clothing. (Examples: clothes, shoes, soap, toothpaste, deodorant, grooming supplies, diapers, etc.)
2005	Education Support	4,450	Cost of course fees and educational materials distributed to clients and prospective clients. Including court ordered educational class.
2006	Employment Support	2,100	Cost of client pre-employment preparation and employment retention. (Examples: job search and interview attire, work boots and tools required for employment, etc.)
2007	Household Items for Clients	-	
2008	Medication Supports	61,800	Cost of medical supplies or treatment/medical expense for a specific client. (Examples: co-pays*, prescription/lab work not covered by insurance, over-the-counter medications*, first aid kit/supplies for client's use at home, etc.) *if allowable per contract
2009	Program Supplies - Medical	7,450	Cost of medical supplies to be used by staff or clients at the program location to meet program objective. Such items are to remain at the program location and not sent home with the client. Such items include, but are not limited to first aid kits, blood pressure monitor, latex gloves, syringes, hazard disposal service, over-the-counter medication*, etc. *if allowable per contract.
2010	Utility Vouchers	13,350	Cost of client utility bills and/or security deposits.
2011	Client Building Maintenance	2,100	Cost of building repair or maintenance paid for on client's behalf. (Examples: handyman work, plumbing, drywall, roofing, etc.)
2012	Client Therapy	1,500	Cost of therapy services not covered by insurance and therapeutic supplies for clients to use outside of the program. (Examples: exercise videos/equipment, relaxation audio/visual recordings, artistic expression supplies, etc.)
2013	Client Activities / Recreation	15,450	Cost for client activities & recreation events. (Examples: cable bill, food/drinks/utensils/decorations needed for a specific client event, incentive rewards, admission fees to events, etc.)
2014	Client Personal Needs	2,250	Cost of supplying clients with necessary personal items not detailed in other accounts. (Examples: birth certificate, DMV fee for ID or license, clients household cleaning products/house supplies/kitchen supplies for their own home, pots/pans/dishes, linens, paper towels and child related expenses such as car seat/stroller/play pin, etc.)
2015	Other (Specify)	-	
2016	Other (Specify)	-	

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>3000: OPERATING EXPENSES</b>		<b>154,500</b>	
3001	Telecommunications	14,850	Cost of electronic communications. (Examples: internet, phone, fax, cell phones, etc.)
3002	Printing/Postage	13,650	Cost of custom copying/printing charges (Examples: letterhead, business forms, business cards, flyers, brochures, signs, etc.) and Postage and delivery, including delivery by the USPS, UPS, FEDEX and other courier services
3003	Office, Household & Program Supplies	32,750	Cost of items normally used in an office setting. (Examples: pens, pencils, paper tablets, paper clips, notepads, staples, non-electric staplers/hole punchers/calculators, and other items normally used in an office setting.) House Supplies, Cost of supplies used by staff during their scheduled work hours. These items are normally used to operate the building at the program location. These items are to remain at program location and not sent home with client. (Examples: pots, pans, pot holders, kitchen towels, curtains, detergent, Clorox for clothes, can opener, dishes, furnace filter, decorations, linens, etc.), Program Supplies, Cost of any items normally used by clients to meet program objectives while receiving services. These items are to remain at the program location and not sent home with the client. Such items include, but are not limited to video tapes, printed handouts, desk reference books, research material, curriculum, puzzles, board games, therapeutic/meditative supplies and other items that are specifically designed and used to accomplish program goals.
3004	Advertising	-	
3005	Staff Development & Training	17,950	Cost of employee training courses and materials.
3006	Staff Mileage	15,450	Cost of employee mileage reimbursement paid in accordance with FPM section 1005.
3007	Subscriptions & Memberships	2,000	Cost of membership dues and subscriptions. (Examples: magazine, newspaper, memberships, etc.)
3008	Vehicle Maintenance / Gas / Insurance	41,500	Cost of vehicle maintenance. Including cost of parts, supplies and labor associated with maintenance and repair of vehicles used by Agency programs. Cost of gas in Vehicles and Insurance
3009	Program Enhancement	-	
3010	Staff Meetings	7,450	Cost of room rental and supplies necessary for staff meetings.
3011	Recruitment	3,750	Cost of advertising and other employee recruitment expenses. (Examples: newspaper ad, urine screening, background check, etc.)
3012	Employee-Employer Relations	5,150	Cost relating to improvement of working conditions, employer/employee relations and employee morale. (Examples: Company picnic items, florist, etc.)

<b>4000: FACILITIES &amp; EQUIPMENT</b>		<b>183,050</b>	
4001	Building Maintenance	7,750	Cost of Agency building repairs and maintenance. (Examples: electrical work, A/C and heating, hood cleaning, plumbing, etc.) This account should not be used if a specific outside labor contractor is doing an identifiable project.
4002	Rent/Lease Building	84,550	Cost of rent/lease payments made for building leases from outside sources.
4003	Rent/Lease Equipment	2,000	Cost of rent/lease payments made for furniture and equipment leases.
4004	Rent/Lease Vehicles	36,800	Rental cost of vehicles and lease of agency vehicles.
4005	Security	3,750	Cost of installation, maintenance and monthly service fees for building alarms and other security measures. (Examples: security/surveillance equipment, service and installation, safes, etc.)
4006	Utilities	38,350	Cost of service for power, gas, water, sewer, garbage, etc.
4007	Equipment Maintenance	2,500	Cost of equipment and furniture repair and maintenance. (Examples: high capacity copier/printer/scanner, replacement parts such as hard drive, laptop battery, monitor/printer/phone cord, drum, power strip, surge protector, video card, etc.)
4008	Liability Insurance	7,350	
4009	Other (Specify)	-	
4010	Other (Specify)	-	

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>5000: SPECIAL EXPENSES</b>		<b>282,550</b>	
5001	Consultant (Network & Data Management)	-	
5002	HMIS (Health Management Information System)	28,900	Avatar Costs
5003	Contractual/Consulting Services : Consultant	17,750	These accounts are assigned to record various professional services provided by contracted sources working as independent agents. (IT Consultations, EHR Consultation, External Consultation, Clinical Supervisors who are not Staffed under the Personnel & Salaries)
5004	Translation Services	4,150	Paid to an outside vendor for translation / interpreter services
5005	Contractual/Consulting Services : Psychiatrist	231,750	These accounts are assigned to record various professional services provided by contracted Psychiatrist working as independent agents.
5006	Other (Specify)	-	
5007	Other (Specify)	-	
5008	Other (Specify)	-	

<b>6000: ADMINISTRATIVE EXPENSES</b>		<b>728,513</b>	
6001	Administrative Overhead	705,363	Support of our cooperate and regional offices such as processing invoices, payroll, cost reports, etc. Accrued Paid Leave moved/added to Admin Overhead. Accrual Paid Leave cannot be listed in Salaries and Benefits Per DBH
6002	Professional Liability Insurance	-	
6003	Accounting/Bookkeeping	-	
6004	External Audit	3,750	Cost of outside audit fees.
6005	Insurance (Specify):	-	
6006	Payroll Services	-	
6007	Depreciation (Provider-Owned Equipment to be Used for Program Purposes)	11,150	This account should be charged for the depreciation expense of the Agency's tangible assets.
6008	Other: Bank Fees	2,500	Cost of bank fees charged to Agency account.
6009	Other: Legal Expense	1,250	Cost of outside legal fees
6010	Other: Licenses	4,500	Cost in obtaining and renewing licenses and permits.
6011	Other (Specify)	-	Cost of membership dues and subscriptions.
6012	Other (Specify)	-	

<b>7000: FIXED ASSETS</b>		<b>6,250</b>	
7001	Computer Equipment & Software	-	
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	-	
7003	Furniture & Fixtures	2,500	Purchase of furniture and fixtures as needed
7004	Leasehold/Tenant/Building Improvements	3,750	Improvements to the building as needed that isn't covered by the landlord
7005	Other Assets over \$500 with Lifespan of 2 Years +	-	
7006	Assets over \$5,000/unit (Specify)	-	
7007	Other (Specify)	-	
7008	Other (Specify)	-	

PROGRAM FUNDING SOURCES		
8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)		
ACCT #	LINE ITEM	PROVIDE DETAILS OF METHODOLOGY(IES) USED IN DETERMINING MEDI-CAL SERVICE RATES AND/OR SERVICE UNITS, IF APPLICABLE AND/OR AS REQUIRED BY THE RFP.
8001	Mental Health Services	We based our rates and units on current program usage
8002	Case Management	We based our rates and units on current program usage
8003	Crisis Services	We based our rates and units on current program usage
8004	Medication Support	We based our rates and units on current program usage
8005	Collateral	We based our rates and units on current program usage
8006	Plan Development	We based our rates and units on current program usage
8007	Assessment	We based our rates and units on current program usage
8008	Rehabilitation	We based our rates and units on current program usage

**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Turning Point of Central Ca, Inc. | Fresno FSP Program Site #3 (Optional Site)**  
**FY 2022 - 2023 | 07/01/22 - 06/30/23**

**PROGRAM EXPENSES**

<b>1000: SALARIES &amp; BENEFITS</b>					
<b>Employee Salaries</b>					
<b>Acct #</b>	<b>Position</b>	<b>FTE</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1101	PROGRAM DIRECTOR	0.50	\$ -	\$ 52,969	\$ 52,969
1102	ASST. PROGRAM DIRECTOR	1.00	-	100,828	100,828
1103	ADMIN. ASSISTANT	0.50	-	26,437	26,437
1104	BILLER	0.50	-	23,964	23,964
1105	BOOKKEEPER	0.50	-	24,678	24,678
1106	CRIMINAL JUSTICE REHAB SPECIALIST (CM)	2.00	-	107,852	107,852
1107	DUAL DIAGNOSIS SPECIALIST (CM)	3.00	-	161,777	161,777
1108	ED & EM REHAB SPECIALIST (CM)	3.00	-	161,777	161,777
1109	HOUSING COORDINATOR	1.00	-	53,926	53,926
1110	INTAKE SPECIALIST	0.50	-	27,772	27,772
1111	LVN	3.00	-	166,629	166,629
1112	MENTAL HEALTH PROFESSIONAL	4.00	-	390,101	390,101
1113	PEER SUPPORT SPECIALIST	2.00	-	70,001	70,001
1114	PERSONAL SERVICE COORDINATOR (CM)	4.00	-	199,381	199,381
1115	PSC SUPERVISOR	1.00	-	74,672	74,672
1116	REGISTERED NURSE	0.50	-	48,763	48,763
1117	SECRETARY	1.00	-	36,760	36,760
1118			-	-	-
1119			-	-	-
1120			-	-	-
1121			-	-	-
1122			-	-	-
1123			-	-	-
1124			-	-	-
1125			-	-	-
1126			-	-	-
1127			-	-	-
1128			-	-	-
1129			-	-	-
1130			-	-	-
1131			-	-	-
<b>Personnel Salaries Subtotal</b>		<b>28.00</b>	<b>\$ -</b>	<b>\$ 1,728,287</b>	<b>\$ 1,728,287</b>

<b>Employee Benefits</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1201	Retirement	\$ -	\$ 28,198	\$ 28,198
1202	Worker's Compensation	-	30,811	30,811
1203	Health/ Dental Insurance	-	266,348	266,348
1204	API Benefits	-	573	573
1205	Other (Specify)	-	-	-
1206	Other (Specify)	-	-	-
<b>Employee Benefits Subtotal:</b>		<b>\$ -</b>	<b>\$ 325,930</b>	<b>\$ 325,930</b>
<b>Payroll Taxes &amp; Expenses:</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1301	OASDI	\$ -	\$ -	\$ -
1302	FICA/MEDICARE / OASDI	-	143,742	143,742
1303	SUI	-	6,298	6,298
1304	Other: Accrued Paid Leave Moved to Admin Overhead	-	-	-
1305	Other (Specify)	-	-	-
1306	Other (Specify)	-	-	-
<b>Payroll Taxes &amp; Expenses Subtotal:</b>		<b>\$ -</b>	<b>\$ 150,040</b>	<b>\$ 150,040</b>
<b>EMPLOYEE SALARIES &amp; BENEFITS TOTAL:</b>		<b>\$ -</b>	<b>\$ 2,204,257</b>	<b>\$ 2,204,257</b>

<b>2000: CLIENT SUPPORT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
2001	Child Care	\$ -
2002	Client Housing Support	450,650
2003	Client Transportation & Support	13,850
2004	Clothing, Food, & Hygiene	21,300
2005	Education Support	4,600
2006	Employment Support	2,200
2007	Household Items for Clients	-
2008	Medication Supports	63,700
2009	Program Supplies - Medical	7,700
2010	Utility Vouchers	13,800
2011	Client Building Maintenance	2,200
2012	Client Therapy	1,550
2013	Client Activities / Recreation	15,950
2014	Client Personal Needs	2,350
2015	Other (Specify)	-
2016	Other (Specify)	-
<b>DIRECT CLIENT CARE TOTAL</b>		<b>\$ 599,850</b>

<b>3000: OPERATING EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
3001	Telecommunications	\$ 15,300
3002	Printing/Postage	14,100
3003	Office, Household & Program Supplies	33,900
3004	Advertising	-
3005	Staff Development & Training	18,500
3006	Staff Mileage	15,950
3007	Subscriptions & Memberships	2,000
3008	Vehicle Maintenance / Gas / Insurance	42,850
3009	Program Enhancement	-
3010	Staff Meetings	7,700
3011	Recruitment	3,900
3012	Employee-Employer Relations	5,350
<b>OPERATING EXPENSES TOTAL:</b>		<b>\$ 159,550</b>

<b>4000: FACILITIES &amp; EQUIPMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
4001	Building Maintenance	\$ 8,000
4002	Rent/Lease Building	87,150
4003	Rent/Lease Equipment	2,000
4004	Rent/Lease Vehicles	37,950
4005	Security	3,900
4006	Utilities	39,550
4007	Equipment Maintenance	2,600
4008	Liability Insurance	-
4009	Other (Specify)	-
4010	Other (Specify)	-
<b>FACILITIES/EQUIPMENT TOTAL:</b>		<b>\$ 181,150</b>

<b>5000: SPECIAL EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
5001	Consultant (Network & Data Management)	\$ -
5002	HMIS (Health Management Information System)	29,850
5003	Contractual/Consulting Services : Consultant	18,300
5004	Translation Services	4,300
5005	Contractual/Consulting Services : Psychiatrist	238,750
5006	Other (Specify)	-
5007	Other (Specify)	-
5008	Other (Specify)	-
<b>SPECIAL EXPENSES TOTAL:</b>		<b>\$ 291,200</b>

<b>6000: ADMINISTRATIVE EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
6001	Administrative Overhead	\$ 737,151
6002	Professional Liability Insurance	-
6003	Accounting/Bookkeeping	-
6004	External Audit	3,900
6005	Insurance (Specify):	7,600
6006	Payroll Services	-
6007	Depreciation <i>(Provider-Owned Equipment to be Used for Program Purposes)</i>	11,500
6008	Other: Bank Fees	2,600
6009	Other: Legal Expense	1,300
6010	Other: Licenses	4,600
6011	Other (Specify)	-
6012	Other (Specify)	-
<b>ADMINISTRATIVE EXPENSES TOTAL</b>		<b>\$ 768,651</b>

<b>7000: FIXED ASSETS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
7001	Computer Equipment & Software	\$ -
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	-
7003	Furniture & Fixtures	2,600
7004	Leasehold/Tenant/Building Improvements	3,900
7005	Other Assets over \$500 with Lifespan of 2 Years +	-
7006	Assets over \$5,000/unit (Specify)	-
7007	Other (Specify)	-
7008	Other (Specify)	-
<b>FIXED ASSETS EXPENSES TOTAL</b>		<b>\$ 6,500</b>

<b>TOTAL PROGRAM EXPENSES</b>		<b>\$ 4,211,158</b>
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**PROGRAM FUNDING SOURCES**

<b>8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)</b>				
<b>Acct #</b>	<b>Line Item Description</b>	<b>Service Units</b>	<b>Rate</b>	<b>Amount</b>
8001	Mental Health Services	82,240	2.91	\$ 239,318
8002	Case Management	35,169	1.99	69,986
8003	Crisis Services	1,580	3.20	5,056
8004	Medication Support	143,951	5.27	758,622
8005	Collateral	5,513	2.91	16,043
8006	Plan Development	8,530	2.91	24,822
8007	Assessment	15,889	2.91	46,237
8008	Rehabilitation	639,102	2.91	1,859,787
<b>Estimated Specialty Mental Health Services Billing Totals:</b>		<b>931,974</b>		<b>\$ 3,019,871</b>
Estimated % of Clients who are Medi-Cal Beneficiaries				100%
Estimated Total Cost of Specialty Mental Health Services Provided to Medi-Cal Beneficiaries				3,019,871
Federal Financial Participation (FFP) %			79%	2,385,698
<b>MEDI-CAL FFP TOTAL</b>				<b>\$ 2,385,698</b>

<b>8100 - SUBSTANCE USE DISORDER FUNDS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8101	Drug Medi-Cal	\$ -
8102	SABG	\$ -
<b>SUBSTANCE USE DISORDER FUNDS TOTAL</b>		<b>\$ -</b>

<b>8200 - REALIGNMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8201	Realignment	\$ (0)
<b>REALIGNMENT TOTAL</b>		<b>\$ (0)</b>

<b>8300 - MENTAL HEALTH SERVICE ACT (MHSA)</b>			
<b>Acct #</b>	<b>MHSA Component</b>	<b>MHSA Program Name</b>	<b>Amount</b>
8301	CSS - Community Services & Supports		\$ 1,786,460
8302	PEI - Prevention & Early Intervention		-
8303	INN - Innovations		-
8304	WET - Workforce Education & Training		-
8305	CFTN - Capital Facilities & Technology		-
<b>MHSA TOTAL</b>			<b>\$ 1,786,460</b>

<b>8400 - OTHER REVENUE</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8401	Client Fees	\$ 39,000
8402	Client Insurance	-
8403	Grants (Specify)	-
8404	Other (Specify)	-
8405	Other (Specify)	-
<b>OTHER REVENUE TOTAL</b>		<b>\$ 39,000</b>

**TOTAL PROGRAM FUNDING SOURCES: \$ 4,211,158**

**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Turning Point of Central Ca, Inc. | Fresno FSP Program Site #3 (Optional Site)**  
**FY 2022 - 2023 | 07/01/22 - 06/30/23 Budget Narrative**

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>1000: SALARIES &amp; BENEFITS</b>		<b>2,204,257</b>	
<b>Employee Salaries</b>		<b>1,728,287</b>	
1101	PROGRAM DIRECTOR	52,969	The Program Director currently oversees the program, hiring, training and supervising staff.
1102	ASST. PROGRAM DIRECTOR	100,828	The Assitant Program Director will supervise staff and assist the Program Director for that location
1103	ADMIN. ASSISTANT	26,437	The administrative assistant will oversee the support staff at both locations and will help with all support staff duties.
1104	BILLER	23,964	The biller will be responsible for billing into Avatar, billing all insurance claims and run reports as necessary for the program.
1105	BOOKKEEPER	24,678	The bookkeeper is responsible for processing all invoices for the program or programs and will send all information to the corporate office. They will handle petty cash, client fees and other bookkeeping needs for the program.
1106	CRIMINAL JUSTICE REHAB SPECIALIST (CM)	107,852	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in providing services to those involved in the criminal justice system and program liaison for Behavioral Health Court and the Federal Wellness Court
1107	DUAL DIAGNOSIS SPECIALIST (CM)	161,777	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in supporting and providing services for those who suffer from a co-occurring diagnosis.
1108	ED & EM REHAB SPECIALIST (CM)	161,777	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in linking and providing services to those interested in engagement in employment and education services.
1109	HOUSING COORDINATOR	53,926	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in identifying, linking and assisting clients in obtaining various housing such as a R&B, supportive housing, etc.
1110	INTAKE SPECIALIST	27,772	Reviews all referrals, contacting referral source and coordinating intake services to enroll in FSP program. The specialist also assists client in applying for additional benefits, such as General Relief, Social Security Benefits, Medi-cal, etc.
1111	LVN	166,629	Assists psychiatrist providing vital intake, coordination of medications, provides medication support and education, provides injections and consults with all staff in ensuring medication education and compliance
1112	MENTAL HEALTH PROFESSIONAL	390,101	Provides mental health assessment, assessing for Medical Necessity, assists client in identifying treatment plan goals according to diagnosis. MHP also provides individual and group therapy as client requests, while also providing program support to assist clients in crisis.
1113	PEER SUPPORT SPECIALIST	70,001	Provides support to clients, utilizing lived mental health experience to relate to clients, while assisting in activities with clients, run peer ran groups, meeting with clients during appointments providing support as needed.

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
1114	PERSONAL SERVICE COORDINATOR (CM)	199,381	Each FSP client will have a single point of responsibility through an assigned Personal Service Coordinator/case manager. The Personal Service Coordinator (PSC) works as a part of a treatment team in achieving the goals and objectives of the program to ensure quality of care for client participants. With case management being one of the primary methods of delivering services, each client shall be assigned a primary Personal Service Coordinator who will be responsible to see that the client's needs are met, as identified in the Plan of Care and the Individual Service and Support Plan (ISSP). They are able to provide intensive services and supports when needed, and they can give the client and/or family member considerable personal attention. The PSC will provide instruction modeling and support one-on-one in the course of daily events in the natural setting to manage day-to-day life and promote increased efficacy and self-sufficiency. This "hands on" approach will be utilized during the PSCs interaction with client's for 'en vivo' support, such as managing symptoms while preparing a budget, going to the doctor's office, the grocery store, in their home and maintaining their environment. Clients will learn at their own pace and with as much help as is needed by their personal service coordinator. A teaching/coaching approach will be used that empowers the client to gain mastery and take responsibility. Transportation and assistance in accessing other resources will be ensured by the PSC. All PSCs maintain their own case load of clients for whom they are the primary contact. Additionally, some of the PSC positions also include specialty training (housing, employment, education, criminal justice, substance use disorder) and will provide those specialty services to clients who are not on their caseload and can benefit from that expertise.
1115	PSC SUPERVISOR	74,672	Provides supervision to all PSCs/Mental Health Specialists to ensure client care, maintain compliance with Turning Point policies and procedures. Supervisor also assisting in training new staff and reporting to the Assistant Program Director.
1116	REGISTERED NURSE	48,763	Provides oversight over the LVNs/LPTs to ensure client care, maintaining compliance with Turning Point policies and procedures, providing training and ensuring accurate charting in accordance with Medi-cal.
1117	SECRETARY	36,760	Provides direct services to the program by data entry, phone calls, checking in clients, etc.
1118	0	-	
1119	0	-	
1120	0	-	
1121	0	-	
1122	0	-	
1123	0	-	
1124	0	-	
1125	0	-	
1126	0	-	
1127	0	-	
1128	0	-	
1129	0	-	
1130	0	-	
1131	0	-	
<b>Employee Benefits</b>		<b>325,930</b>	
1201	Retirement	28,198	Cost of Agency contribution to employee retirement plans.
1202	Worker's Compensation	30,811	Cost of workers compensation insurance.
1203	Health/ Dental Insurance	266,348	Agency cost for health, dental and vision insurance
1204	API Benefits	573	Employee assistance program
1205	Other (Specify)	-	
1206	Other (Specify)	-	
<b>Payroll Taxes &amp; Expenses:</b>		<b>150,040</b>	
1301	OASDI	-	
1302	FICA/MEDICARE / OASDI	143,742	Employer portion of F.I.C.A. taxes charged to the Agency by the Internal Revenue Service. F.I.C.A. is comprised of "Old-Age, Survivors, and Disability Insurance" (OASDI), plus "Hospital Insurance" (Medicare).
1303	SUI	6,298	Employer portion of S.U.I. taxes charged to the Agency by the various states in which wages are paid.
1304	Other: Accrued Paid Leave Moved to Admin Overhead	-	The monetary value of staff Paid Leave hours as they accrue on a monthly basis
1305	Other (Specify)	-	
1306	Other (Specify)	-	

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>2000: CLIENT SUPPORT</b>		<b>599,850</b>	
2001	Child Care	-	
2002	Client Housing Support	450,650	Cost of rent, housing assistance and deposit paid on behalf of client. (Examples: first/last month deposit, late fees, monthly rent, hotel charges, room & board, board & care, etc.)
2003	Client Transportation & Support	13,850	Cost for client transportation. (Examples: bus tokens/passes, taxi, other public transportation, bicycles, etc.)
2004	Clothing, Food, & Hygiene	21,300	Cost of client hygiene supplies and non-work related clothing. (Examples: clothes, shoes, soap, toothpaste, deodorant, grooming supplies, diapers, etc.)
2005	Education Support	4,600	Cost of course fees and educational materials distributed to clients and prospective clients. Including court ordered educational class.
2006	Employment Support	2,200	Cost of client pre-employment preparation and employment retention. (Examples: job search and interview attire, work boots and tools required for employment, etc.)
2007	Household Items for Clients	-	
2008	Medication Supports	63,700	Cost of medical supplies or treatment/medical expense for a specific client. (Examples: co-pays*, prescription/lab work not covered by insurance, over-the-counter medications*, first aid kit/supplies for client's use at home, etc.) *if allowable per contract
2009	Program Supplies - Medical	7,700	Cost of medical supplies to be used by staff or clients at the program location to meet program objective. Such items are to remain at the program location and not sent home with the client. Such items include, but are not limited to first aid kits, blood pressure monitor, latex gloves, syringes, hazard disposal service, over-the-counter medication*, etc. *if allowable per contract.
2010	Utility Vouchers	13,800	Cost of client utility bills and/or security deposits.
2011	Client Building Maintenance	2,200	Cost of building repair or maintenance paid for on client's behalf. (Examples: handyman work, plumbing, drywall, roofing, etc.)
2012	Client Therapy	1,550	Cost of therapy services not covered by insurance and therapeutic supplies for clients to use outside of the program. (Examples: exercise videos/equipment, relaxation audio/visual recordings, artistic expression supplies, etc.)
2013	Client Activities / Recreation	15,950	Cost for client activities & recreation events. (Examples: cable bill, food/drinks/utensils/decorations needed for a specific client event, incentive rewards, admission fees to events, etc.)
2014	Client Personal Needs	2,350	Cost of supplying clients with necessary personal items not detailed in other accounts. (Examples: birth certificate, DMV fee for ID or license, clients household cleaning products/house supplies/kitchen supplies for their own home, pots/pans/dishes, linens, paper towels and child related expenses such as car seat/stroller/play pin, etc.)
2015	Other (Specify)	-	
2016	Other (Specify)	-	

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>3000: OPERATING EXPENSES</b>		<b>159,550</b>	
3001	Telecommunications	15,300	Cost of electronic communications. (Examples: internet, phone, fax, cell phones, etc.)
3002	Printing/Postage	14,100	Cost of custom copying/printing charges (Examples: letterhead, business forms, business cards, flyers, brochures, signs, etc.) and Postage and delivery, including delivery by the USPS, UPS, FEDEX and other courier services
3003	Office, Household & Program Supplies	33,900	Cost of items normally used in an office setting. (Examples: pens, pencils, paper tablets, paper clips, notepads, staples, non-electric staplers/hole punchers/calculators, and other items normally used in an office setting.) House Supplies, Cost of supplies used by
3004	Advertising	-	
3005	Staff Development & Training	18,500	Cost of employee training courses and materials.
3006	Staff Mileage	15,950	Cost of employee mileage reimbursement paid in accordance with FPM section 1005.
3007	Subscriptions & Memberships	2,000	Cost of membership dues and subscriptions. (Examples: magazine, newspaper, memberships, etc.)
3008	Vehicle Maintenance / Gas / Insurance	42,850	Cost of vehicle maintenance. Including cost of parts, supplies and labor associated with maintenance and repair of vehicles used by Agency programs. Cost of gas in Vehicles and Insurance
3009	Program Enhancement	-	
3010	Staff Meetings	7,700	Cost of room rental and supplies necessary for staff meetings.
3011	Recruitment	3,900	Cost of advertising and other employee recruitment expenses. (Examples: newspaper ad, urine screening, background check, etc.)
3012	Employee-Employer Relations	5,350	Cost relating to improvement of working conditions, employer/employee relations and employee morale. (Examples: Company picnic items, florist, etc.)

4000: FACILITIES & EQUIPMENT			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>4000: FACILITIES &amp; EQUIPMENT</b>		<b>181,150</b>	
4001	Building Maintenance	8,000	Cost of Agency building repairs and maintenance. (Examples: electrical work, A/C and heating, hood cleaning, plumbing, etc.) This account should not be used if a specific outside labor contractor is doing an identifiable project.
4002	Rent/Lease Building	87,150	Cost of rent/lease payments made for building leases from outside sources.
4003	Rent/Lease Equipment	2,000	Cost of rent/lease payments made for furniture and equipment leases.
4004	Rent/Lease Vehicles	37,950	Rental cost of vehicles and lease of agency vehicles.
4005	Security	3,900	Cost of installation, maintenance and monthly service fees for building alarms and other security measures. (Examples: security/surveillance equipment, service and installation, safes, etc.)
4006	Utilities	39,550	Cost of service for power, gas, water, sewer, garbage, etc.
4007	Equipment Maintenance	2,600	Cost of equipment and furniture repair and maintenance. (Examples: high capacity copier/printer/scanner, replacement parts such as hard drive, laptop battery, monitor/printer/phone cord, drum, power strip, surge protector, video card, etc.)
4008	Liability Insurance	-	
4009	Other (Specify)	-	
4010	Other (Specify)	-	

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>5000: SPECIAL EXPENSES</b>		<b>291,200</b>	
5001	Consultant (Network & Data Management)	-	
5002	HMIS (Health Management Information System)	29,850	Avatar Costs
5003	Contractual/Consulting Services : Consultant	18,300	These accounts are assigned to record various professional services provided by contracted sources working as independent agents. (IT Consultations, EHR Consultation, External Consultation, Clinical Supervisors who are not Staffed under the Personnel & Salaries)
5004	Translation Services	4,300	Paid to an outside vendor for translation / interpreter services
5005	Contractual/Consulting Services : Psychiatrist	238,750	These accounts are assigned to record various professional services provided by contracted Psychiatrist working as independent agents.
5006	Other (Specify)	-	
5007	Other (Specify)	-	
5008	Other (Specify)	-	

<b>6000: ADMINISTRATIVE EXPENSES</b>		<b>768,651</b>	
6001	Administrative Overhead	737,151	Support of our cooperate and regional offices such as processing invoices, payroll, cost reports, etc. Accrued Paid Leave moved/added to Admin Overhead. Accrual Paid Leave cannot be listed in Salaries and Benefits Per DBH
6002	Professional Liability Insurance	-	
6003	Accounting/Bookkeeping	-	
6004	External Audit	3,900	Cost of outside audit fees.
6005	Insurance (Specify):	7,600	
6006	Payroll Services	-	
6007	Depreciation (Provider-Owned Equipment to be Used for Program Purposes)	11,500	This account should be charged for the depreciation expense of the Agency's tangible assets.
6008	Other: Bank Fees	2,600	Cost of bank fees charged to Agency account.
6009	Other: Legal Expense	1,300	Cost of outside legal fees
6010	Other: Licenses	4,600	Cost in obtaining and renewing licenses and permits.
6011	Other (Specify)	-	Cost of membership dues and subscriptions.
6012	Other (Specify)	-	

<b>7000: FIXED ASSETS</b>		<b>6,500</b>	
7001	Computer Equipment & Software	-	
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	-	
7003	Furniture & Fixtures	2,600	Purchase of furniture and fixtures as needed
7004	Leasehold/Tenant/Building Improvements	3,900	Improvements to the building as needed that isn't covered by the landlord
7005	Other Assets over \$500 with Lifespan of 2 Years +	-	
7006	Assets over \$5,000/unit (Specify)	-	
7007	Other (Specify)	-	
7008	Other (Specify)	-	

PROGRAM FUNDING SOURCES		
8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)		
ACCT #	LINE ITEM	PROVIDE DETAILS OF METHODOLOGY(IES) USED IN DETERMINING MEDI-CAL SERVICE RATES AND/OR SERVICE UNITS, IF APPLICABLE AND/OR AS REQUIRED BY THE RFP.
8001	Mental Health Services	We based our rates and units on current program usage
8002	Case Management	We based our rates and units on current program usage
8003	Crisis Services	We based our rates and units on current program usage
8004	Medication Support	We based our rates and units on current program usage
8005	Collateral	We based our rates and units on current program usage
8006	Plan Development	We based our rates and units on current program usage
8007	Assessment	We based our rates and units on current program usage
8008	Rehabilitation	We based our rates and units on current program usage

**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Turning Point of Central Ca, Inc. | Fresno FSP Program Site #3 (Optional site)**  
**FY 2023 - 2024 | 07/01/23 - 06/30/24**

**PROGRAM EXPENSES**

1000: SALARIES & BENEFITS					
Employee Salaries					
Acct #	Position	FTE	Admin	Direct	Total
1101	PROGRAM DIRECTOR	0.50	\$ -	\$ 55,617	\$ 55,617
1102	ASST. PROGRAM DIRECTOR	1.00	-	105,869	105,869
1103	ADMIN. ASSISTANT	0.50	-	27,759	27,759
1104	BILLER	0.50	-	25,162	25,162
1105	BOOKKEEPER	0.50	-	25,912	25,912
1106	CRIMINAL JUSTICE REHAB SPECIALIST (CM)	2.00	-	113,245	113,245
1107	DUAL DIAGNOSIS SPECIALIST (CM)	3.00	-	169,866	169,866
1108	ED & EM REHAB SPECIALIST (CM)	3.00	-	169,866	169,866
1109	HOUSING COORDINATOR	1.00	-	56,623	56,623
1110	INTAKE SPECIALIST	0.50	-	29,161	29,161
1111	LVN	3.00	-	174,961	174,961
1112	MENTAL HEALTH PROFESSIONAL	4.00	-	409,606	409,606
1113	PEER SUPPORT SPECIALIST	2.00	-	73,501	73,501
1114	PERSONAL SERVICE COORDINATOR (CM)	4.00	-	209,351	209,351
1115	PSC SUPERVISOR	1.00	-	78,406	78,406
1116	REGISTERED NURSE	0.50	-	51,202	51,202
1117	SECRETARY	1.00	-	38,598	38,598
1118			-	-	-
1119			-	-	-
1120			-	-	-
1121			-	-	-
1122			-	-	-
1123			-	-	-
1124			-	-	-
1125			-	-	-
1126			-	-	-
1127			-	-	-
1128			-	-	-
1129			-	-	-
1130			-	-	-
1131			-	-	-
<b>Personnel Salaries Subtotal</b>		<b>28.00</b>	<b>\$ -</b>	<b>\$ 1,814,705</b>	<b>\$ 1,814,705</b>

<b>Employee Benefits</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1201	Retirement	\$ -	\$ -	\$ -
1202	Worker's Compensation	-	61,960	61,960
1203	Health/ Dental Insurance	-	279,666	279,666
1204	API Benefits	-	602	602
1205	Other (Specify)	-	-	-
1206	Other (Specify)	-	-	-
<b>Employee Benefits Subtotal:</b>		<b>\$ -</b>	<b>\$ 342,228</b>	<b>\$ 342,228</b>
<b>Payroll Taxes &amp; Expenses:</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1301	OASDI	\$ -	\$ 27,634	\$ 27,634
1302	FICA/MEDICARE / OASDI	-	123,296	123,296
1303	SUI	-	6,613	6,613
1304	Other: Accrued Paid Leave Moved to Admin Overhead	-	-	-
1305	Other (Specify)	-	-	-
1306	Other (Specify)	-	-	-
<b>Payroll Taxes &amp; Expenses Subtotal:</b>		<b>\$ -</b>	<b>\$ 157,543</b>	<b>\$ 157,543</b>
<b>EMPLOYEE SALARIES &amp; BENEFITS TOTAL:</b>		<b>\$ -</b>	<b>\$ 2,314,476</b>	<b>\$ 2,314,476</b>



<b>2000: CLIENT SUPPORT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
2001	Child Care	\$ -
2002	Client Housing Support	464,170
2003	Client Transportation & Support	14,266
2004	Clothing, Food, & Hygiene	21,939
2005	Education Support	4,738
2006	Employment Support	2,266
2007	Household Items for Clients	-
2008	Medication Supports	65,611
2009	Program Supplies - Medical	7,931
2010	Utility Vouchers	14,214
2011	Client Building Maintenance	2,266
2012	Client Therapy	1,597
2013	Client Activities / Recreation	16,429
2014	Client Personal Needs	2,421
2015	Other (Specify)	-
2016	Other (Specify)	-
<b>DIRECT CLIENT CARE TOTAL</b>		<b>\$ 617,848</b>

<b>3000: OPERATING EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
3001	Telecommunications	\$ 15,759
3002	Printing/Postage	14,523
3003	Office, Household & Program Supplies	34,977
3004	Advertising	-
3005	Staff Development & Training	19,055
3006	Staff Mileage	16,429
3007	Subscriptions & Memberships	2,000
3008	Vehicle Maintenance / Gas / Insurance	44,136
3009	Program Enhancement	-
3010	Staff Meetings	7,931
3011	Recruitment	4,017
3012	Employee-Employer Relations	5,511
<b>OPERATING EXPENSES TOTAL:</b>		<b>\$ 164,338</b>

<b>4000: FACILITIES &amp; EQUIPMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
4001	Building Maintenance	\$ 8,240
4002	Rent/Lease Building	89,825
4003	Rent/Lease Equipment	2,000
4004	Rent/Lease Vehicles	39,089
4005	Security	4,017
4006	Utilities	40,737
4007	Equipment Maintenance	2,678
4008	Liability Insurance	7,828
4009	Other (Specify)	-
4010	Other (Specify)	-
<b>FACILITIES/EQUIPMENT TOTAL:</b>		<b>\$ 194,414</b>

<b>5000: SPECIAL EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
5001	Consultant (Network & Data Management)	\$ -
5002	HMIS (Health Management Information System)	30,806
5003	Contractual/Consulting Services : Consultant	18,849
5004	Translation Services	4,429
5005	Contractual/Consulting Services : Psychiatrist	245,913
5006	Other (Specify)	-
5007	Other (Specify)	-
5008	Other (Specify)	-
<b>SPECIAL EXPENSES TOTAL:</b>		<b>\$ 299,997</b>

<b>6000: ADMINISTRATIVE EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
6001	Administrative Overhead	\$ 770,200
6002	Professional Liability Insurance	-
6003	Accounting/Bookkeeping	-
6004	External Audit	4,017
6005	Insurance (Specify):	-
6006	Payroll Services	-
6007	Depreciation <i>(Provider-Owned Equipment to be Used for Program Purposes)</i>	11,845
6008	Other: Bank Fees	2,678
6009	Other: Legal Expense	1,339
6010	Other: Licenses	4,678
6011	Other (Specify)	-
6012	Other (Specify)	-
<b>ADMINISTRATIVE EXPENSES TOTAL</b>		<b>\$ 794,757</b>

<b>7000: FIXED ASSETS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
7001	Computer Equipment & Software	\$ -
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	-
7003	Furniture & Fixtures	2,678
7004	Leasehold/Tenant/Building Improvements	4,017
7005	Other Assets over \$500 with Lifespan of 2 Years +	-
7006	Assets over \$5,000/unit (Specify)	-
7007	Other (Specify)	-
7008	Other (Specify)	-
<b>FIXED ASSETS EXPENSES TOTAL</b>		<b>\$ 6,695</b>

<b>TOTAL PROGRAM EXPENSES</b>		<b>\$ 4,392,525</b>
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**PROGRAM FUNDING SOURCES**

<b>8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)</b>				
<b>Acct #</b>	<b>Line Item Description</b>	<b>Service Units</b>	<b>Rate</b>	<b>Amount</b>
8001	Mental Health Services	88,360	2.91	\$ 257,128
8002	Case Management	37,785	1.99	75,192
8003	Crisis Services	1,697	3.20	5,430
8004	Medication Support	154,662	5.27	815,069
8005	Collateral	5,923	2.91	17,236
8006	Plan Development	9,164	2.91	26,667
8007	Assessment	17,071	2.91	49,677
8008	Rehabilitation	686,660	2.91	1,998,181
<b>Estimated Specialty Mental Health Services Billing Totals:</b>		<b>1,001,322</b>		<b>\$ 3,244,579</b>
Estimated % of Clients who are Medi-Cal Beneficiaries				100%
Estimated Total Cost of Specialty Mental Health Services Provided to Medi-Cal Beneficiaries				3,244,579
Federal Financial Participation (FFP) %			79%	2,563,218
<b>MEDI-CAL FFP TOTAL</b>				<b>\$ 2,563,218</b>

<b>8100 - SUBSTANCE USE DISORDER FUNDS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8101	Drug Medi-Cal	\$ -
8102	SABG	\$ -
<b>SUBSTANCE USE DISORDER FUNDS TOTAL</b>		<b>\$ -</b>

<b>8200 - REALIGNMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8201	Realignment	\$ 0
<b>REALIGNMENT TOTAL</b>		<b>\$ 0</b>

<b>8300 - MENTAL HEALTH SERVICE ACT (MHSA)</b>			
<b>Acct #</b>	<b>MHSA Component</b>	<b>MHSA Program Name</b>	<b>Amount</b>
8301	CSS - Community Services & Supports		\$ 1,790,307
8302	PEI - Prevention & Early Intervention		-
8303	INN - Innovations		-
8304	WET - Workforce Education & Training		-
8305	CFTN - Capital Facilities & Technology		-
<b>MHSA TOTAL</b>			<b>\$ 1,790,307</b>

<b>8400 - OTHER REVENUE</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8401	Client Fees	\$ 39,000
8402	Client Insurance	-
8403	Grants (Specify)	-
8404	Other (Specify)	-
8405	Other (Specify)	-
<b>OTHER REVENUE TOTAL</b>		<b>\$ 39,000</b>

**TOTAL PROGRAM FUNDING SOURCES: \$ 4,392,525**

**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Turning Point of Central Ca, Inc. | Fresno FSP Program Site #3 (Optional site)**  
**FY 2023 - 2024 | 07/01/23 - 06/30/24 Budget Narrative**

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>1000: SALARIES &amp; BENEFITS</b>		<b>2,314,476</b>	
<b>Employee Salaries</b>		<b>1,814,705</b>	
1101	PROGRAM DIRECTOR	55,617	The Program Director currently oversees the program, hiring, training and supervising staff.
1102	ASST. PROGRAM DIRECTOR	105,869	The Assitant Program Director will supervise staff and assist the Program Director for that location
1103	ADMIN. ASSISTANT	27,759	The administrative assistant will oversee the support staff at both locations and will help with all support staff duties.
1104	BILLER	25,162	The biller will be responsible for billing into Avatar, billing all insurance claims and run reports as necessary for the program.
1105	BOOKKEEPER	25,912	The bookkeeper is responsible for processing all invoices for the program or programs and will send all information to the corporate office. They will handle petty cash, client fees and other bookkeeping needs for the program.
1106	CRIMINAL JUSTICE REHAB SPECIALIST (CM)	113,245	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in providing services to those involved in the criminal justice system and program liaison for Behavioral Health Court and the Federal Wellness Court
1107	DUAL DIAGNOSIS SPECIALIST (CM)	169,866	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in supporting and providing services for those who suffer from a co-occurring diagnosis.
1108	ED & EM REHAB SPECIALIST (CM)	169,866	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in linking and providing services to those interested in engagement in employment and education services.
1109	HOUSING COORDINATOR	56,623	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in identifying, linking and assisting clients in obtaining various housing such as a R&B, supportive housing, etc.
1110	INTAKE SPECIALIST	29,161	Reviews all referrals, contacting referral source and coordinating intake services to enroll in FSP program. The specialist also assists client in applying for additional benefits, such as General Relief, Social Security Benefits, Medi-cal, etc.
1111	LVN	174,961	Assists psychiatrist providing vital intake, coordination of medications, provides medication support and education, provides injections and consults with all staff in ensuring medication education and compliance
1112	MENTAL HEALTH PROFESSIONAL	409,606	Provides mental health assessment, assessing for Medical Necessity, assists client in identifying treatment plan goals according to diagnosis. MHP also provides individual and group therapy as client requests, while also providing program support to assist clients in crisis.
1113	PEER SUPPORT SPECIALIST	73,501	Provides support to clients, utilizing lived mental health experience to relate to clients, while assisting in activities with clients, run peer ran groups, meeting with clients during appointments providing support as needed.

PROGRAM EXPENSE				
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE	
1114	PERSONAL SERVICE COORDINATOR (CM)	209,351	Each FSP client will have a single point of responsibility through an assigned Personal Service Coordinator/case manager. The Personal Service Coordinator (PSC) works as a part of a treatment team in achieving the goals and objectives of the program to ensure quality of care for client participants. With case management being one of the primary methods of delivering services, each client shall be assigned a primary Personal Service Coordinator who will be responsible to see that the client's needs are met, as identified in the Plan of Care and the Individual Service and Support Plan (ISSP). They are able to provide intensive services and supports when needed, and they can give the client and/or family member considerable personal attention. The PSC will provide instruction modeling and support one-on-one in the course of daily events in the natural setting to manage day-to-day life and promote increased efficacy and self-sufficiency. This "hands on" approach will be utilized during the PSCs interaction with client's for 'en vivo' support, such as managing symptoms while preparing a budget, going to the doctor's office, the grocery store, in their home and maintaining their environment. Clients will learn at their own pace and with as much help as is needed by their personal service coordinator. A teaching/coaching approach will be used that empowers the client to gain mastery and take responsibility. Transportation and assistance in accessing other resources will be ensured by the PSC. All PSCs maintain their own case load of clients for whom they are the primary contact. Additionally, some of the PSC positions also include specialty training (housing, employment, education, criminal justice, substance use disorder) and will provide those specialty services to clients who are not on their caseload and can benefit from that expertise.	
1115	PSC SUPERVISOR	78,406	Provides supervision to all PSCs/Mental Health Specialists to ensure client care, maintain compliance with Turning Point policies and procedures. Supervisor also assisting in training new staff and reporting to the Assistant Program Director.	
1116	REGISTERED NURSE	51,202	Provides oversight over the LVNs/LPTs to ensure client care, maintaining compliance with Turning Point policies and procedures, providing training and ensuring accurate charting in accordance with Medi-cal.	
1117	SECRETARY	38,598	Provides direct services to the program by data entry, phone calls, checking in clients, etc.	
1118	0	-		
1119	0	-		
1120	0	-		
1121	0	-		
1122	0	-		
1123	0	-		
1124	0	-		
1125	0	-		
1126	0	-		
1127	0	-		
1128	0	-		
1129	0	-		
1130	0	-		
1131	0	-		
<b>Employee Benefits</b>		<b>342,228</b>		
1201	Retirement	-	Cost of Agency contribution to employee retirement plans.	
1202	Worker's Compensation	61,960	Cost of workers compensation insurance.	
1203	Health/ Dental Insurance	279,666	Agency cost for health, dental and vision insurance	
1204	API Benefits	602	Employee assistance program	
1205	Other (Specify)	-		
1206	Other (Specify)	-		
<b>Payroll Taxes &amp; Expenses:</b>		<b>157,543</b>		
1301	OASDI	27,634		
1302	FICA/MEDICARE / OASDI	123,296	Employer portion of F.I.C.A. taxes charged to the Agency by the Internal Revenue Service. F.I.C.A. is comprised of "Old-Age, Survivors, and Disability Insurance" (OASDI), plus "Hospital Insurance" (Medicare).	
1303	SUI	6,613	Employer portion of S.U.I. taxes charged to the Agency by the various states in which wages are paid.	
1304	Other: Accrued Paid Leave Moved to Admin Overhead	-	The monetary value of staff Paid Leave hours as they accrue on a monthly basis	
1305	Other (Specify)	-		
1306	Other (Specify)	-		

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>2000: CLIENT SUPPORT</b>		<b>617,848</b>	
2001	Child Care	-	
2002	Client Housing Support	464,170	Cost of rent, housing assistance and deposit paid on behalf of client. (Examples: first/last month deposit, late fees, monthly rent, hotel charges, room & board, board & care, etc.)
2003	Client Transportation & Support	14,266	Cost for client transportation. (Examples: bus tokens/passes, taxi, other public transportation, bicycles, etc.)
2004	Clothing, Food, & Hygiene	21,939	Cost of client hygiene supplies and non-work related clothing. (Examples: clothes, shoes, soap, toothpaste, deodorant, grooming supplies, diapers, etc.)
2005	Education Support	4,738	Cost of course fees and educational materials distributed to clients and prospective clients. Including court ordered educational class.
2006	Employment Support	2,266	Cost of client pre-employment preparation and employment retention. (Examples: job search and interview attire, work boots and tools required for employment, etc.)
2007	Household Items for Clients	-	
2008	Medication Supports	65,611	Cost of medical supplies or treatment/medical expense for a specific client. (Examples: co-pays*, prescription/lab work not covered by insurance, over-the-counter medications*, first aid kit/supplies for client's use at home, etc.) *if allowable per contract
2009	Program Supplies - Medical	7,931	Cost of medical supplies to be used by staff or clients at the program location to meet program objective. Such items are to remain at the program location and not sent home with the client. Such items include, but are not limited to first aid kits, blood pressure monitor, latex gloves, syringes, hazard disposal service, over-the-counter medication*, etc. *if allowable per contract.
2010	Utility Vouchers	14,214	Cost of client utility bills and/or security deposits.
2011	Client Building Maintenance	2,266	Cost of building repair or maintenance paid for on client's behalf. (Examples: handyman work, plumbing, drywall, roofing, etc.)
2012	Client Therapy	1,597	Cost of therapy services not covered by insurance and therapeutic supplies for clients to use outside of the program. (Examples: exercise videos/equipment, relaxation audio/visual recordings, artistic expression supplies, etc.)
2013	Client Activities / Recreation	16,429	Cost for client activities & recreation events. (Examples: cable bill, food/drinks/utensils/decorations needed for a specific client event, incentive rewards, admission fees to events, etc.)
2014	Client Personal Needs	2,421	Cost of supplying clients with necessary personal items not detailed in other accounts. (Examples: birth certificate, DMV fee for ID or license, clients household cleaning products/house supplies/kitchen supplies for their own home, pots/pans/dishes, linens, paper towels and child related expenses such as car seat/stroller/play pin, etc.)
2015	Other (Specify)	-	
2016	Other (Specify)	-	

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>3000: OPERATING EXPENSES</b>		<b>164,338</b>	
3001	Telecommunications	15,759	Cost of electronic communications. (Examples: internet, phone, fax, cell phones, etc.)
3002	Printing/Postage	14,523	Cost of custom copying/printing charges (Examples: letterhead, business forms, business cards, flyers, brochures, signs, etc.) and Postage and delivery, including delivery by the USPS, UPS, FEDEX and other courier services
3003	Office, Household & Program Supplies	34,977	Cost of items normally used in an office setting. (Examples: pens, pencils, paper tablets, paper clips, notepads, staples, non-electric staplers/hole punchers/calculators, and other items normally used in an office setting.) House Supplies, Cost of supplies used by staff during their scheduled work hours. These items are normally used to operate the building at the program location. These items are to remain at program location and not sent home with client. (Examples: pots, pans, pot holders, kitchen towels, curtains, detergent, Clorox for clothes, can opener, dishes, furnace filter, decorations, linens, etc.), Program Supplies, Cost of any items normally used by clients to meet program objectives while receiving services. These items are to remain at the program location and not sent home with the client. Such items include, but are not limited to video tapes, printed handouts, desk reference books, research material, curriculum, puzzles, board games, therapeutic/meditative supplies and other items that are specifically designed and used to accomplish program goals.
3004	Advertising	-	
3005	Staff Development & Training	19,055	Cost of employee training courses and materials.
3006	Staff Mileage	16,429	Cost of employee mileage reimbursement paid in accordance with FPM section 1005.
3007	Subscriptions & Memberships	2,000	Cost of membership dues and subscriptions. (Examples: magazine, newspaper, memberships, etc.)
3008	Vehicle Maintenance / Gas / Insurance	44,136	Cost of vehicle maintenance. Including cost of parts, supplies and labor associated with maintenance and repair of vehicles used by Agency programs. Cost of gas in Vehicles and Insurance
3009	Program Enhancement	-	
3010	Staff Meetings	7,931	Cost of room rental and supplies necessary for staff meetings.
3011	Recruitment	4,017	Cost of advertising and other employee recruitment expenses. (Examples: newspaper ad, urine screening, background check, etc.)
3012	Employee-Employer Relations	5,511	Cost relating to improvement of working conditions, employer/employee relations and employee morale. (Examples: Company picnic items, florist, etc.)
<b>4000: FACILITIES &amp; EQUIPMENT</b>		<b>194,414</b>	
4001	Building Maintenance	8,240	Cost of Agency building repairs and maintenance. (Examples: electrical work, A/C and heating, hood cleaning, plumbing, etc.) This account should not be used if a specific outside labor contractor is doing an identifiable project.
4002	Rent/Lease Building	89,825	Cost of rent/lease payments made for building leases from outside sources.
4003	Rent/Lease Equipment	2,000	Cost of rent/lease payments made for furniture and equipment leases.
4004	Rent/Lease Vehicles	39,089	Rental cost of vehicles and lease of agency vehicles.
4005	Security	4,017	Cost of installation, maintenance and monthly service fees for building alarms and other security measures. (Examples: security/surveillance equipment, service and installation, safes, etc.)
4006	Utilities	40,737	Cost of service for power, gas, water, sewer, garbage, etc.
4007	Equipment Maintenance	2,678	Cost of equipment and furniture repair and maintenance. (Examples: high capacity copier/printer/scanner, replacement parts such as hard drive, laptop battery, monitor/printer/phone cord, drum, power strip, surge protector, video card, etc.)
4008	Liability Insurance	7,828	
4009	Other (Specify)	-	
4010	Other (Specify)	-	

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>5000: SPECIAL EXPENSES</b>		<b>299,997</b>	
5001	Consultant (Network & Data Management)	-	
5002	HMIS (Health Management Information System)	30,806	Avatar Costs
5003	Contractual/Consulting Services : Consultant	18,849	These accounts are assigned to record various professional services provided by contracted sources working as independent agents. (IT Consultations, EHR Consultation, External Consultation, Clinical Supervisors who are not Staffed under the Personnel & Salaries)
5004	Translation Services	4,429	Paid to an outside vendor for translation / interpreter services
5005	Contractual/Consulting Services : Psychiatrist	245,913	These accounts are assigned to record various professional services provided by contracted Psychiatrist working as independent agents.
5006	Other (Specify)	-	
5007	Other (Specify)	-	
5008	Other (Specify)	-	

<b>6000: ADMINISTRATIVE EXPENSES</b>		<b>794,757</b>	
6001	Administrative Overhead	770,200	Support of our cooperate and regional offices such as processing invoices, payroll, cost reports, etc. Accrued Paid Leave moved/added to Admin Overhead. Accrual Paid Leave cannot be listed in Salaries and Benefits Per DBH
6002	Professional Liability Insurance	-	
6003	Accounting/Bookkeeping	-	
6004	External Audit	4,017	Cost of outside audit fees.
6005	Insurance (Specify):	-	
6006	Payroll Services	-	
6007	Depreciation (Provider-Owned Equipment to be Used for Program Purposes)	11,845	This account should be charged for the depreciation expense of the Agency's tangible assets.
6008	Other: Bank Fees	2,678	Cost of bank fees charged to Agency account.
6009	Other: Legal Expense	1,339	Cost of outside legal fees
6010	Other: Licenses	4,678	Cost in obtaining and renewing licenses and permits.
6011	Other (Specify)	-	Cost of membership dues and subscriptions.
6012	Other (Specify)	-	

<b>7000: FIXED ASSETS</b>		<b>6,695</b>	
7001	Computer Equipment & Software	-	
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	-	
7003	Furniture & Fixtures	2,678	Purchase of furniture and fixtures as needed
7004	Leasehold/Tenant/Building Improvements	4,017	Improvements to the building as needed that isn't covered by the landlord
7005	Other Assets over \$500 with Lifespan of 2 Years +	-	
7006	Assets over \$5,000/unit (Specify)	-	
7007	Other (Specify)	-	
7008	Other (Specify)	-	

PROGRAM FUNDING SOURCES		
8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)		
ACCT #	LINE ITEM	PROVIDE DETAILS OF METHODOLOGY(IES) USED IN DETERMINING MEDI-CAL SERVICE RATES AND/OR SERVICE UNITS, IF APPLICABLE AND/OR AS REQUIRED BY THE RFP.
8001	Mental Health Services	We based our rates and units on current program usage
8002	Case Management	We based our rates and units on current program usage
8003	Crisis Services	We based our rates and units on current program usage
8004	Medication Support	We based our rates and units on current program usage
8005	Collateral	We based our rates and units on current program usage
8006	Plan Development	We based our rates and units on current program usage
8007	Assessment	We based our rates and units on current program usage
8008	Rehabilitation	We based our rates and units on current program usage



**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Turning Point of Central Ca, Inc. | Fresno FSP Program Site #3 (Optional Site)**  
**FY 2024 - 2025 | 07/01/24 - 06/30/25**

**PROGRAM EXPENSES**

1000: SALARIES & BENEFITS					
Employee Salaries					
Acct #	Position	FTE	Admin	Direct	Total
1101	PROGRAM DIRECTOR	0.50	\$ -	\$ 58,398	\$ 58,398
1102	ASST. PROGRAM DIRECTOR	1.00	-	111,163	111,163
1103	ADMIN. ASSISTANT	0.50	-	29,147	29,147
1104	BILLER	0.50	-	26,421	26,421
1105	BOOKKEEPER	0.50	-	27,208	27,208
1106	CRIMINAL JUSTICE REHAB SPECIALIST (CM)	2.00	-	118,907	118,907
1107	DUAL DIAGNOSIS SPECIALIST (CM)	3.00	-	178,360	178,360
1108	ED & EM REHAB SPECIALIST (CM)	3.00	-	178,360	178,360
1109	HOUSING COORDINATOR	1.00	-	59,454	59,454
1110	INTAKE SPECIALIST	0.50	-	30,619	30,619
1111	LVN	3.00	-	183,709	183,709
1112	MENTAL HEALTH PROFESSIONAL	4.00	-	430,087	430,087
1113	PEER SUPPORT SPECIALIST	2.00	-	77,177	77,177
1114	PERSONAL SERVICE COORDINATOR (CM)	4.00	-	219,819	219,819
1115	PSC SUPERVISOR	1.00	-	82,326	82,326
1116	REGISTERED NURSE	0.50	-	53,762	53,762
1117	SECRETARY	1.00	-	40,528	40,528
1118			-	-	-
1119			-	-	-
1120			-	-	-
1121			-	-	-
1122			-	-	-
1123			-	-	-
1124			-	-	-
1125			-	-	-
1126			-	-	-
1127			-	-	-
1128			-	-	-
1129			-	-	-
1130			-	-	-
1131			-	-	-
<b>Personnel Salaries Subtotal</b>		<b>28.00</b>	<b>\$ -</b>	<b>\$ 1,905,445</b>	<b>\$ 1,905,445</b>

<b>Employee Benefits</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1201	Retirement	\$ -	\$ -	\$ -
1202	Worker's Compensation	-	65,058	65,058
1203	Health/ Dental Insurance	-	293,649	293,649
1204	API Benefits	-	632	632
1205	Other (Specify)	-	-	-
1206	Other (Specify)	-	-	-
<b>Employee Benefits Subtotal:</b>		<b>\$ -</b>	<b>\$ 359,339</b>	<b>\$ 359,339</b>
<b>Payroll Taxes &amp; Expenses:</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1301	OASDI	\$ -	\$ -	\$ -
1302	FICA/MEDICARE / OASDI	-	158,477	158,477
1303	SUI	-	6,944	6,944
1304	Other: Accrued Paid Leave Moved to Admin Overhead	-	-	-
1305	Other (Specify)	-	-	-
1306	Other (Specify)	-	-	-
<b>Payroll Taxes &amp; Expenses Subtotal:</b>		<b>\$ -</b>	<b>\$ 165,421</b>	<b>\$ 165,421</b>
<b>EMPLOYEE SALARIES &amp; BENEFITS TOTAL:</b>		<b>\$ -</b>	<b>\$ 2,430,205</b>	<b>\$ 2,430,205</b>

<b>2000: CLIENT SUPPORT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
2001	Child Care	\$ -
2002	Client Housing Support	478,096
2003	Client Transportation & Support	14,694
2004	Clothing, Food, & Hygiene	22,598
2005	Education Support	4,881
2006	Employment Support	2,334
2007	Household Items for Clients	-
2008	Medication Supports	67,580
2009	Program Supplies - Medical	8,169
2010	Utility Vouchers	14,641
2011	Client Building Maintenance	2,334
2012	Client Therapy	1,645
2013	Client Activities / Recreation	16,922
2014	Client Personal Needs	2,494
2015	Other (Specify)	-
2016	Other (Specify)	-
<b>DIRECT CLIENT CARE TOTAL</b>		<b>\$ 636,388</b>

<b>3000: OPERATING EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
3001	Telecommunications	\$ 16,232
3002	Printing/Postage	14,960
3003	Office, Household & Program Supplies	36,089
3004	Advertising	-
3005	Staff Development & Training	19,627
3006	Staff Mileage	16,922
3007	Subscriptions & Memberships	2,000
3008	Vehicle Maintenance / Gas / Insurance	45,463
3009	Program Enhancement	-
3010	Staff Meetings	8,169
3011	Recruitment	4,138
3012	Employee-Employer Relations	5,676
<b>OPERATING EXPENSES TOTAL:</b>		<b>\$ 169,276</b>

<b>4000: FACILITIES &amp; EQUIPMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
4001	Building Maintenance	\$ 8,488
4002	Rent/Lease Building	92,580
4003	Rent/Lease Equipment	2,000
4004	Rent/Lease Vehicles	40,262
4005	Security	4,138
4006	Utilities	41,959
4007	Equipment Maintenance	2,759
4008	Liability Insurance	8,063
4009	Other (Specify)	-
4010	Other (Specify)	-
<b>FACILITIES/EQUIPMENT TOTAL:</b>		<b>\$ 200,249</b>

<b>5000: SPECIAL EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
5001	Consultant (Network & Data Management)	\$ -
5002	HMIS (Health Management Information System)	31,790
5003	Contractual/Consulting Services : Consultant	19,416
5004	Translation Services	4,562
5005	Contractual/Consulting Services : Psychiatrist	253,290
5006	Other (Specify)	-
5007	Other (Specify)	-
5008	Other (Specify)	-
<b>SPECIAL EXPENSES TOTAL:</b>		<b>\$ 309,058</b>

<b>6000: ADMINISTRATIVE EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
6001	Administrative Overhead	\$ 804,791
6002	Professional Liability Insurance	-
6003	Accounting/Bookkeeping	-
6004	External Audit	4,138
6005	Insurance (Specify):	-
6006	Payroll Services	-
6007	Depreciation <i>(Provider-Owned Equipment to be Used for Program Purposes)</i>	12,201
6008	Other: Bank Fees	2,760
6009	Other: Legal Expense	1,380
6010	Other: Licenses	4,759
6011	Other (Specify)	-
6012	Other (Specify)	-
<b>ADMINISTRATIVE EXPENSES TOTAL</b>		<b>\$ 830,029</b>

<b>7000: FIXED ASSETS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
7001	Computer Equipment & Software	\$ -
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	-
7003	Furniture & Fixtures	2,759
7004	Leasehold/Tenant/Building Improvements	4,138
7005	Other Assets over \$500 with Lifespan of 2 Years +	-
7006	Assets over \$5,000/unit (Specify)	-
7007	Other (Specify)	-
7008	Other (Specify)	-
<b>FIXED ASSETS EXPENSES TOTAL</b>		<b>\$ 6,897</b>

<b>TOTAL PROGRAM EXPENSES</b>		<b>\$ 4,582,102</b>
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**PROGRAM FUNDING SOURCES**

<b>8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)</b>				
<b>Acct #</b>	<b>Line Item Description</b>	<b>Service Units</b>	<b>Rate</b>	<b>Amount</b>
8001	Mental Health Services	95,090	2.91	\$ 276,712
8002	Case Management	40,664	1.99	80,921
8003	Crisis Services	1,827	3.20	5,846
8004	Medication Support	166,443	5.27	877,155
8005	Collateral	6,374	2.91	18,548
8006	Plan Development	9,862	2.91	28,698
8007	Assessment	18,371	2.91	53,460
8008	Rehabilitation	738,937	2.91	2,150,307
<b>Estimated Specialty Mental Health Services Billing Totals:</b>		<b>1,077,568</b>		<b>\$ 3,491,647</b>
Estimated % of Clients who are Medi-Cal Beneficiaries				100%
Estimated Total Cost of Specialty Mental Health Services Provided to Medi-Cal Beneficiaries				3,491,647
Federal Financial Participation (FFP) %			79%	2,758,401
<b>MEDI-CAL FFP TOTAL</b>				<b>\$ 2,758,401</b>

<b>8100 - SUBSTANCE USE DISORDER FUNDS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8101	Drug Medi-Cal	\$ -
8102	SABG	\$ -
<b>SUBSTANCE USE DISORDER FUNDS TOTAL</b>		<b>\$ -</b>

<b>8200 - REALIGNMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8201	Realignment	\$ (0)
<b>REALIGNMENT TOTAL</b>		<b>\$ (0)</b>

<b>8300 - MENTAL HEALTH SERVICE ACT (MHSA)</b>			
<b>Acct #</b>	<b>MHSA Component</b>	<b>MHSA Program Name</b>	<b>Amount</b>
8301	CSS - Community Services & Supports		\$ 1,784,701
8302	PEI - Prevention & Early Intervention		-
8303	INN - Innovations		-
8304	WET - Workforce Education & Training		-
8305	CFTN - Capital Facilities & Technology		-
<b>MHSA TOTAL</b>			<b>\$ 1,784,701</b>

<b>8400 - OTHER REVENUE</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8401	Client Fees	\$ 39,000
8402	Client Insurance	-
8403	Grants (Specify)	-
8404	Other (Specify)	-
8405	Other (Specify)	-
<b>OTHER REVENUE TOTAL</b>		<b>\$ 39,000</b>

**TOTAL PROGRAM FUNDING SOURCES: \$ 4,582,102**

**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Turning Point of Central Ca, Inc. | Fresno FSP Program Site #3 (Optional Site)**  
**FY 2024 - 2025 | 07/01/24 - 06/30/25 Budget Narrative**

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>1000: SALARIES &amp; BENEFITS</b>		<b>2,430,205</b>	
<b>Employee Salaries</b>		<b>1,905,445</b>	
1101	PROGRAM DIRECTOR	58,398	The Program Director currently oversees the program, hiring, training and supervising staff.
1102	ASST. PROGRAM DIRECTOR	111,163	The Assitant Program Director will supervise staff and assist the Program Director for that location
1103	ADMIN. ASSISTANT	29,147	The administrative assistant will oversee the support staff at both locations and will help with all support staff duties.
1104	BILLER	26,421	The biller will be responsible for billing into Avatar, billing all insurance claims and run reports as necessary for the program.
1105	BOOKKEEPER	27,208	The bookkeeper is responsible for processing all invoices for the program or programs and will send all information to the corporate office. They will handle petty cash, client fees and other bookkeeping needs for the program.
1106	CRIMINAL JUSTICE REHAB SPECIALIST (CM)	118,907	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in providing services to those involved in the criminal justice system and program liaison for Behavioral Health Court and the Federal Wellness Court
1107	DUAL DIAGNOSIS SPECIALIST (CM)	178,360	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in supporting and providing services for those who suffer from a co-occurring diagnosis.
1108	ED & EM REHAB SPECIALIST (CM)	178,360	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in linking and providing services to those interested in engagement in employment and education services.
1109	HOUSING COORDINATOR	59,454	Provides Personal Service Coordinator duties, carrying a caseload, while also specializing in identifying, linking and assisting clients in obtaining various housing such as a R&B, supportive housing, etc.
1110	INTAKE SPECIALIST	30,619	Reviews all referrals, contacting referral source and coordinating intake services to enrol in FSP program. The specialist also assists client in applying for additional benefits, such as General Relief, Social Security Benefits, Medi-cal, etc.
1111	LVN	183,709	Assists psychiatrist providing vital intake, coordination of medications, provides medication support and education, provides injections and consults with all staff in ensuring medication education and compliance
1112	MENTAL HEALTH PROFESSIONAL	430,087	Provides mental health assessment, assessing for Medical Necessity, assists client in identifying treatment plan goals according to diagnosis. MHP also provides individual and group therapy as client requests, while also providing program support to assist clients in crisis.
1113	PEER SUPPORT SPECIALIST	77,177	Provides support to clients, utilizing lived mental health experience to relate to clients, while assisting in activities with clients, run peer ran groups, meeting with clients during appointments providing support as needed.

PROGRAM EXPENSE				
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE	
1114	PERSONAL SERVICE COORDINATOR (CM)	219,819	Each FSP client will have a single point of responsibility through an assigned Personal Service Coordinator/case manager. The Personal Service Coordinator (PSC) works as a part of a treatment team in achieving the goals and objectives of the program to ensure quality of care for client participants. With case management being one of the primary methods of delivering services, each client shall be assigned a primary Personal Service Coordinator who will be responsible to see that the client's needs are met, as identified in the Plan of Care and the Individual Service and Support Plan (ISSP). They are able to provide intensive services and supports when needed, and they can give the client and/or family member considerable personal attention. The PSC will provide instruction modeling and support one-on-one in the course of daily events in the natural setting to manage day-to-day life and promote increased efficacy and self-sufficiency. This "hands on" approach will be utilized during the PSCs interaction with client's for 'en vivo' support, such as managing symptoms while preparing a budget, going to the doctor's office, the grocery store, in their home and maintaining their environment. Clients will learn at their own pace and with as much help as is needed by their personal service coordinator. A teaching/coaching approach will be used that empowers the client to gain mastery and take responsibility. Transportation and assistance in accessing other resources will be ensured by the PSC. All PSCs maintain their own case load of clients for whom they are the primary contact. Additionally, some of the PSC positions also include specialty training (housing, employment, education, criminal justice, substance use disorder) and will provide those specialty services to clients who are not on their caseload and can benefit from that expertise.	
1115	PSC SUPERVISOR	82,326	Provides supervision to all PSCs/Mental Health Specialists to ensure client care, maintain compliance with Turning Point policies and procedures. Supervisor also assisting in training new staff and reporting to the Assistant Program Director.	
1116	REGISTERED NURSE	53,762	Provides oversight over the LVNs/LPTs to ensure client care, maintaining compliance with Turning Point policies and procedures, providing training and ensuring accurate charting in accordance with Medi-cal.	
1117	SECRETARY	40,528	Provides direct services to the program by data entry, phone calls, checking in clients, etc.	
1118	0	-		
1119	0	-		
1120	0	-		
1121	0	-		
1122	0	-		
1123	0	-		
1124	0	-		
1125	0	-		
1126	0	-		
1127	0	-		
1128	0	-		
1129	0	-		
1130	0	-		
1131	0	-		
<b>Employee Benefits</b>		<b>359,339</b>		
1201	Retirement	-	Cost of Agency contribution to employee retirement plans.	
1202	Worker's Compensation	65,058	Cost of workers compensation insurance.	
1203	Health/ Dental Insurance	293,649	Agency cost for health, dental and vision insurance	
1204	API Benefits	632	Employee assistance program	
1205	Other (Specify)	-		
1206	Other (Specify)	-		
<b>Payroll Taxes &amp; Expenses:</b>		<b>165,421</b>		
1301	OASDI	-		
1302	FICA/MEDICARE / OASDI	158,477	Employer portion of F.I.C.A. taxes charged to the Agency by the Internal Revenue Service. F.I.C.A. is comprised of "Old-Age, Survivors, and Disability Insurance" (OASDI), plus "Hospital Insurance" (Medicare).	
1303	SUI	6,944	Employer portion of S.U.I. taxes charged to the Agency by the various states in which wages are paid.	
1304	Other: Accrued Paid Leave Moved to Admin Overhead	-	The monetary value of staff Paid Leave hours as they accrue on a monthly basis	
1305	Other (Specify)	-		
1306	Other (Specify)	-		

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>2000: CLIENT SUPPORT</b>		<b>636,388</b>	
2001	Child Care	-	
2002	Client Housing Support	478,096	Cost of rent, housing assistance and deposit paid on behalf of client. (Examples: first/last month deposit, late fees, monthly rent, hotel charges, room & board, board & care, etc.)
2003	Client Transportation & Support	14,694	Cost for client transportation. (Examples: bus tokens/passes, taxi, other public transportation, bicycles, etc.)
2004	Clothing, Food, & Hygiene	22,598	Cost of client hygiene supplies and non-work related clothing. (Examples: clothes, shoes, soap, toothpaste, deodorant, grooming supplies, diapers, etc.)
2005	Education Support	4,881	Cost of course fees and educational materials distributed to clients and prospective clients. Including court ordered educational class.
2006	Employment Support	2,334	Cost of client pre-employment preparation and employment retention. (Examples: job search and interview attire, work boots and tools required for employment, etc.)
2007	Household Items for Clients	-	
2008	Medication Supports	67,580	Cost of medical supplies or treatment/medical expense for a specific client. (Examples: co-pays*, prescription/lab work not covered by insurance, over-the-counter medications*, first aid kit/supplies for client's use at home, etc.) *if allowable per contract
2009	Program Supplies - Medical	8,169	Cost of medical supplies to be used by staff or clients at the program location to meet program objective. Such items are to remain at the program location and not sent home with the client. Such items include, but are not limited to first aid kits, blood pressure monitor, latex gloves, syringes, hazard disposal service, over-the-counter medication*, etc. *if allowable per contract.
2010	Utility Vouchers	14,641	Cost of client utility bills and/or security deposits.
2011	Client Building Maintenance	2,334	Cost of building repair or maintenance paid for on client's behalf. (Examples: handyman work, plumbing, drywall, roofing, etc.)
2012	Client Therapy	1,645	Cost of therapy services not covered by insurance and therapeutic supplies for clients to use outside of the program. (Examples: exercise videos/equipment, relaxation audio/visual recordings, artistic expression supplies, etc.)
2013	Client Activities / Recreation	16,922	Cost for client activities & recreation events. (Examples: cable bill, food/drinks/utensils/decorations needed for a specific client event, incentive rewards, admission fees to events, etc.)
2014	Client Personal Needs	2,494	Cost of supplying clients with necessary personal items not detailed in other accounts. (Examples: birth certificate, DMV fee for ID or license, clients household cleaning products/house supplies/kitchen supplies for their own home, pots/pans/dishes, linens, paper towels and child related expenses such as car seat/stroller/play pin, etc.)
2015	Other (Specify)	-	
2016	Other (Specify)	-	



PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>3000: OPERATING EXPENSES</b>		<b>169,276</b>	
3001	Telecommunications	16,232	Cost of electronic communications. (Examples: internet, phone, fax, cell phones, etc.)
3002	Printing/Postage	14,960	Cost of custom copying/printing charges (Examples: letterhead, business forms, business cards, flyers, brochures, signs, etc.) and Postage and delivery, including delivery by the USPS, UPS, FEDEX and other courier services
3003	Office, Household & Program Supplies	36,089	Cost of items normally used in an office setting. (Examples: pens, pencils, paper tablets, paper clips, notepads, staples, non-electric staplers/hole punchers/calculators, and other items normally used in an office setting.) House Supplies, Cost of supplies used by staff during their scheduled work hours. These items are normally used to operate the building at the program location. These items are to remain at program location and not sent home with client. (Examples: pots, pans, pot holders, kitchen towels, curtains, detergent, Clorox for clothes, can opener, dishes, furnace filter, decorations, linens, etc.), Program Supplies, Cost of any items normally used by clients to meet program objectives while receiving services. These items are to remain at the program location and not sent home with the client. Such items include, but are not limited to video tapes, printed handouts, desk reference books, research material, curriculum, puzzles, board games, therapeutic/meditative supplies and other items that are specifically designed and used to accomplish program goals.
3004	Advertising	-	
3005	Staff Development & Training	19,627	Cost of employee training courses and materials.
3006	Staff Mileage	16,922	Cost of employee mileage reimbursement paid in accordance with FPM section 1005.
3007	Subscriptions & Memberships	2,000	Cost of membership dues and subscriptions. (Examples: magazine, newspaper, memberships, etc.)
3008	Vehicle Maintenance / Gas / Insurance	45,463	Cost of vehicle maintenance. Including cost of parts, supplies and labor associated with maintenance and repair of vehicles used by Agency programs. Cost of gas in Vehicles and Insurance
3009	Program Enhancement	-	
3010	Staff Meetings	8,169	Cost of room rental and supplies necessary for staff meetings.
3011	Recruitment	4,138	Cost of advertising and other employee recruitment expenses. (Examples: newspaper ad, urine screening, background check, etc.)
3012	Employee-Employer Relations	5,676	Cost relating to improvement of working conditions, employer/employee relations and employee morale. (Examples: Company picnic items, florist, etc.)
<b>4000: FACILITIES &amp; EQUIPMENT</b>		<b>200,249</b>	
4001	Building Maintenance	8,488	Cost of Agency building repairs and maintenance. (Examples: electrical work, A/C and heating, hood cleaning, plumbing, etc.) This account should not be used if a specific outside labor contractor is doing an identifiable project.
4002	Rent/Lease Building	92,580	Cost of rent/lease payments made for building leases from outside sources.
4003	Rent/Lease Equipment	2,000	Cost of rent/lease payments made for furniture and equipment leases.
4004	Rent/Lease Vehicles	40,262	Rental cost of vehicles and lease of agency vehicles.
4005	Security	4,138	Cost of installation, maintenance and monthly service fees for building alarms and other security measures. (Examples: security/surveillance equipment, service and installation, safes, etc.)
4006	Utilities	41,959	Cost of service for power, gas, water, sewer, garbage, etc.
4007	Equipment Maintenance	2,759	Cost of equipment and furniture repair and maintenance. (Examples: high capacity copier/printer/scanner, replacement parts such as hard drive, laptop battery, monitor/printer/phone cord, drum, power strip, surge protector, video card, etc.)
4008	Liability Insurance	8,063	
4009	Other (Specify)	-	
4010	Other (Specify)	-	

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>5000: SPECIAL EXPENSES</b>		<b>309,058</b>	
5001	Consultant (Network & Data Management)	-	
5002	HMIS (Health Management Information System)	31,790	Avatar Costs
5003	Contractual/Consulting Services : Consultant	19,416	These accounts are assigned to record various professional services provided by contracted sources working as independent agents. (IT Consultations, EHR Consultation, External Consultation, Clinical Supervisors who are not Staffed under the Personnel & Salaries)
5004	Translation Services	4,562	Paid to an outside vendor for translation / interpreter services
5005	Contractual/Consulting Services : Psychiatrist	253,290	These accounts are assigned to record various professional services provided by contracted Psychiatrist working as independent agents.
5006	Other (Specify)	-	
5007	Other (Specify)	-	
5008	Other (Specify)	-	

<b>6000: ADMINISTRATIVE EXPENSES</b>		<b>830,029</b>	
6001	Administrative Overhead	804,791	Support of our cooperate and regional offices such as processing invoices, payroll, cost reports, etc. Accrued Paid Leave moved/added to Admin Overhead. Accrual Paid Leave cannot be listed in Salaries and Benefits Per DBH
6002	Professional Liability Insurance	-	
6003	Accounting/Bookkeeping	-	
6004	External Audit	4,138	Cost of outside audit fees.
6005	Insurance (Specify):	-	
6006	Payroll Services	-	
6007	Depreciation (Provider-Owned Equipment to be Used for Program Purposes)	12,201	This account should be charged for the depreciation expense of the Agency's tangible assets.
6008	Other: Bank Fees	2,760	Cost of bank fees charged to Agency account.
6009	Other: Legal Expense	1,380	Cost of outside legal fees
6010	Other: Licenses	4,759	Cost in obtaining and renewing licenses and permits.
6011	Other (Specify)	-	Cost of membership dues and subscriptions.
6012	Other (Specify)	-	

<b>7000: FIXED ASSETS</b>		<b>6,897</b>	
7001	Computer Equipment & Software	-	
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	-	
7003	Furniture & Fixtures	2,759	Purchase of furniture and fixtures as needed
7004	Leasehold/Tenant/Building Improvements	4,138	Improvements to the building as needed that isn't covered by the landlord
7005	Other Assets over \$500 with Lifespan of 2 Years +	-	
7006	Assets over \$5,000/unit (Specify)	-	
7007	Other (Specify)	-	
7008	Other (Specify)	-	

PROGRAM FUNDING SOURCES		
8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)		
ACCT #	LINE ITEM	PROVIDE DETAILS OF METHODOLOGY(IES) USED IN DETERMINING MEDI-CAL SERVICE RATES AND/OR SERVICE UNITS, IF APPLICABLE AND/OR AS REQUIRED BY THE RFP.
8001	Mental Health Services	We based our rates and units on current program usage
8002	Case Management	We based our rates and units on current program usage
8003	Crisis Services	We based our rates and units on current program usage
8004	Medication Support	We based our rates and units on current program usage
8005	Collateral	We based our rates and units on current program usage
8006	Plan Development	We based our rates and units on current program usage
8007	Assessment	We based our rates and units on current program usage
8008	Rehabilitation	We based our rates and units on current program usage

**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Mental Health Systems, Inc. | Fresno FSP Program Site #1**  
**FY 2019 - 2020 Ramp-up | 06/01/20 - 08/30/20**

**PROGRAM EXPENSES**

1000: SALARIES & BENEFITS					
Employee Salaries					
Acct #	Position	FTE	Admin	Direct	Total
1101	Program Manager	1.00	\$ 15,600	\$ -	\$ 15,600
1102	Clinical Supervisor	1.00	8,112	2,028	10,140
1103	Program Supervisor/Team Lead (bilingual)	1.00	6,414	6,414	12,827
1104	Program Supervisor/Team Lead	1.00	3,034	3,034	6,067
1105	Program Supervisor/Team Lead	1.00	-	-	-
1106	Clinical Case Manager (bilingual)	1.00	-	-	-
1107	Clinical Case Manager (bilingual)	1.00	-	-	-
1108	Clinical Case Manager	1.00	-	6,760	6,760
1109	Clinical Case Manager	1.00	-	6,760	6,760
1110	Clinical Case Manager	1.00	-	4,507	4,507
1111	Clinical Case Manager	1.00	-	4,507	4,507
1112	Dual Recovery Case Manager (bilingual)	1.00	-	7,020	7,020
1113	Dual Recovery Case Manager	1.00	-	4,507	4,507
1114	Dual Recovery Case Manager	1.00	-	-	-
1115	Employment Case Manager (bilingual)	1.00	-	7,020	7,020
1116	Employment Case Manager	1.00	-	4,507	4,507
1117	Employment Case Manager	1.00	-	-	-
1118	Lead Housing Case Manager	1.00	-	7,020	7,020
1119	Housing Case Manager (bilingual)	1.00	-	4,507	4,507
1120	Housing Case Manager	1.00	-	-	-
1121	Peer Support Specialist (bilingual)	1.00	-	5,720	5,720
1122	Peer Support Specialist	1.00	-	3,640	3,640
1123	Peer Support Specialist	1.00	-	-	-
1124	Registered Nurse	1.00	-	6,587	6,587
1125	Licensed Vocational Nurse (bilingual)	1.00	-	-	-
1126	Licensed Vocational Nurse	1.00	-	8,320	8,320
1127	Office Manager (Bilingual)	1.00	9,013	-	9,013
1128	Billing Specialist	1.00	3,813	-	3,813
1129	Compliance Specialist	1.00	9,013	-	9,013
1130	Intern	3.00	-	-	-
1131	24/7 on-call capacity	1.00	-	12,827	12,827
1132	Vice President of Clinical Services	0.35	7,280	-	7,280
1133	Vice President of Supportive Housing	0.05	1,040	-	1,040
1134	Program Financial Analyst	0.25	2,817	-	2,817
1135			-	-	-
1136			-	-	-
1137			-	-	-
<b>Personnel Salaries Subtotal</b>		<b>33.65</b>	<b>\$ 66,135</b>	<b>\$ 105,684</b>	<b>\$ 171,819</b>

<b>Employee Benefits</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1201	Retirement	\$ 326	\$ 533	\$ 859
1202	Worker's Compensation	653	1,065	1,718
1203	Health Insurance	1,306	2,130	3,436
1204	Other (Specify)	-	-	-
1205	Other (Specify)	-	-	-
1206	Other (Specify)	-	-	-
<b>Employee Benefits Subtotal:</b>		<b>\$ 2,285</b>	<b>\$ 3,728</b>	<b>\$ 6,013</b>
<b>Payroll Taxes &amp; Expenses:</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1301	OASDI	\$ 187	\$ 306	\$ 493
1302	FICA/MEDICARE	4,995	8,149	13,144
1303	SUI	326	533	859
1304	Other (Specify)	-	-	-
1305	Other (Specify)	-	-	-
1306	Other (Specify)	-	-	-
<b>Payroll Taxes &amp; Expenses Subtotal:</b>		<b>\$ 5,508</b>	<b>\$ 8,988</b>	<b>\$ 14,496</b>
<b>EMPLOYEE SALARIES &amp; BENEFITS TOTAL:</b>		<b>\$ 73,928</b>	<b>\$ 118,400</b>	<b>\$ 192,328</b>

<b>2000: CLIENT SUPPORT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
2001	Child Care	\$ 429
2002	Client Housing Support	16,150
2003	Client Transportation & Support	5,789
2004	Clothing, Food, & Hygiene	2,314
2005	Education Support	429
2006	Employment Support	429
2007	Household Items for Clients	7,571
2008	Medication Supports	37,491
2009	Program Supplies - Medical	3,400
2010	Utility Vouchers	107
2011	Other (Specify)	-
2012	Other (Specify)	-
2013	Other (Specify)	-
2014	Other (Specify)	-
2015	Other (Specify)	-
2016	Other (Specify)	-
<b>DIRECT CLIENT CARE TOTAL</b>		<b>\$ 74,109</b>

<b>3000: OPERATING EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
3001	Telecommunications	\$ 16,892
3002	Printing/Postage	7,400
3003	Office, Household & Program Supplies	25,570
3004	Advertising	-
3005	Staff Development & Training	31,390
3006	Staff Mileage	2,468
3007	Subscriptions & Memberships	150
3008	Vehicle Maintenance	-
3009	Staff Travel (Out of County)	1,838
3010	Lodging	-
3011	Other - Licenses/Taxes	5,196
3012	Other - Other Business Services	13,449
<b>OPERATING EXPENSES TOTAL:</b>		<b>\$ 104,353</b>

<b>4000: FACILITIES &amp; EQUIPMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
4001	Building Maintenance	\$ 24,338
4002	Rent/Lease Building	10,254
4003	Rent/Lease Equipment	650
4004	Rent/Lease Vehicles	12,954
4005	Security	-
4006	Utilities	2,400
4007	Minor equipment purchases and equipment repair/maintenance	13,760
4008	Other (Specify)	-
4009	Other (Specify)	-
4010	Other (Specify)	-
<b>FACILITIES/EQUIPMENT TOTAL:</b>		<b>\$ 64,356</b>

<b>5000: SPECIAL EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
5001	Consultant (Network & Data Management)	\$ -
5002	HMIS (Health Management Information System)	1,300
5003	Contractual/Consulting Services (Specify)	
5004	Translation Services	3,611
5005	Other (Specify)	-
5006	Other (Specify)	-
5007	Other (Specify)	-
5008	Other (Specify)	-
<b>SPECIAL EXPENSES TOTAL:</b>		<b>\$ 4,911</b>

<b>6000: ADMINISTRATIVE EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
6001	Administrative Overhead	\$ 78,492
6002	Professional Liability Insurance	-
6003	Accounting/Bookkeeping	-
6004	External Audit	200
6005	Liability Insurance	240
6006	Payroll Services	-
6007	Depreciation (Provider-Owned Equipment to be Used for Program Purposes)	-
6008	Other (Specify)	-
6009	Other (Specify)	-
6010	Other (Specify)	-
6011	Other (Specify)	-
6012	Other (Specify)	-
<b>ADMINISTRATIVE EXPENSES TOTAL</b>		<b>\$ 78,932</b>

<b>7000: FIXED ASSETS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
7001	Computer Equipment & Software	\$ 38,156
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	5,000
7003	Furniture & Fixtures	43,140
7004	Leasehold/Tenant/Building Improvements	-
7005	Other Assets over \$500 with Lifespan of 2 Years +	-
7006	Assets over \$5,000/unit (Specify)	-
7007	Other (Specify)	-
7008	Other (Specify)	-
<b>FIXED ASSETS EXPENSES TOTAL</b>		<b>\$ 86,296</b>

<b>TOTAL PROGRAM EXPENSES</b>		<b>\$ 605,285</b>
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**PROGRAM FUNDING SOURCES**

<b>8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)</b>				
<b>Acct #</b>	<b>Line Item Description</b>	<b>Service Units</b>	<b>Rate</b>	<b>Amount</b>
8001	Mental Health Services	0	-	\$ -
8002	Case Management	0	-	-
8003	Crisis Services	0	-	-
8004	Medication Support	0	-	-
8005	Collateral	0	-	-
8006	Plan Development	0	-	-
8007	Assessment	0	-	-
8008	Rehabilitation	0	-	-
<b>Estimated Specialty Mental Health Services Billing Totals:</b>		<b>0</b>		<b>\$ -</b>
Estimated % of Clients who are Medi-Cal Beneficiaries				0%
Estimated Total Cost of Specialty Mental Health Services Provided to Medi-Cal Beneficiaries				-
Federal Financial Participation (FFP) %			0%	-
<b>MEDI-CAL FFP TOTAL</b>				<b>\$ -</b>

<b>8100 - SUBSTANCE USE DISORDER FUNDS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8101	Drug Medi-Cal	\$ -
8102	SABG	\$ -
<b>SUBSTANCE USE DISORDER FUNDS TOTAL</b>		<b>\$ -</b>

<b>8200 - REALIGNMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8201	Realignment	\$ -
<b>REALIGNMENT TOTAL</b>		<b>\$ -</b>

<b>8300 - MENTAL HEALTH SERVICE ACT (MHSA)</b>			
<b>Acct #</b>	<b>MHSA Component</b>	<b>MHSA Program Name</b>	<b>Amount</b>
8301	CSS - Community Services & Supports	Adult FSP	\$ 605,285
8302	PEI - Prevention & Early Intervention		-
8303	INN - Innovations		-
8304	WET - Workforce Education & Training		-
8305	CFTN - Capital Facilities & Technology		-
<b>MHSA TOTAL</b>			<b>\$ 605,285</b>

<b>8400 - OTHER REVENUE</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8401	Client Fees	\$ -
8402	Client Insurance	-
8403	Grants (Specify)	-
8404	Other (Specify)	-
8405	Other (Specify)	-
<b>OTHER REVENUE TOTAL</b>		<b>\$ -</b>

<b>TOTAL PROGRAM FUNDING SOURCES:</b>			<b>\$ 605,285</b>
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**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Mental Health Systems, Inc. | Fresno FSP Program Site #1**  
**FY 2019 - 2020 Ramp-up | 06/01/20 - 08/30/20 Budget Narrative**

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>1000: SALARIES &amp; BENEFITS</b>		<b>192,328</b>	
<b>Employee Salaries</b>		<b>171,819</b>	
1101	Program Manager	15,600	The Program Manager is responsible for the overall operation of the program
1102	Clinical Supervisor	10,140	The Clinical Supervisor is responsible for all program clinical supervision, clinical assessment guidelines, clinical assessment guideline review, in-service training and clinical consultation with staff.
1103	Program Supervisor/Team Lead (bilingual)	12,827	The Program Supervisor/Team Lead acts as a member of a multidisciplinary team and directly provides services to clients. In addition, the Program Supervisor/Team Lead assists the Program Manager in establishing, administering and directing the MHS DART program. The Program Supervisor/Team Lead demonstrates a strong working knowledge of best practices in Assertive Community Treatment, Full-Service Partnership treatment, Intensive Case Management, bio-psychosocial rehabilitation and recovery, and outpatient treatment. Along with assisting the Program Manager, the Program Supervisor/Team Lead provides supervision to assigned staff. The bulk of client services are provided in the community.
1104	Program Supervisor/Team Lead	6,067	The Program Supervisor/Team Lead acts as a member of a multidisciplinary team and directly provides services to clients. In addition, the Program Supervisor/Team Lead assists the Program Manager in establishing, administering and directing the MHS DART program. The Program Supervisor/Team Lead demonstrates a strong working knowledge of best practices in Assertive Community Treatment, Full-Service Partnership treatment, Intensive Case Management, bio-psychosocial rehabilitation and recovery, and outpatient treatment. Along with assisting the Program Manager, the Program Supervisor/Team Lead provides supervision to assigned staff. The bulk of client services are provided in the community.
1105	Program Supervisor/Team Lead	-	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.
1106	Clinical Case Manager (bilingual)	-	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.
1107	Clinical Case Manager (bilingual)	-	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.



PROGRAM EXPENSE				
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE	
1108	Clinical Case Manager	6,760	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.	
1109	Clinical Case Manager	6,760	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.	
1110	Clinical Case Manager	4,507	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.	
1111	Clinical Case Manager	4,507	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.	
1112	Dual Recovery Case Manager (bilingual)	7,020	The Dual Recovery Case Manager provides substance abuse education and relapse prevention strategies, and implements social model interventions in the milieu.	
1113	Dual Recovery Case Manager	4,507	The Dual Recovery Case Manager provides substance abuse education and relapse prevention strategies, and implements social model interventions in the milieu.	
1114	Dual Recovery Case Manager	-	The Dual Recovery Case Manager provides substance abuse education and relapse prevention strategies, and implements social model interventions in the milieu.	
1115	Employment Case Manager (bilingual)	7,020	Functions as an ACT/FSP PSC assisting clients with training for, seeking, finding, and keeping viable jobs.	
1116	Employment Case Manager	4,507	Functions as an ACT/FSP PSC assisting clients with training for, seeking, finding, and keeping viable jobs.	
1117	Employment Case Manager	-	Functions as an ACT/FSP PSC assisting clients with training for, seeking, finding, and keeping viable jobs.	
1118	Lead Housing Case Manager	7,020	Locate housing opportunities, coordinate and oversee various kinds of housing related agreements, assists clients in obtaining necessary documents for housing placement, coordinates appropriate housing options for clients, etc.	
1119	Housing Case Manager (bilingual)	4,507	Locate housing opportunities, coordinate and oversee various kinds of housing related agreements, assists clients in obtaining necessary documents for housing placement, coordinates appropriate housing options for clients, etc.	
1120	Housing Case Manager	-	Locate housing opportunities, coordinate and oversee various kinds of housing related agreements, assists clients in obtaining necessary documents for housing placement, coordinates appropriate housing options for clients, etc.	

PROGRAM EXPENSE				
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE	
1121	Peer Support Specialist (bilingual)	5,720	The Peer Support Specialist utilizes his or her experiences as a recipient of mental health and/or substance abuse services to enhance recovery efforts of clients. He or she serves as a member of a multidisciplinary team and shares practical and personal experience, knowledge and insight related to illness management, life skills, and the lifelong process of recovery. The Peer Support Specialist actively promotes greater understanding of clients' points of view and preferences.	
1122	Peer Support Specialist	3,640	The Peer Support Specialist utilizes his or her experiences as a recipient of mental health and/or substance abuse services to enhance recovery efforts of clients. He or she serves as a member of a multidisciplinary team and shares practical and personal experience, knowledge and insight related to illness management, life skills, and the lifelong process of recovery. The Peer Support Specialist actively promotes greater understanding of clients' points of view and preferences.	
1123	Peer Support Specialist	-	The Peer Support Specialist utilizes his or her experiences as a recipient of mental health and/or substance abuse services to enhance recovery efforts of clients. He or she serves as a member of a multidisciplinary team and shares practical and personal experience, knowledge and insight related to illness management, life skills, and the lifelong process of recovery. The Peer Support Specialist actively promotes greater understanding of clients' points of view and preferences.	
1124	Registered Nurse	6,587	The Registered Nurse is responsible for monitoring the general psychiatric and physical health of all program clients. The Registered Nurse dispenses and accounts for all medication as ordered by the Psychiatrist (Consultant).	
1125	Licensed Vocational Nurse (bilingual)	-	The Licensed Vocational Nurse administers medications, takes and records patients' vital signs, reports adverse reactions to medication or treatment to medical personnel in charge. The Licensed Vocational Nurse assesses ongoing symptomatology and provides crisis intervention as needed and assists clinical staff in implementing the Patient Assistance Program.	
1126	Licensed Vocational Nurse	8,320	The Licensed Vocational Nurse administers medications, takes and records patients' vital signs, reports adverse reactions to medication or treatment to medical personnel in charge. The Licensed Vocational Nurse assesses ongoing symptomatology and provides crisis intervention as needed and assists clinical staff in implementing the Patient Assistance Program.	
1127	Office Manager (Bilingual)	9,013	The Office Manager supervises the performance of assigned office staff and performs traditional administrative duties including file management, preparing correspondence, and attending to other administrative and clerical duties in support of the Program Manager, Program Supervisor/Team Lead, and professional staff.	
1128	Billing Specialist	3,813	The Billing Specialist performs data entry, report writing and record compliance, and ensures timely completion of all billing and reimbursement functions. This position also works to compile, process, and maintain medical records of clinic patients in a manner consistent with medical, administrative, ethical, legal, and regulatory requirements of the health care system.	
1129	Compliance Specialist	9,013	The Compliance Specialist develops and maintains systems to ensure appropriate documentation is completed within the program. The Compliance specialist also performs other duties, as assigned by the Program Manager to ensure overall program compliance and quality assurance within the program.	
1130	Intern	-	The Intern performs a range of psychotherapeutic and rehabilitative interventions, including psychosocial assessment, individual and group counseling, crisis intervention and limited case management duties for clients under the supervision of staff.	
1131	24/7 on-call capacity	12,827	This line allows the flexibility for assigned staff that cover crisis and 24/7 response to incur overtime above and beyond what their specific line item allows for. It is difficult to determine exactly which position will require certain levels of OT over the year.	
1132	Vice President of Clinical Services	7,280	The Vice President is responsible for the oversight and management responsibility of all assigned programs operated by MHS in a designated region including contract compliance, performance outcomes, administrative and clinical supervision, budgetary compliance, financial performance, and community outreach. This position shares allocations across several programs.	
1133	Vice President of Supportive Housing	1,040	The Vice President of Supportive Housing is responsible for defining and implementing portfolio-wide acquisition, master-leasing, and rehabilitation strategies to meet current and future housing needs for clients served by the agency and is responsible for the oversight of housing funds embedded in MHS programs.	

PROGRAM EXPENSE				
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE	
1134	Program Financial Analyst	2,817	This position is responsible for analyzing contract cost and production data, communicating irregularities, ensuring fiscal contract compliance, preparing and submitting monthly contract billings, responding to audit requests, and other program/contract related ad hoc reporting. Other duties include budget development, budget analysis and review, preparing and reviewing contract billings, and contract compliance for assigned contracts/programs.	
1135	0	-		
1136	0	-		
1137	0	-		
<b>Employee Benefits</b>		<b>6,013</b>		
1201	Retirement	859	Cover the cost of providing a retirement fund benefit at an estimated 6% of salaries. In year one, the percentage is highly reduced since new employees are not eligible.	
1202	Worker's Compensation	1,718	Covers the cost of workers compensation expenses at 1.0% of salaries. Actual expenses might be higher or lower based on specific worker's compensation rates per class per year.	
1203	Health Insurance	3,436	Covers the cost of medical, and dental coverage per employee. In year 1 we are estimating a lower percentage as employees are not eligible for the first 3 months	
1204	Other (Specify)	-		
1205	Other (Specify)	-		
1206	Other (Specify)	-		
<b>Payroll Taxes &amp; Expenses:</b>		<b>14,496</b>		
1301	OASDI	493	Calculating estimated expenses based on a factor of \$0.61 per employee per pay period	
1302	FICA/MEDICARE	13,144	Calculating estimated expenses based on a factor of 7.65% of salaries	
1303	SUI	859	Calculating estimated expenses based on a factor of 0.50% of salaries	
1304	Other (Specify)	-		
1305	Other (Specify)	-		
1306	Other (Specify)	-		

<b>2000: CLIENT SUPPORT</b>		<b>74,109</b>		
2001	Child Care	429	estimated wrap expenses related to child care for clients	
2002	Client Housing Support	16,150	estimated expenses for housing support for clients	
2003	Client Transportation & Support	5,789	Cost of transporting clients by staff (mileage reimbursement or gas for vehicles) and bus passes/cards for client transportation needs.	
2004	Clothing, Food, & Hygiene	2,314	estimated expenses for food & for clothing	
2005	Education Support	429	estimated wrap expenses related to education support for clients	
2006	Employment Support	429	estimated wrap expenses related to employment support for clients	
2007	Household Items for Clients	7,571	estimated wrap expenses related to household items for clients	
2008	Medication Supports	37,491	estimated wrap expenses related to medication supports (psychiatrist) for clients - Psychiatrist service expense outside of the MHS, Inc. staff.	
2009	Program Supplies - Medical	3,400	Medical supplies that consist of miscellaneous items such as latex gloves, cotton, alcohol swipes, etc., in addition to charges for laboratory tests for clients (i.e. blood tests).	
2010	Utility Vouchers	107	estimated wrap expenses related to utility vouchers for clients	
2011	Other (Specify)	-		
2012	Other (Specify)	-		
2013	Other (Specify)	-		
2014	Other (Specify)	-		
2015	Other (Specify)	-		
2016	Other (Specify)	-		

<b>3000: OPERATING EXPENSES</b>		<b>104,353</b>		
3001	Telecommunications	16,892	Recurring costs of phones, cell phones, laptop data/internet device, and internet services. Also covers the monthly user fees for the VDI solution and MS Teams	
3002	Printing/Postage	7,400	Covers the cost of brochures, business cards, other program printing needs, postage and freight expenses.	
3003	Office, Household & Program Supplies	25,570	Office supplies utilized for program operation, including paper, pens, pencils, folders, staples, paper clips, printer cartridges, binders, folder tabs, client chart supplies. Housekeeping supplies such as cleaning products, bathroom products, non stationary paper goods, cleaning, and trash supplies. Recreational/occupational therapy supplies used by clients for their treatment plan.	
3004	Advertising	-		

PROGRAM EXPENSE				
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE	
3005	Staff Development & Training	31,390	Staff development/training costs include CPR and First Aid trainings for staff, MHS course requirements (via Relias platform), and registrations for staff development and trainings held in collaboration with the program's mission (Forensic Mental Health, Evidence-based Trainings, etc.).	
3006	Staff Mileage	2,468	In-County mileage reimbursements of staff (without clients) traveling to and from events, meetings and trainings in conjunction with program operations and responsibilities. This also includes gasoline costs for leased vehicles.	
3007	Subscriptions & Memberships	150	Covers the estimated cost of dues to memberships that benefit the program and subscriptions to housing, employment and other periodicals that benefit the program goals.	
3008	Vehicle Maintenance	-		
3009	Staff Travel (Out of County)	1,838	Out-of-County mileage reimbursements and/or leased vehicles gasoline, in addition to hotel, travel and flight expenses related to the attendance of conferences, training, and staff programmatic/training visits to the Corporate Office in San Diego.	
3010	Lodging	-		
3011	Other - Licenses/Taxes	5,196	Fresno County EHR system: Avatar expenses per user based on published County rates. Department Of Motor Vehicles registration renewals. Microsoft license expense for users at the program.	
3012	Other - Other Business Services	13,449	Associated costs for hiring of new employees such as TB screenings, assessments, drug screenings, background checks, and fingerprinting. Also includes the cost of movers, HIPPA shredding costs, Monthly user fees for Common Ground Software (for client support and treatment), payee services, and other	

4000: FACILITIES & EQUIPMENT		64,356		
4001	Building Maintenance	24,338	Minor repairs and maintenance for facility including, but not limited to replacement of locks, minor breakage, internal phone line repairs, building cleaning, and other repairs required for safe operation of the program at the leased facility. Also covers costs of preparing the facility for initial operations in year 1. Estimating 30 cabling drops will be needed.	
4002	Rent/Lease Building	10,254	covers the cost of leasing a facility for operations	
4003	Rent/Lease Equipment	650	covers the cost of renting a copier	
4004	Rent/Lease Vehicles	12,954	covers the cost of leasing 2 vehicles and the down payment for those leases.	
4005	Security	-		
4006	Utilities	2,400	covers the estimated cost of utilities for the facility	
4007	Minor equipment purchases and equipment repair/maintenance	13,760	Equipment repairs/maintenance that encompass the cost of a maintenance contract for the copier, monitoring of internet firewall, and the repair of other equipment not covered by maintenance agreements such as computers, printers, and telephones. Also covers the maintenance and registration of the leased vehicles Minor equipment replacement of existing equipment that in the normal course of use is worn out and either cannot be repaired or is not practical to have repaired.	
4008	Other (Specify)	-		
4009	Other (Specify)	-		
4010	Other (Specify)	-		

5000: SPECIAL EXPENSES		4,911		
5001	Consultant (Network & Data Management)	-		
5002	HMIS (Health Management Information System)	1,300	covers the cost of HMIS licenses for 4 users	
5003	Contractual/Consulting Services (Specify)	-		
5004	Translation Services	3,611	Estimated cost of providing interpreters when there isn't a bilingual staff available. Actual costs might come in higher depending on clients and their needs.	
5005	Other (Specify)	-		
5006	Other (Specify)	-		
5007	Other (Specify)	-		
5008	Other (Specify)	-		

6000: ADMINISTRATIVE EXPENSES		78,932		
6001	Administrative Overhead	78,492	Indirect/administrative expense per Federally approved Indirect Rate of 14.9%.	
6002	Professional Liability Insurance	-		
6003	Accounting/Bookkeeping	-		
6004	External Audit	200	Accounting fees incurred by this program, including the required Federal Office of Management and Budget (OMB-133) audit.	

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
6005	Liability Insurance	240	Covers the cost of car insurance on the leased vehicles
6006	Payroll Services	-	
6007	Depreciation (Provider-Owned Equipment to be Used for Program Purposes)	-	
6008	Other (Specify)	-	
6009	Other (Specify)	-	
6010	Other (Specify)	-	
6011	Other (Specify)	-	
6012	Other (Specify)	-	

7000: FIXED ASSETS		86,296	
7001	Computer Equipment & Software	38,156	Includes: 7 thin clients, 26 Chromebook, 33 sets of accessories for thin client/Chromebook, 33 headsets, 33 monitors, 1 projector, 1 projector mounting kit, 1 port-switch, 26 wireless cards, projector installation. Includes estimated minor software expenses
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	5,000	25 cellphones
7003	Furniture & Fixtures	43,140	Includes the following: estimated based on initial facility floor plans, actual items purchase might change slightly for optimal facility set-up. 10 desks, 3 cubicle system sets, 33 staff chairs, 5 foyer chairs, 2 side tables, 1 brochure table, lobby artwork, 2 conference room tables, 35 conference room chairs, 10 filing cabinets, 10 bookcases, 1 locked fridge, 8 small sofas (individual counseling), 8 small tables, 8 additional desk chairs
7004	Leasehold/Tenant/Building Improvements	-	
7005	Other Assets over \$500 with Lifespan of 2 Years +	-	
7006	Assets over \$5,000/unit (Specify)	-	
7007	Other (Specify)	-	
7008	Other (Specify)	-	

PROGRAM FUNDING SOURCES		
8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)		
ACCT #	LINE ITEM	PROVIDE DETAILS OF METHODOLOGY(IES) USED IN DETERMINING MEDI-CAL SERVICE RATES AND/OR SERVICE UNITS, IF APPLICABLE AND/OR AS REQUIRED BY THE RFP.
8001	Mental Health Services	
8002	Case Management	
8003	Crisis Services	
8004	Medication Support	
8005	Collateral	
8006	Plan Development	
8007	Assessment	
8008	Rehabilitation	

**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Mental Health Systems, Inc. | Fresno FSP Program Site #1**  
**FY 2020 - 2021 | 09/01/20 - 06/30/21**

**PROGRAM EXPENSES**

<b>1000: SALARIES &amp; BENEFITS</b>					
<b>Employee Salaries</b>					
<b>Acct #</b>	<b>Position</b>	<b>FTE</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1101	Program Manager	1.00	\$ 78,000	\$ -	\$ 78,000
1102	Clinical Supervisor	1.00	54,080	13,520	67,600
1103	Program Supervisor/Team Lead (bilingual)	1.00	32,067	32,067	64,134
1104	Program Supervisor/Team Lead	1.00	30,333	30,333	60,666
1105	Program Supervisor/Team Lead	1.00	30,333	30,333	60,666
1106	Clinical Case Manager (bilingual)	1.00	-	46,800	46,800
1107	Clinical Case Manager (bilingual)	1.00	-	46,800	46,800
1108	Clinical Case Manager	1.00	-	45,067	45,067
1109	Clinical Case Manager	1.00	-	45,067	45,067
1110	Clinical Case Manager	1.00	-	45,067	45,067
1111	Clinical Case Manager	1.00	-	45,067	45,067
1112	Dual Recovery Case Manager (bilingual)	1.00	-	46,800	46,800
1113	Dual Recovery Case Manager	1.00	-	45,607	45,607
1114	Dual Recovery Case Manager	1.00	-	45,067	45,067
1115	Employment Case Manager (bilingual)	1.00	-	46,800	46,800
1116	Employment Case Manager	1.00	-	45,607	45,607
1117	Employment Case Manager	1.00	-	45,607	45,607
1118	Lead Housing Case Manager	1.00	-	46,800	46,800
1119	Housing Case Manager (bilingual)	1.00	-	45,607	45,607
1120	Housing Case Manager	1.00	-	43,333	43,333
1121	Peer Support Specialist (bilingual)	1.00	-	38,133	38,133
1122	Peer Support Specialist	1.00	-	36,400	36,400
1123	Peer Support Specialist	1.00	-	36,400	36,400
1124	Registered Nurse	1.00	-	65,867	65,867
1125	Licensed Vocational Nurse (bilingual)	1.00	-	57,200	57,200
1126	Licensed Vocational Nurse	1.00	-	55,467	55,467
1127	Office Manager (Bilingual)	1.00	45,067	-	45,067
1128	Billing Specialist	1.00	38,133	-	38,133
1129	Compliance Specialist	1.00	45,067	-	45,067
1130	Intern	3.00	-	-	-
1131	24/7 on-call capacity	1.00	-	64,133	64,133
1132	Vice President of Clinical Services	0.35	36,400	-	36,400
1133	Vice President of Supportive Housing	0.05	5,200	-	5,200
1134	Program Financial Analyst	0.25	14,083	-	14,083
1135			-	-	-
1136			-	-	-
1137			-	-	-
<b>Personnel Salaries Subtotal</b>		<b>33.65</b>	<b>\$ 408,763</b>	<b>\$ 1,144,949</b>	<b>\$ 1,553,712</b>

<b>Employee Benefits</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1201	Retirement	\$ 24,204	\$ 68,889	\$ 93,093
1202	Worker's Compensation	4,034	11,482	15,516
1203	Health Insurance	49,051	139,605	188,656
1204	Other (Specify)	-	-	-
1205	Other (Specify)	-	-	-
1206	Other (Specify)	-	-	-
<b>Employee Benefits Subtotal:</b>		<b>\$ 77,289</b>	<b>\$ 219,976</b>	<b>\$ 297,265</b>
<b>Payroll Taxes &amp; Expenses:</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1301	OASDI	\$ 107	\$ 304	\$ 411
1302	FICA/MEDICARE	30,860	87,833	118,693
1303	SUI	2,017	5,741	7,758
1304	Other (Specify)	-	-	-
1305	Other (Specify)	-	-	-
1306	Other (Specify)	-	-	-
<b>Payroll Taxes &amp; Expenses Subtotal:</b>		<b>\$ 32,984</b>	<b>\$ 93,878</b>	<b>\$ 126,862</b>
<b>EMPLOYEE SALARIES &amp; BENEFITS TOTAL:</b>		<b>\$ 519,036</b>	<b>\$ 1,458,803</b>	<b>\$ 1,977,839</b>

<b>2000: CLIENT SUPPORT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
2001	Child Care	\$ 2,143
2002	Client Housing Support	501,500
2003	Client Transportation & Support	28,943
2004	Clothing, Food, & Hygiene	11,572
2005	Education Support	2,143
2006	Employment Support	2,143
2007	Household Items for Clients	17,024
2008	Medication Supports	406,155
2009	Program Supplies - Medical	7,000
2010	Utility Vouchers	536
2011	Other (Specify)	-
2012	Other (Specify)	-
2013	Other (Specify)	-
2014	Other (Specify)	-
2015	Other (Specify)	-
2016	Other (Specify)	-
<b>DIRECT CLIENT CARE TOTAL</b>		<b>\$ 979,159</b>

<b>3000: OPERATING EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
3001	Telecommunications	\$ 36,927
3002	Printing/Postage	6,267
3003	Office, Household & Program Supplies	19,167
3004	Advertising	-
3005	Staff Development & Training	9,850
3006	Staff Mileage	26,695
3007	Subscriptions & Memberships	1,025
3008	Vehicle Maintenance	-
3009	Staff Travel (Out of County)	8,168
3010	Other (Specify)	-
3011	Other - Licenses/Taxes	24,895
3012	Other - Other Business Services	9,355
<b>OPERATING EXPENSES TOTAL:</b>		<b>\$ 142,349</b>

<b>4000: FACILITIES &amp; EQUIPMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
4001	Building Maintenance	\$ 15,440
4002	Rent/Lease Building	47,168
4003	Rent/Lease Equipment	2,208
4004	Rent/Lease Vehicles	9,544
4005	Security	-
4006	Utilities	12,000
4007	Minor equipment purchases and equipment repair/maintenance	12,558
4008	Other (Specify)	-
4009	Other (Specify)	-
4010	Other (Specify)	-
<b>FACILITIES/EQUIPMENT TOTAL:</b>		<b>\$ 98,918</b>



<b>5000: SPECIAL EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
5001	Consultant (Network & Data Management)	\$ -
5002	HMIS (Health Management Information System)	1,083
5003	Contractual/Consulting Services (Specify)	-
5004	Translation Services	500
5005	Other (Specify)	-
5006	Other (Specify)	-
5007	Other (Specify)	-
5008	Other (Specify)	-
<b>SPECIAL EXPENSES TOTAL:</b>		<b>\$ 1,583</b>

<b>6000: ADMINISTRATIVE EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
6001	Administrative Overhead	\$ 476,948
6002	Professional Liability Insurance	-
6003	Accounting/Bookkeeping	-
6004	External Audit	167
6005	Liability Insurance	1,200
6006	Payroll Services	-
6007	Depreciation (Provider-Owned Equipment to be Used for Program Purposes)	-
6008	Other (Specify)	-
6009	Other (Specify)	-
6010	Other (Specify)	-
6011	Other (Specify)	-
6012	Other (Specify)	-
<b>ADMINISTRATIVE EXPENSES TOTAL</b>		<b>\$ 478,315</b>

<b>7000: FIXED ASSETS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
7001	Computer Equipment & Software	\$ 2,337
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	-
7003	Furniture & Fixtures	-
7004	Leasehold/Tenant/Building Improvements	-
7005	Other Assets over \$500 with Lifespan of 2 Years +	-
7006	Assets over \$5,000/unit (Specify)	-
7007	Other (Specify)	-
7008	Other (Specify)	-
<b>FIXED ASSETS EXPENSES TOTAL</b>		<b>\$ 2,337</b>

<b>TOTAL PROGRAM EXPENSES</b>		<b>\$ 3,680,500</b>
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**PROGRAM FUNDING SOURCES**

<b>8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)</b>				
<b>Acct #</b>	<b>Line Item Description</b>	<b>Service Units</b>	<b>Rate</b>	<b>Amount</b>
8001	Mental Health Services	579,690	2.31	\$ 1,339,084
8002	Case Management	287,550	1.78	511,839
8003	Crisis Services	30,780	3.50	107,730
8004	Medication Support	221,300	4.26	942,738
8005	Collateral	14,850	2.31	34,304
8006	Plan Development	20,250	2.31	46,778
8007	Assessment	20,250	2.31	46,778
8008	Rehabilitation	16,200	2.31	37,422
<b>Estimated Specialty Mental Health Services Billing Totals:</b>		<b>1,190,870</b>		<b>\$ 3,066,672</b>
Estimated % of Clients who are Medi-Cal Beneficiaries				71%
Estimated Total Cost of Specialty Mental Health Services Provided to Medi-Cal Beneficiaries				2,169,158
Federal Financial Participation (FFP) %			100%	2,169,158
<b>MEDI-CAL FFP TOTAL</b>				<b>\$ 2,169,158</b>

<b>8100 - SUBSTANCE USE DISORDER FUNDS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8101	Drug Medi-Cal	\$ -
8102	SABG	\$ -
<b>SUBSTANCE USE DISORDER FUNDS TOTAL</b>		<b>\$ -</b>

<b>8200 - REALIGNMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8201	Realignment	\$ (0)
<b>REALIGNMENT TOTAL</b>		<b>\$ (0)</b>

<b>8300 - MENTAL HEALTH SERVICE ACT (MHSA)</b>			
<b>Acct #</b>	<b>MHSA Component</b>	<b>MHSA Program Name</b>	<b>Amount</b>
8301	CSS - Community Services & Supports	Adult FSP	\$ 1,497,175
8302	PEI - Prevention & Early Intervention		-
8303	INN - Innovations		-
8304	WET - Workforce Education & Training		-
8305	CFTN - Capital Facilities & Technology		-
<b>MHSA TOTAL</b>			<b>\$ 1,497,175</b>

<b>8400 - OTHER REVENUE</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8401	Client Fees	\$ -
8402	Client Insurance	4,167
8403	Grants (Specify)	-
8404	Client Rent Income	8,333
8405	Donations, other sources	1,667
<b>OTHER REVENUE TOTAL</b>		<b>\$ 14,167</b>

<b>TOTAL PROGRAM FUNDING SOURCES:</b>	<b>\$ 3,680,500</b>
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**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Mental Health Systems, Inc. | Fresno FSP Program Site #1**  
**FY 2020 - 2021 | 09/01/20 - 06/30/21 Budget Narrative**

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>1000: SALARIES &amp; BENEFITS</b>		<b>1,977,839</b>	
<b>Employee Salaries</b>		<b>1,553,712</b>	
1101	Program Manager	78,000	The Program Manager is responsible for the overall operation of the program
1102	Clinical Supervisor	67,600	The Clinical Supervisor is responsible for all program clinical supervision, clinical assessment guidelines, clinical assessment guideline review, in-service training and clinical consultation with staff.
1103	Program Supervisor/Team Lead (bilingual)	64,134	The Program Supervisor/Team Lead acts as a member of a multidisciplinary team and directly provides services to clients. In addition, the Program Supervisor/Team Lead assists the Program Manager in establishing, administering and directing the MHS DART program. The Program Supervisor/Team Lead demonstrates a strong working knowledge of best practices in Assertive Community Treatment, Full-Service Partnership treatment, Intensive Case Management, bio-psychosocial rehabilitation and recovery, and outpatient treatment. Along with assisting the Program Manager, the Program Supervisor/Team Lead provides supervision to assigned staff. The bulk of client services are provided in the community.
1104	Program Supervisor/Team Lead	60,666	The Program Supervisor/Team Lead acts as a member of a multidisciplinary team and directly provides services to clients. In addition, the Program Supervisor/Team Lead assists the Program Manager in establishing, administering and directing the MHS DART program. The Program Supervisor/Team Lead demonstrates a strong working knowledge of best practices in Assertive Community Treatment, Full-Service Partnership treatment, Intensive Case Management, bio-psychosocial rehabilitation and recovery, and outpatient treatment. Along with assisting the Program Manager, the Program Supervisor/Team Lead provides supervision to assigned staff. The bulk of client services are provided in the community.
1105	Program Supervisor/Team Lead	60,666	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.
1106	Clinical Case Manager (bilingual)	46,800	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.
1107	Clinical Case Manager (bilingual)	46,800	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.

PROGRAM EXPENSE				
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE	
1108	Clinical Case Manager	45,067	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.	
1109	Clinical Case Manager	45,067	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.	
1110	Clinical Case Manager	45,067	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.	
1111	Clinical Case Manager	45,067	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.	
1112	Dual Recovery Case Manager (bilingual)	46,800	The Dual Recovery Case Manager provides substance abuse education and relapse prevention strategies, and implements social model interventions in the milieu.	
1113	Dual Recovery Case Manager	45,607	The Dual Recovery Case Manager provides substance abuse education and relapse prevention strategies, and implements social model interventions in the milieu.	
1114	Dual Recovery Case Manager	45,067	The Dual Recovery Case Manager provides substance abuse education and relapse prevention strategies, and implements social model interventions in the milieu.	
1115	Employment Case Manager (bilingual)	46,800	Functions as an ACT/FSP PSC assisting clients with training for, seeking, finding, and keeping viable jobs.	
1116	Employment Case Manager	45,607	Functions as an ACT/FSP PSC assisting clients with training for, seeking, finding, and keeping viable jobs.	
1117	Employment Case Manager	45,607	Functions as an ACT/FSP PSC assisting clients with training for, seeking, finding, and keeping viable jobs.	
1118	Lead Housing Case Manager	46,800	Locate housing opportunities, coordinate and oversee various kinds of housing related agreements, assists clients in obtaining necessary documents for housing placement, coordinates appropriate housing options for clients, etc.	
1119	Housing Case Manager (bilingual)	45,607	Locate housing opportunities, coordinate and oversee various kinds of housing related agreements, assists clients in obtaining necessary documents for housing placement, coordinates appropriate housing options for clients, etc.	
1120	Housing Case Manager	43,333	Locate housing opportunities, coordinate and oversee various kinds of housing related agreements, assists clients in obtaining necessary documents for housing placement, coordinates appropriate housing options for clients, etc.	

PROGRAM EXPENSE				
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE	
1121	Peer Support Specialist (bilingual)	38,133	The Peer Support Specialist utilizes his or her experiences as a recipient of mental health and/or substance abuse services to enhance recovery efforts of clients. He or she serves as a member of a multidisciplinary team and shares practical and personal experience, knowledge and insight related to illness management, life skills, and the lifelong process of recovery. The Peer Support Specialist actively promotes greater understanding of clients' points of view and preferences.	
1122	Peer Support Specialist	36,400	The Peer Support Specialist utilizes his or her experiences as a recipient of mental health and/or substance abuse services to enhance recovery efforts of clients. He or she serves as a member of a multidisciplinary team and shares practical and personal experience, knowledge and insight related to illness management, life skills, and the lifelong process of recovery. The Peer Support Specialist actively promotes greater understanding of clients' points of view and preferences.	
1123	Peer Support Specialist	36,400	The Peer Support Specialist utilizes his or her experiences as a recipient of mental health and/or substance abuse services to enhance recovery efforts of clients. He or she serves as a member of a multidisciplinary team and shares practical and personal experience, knowledge and insight related to illness management, life skills, and the lifelong process of recovery. The Peer Support Specialist actively promotes greater understanding of clients' points of view and preferences.	
1124	Registered Nurse	65,867	The Registered Nurse is responsible for monitoring the general psychiatric and physical health of all program clients. The Registered Nurse dispenses and accounts for all medication as ordered by the Psychiatrist (Consultant).	
1125	Licensed Vocational Nurse (bilingual)	57,200	The Licensed Vocational Nurse administers medications, takes and records patients' vital signs, reports adverse reactions to medication or treatment to medical personnel in charge. The Licensed Vocational Nurse assesses ongoing symptomatology and provides crisis intervention as needed and assists clinical staff in implementing the Patient Assistance Program.	
1126	Licensed Vocational Nurse	55,467	The Licensed Vocational Nurse administers medications, takes and records patients' vital signs, reports adverse reactions to medication or treatment to medical personnel in charge. The Licensed Vocational Nurse assesses ongoing symptomatology and provides crisis intervention as needed and assists clinical staff in implementing the Patient Assistance Program.	
1127	Office Manager (Bilingual)	45,067	The Office Manager supervises the performance of assigned office staff and performs traditional administrative duties including file management, preparing correspondence, and attending to other administrative and clerical duties in support of the Program Manager, Program Supervisor/Team Lead, and professional staff.	
1128	Billing Specialist	38,133	The Billing Specialist performs data entry, report writing and record compliance, and ensures timely completion of all billing and reimbursement functions. This position also works to compile, process, and maintain medical records of clinic patients in a manner consistent with medical, administrative, ethical, legal, and regulatory requirements of the health care system.	
1129	Compliance Specialist	45,067	The Compliance Specialist develops and maintains systems to ensure appropriate documentation is completed within the program. The Compliance specialist also performs other duties, as assigned by the Program Manager to ensure overall program compliance and quality assurance within the program.	
1130	Intern	-	The Intern performs a range of psychotherapeutic and rehabilitative interventions, including psychosocial assessment, individual and group counseling, crisis intervention and limited case management duties for clients under the supervision of staff.	
1131	24/7 on-call capacity	64,133	This line allows the flexibility for assigned staff that cover crisis and 24/7 response to incur overtime above and beyond what their specific line item allows for. It is difficult to determine exactly which position will require certain levels of OT over the year.	
1132	Vice President of Clinical Services	36,400	The Vice President is responsible for the oversight and management responsibility of all assigned programs operated by MHS in a designated region including contract compliance, performance outcomes, administrative and clinical supervision, budgetary compliance, financial performance, and community outreach. This position shares allocations across several programs.	
1133	Vice President of Supportive Housing	5,200	The Vice President of Supportive Housing is responsible for defining and implementing portfolio-wide acquisition, master-leasing, and rehabilitation strategies to meet current and future housing needs for clients served by the agency and is responsible for the oversight of housing funds embedded in MHS programs.	

PROGRAM EXPENSE				
	ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
	1134	Program Financial Analyst	14,083	This position is responsible for analyzing contract cost and production data, communicating irregularities, ensuring fiscal contract compliance, preparing and submitting monthly contract billings, responding to audit requests, and other program/contract related ad hoc reporting. Other duties include budget development, budget analysis and review, preparing and reviewing contract billings, and contract compliance for assigned contracts/programs.
	1135	0	-	
	1136	0	-	
	1137	0	-	
<b>Employee Benefits</b>			<b>297,265</b>	
	1201	Retirement	93,093	Cover the cost of providing a retirement fund benefit at an estimated 6% of salaries.
	1202	Worker's Compensation	15,516	Covers the cost of workers compensation expenses at 1.0% of salaries. Actual expenses might be higher or lower based on specific worker's compensation rates per class per year.
	1203	Health Insurance	188,656	Covers the cost of medical, and dental coverage per employee @ 11.72% of total salaries
	1204	Other (Specify)	-	
	1205	Other (Specify)	-	
	1206	Other (Specify)	-	
<b>Payroll Taxes &amp; Expenses:</b>			<b>126,862</b>	
	1301	OASDI	411	Calculating estimated expenses based on a factor of \$0.61 per employee per pay period
	1302	FICA/MEDICARE	118,693	Calculating estimated expenses based on a factor of 7.65% of salaries
	1303	SUI	7,758	Calculating estimated expenses based on a factor of 0.50% of salaries
	1304	Other (Specify)	-	
	1305	Other (Specify)	-	
	1306	Other (Specify)	-	
<b>2000: CLIENT SUPPORT</b>			<b>979,159</b>	
	2001	Child Care	2,143	estimated wrap expenses related to child care for clients
	2002	Client Housing Support	501,500	estimated expenses for housing support for clients
	2003	Client Transportation & Support	28,943	Cost of transporting clients by staff (mileage reimbursement or gas for vehicles) and bus passes/cards for client transportation needs.
	2004	Clothing, Food, & Hygiene	11,572	estimated expenses for food & for clothing
	2005	Education Support	2,143	estimated wrap expenses related to education support for clients
	2006	Employment Support	2,143	estimated wrap expenses related to employment support for clients
	2007	Household Items for Clients	17,024	estimated wrap expenses related to household items for clients
	2008	Medication Supports	406,155	estimated wrap expenses related to medication supports (psychiatrist) for clients - Psychiatrist service expense outside of the MHS, Inc. staff.
	2009	Program Supplies - Medical	7,000	Medical supplies that consist of miscellaneous items such as latex gloves, cotton, alcohol swipes, etc., in addition to charges for laboratory tests for clients (i.e. blood tests).
	2010	Utility Vouchers	536	estimated wrap expenses related to utility vouchers for clients
	2011	Other (Specify)	-	
	2012	Other (Specify)	-	
	2013	Other (Specify)	-	
	2014	Other (Specify)	-	
	2015	Other (Specify)	-	
	2016	Other (Specify)	-	
<b>3000: OPERATING EXPENSES</b>			<b>142,349</b>	
	3001	Telecommunications	36,927	Recurring costs of phones, cell phones, laptop data/internet device, and internet services. Also covers the monthly user fees for the VDI solution and MS Teams
	3002	Printing/Postage	6,267	Covers the cost of brochures, business cards, other program printing needs, postage and freight expenses.
	3003	Office, Household & Program Supplies	19,167	Office supplies utilized for program operation, including paper, pens, pencils, folders, staples, paper clips, printer cartridges, binders, folder tabs, client chart supplies. Housekeeping supplies such as cleaning products, bathroom products, non stationary paper goods, cleaning, and trash supplies. Recreational/occupational therapy supplies used by clients for their treatment plan.
	3004	Advertising	-	
	3005	Staff Development & Training	9,850	Staff development/training costs include CPR and First Aid trainings for staff, MHS course requirements (via Relias platform), and registrations for staff development and trainings held in collaboration with the program's mission (Forensic Mental Health, Evidence-based Trainings, etc.).

PROGRAM EXPENSE				
	ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
	3006	Staff Mileage	26,695	In-County mileage reimbursements of staff (without clients) traveling to and from events, meetings and trainings in conjunction with program operations and responsibilities. This also includes gasoline costs for leased vehicles.
	3007	Subscriptions & Memberships	1,025	Covers the estimated cost of dues to memberships that benefit the program and subscriptions to housing, employment and other periodicals that benefit the program goals.
	3008	Vehicle Maintenance	-	
	3009	Staff Travel (Out of County)	8,168	Out-of-County mileage reimbursements and/or leased vehicles gasoline, in addition to hotel, travel and flight expenses related to the attendance of conferences, training, and staff programmatic/training visits to the Corporate Office in San Diego.
	3010	Other (Specify)	-	
	3011	Other - Licenses/Taxes	24,895	Fresno County EHR system: Avatar expenses per user based on published County rates. Department Of Motor Vehicles registration renewals. Microsoft license expense for users at the program.
	3012	Other - Other Business Services	9,355	Associated costs for hiring of new employees such as TB screenings, assessments, drug screenings, background checks, and fingerprinting. Also includes the cost of movers, HIPPA shredding costs, Monthly user fees for Common Ground Software (for client support and treatment), payee services, and other

4000: FACILITIES & EQUIPMENT			98,918	
	4001	Building Maintenance	15,440	Minor repairs and maintenance for facility including, but not limited to replacement of locks, minor breakage, internal phone line repairs, building cleaning, and other repairs required for safe operation of the program at the leased facility.
	4002	Rent/Lease Building	47,168	covers the cost of leasing a facility for operations
	4003	Rent/Lease Equipment	2,208	covers the cost of renting a copier
	4004	Rent/Lease Vehicles	9,544	covers the cost of leasing two vehicles
	4005	Security	-	
	4006	Utilities	12,000	covers the estimated cost of utilities for the facility
	4007	Minor equipment purchases and equipment repair/maintenance	12,558	Equipment repairs/maintenance that encompass the cost of a maintenance contract for the copier, monitoring of internet firewall, and the repair of other equipment not covered by maintenance agreements such as computers, printers, and telephones. Also covers the cost of maintenance and registration on the leased vehicles Minor equipment replacement of existing equipment that in the normal course of use is worn out and either cannot be repaired or is not practical to have repaired.
	4008	Other (Specify)	-	
	4009	Other (Specify)	-	
	4010	Other (Specify)	-	

5000: SPECIAL EXPENSES			1,583	
	5001	Consultant (Network & Data Management)	-	
	5002	HMIS (Health Management Information System)	1,083	Covers the cost of 4 users in the HMIS system
	5003	Contractual/Consulting Services (Specify)	-	
	5004	Translation Services	500	Estimated cost of providing interpreters when there isn't a bilingual staff available. Actual costs might come in higher depending on clients and their needs.
	5005	Other (Specify)	-	
	5006	Other (Specify)	-	
	5007	Other (Specify)	-	
	5008	Other (Specify)	-	

6000: ADMINISTRATIVE EXPENSES			478,315	
	6001	Administrative Overhead	476,948	Indirect/administrative expense per Federally approved Indirect Rate of 14.9%.
	6002	Professional Liability Insurance	-	
	6003	Accounting/Bookkeeping	-	
	6004	External Audit	167	Accounting fees incurred by this program, including the required Federal Office of Management and Budget (OMB-133) audit.
	6005	Liability Insurance	1,200	Covers the cost of car insurance on the leased vehicles
	6006	Payroll Services	-	
	6007	Depreciation (Provider-Owned Equipment to be Used for Program Purposes)	-	

PROGRAM EXPENSE				
	ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
	6008	Other (Specify)	-	
	6009	Other (Specify)	-	
	6010	Other (Specify)	-	
	6011	Other (Specify)	-	
	6012	Other (Specify)	-	

7000: FIXED ASSETS		2,337		
	7001	Computer Equipment & Software	2,337	Includes estimated minor software expenses
	7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	-	
	7003	Furniture & Fixtures	-	
	7004	Leasehold/Tenant/Building Improvements	-	
	7005	Other Assets over \$500 with Lifespan of 2 Years +	-	
	7006	Assets over \$5,000/unit (Specify)	-	
	7007	Other (Specify)	-	
	7008	Other (Specify)	-	

PROGRAM FUNDING SOURCES			
8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)			
	ACCT #	LINE ITEM	PROVIDE DETAILS OF METHODOLOGY(IES) USED IN DETERMINING MEDI-CAL SERVICE RATES AND/OR SERVICE UNITS, IF APPLICABLE AND/OR AS REQUIRED BY THE RFP.
	8001	Mental Health Services	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We
	8002	Case Management	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We
	8003	Crisis Services	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We
	8004	Medication Support	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We
	8005	Collateral	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We
	8006	Plan Development	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We
	8007	Assessment	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We
	8008	Rehabilitation	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We



**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Mental Health Systems, Inc. | Fresno FSP Program Site #1**  
**FY 2021 - 2022 | 07/01/21 - 06/30/22**

**PROGRAM EXPENSES**

1000: SALARIES & BENEFITS					
Employee Salaries					
Acct #	Position	FTE	Admin	Direct	Total
1101	Program Manager	1.00	\$ 96,408	\$ -	\$ 96,408
1102	Clinical Supervisor	1.00	66,843	16,711	83,554
1103	Program Supervisor/Team Lead (bilingual)	1.00	39,635	39,635	79,269
1104	Program Supervisor/Team Lead	1.00	37,492	37,492	74,984
1105	Program Supervisor/Team Lead	1.00	37,492	37,492	74,984
1106	Clinical Case Manager (bilingual)	1.00	-	57,845	57,845
1107	Clinical Case Manager (bilingual)	1.00	-	57,845	57,845
1108	Clinical Case Manager	1.00	-	55,702	55,702
1109	Clinical Case Manager	1.00	-	55,702	55,702
1110	Clinical Case Manager	1.00	-	55,702	55,702
1111	Clinical Case Manager	1.00	-	55,702	55,702
1112	Dual Recovery Case Manager (bilingual)	1.00	-	57,845	57,845
1113	Dual Recovery Case Manager	1.00	-	55,702	55,702
1114	Dual Recovery Case Manager	1.00	-	55,702	55,702
1115	Employment Case Manager (bilingual)	1.00	-	57,845	57,845
1116	Employment Case Manager	1.00	-	55,702	55,702
1117	Employment Case Manager	1.00	-	55,702	55,702
1118	Lead Housing Case Manager	1.00	-	57,845	57,845
1119	Housing Case Manager (bilingual)	1.00	-	55,702	55,702
1120	Housing Case Manager	1.00	-	53,560	53,560
1121	Peer Support Specialist (bilingual)	1.00	-	47,133	47,133
1122	Peer Support Specialist	1.00	-	44,990	44,990
1123	Peer Support Specialist	1.00	-	44,990	44,990
1124	Registered Nurse	1.00	-	81,411	81,411
1125	Licensed Vocational Nurse (bilingual)	1.00	-	70,699	70,699
1126	Licensed Vocational Nurse	1.00	-	68,557	68,557
1127	Office Manager (Bilingual)	1.00	55,702	-	55,702
1128	Billing Specialist	1.00	47,133	-	47,133
1129	Compliance Specialist	1.00	55,702	-	55,702
1130	Intern	3.00	-	-	-
1131	24/7 on-call capacity	1.00	-	79,269	79,269
1132	Vice President of Clinical Services	0.35	44,990	-	44,990
1133	Vice President of Supportive Housing	0.05	6,427	-	6,427
1134	Program Financial Analyst	0.25	17,410	-	17,410
1135			-	-	-
1136			-	-	-
1137			-	-	-
<b>Personnel Salaries Subtotal</b>		<b>33.65</b>	<b>\$ 505,234</b>	<b>\$ 1,412,481</b>	<b>\$ 1,917,715</b>

<b>Employee Benefits</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1201	Retirement	\$ 29,916	\$ 85,147	\$ 115,063
1202	Worker's Compensation	4,986	14,191	19,177
1203	Health Insurance	60,503	172,193	232,696
1204	Other (Specify)	-	-	-
1205	Other (Specify)	-	-	-
1206	Other (Specify)	-	-	-
<b>Employee Benefits Subtotal:</b>		<b>\$ 95,405</b>	<b>\$ 271,531</b>	<b>\$ 366,936</b>
<b>Payroll Taxes &amp; Expenses:</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1301	OASDI	\$ 128	\$ 365	\$ 493
1302	FICA/MEDICARE	38,143	108,562	146,705
1303	SUI	2,493	7,096	9,589
1304	Other (Specify)	-	-	-
1305	Other (Specify)	-	-	-
1306	Other (Specify)	-	-	-
<b>Payroll Taxes &amp; Expenses Subtotal:</b>		<b>\$ 40,764</b>	<b>\$ 116,023.00</b>	<b>\$ 156,787.00</b>
<b>EMPLOYEE SALARIES &amp; BENEFITS TOTAL:</b>		<b>\$ 641,403</b>	<b>\$ 1,800,035</b>	<b>\$ 2,441,438</b>

<b>2000: CLIENT SUPPORT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
2001	Child Care	\$ 2,571
2002	Client Housing Support	601,800
2003	Client Transportation & Support	34,731
2004	Clothing, Food, & Hygiene	13,886
2005	Education Support	2,571
2006	Employment Support	2,571
2007	Household Items for Clients	20,429
2008	Medication Supports	487,386
2009	Program Supplies - Medical	8,400
2010	Utility Vouchers	643
2011	Other (Specify)	-
2012	Other (Specify)	-
2013	Other (Specify)	-
2014	Other (Specify)	-
2015	Other (Specify)	-
2016	Other (Specify)	-
<b>DIRECT CLIENT CARE TOTAL</b>		<b>\$ 1,174,988</b>

<b>3000: OPERATING EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
3001	Telecommunications	\$ 44,312
3002	Printing/Postage	7,520
3003	Office, Household & Program Supplies	23,000
3004	Advertising	-
3005	Staff Development & Training	11,820
3006	Staff Mileage	32,034
3007	Subscriptions & Memberships	1,230
3008	Vehicle Maintenance	-
3009	Staff Travel (Out of County)	9,802
3010	Lodging	-
3011	Other - Licenses/Taxes	29,874
3012	Other - Other Business Services	11,298
<b>OPERATING EXPENSES TOTAL:</b>		<b>\$ 170,890</b>

<b>4000: FACILITIES &amp; EQUIPMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
4001	Building Maintenance	\$ 18,528
4002	Rent/Lease Building	63,372
4003	Rent/Lease Equipment	2,650
4004	Rent/Lease Vehicles	11,453
4005	Security	-
4006	Utilities	14,400
4007	Minor equipment purchases and equipment repair/maintenance	15,060
4008	Other (Specify)	-
4009	Other (Specify)	-
4010	Other (Specify)	-
<b>FACILITIES/EQUIPMENT TOTAL:</b>		<b>\$ 125,463</b>

<b>5000: SPECIAL EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
5001	Consultant (Network & Data Management)	\$ -
5002	HMIS (Health Management Information System)	1,300
5003	Contractual/Consulting Services (Specify)	
5004	Translation Services	600
5005	Other (Specify)	-
5006	Other (Specify)	-
5007	Other (Specify)	-
5008	Other (Specify)	-
<b>SPECIAL EXPENSES TOTAL:</b>		<b>\$ 1,900</b>

<b>6000: ADMINISTRATIVE EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
6001	Administrative Overhead	\$ 583,880
6002	Professional Liability Insurance	-
6003	Accounting/Bookkeeping	-
6004	External Audit	200
6005	Liability Insurance	1,440
6006	Payroll Services	-
6007	Depreciation (Provider-Owned Equipment to be Used for Program Purposes)	-
6008	Other (Specify)	-
6009	Other (Specify)	-
6010	Other (Specify)	-
6011	Other (Specify)	-
6012	Other (Specify)	-
<b>ADMINISTRATIVE EXPENSES TOTAL</b>		<b>\$ 585,520</b>

<b>7000: FIXED ASSETS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
7001	Computer Equipment & Software	\$ 2,337
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	-
7003	Furniture & Fixtures	-
7004	Leasehold/Tenant/Building Improvements	-
7005	Other Assets over \$500 with Lifespan of 2 Years +	-
7006	Assets over \$5,000/unit (Specify)	-
7007	Other (Specify)	-
7008	Other (Specify)	-
<b>FIXED ASSETS EXPENSES TOTAL</b>		<b>\$ 2,337</b>

<b>TOTAL PROGRAM EXPENSES</b>		<b>\$ 4,502,536</b>
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**PROGRAM FUNDING SOURCES**

<b>8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)</b>				
<b>Acct #</b>	<b>Line Item Description</b>	<b>Service Units</b>	<b>Rate</b>	<b>Amount</b>
8001	Mental Health Services	695,628	2.35	\$ 1,637,578
8002	Case Management	345,060	1.82	628,222
8003	Crisis Services	36,936	3.57	131,990
8004	Medication Support	265,560	4.35	1,155,861
8005	Collateral	17,820	2.35	41,950
8006	Plan Development	24,300	2.35	57,205
8007	Assessment	24,300	2.35	57,205
8008	Rehabilitation	19,440	2.35	45,764
<b>Estimated Specialty Mental Health Services Billing Totals:</b>		<b>1,429,044</b>		<b>\$ 3,755,774</b>
Estimated % of Clients who are Medi-Cal Beneficiaries				72%
Estimated Total Cost of Specialty Mental Health Services Provided to Medi-Cal Beneficiaries				2,692,083
Federal Financial Participation (FFP) %			100%	2,692,083
<b>MEDI-CAL FFP TOTAL</b>				<b>\$ 2,692,083</b>

<b>8100 - SUBSTANCE USE DISORDER FUNDS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8101	Drug Medi-Cal	\$ -
8102	SABG	\$ -
<b>SUBSTANCE USE DISORDER FUNDS TOTAL</b>		<b>\$ -</b>

<b>8200 - REALIGNMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8201	Realignment	\$ 0
<b>REALIGNMENT TOTAL</b>		<b>\$ 0</b>

<b>8300 - MENTAL HEALTH SERVICE ACT (MHSA)</b>			
<b>Acct #</b>	<b>MHSA Component</b>	<b>MHSA Program Name</b>	<b>Amount</b>
8301	CSS - Community Services & Supports	Adult FSP	\$ 1,793,453
8302	PEI - Prevention & Early Intervention		-
8303	INN - Innovations		-
8304	WET - Workforce Education & Training		-
8305	CFTN - Capital Facilities & Technology		-
<b>MHSA TOTAL</b>			<b>\$ 1,793,453</b>

<b>8400 - OTHER REVENUE</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8401	Client Fees	\$ -
8402	Client Insurance	5,000
8403	Grants (Specify)	-
8404	Client Rent Income	10,000
8405	Donations and other sources	2,000
<b>OTHER REVENUE TOTAL</b>		<b>\$ 17,000</b>

**TOTAL PROGRAM FUNDING SOURCES: \$ 4,502,536**

**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Mental Health Systems, Inc. | Fresno FSP Program Site #1**  
**FY 2021 - 2022 | 07/01/21 - 06/30/22 Budget Narrative**

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>1000: SALARIES &amp; BENEFITS</b>		<b>2,441,438</b>	
<b>Employee Salaries</b>		<b>1,917,715</b>	
1101	Program Manager	96,408	The Program Manager is responsible for the overall operation of the program
1102	Clinical Supervisor	83,554	The Clinical Supervisor is responsible for all program clinical supervision, clinical assessment guidelines, clinical assessment guideline review, in-service training and clinical consultation with staff.
1103	Program Supervisor/Team Lead (bilingual)	79,269	The Program Supervisor/Team Lead acts as a member of a multidisciplinary team and directly provides services to clients. In addition, the Program Supervisor/Team Lead assists the Program Manager in establishing, administering and directing the MHS DART program. The Program Supervisor/Team Lead demonstrates a strong working knowledge of best practices in Assertive Community Treatment, Full-Service Partnership treatment, Intensive Case Management, bio-psychosocial rehabilitation and recovery, and outpatient treatment. Along with assisting the Program Manager, the Program Supervisor/Team Lead provides supervision to assigned staff. The bulk of client services are provided in the community.
1104	Program Supervisor/Team Lead	74,984	The Program Supervisor/Team Lead acts as a member of a multidisciplinary team and directly provides services to clients. In addition, the Program Supervisor/Team Lead assists the Program Manager in establishing, administering and directing the MHS DART program. The Program Supervisor/Team Lead demonstrates a strong working knowledge of best practices in Assertive Community Treatment, Full-Service Partnership treatment, Intensive Case Management, bio-psychosocial rehabilitation and recovery, and outpatient treatment. Along with assisting the Program Manager, the Program Supervisor/Team Lead provides supervision to assigned staff. The bulk of client services are provided in the community.
1105	Program Supervisor/Team Lead	74,984	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.
1106	Clinical Case Manager (bilingual)	57,845	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.
1107	Clinical Case Manager (bilingual)	57,845	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.

PROGRAM EXPENSE				
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE	
1108	Clinical Case Manager	55,702	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.	
1109	Clinical Case Manager	55,702	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.	
1110	Clinical Case Manager	55,702	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.	
1111	Clinical Case Manager	55,702	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.	
1112	Dual Recovery Case Manager (bilingual)	57,845	The Dual Recovery Case Manager provides substance abuse education and relapse prevention strategies, and implements social model interventions in the milieu.	
1113	Dual Recovery Case Manager	55,702	The Dual Recovery Case Manager provides substance abuse education and relapse prevention strategies, and implements social model interventions in the milieu.	
1114	Dual Recovery Case Manager	55,702	The Dual Recovery Case Manager provides substance abuse education and relapse prevention strategies, and implements social model interventions in the milieu.	
1115	Employment Case Manager (bilingual)	57,845	Functions as an ACT/FSP PSC assisting clients with training for, seeking, finding, and keeping viable jobs.	
1116	Employment Case Manager	55,702	Functions as an ACT/FSP PSC assisting clients with training for, seeking, finding, and keeping viable jobs.	
1117	Employment Case Manager	55,702	Functions as an ACT/FSP PSC assisting clients with training for, seeking, finding, and keeping viable jobs.	
1118	Lead Housing Case Manager	57,845	Locate housing opportunities, coordinate and oversee various kinds of housing related agreements, assists clients in obtaining necessary documents for housing placement, coordinates appropriate housing options for clients, etc.	
1119	Housing Case Manager (bilingual)	55,702	Locate housing opportunities, coordinate and oversee various kinds of housing related agreements, assists clients in obtaining necessary documents for housing placement, coordinates appropriate housing options for clients, etc.	
1120	Housing Case Manager	53,560	Locate housing opportunities, coordinate and oversee various kinds of housing related agreements, assists clients in obtaining necessary documents for housing placement, coordinates appropriate housing options for clients, etc.	

PROGRAM EXPENSE				
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE	
1121	Peer Support Specialist (bilingual)	47,133	The Peer Support Specialist utilizes his or her experiences as a recipient of mental health and/or substance abuse services to enhance recovery efforts of clients. He or she serves as a member of a multidisciplinary team and shares practical and personal experience, knowledge and insight related to illness management, life skills, and the lifelong process of recovery. The Peer Support Specialist actively promotes greater understanding of clients' points of view and preferences.	
1122	Peer Support Specialist	44,990	The Peer Support Specialist utilizes his or her experiences as a recipient of mental health and/or substance abuse services to enhance recovery efforts of clients. He or she serves as a member of a multidisciplinary team and shares practical and personal experience, knowledge and insight related to illness management, life skills, and the lifelong process of recovery. The Peer Support Specialist actively promotes greater understanding of clients' points of view and preferences.	
1123	Peer Support Specialist	44,990	The Peer Support Specialist utilizes his or her experiences as a recipient of mental health and/or substance abuse services to enhance recovery efforts of clients. He or she serves as a member of a multidisciplinary team and shares practical and personal experience, knowledge and insight related to illness management, life skills, and the lifelong process of recovery. The Peer Support Specialist actively promotes greater understanding of clients' points of view and preferences.	
1124	Registered Nurse	81,411	The Registered Nurse is responsible for monitoring the general psychiatric and physical health of all program clients. The Registered Nurse dispenses and accounts for all medication as ordered by the Psychiatrist (Consultant).	
1125	Licensed Vocational Nurse (bilingual)	70,699	The Licensed Vocational Nurse administers medications, takes and records patients' vital signs, reports adverse reactions to medication or treatment to medical personnel in charge. The Licensed Vocational Nurse assesses ongoing symptomatology and provides crisis intervention as needed and assists clinical staff in implementing the Patient Assistance Program.	
1126	Licensed Vocational Nurse	68,557	The Licensed Vocational Nurse administers medications, takes and records patients' vital signs, reports adverse reactions to medication or treatment to medical personnel in charge. The Licensed Vocational Nurse assesses ongoing symptomatology and provides crisis intervention as needed and assists clinical staff in implementing the Patient Assistance Program.	
1127	Office Manager (Bilingual)	55,702	The Office Manager supervises the performance of assigned office staff and performs traditional administrative duties including file management, preparing correspondence, and attending to other administrative and clerical duties in support of the Program Manager, Program Supervisor/Team Lead, and professional staff.	
1128	Billing Specialist	47,133	The Billing Specialist performs data entry, report writing and record compliance, and ensures timely completion of all billing and reimbursement functions. This position also works to compile, process, and maintain medical records of clinic patients in a manner consistent with medical, administrative, ethical, legal, and regulatory requirements of the health care system.	
1129	Compliance Specialist	55,702	The Compliance Specialist develops and maintains systems to ensure appropriate documentation is completed within the program. The Compliance specialist also performs other duties, as assigned by the Program Manager to ensure overall program compliance and quality assurance within the program.	
1130	Intern	-	The Intern performs a range of psychotherapeutic and rehabilitative interventions, including psychosocial assessment, individual and group counseling, crisis intervention and limited case management duties for clients under the supervision of staff.	
1131	24/7 on-call capacity	79,269	This line allows the flexibility for assigned staff that cover crisis and 24/7 response to incur overtime above and beyond what their specific line item allows for. It is difficult to determine exactly which position will require certain levels of OT over the year.	
1132	Vice President of Clinical Services	44,990	The Vice President is responsible for the oversight and management responsibility of all assigned programs operated by MHS in a designated region including contract compliance, performance outcomes, administrative and clinical supervision, budgetary compliance, financial performance, and community outreach. This position shares allocations across several programs.	
1133	Vice President of Supportive Housing	6,427	The Vice President of Supportive Housing is responsible for defining and implementing portfolio-wide acquisition, master-leasing, and rehabilitation strategies to meet current and future housing needs for clients served by the agency and is responsible for the oversight of housing funds embedded in MHS programs.	



PROGRAM EXPENSE				
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE	
1134	Program Financial Analyst	17,410	This position is responsible for analyzing contract cost and production data, communicating irregularities, ensuring fiscal contract compliance, preparing and submitting monthly contract billings, responding to audit requests, and other program/contract related ad hoc reporting. Other duties include budget development, budget analysis and review, preparing and reviewing contract billings, and contract compliance for assigned contracts/programs.	
1135	0	-		
1136	0	-		
1137	0	-		
<b>Employee Benefits</b>		<b>366,936</b>		
1201	Retirement	115,063	Cover the cost of providing a retirement fund benefit at an estimated 6% of salaries.	
1202	Worker's Compensation	19,177	Covers the cost of workers compensation expenses at 1.0% of salaries. Actual expenses might be higher or lower based on specific worker's compensation rates per class per year.	
1203	Health Insurance	232,696	Covers the cost of medical, and dental coverage per employee @ 11.72% of total salaries	
1204	Other (Specify)	-		
1205	Other (Specify)	-		
1206	Other (Specify)	-		
<b>Payroll Taxes &amp; Expenses:</b>		<b>156,787</b>		
1301	OASDI	493	Calculating estimated expenses based on a factor of \$0.61 per employee per pay period	
1302	FICA/MEDICARE	146,705	Calculating estimated expenses based on a factor of 7.65% of salaries	
1303	SUI	9,589	Calculating estimated expenses based on a factor of 0.50% of salaries	
1304	Other (Specify)	-		
1305	Other (Specify)	-		
1306	Other (Specify)	-		
<b>2000: CLIENT SUPPORT</b>		<b>1,174,988</b>		
2001	Child Care	2,571	estimated wrap expenses related to child care for clients	
2002	Client Housing Support	601,800	estimated expenses for housing support for clients	
2003	Client Transportation & Support	34,731	Cost of transporting clients by staff (mileage reimbursement or gas for vehicles) and bus passes/cards for client transportation needs.	
2004	Clothing, Food, & Hygiene	13,886	estimated expenses for food & for clothing	
2005	Education Support	2,571	estimated wrap expenses related to education support for clients	
2006	Employment Support	2,571	estimated wrap expenses related to employment support for clients	
2007	Household Items for Clients	20,429	estimated wrap expenses related to household items for clients	
2008	Medication Supports	487,386	estimated wrap expenses related to medication supports (psychiatrist) for clients - Psychiatrist service expense outside of the MHS, Inc. staff.	
2009	Program Supplies - Medical	8,400	Medical supplies that consist of miscellaneous items such as latex gloves, cotton, alcohol swipes, etc., in addition to charges for laboratory tests for clients (i.e. blood tests).	
2010	Utility Vouchers	643	estimated wrap expenses related to utility vouchers for clients	
2011	Other (Specify)	-		
2012	Other (Specify)	-		
2013	Other (Specify)	-		
2014	Other (Specify)	-		
2015	Other (Specify)	-		
2016	Other (Specify)	-		
<b>3000: OPERATING EXPENSES</b>		<b>170,890</b>		
3001	Telecommunications	44,312	Recurring costs of phones, cell phones, laptop data/internet device, and internet services. Also covers the monthly user fees for the VDI solution and MS Teams	
3002	Printing/Postage	7,520	Covers the cost of brochures, business cards, other program printing needs, postage and freight expenses.	
3003	Office, Household & Program Supplies	23,000	Office supplies utilized for program operation, including paper, pens, pencils, folders, staples, paper clips, printer cartridges, binders, folder tabs, client chart supplies. Housekeeping supplies such as cleaning products, bathroom products, non stationary paper goods, cleaning, and trash supplies. Recreational/occupational therapy supplies used by clients for their treatment plan.	
3004	Advertising	-		
3005	Staff Development & Training	11,820	Staff development/training costs include CPR and First Aid trainings for staff, MHS course requirements (via Relias platform), and registrations for staff development and trainings held in collaboration with the program's mission (Forensic Mental Health, Evidence-based Trainings, etc.).	

PROGRAM EXPENSE				
	ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
	3006	Staff Mileage	32,034	In-County mileage reimbursements of staff (without clients) traveling to and from events, meetings and trainings in conjunction with program operations and responsibilities. This also includes gasoline costs for leased vehicles.
	3007	Subscriptions & Memberships	1,230	Covers the estimated cost of dues to memberships that benefit the program and subscriptions to housing, employment and other periodicals that benefit the program goals.
	3008	Vehicle Maintenance	-	
	3009	Staff Travel (Out of County)	9,802	Out-of-County mileage reimbursements and/or leased vehicles gasoline, in addition to hotel, travel and flight expenses related to the attendance of conferences, training, and staff programmatic/training visits to the Corporate Office in San Diego.
	3010	Lodging	-	
	3011	Other - Licenses/Taxes	29,874	Fresno County EHR system: Avatar expenses per user based on published County rates. Department Of Motor Vehicles registration renewals. Microsoft license expense for users at the program.
	3012	Other - Other Business Services	11,298	Associated costs for hiring of new employees such as TB screenings, assessments, drug screenings, background checks, and fingerprinting. Also includes the cost of movers, HIPPA shredding costs, Monthly user fees for Common Ground Software (for client support and treatment), payee services, and other

4000: FACILITIES & EQUIPMENT		125,463		
	4001	Building Maintenance	18,528	Minor repairs and maintenance for facility including, but not limited to replacement of locks, minor breakage, internal phone line repairs, building cleaning, and other repairs required for safe operation of the program at the leased facility.
	4002	Rent/Lease Building	63,372	covers the cost of leasing a facility for operations
	4003	Rent/Lease Equipment	2,650	covers the cost of renting a copier
	4004	Rent/Lease Vehicles	11,453	covers the cost of leasing two vehicles
	4005	Security	-	
	4006	Utilities	14,400	covers the estimated cost of utilities for the facility
	4007	Minor equipment purchases and equipment repair/maintenance	15,060	Equipment repairs/maintenance that encompass the cost of a maintenance contract for the copier, monitoring of internet firewall, and the repair of other equipment not covered by maintenance agreements such as computers, printers, and telephones. Also covers the cost of maintenance and registration on the leased vehicles Minor equipment replacement of existing equipment that in the normal course of use is worn out and either cannot be repaired or is not practical to have repaired.
	4008	Other (Specify)	-	
	4009	Other (Specify)	-	
	4010	Other (Specify)	-	

5000: SPECIAL EXPENSES		1,900		
	5001	Consultant (Network & Data Management)	-	
	5002	HMIS (Health Management Information System)	1,300	Covers the cost of 4 users in the HMIS system
	5003	Contractual/Consulting Services (Specify)	-	
	5004	Translation Services	600	Estimated cost of providing interpreters when there isn't a bilingual staff available. Actual costs might come in higher depending on clients and their needs.
	5005	Other (Specify)	-	
	5006	Other (Specify)	-	
	5007	Other (Specify)	-	
	5008	Other (Specify)	-	

6000: ADMINISTRATIVE EXPENSES		585,520		
	6001	Administrative Overhead	583,880	Indirect/administrative expense per Federally approved Indirect Rate of 14.9%.
	6002	Professional Liability Insurance	-	
	6003	Accounting/Bookkeeping	-	
	6004	External Audit	200	Accounting fees incurred by this program, including the required Federal Office of Management and Budget (OMB-133) audit.
	6005	Liability Insurance	1,440	Covers the cost of car insurance on the leased vehicles
	6006	Payroll Services	-	
	6007	Depreciation (Provider-Owned Equipment to be Used for Program Purposes)	-	

PROGRAM EXPENSE				
	ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
	6008	Other (Specify)	-	
	6009	Other (Specify)	-	
	6010	Other (Specify)	-	
	6011	Other (Specify)	-	
	6012	Other (Specify)	-	

7000: FIXED ASSETS		2,337		
	7001	Computer Equipment & Software	2,337	Includes estimated minor software expenses
	7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	-	
	7003	Furniture & Fixtures	-	
	7004	Leasehold/Tenant/Building Improvements	-	
	7005	Other Assets over \$500 with Lifespan of 2 Years +	-	
	7006	Assets over \$5,000/unit (Specify)	-	
	7007	Other (Specify)	-	
	7008	Other (Specify)	-	

PROGRAM FUNDING SOURCES			
8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)			
	ACCT #	LINE ITEM	PROVIDE DETAILS OF METHODOLOGY(IES) USED IN DETERMINING MEDI-CAL SERVICE RATES AND/OR SERVICE UNITS, IF APPLICABLE AND/OR AS REQUIRED BY THE RFP.
	8001	Mental Health Services	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We are
	8002	Case Management	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We are
	8003	Crisis Services	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We are
	8004	Medication Support	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We are
	8005	Collateral	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We are
	8006	Plan Development	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We are
	8007	Assessment	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We are
	8008	Rehabilitation	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We are

**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Mental Health Systems, Inc. | Fresno FSP Program Site #1**  
**FY 2022 - 2023 | 07/01/22 - 06/30/23**

**PROGRAM EXPENSES**

<b>1000: SALARIES &amp; BENEFITS</b>					
<b>Employee Salaries</b>					
<b>Acct #</b>	<b>Position</b>	<b>FTE</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1101	Program Manager	1.00	\$ 99,299	\$ -	\$ 99,299
1102	Clinical Supervisor	1.00	68,856	17,214	86,070
1103	Program Supervisor/Team Lead (bilingual)	1.00	40,820	40,820	81,640
1104	Program Supervisor/Team Lead	1.00	38,615	38,615	77,230
1105	Program Supervisor/Team Lead	1.00	38,615	38,615	77,230
1106	Clinical Case Manager (bilingual)	1.00	-	59,571	59,571
1107	Clinical Case Manager (bilingual)	1.00	-	59,571	59,571
1108	Clinical Case Manager	1.00	-	57,366	57,366
1109	Clinical Case Manager	1.00	-	57,366	57,366
1110	Clinical Case Manager	1.00	-	57,366	57,366
1111	Clinical Case Manager	1.00	-	57,366	57,366
1112	Dual Recovery Case Manager (bilingual)	1.00	-	59,571	59,571
1113	Dual Recovery Case Manager	1.00	-	57,366	57,366
1114	Dual Recovery Case Manager	1.00	-	57,366	57,366
1115	Employment Case Manager (bilingual)	1.00	-	59,571	59,571
1116	Employment Case Manager	1.00	-	57,366	57,366
1117	Employment Case Manager	1.00	-	57,366	57,366
1118	Lead Housing Case Manager	1.00	-	59,571	59,571
1119	Housing Case Manager (bilingual)	1.00	-	57,366	57,366
1120	Housing Case Manager	1.00	-	55,162	55,162
1121	Peer Support Specialist (bilingual)	1.00	-	48,547	48,547
1122	Peer Support Specialist	1.00	-	46,342	46,342
1123	Peer Support Specialist	1.00	-	46,342	46,342
1124	Registered Nurse	1.00	-	83,845	83,845
1125	Licensed Vocational Nurse (bilingual)	1.00	-	72,821	72,821
1126	Licensed Vocational Nurse	1.00	-	70,616	70,616
1127	Office Manager (Bilingual)	1.00	57,366	-	57,366
1128	Billing Specialist	1.00	48,547	-	48,547
1129	Compliance Specialist	1.00	57,366	-	57,366
1130	Intern	3.00	-	-	-
1131	24/7 on-call capacity	1.00	-	81,640	81,640
1132	Vice President of Clinical Services	0.35	46,337	-	46,337
1133	Vice President of Supportive Housing	0.05	6,620	-	6,620
1134	Program Financial Analyst	0.25	17,930	-	17,930
1135			-	-	-
1136			-	-	-
1137			-	-	-
<b>Personnel Salaries Subtotal</b>		<b>33.65</b>	<b>\$ 520,371</b>	<b>\$ 1,454,728</b>	<b>\$ 1,975,099</b>

<b>Employee Benefits</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1201	Retirement	\$ 30,812	\$ 87,694	\$ 118,506
1202	Worker's Compensation	5,135	14,616	19,751
1203	Health Insurance	62,176	176,962	239,138
1204	Other (Specify)	-	-	-
1205	Other (Specify)	-	-	-
1206	Other (Specify)	-	-	-
<b>Employee Benefits Subtotal:</b>		<b>\$ 98,123</b>	<b>\$ 279,272</b>	<b>\$ 377,395</b>
<b>Payroll Taxes &amp; Expenses:</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1301	OASDI	\$ 128	\$ 365	\$ 493
1302	FICA/MEDICARE	39,285	111,810	151,095
1303	SUI	2,568	7,307	9,875
1304	Other (Specify)	-	-	-
1305	Other (Specify)	-	-	-
1306	Other (Specify)	-	-	-
<b>Payroll Taxes &amp; Expenses Subtotal:</b>		<b>\$ 41,981</b>	<b>\$ 119,482</b>	<b>\$ 161,463</b>
<b>EMPLOYEE SALARIES &amp; BENEFITS TOTAL:</b>		<b>\$ 660,475</b>	<b>\$ 1,853,482</b>	<b>\$ 2,513,957</b>

<b>2000: CLIENT SUPPORT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
2001	Child Care	\$ 2,571
2002	Client Housing Support	601,800
2003	Client Transportation & Support	34,731
2004	Clothing, Food, & Hygiene	13,886
2005	Education Support	2,571
2006	Employment Support	2,571
2007	Household Items for Clients	20,429
2008	Medication Supports	487,386
2009	Program Supplies - Medical	8,400
2010	Utility Vouchers	643
2011	Other (Specify)	-
2012	Other (Specify)	-
2013	Other (Specify)	-
2014	Other (Specify)	-
2015	Other (Specify)	-
2016	Other (Specify)	-
<b>DIRECT CLIENT CARE TOTAL</b>		<b>\$ 1,174,988</b>

<b>3000: OPERATING EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
3001	Telecommunications	\$ 44,312
3002	Printing/Postage	7,520
3003	Office, Household & Program Supplies	23,000
3004	Advertising	-
3005	Staff Development & Training	11,820
3006	Staff Mileage	32,034
3007	Subscriptions & Memberships	1,230
3008	Vehicle Maintenance	-
3009	Staff Travel (Out of County)	9,802
3010	Lodging	-
3011	Other - Licenses/Taxes	29,874
3012	Other - Other Business Services	11,364
<b>OPERATING EXPENSES TOTAL:</b>		<b>\$ 170,956</b>

<b>4000: FACILITIES &amp; EQUIPMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
4001	Building Maintenance	\$ 18,528
4002	Rent/Lease Building	65,273
4003	Rent/Lease Equipment	2,650
4004	Rent/Lease Vehicles	11,453
4005	Security	-
4006	Utilities	14,400
4007	Minor equipment purchases and equipment repair/maintenance	15,060
4008	Other (Specify)	-
4009	Other (Specify)	-
4010	Other (Specify)	-
<b>FACILITIES/EQUIPMENT TOTAL:</b>		<b>\$ 127,364</b>

<b>5000: SPECIAL EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
5001	Consultant (Network & Data Management)	\$ -
5002	HMIS (Health Management Information System)	1,300
5003	Contractual/Consulting Services (Specify)	
5004	Translation Services	600
5005	Other (Specify)	-
5006	Other (Specify)	-
5007	Other (Specify)	-
5008	Other (Specify)	-
<b>SPECIAL EXPENSES TOTAL:</b>		<b>\$ 1,900</b>

<b>6000: ADMINISTRATIVE EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
6001	Administrative Overhead	\$ 594,978
6002	Professional Liability Insurance	-
6003	Accounting/Bookkeeping	-
6004	External Audit	200
6005	Liability Insurance	1,440
6006	Payroll Services	-
6007	Depreciation (Provider-Owned Equipment to be Used for Program Purposes)	-
6008	Other (Specify)	-
6009	Other (Specify)	-
6010	Other (Specify)	-
6011	Other (Specify)	-
6012	Other (Specify)	-
<b>ADMINISTRATIVE EXPENSES TOTAL</b>		<b>\$ 596,618</b>

<b>7000: FIXED ASSETS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
7001	Computer Equipment & Software	\$ 2,337
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	-
7003	Furniture & Fixtures	-
7004	Leasehold/Tenant/Building Improvements	-
7005	Other Assets over \$500 with Lifespan of 2 Years +	-
7006	Assets over \$5,000/unit (Specify)	-
7007	Other (Specify)	-
7008	Other (Specify)	-
<b>FIXED ASSETS EXPENSES TOTAL</b>		<b>\$ 2,337</b>

<b>TOTAL PROGRAM EXPENSES</b>		<b>\$ 4,588,120</b>
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**PROGRAM FUNDING SOURCES**

<b>8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)</b>				
<b>Acct #</b>	<b>Line Item Description</b>	<b>Service Units</b>	<b>Rate</b>	<b>Amount</b>
8001	Mental Health Services	695,632	2.40	\$ 1,669,299
8002	Case Management	345,060	1.86	640,388
8003	Crisis Services	36,936	3.64	134,546
8004	Medication Support	265,560	4.44	1,178,245
8005	Collateral	17,820	2.40	42,762
8006	Plan Development	24,300	2.40	58,312
8007	Assessment	24,300	2.40	58,312
8008	Rehabilitation	19,440	2.40	46,650
<b>Estimated Specialty Mental Health Services Billing Totals:</b>		<b>1,429,048</b>		<b>\$ 3,828,516</b>
Estimated % of Clients who are Medi-Cal Beneficiaries				73%
Estimated Total Cost of Specialty Mental Health Services Provided to Medi-Cal Beneficiaries				2,777,667
Federal Financial Participation (FFP) %			100%	2,777,667
<b>MEDI-CAL FFP TOTAL</b>				<b>\$ 2,777,667</b>

<b>8100 - SUBSTANCE USE DISORDER FUNDS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8101	Drug Medi-Cal	\$ -
8102	SABG	\$ -
<b>SUBSTANCE USE DISORDER FUNDS TOTAL</b>		<b>\$ -</b>

<b>8200 - REALIGNMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8201	Realignment	\$ 0
<b>REALIGNMENT TOTAL</b>		<b>\$ 0</b>

<b>8300 - MENTAL HEALTH SERVICE ACT (MHSA)</b>			
<b>Acct #</b>	<b>MHSA Component</b>	<b>MHSA Program Name</b>	<b>Amount</b>
8301	CSS - Community Services & Supports	Adult FSP	\$ 1,793,453
8302	PEI - Prevention & Early Intervention		-
8303	INN - Innovations		-
8304	WET - Workforce Education & Training		-
8305	CFTN - Capital Facilities & Technology		-
<b>MHSA TOTAL</b>			<b>\$ 1,793,453</b>

<b>8400 - OTHER REVENUE</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8401	Client Fees	\$ -
8402	Client Insurance	5,000
8403	Grants (Specify)	-
8404	Client Rent Income	10,000
8405	Donations and other sources	2,000
<b>OTHER REVENUE TOTAL</b>		<b>\$ 17,000</b>

**TOTAL PROGRAM FUNDING SOURCES: \$ 4,588,120**



**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Mental Health Systems, Inc. | Fresno FSP Program Site #1**  
**FY 2022 - 2023 | 07/01/22 - 06/30/23 Budget Narrative**

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>1000: SALARIES &amp; BENEFITS</b>		<b>2,513,957</b>	
<b>Employee Salaries</b>		<b>1,975,099</b>	
1101	Program Manager	99,299	The Program Manager is responsible for the overall operation of the program
1102	Clinical Supervisor	86,070	The Clinical Supervisor is responsible for all program clinical supervision, clinical assessment guidelines, clinical assessment guideline review, in-service training and clinical consultation with staff.
1103	Program Supervisor/Team Lead (bilingual)	81,640	The Program Supervisor/Team Lead acts as a member of a multidisciplinary team and directly provides services to clients. In addition, the Program Supervisor/Team Lead assists the Program Manager in establishing, administering and directing the MHS DART program. The Program Supervisor/Team Lead demonstrates a strong working knowledge of best practices in Assertive Community Treatment, Full-Service Partnership treatment, Intensive Case Management, bio-psychosocial rehabilitation and recovery, and outpatient treatment. Along with assisting the Program Manager, the Program Supervisor/Team Lead provides supervision to assigned staff. The bulk of client services are provided in the community.
1104	Program Supervisor/Team Lead	77,230	The Program Supervisor/Team Lead acts as a member of a multidisciplinary team and directly provides services to clients. In addition, the Program Supervisor/Team Lead assists the Program Manager in establishing, administering and directing the MHS DART program. The Program Supervisor/Team Lead demonstrates a strong working knowledge of best practices in Assertive Community Treatment, Full-Service Partnership treatment, Intensive Case Management, bio-psychosocial rehabilitation and recovery, and outpatient treatment. Along with assisting the Program Manager, the Program Supervisor/Team Lead provides supervision to assigned staff. The bulk of client services are provided in the community.
1105	Program Supervisor/Team Lead	77,230	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.
1106	Clinical Case Manager (bilingual)	59,571	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.
1107	Clinical Case Manager (bilingual)	59,571	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.

PROGRAM EXPENSE				
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE	
1108	Clinical Case Manager	57,366	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.	
1109	Clinical Case Manager	57,366	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.	
1110	Clinical Case Manager	57,366	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.	
1111	Clinical Case Manager	57,366	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.	
1112	Dual Recovery Case Manager (bilingual)	59,571	The Dual Recovery Case Manager provides substance abuse education and relapse prevention strategies, and implements social model interventions in the milieu.	
1113	Dual Recovery Case Manager	57,366	The Dual Recovery Case Manager provides substance abuse education and relapse prevention strategies, and implements social model interventions in the milieu.	
1114	Dual Recovery Case Manager	57,366	The Dual Recovery Case Manager provides substance abuse education and relapse prevention strategies, and implements social model interventions in the milieu.	
1115	Employment Case Manager (bilingual)	59,571	Functions as an ACT/FSP PSC assisting clients with training for, seeking, finding, and keeping viable jobs.	
1116	Employment Case Manager	57,366	Functions as an ACT/FSP PSC assisting clients with training for, seeking, finding, and keeping viable jobs.	
1117	Employment Case Manager	57,366	Functions as an ACT/FSP PSC assisting clients with training for, seeking, finding, and keeping viable jobs.	
1118	Lead Housing Case Manager	59,571	Locate housing opportunities, coordinate and oversee various kinds of housing related agreements, assists clients in obtaining necessary documents for housing placement, coordinates appropriate housing options for clients, etc.	
1119	Housing Case Manager (bilingual)	57,366	Locate housing opportunities, coordinate and oversee various kinds of housing related agreements, assists clients in obtaining necessary documents for housing placement, coordinates appropriate housing options for clients, etc.	
1120	Housing Case Manager	55,162	Locate housing opportunities, coordinate and oversee various kinds of housing related agreements, assists clients in obtaining necessary documents for housing placement, coordinates appropriate housing options for clients, etc.	

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
1121	Peer Support Specialist (bilingual)	48,547	The Peer Support Specialist utilizes his or her experiences as a recipient of mental health and/or substance abuse services to enhance recovery efforts of clients. He or she serves as a member of a multidisciplinary team and shares practical and personal experience, knowledge and insight related to illness management, life skills, and the lifelong process of recovery. The Peer Support Specialist actively promotes greater understanding of clients' points of view and preferences.
1122	Peer Support Specialist	46,342	The Peer Support Specialist utilizes his or her experiences as a recipient of mental health and/or substance abuse services to enhance recovery efforts of clients. He or she serves as a member of a multidisciplinary team and shares practical and personal experience, knowledge and insight related to illness management, life skills, and the lifelong process of recovery. The Peer Support Specialist actively promotes greater understanding of clients' points of view and preferences.
1123	Peer Support Specialist	46,342	The Peer Support Specialist utilizes his or her experiences as a recipient of mental health and/or substance abuse services to enhance recovery efforts of clients. He or she serves as a member of a multidisciplinary team and shares practical and personal experience, knowledge and insight related to illness management, life skills, and the lifelong process of recovery. The Peer Support Specialist actively promotes greater understanding of clients' points of view and preferences.
1124	Registered Nurse	83,845	The Registered Nurse is responsible for monitoring the general psychiatric and physical health of all program clients. The Registered Nurse dispenses and accounts for all medication as ordered by the Psychiatrist (Consultant).
1125	Licensed Vocational Nurse (bilingual)	72,821	The Licensed Vocational Nurse administers medications, takes and records patients' vital signs, reports adverse reactions to medication or treatment to medical personnel in charge. The Licensed Vocational Nurse assesses ongoing symptomatology and provides crisis intervention as needed and assists clinical staff in implementing the Patient Assistance Program.
1126	Licensed Vocational Nurse	70,616	The Licensed Vocational Nurse administers medications, takes and records patients' vital signs, reports adverse reactions to medication or treatment to medical personnel in charge. The Licensed Vocational Nurse assesses ongoing symptomatology and provides crisis intervention as needed and assists clinical staff in implementing the Patient Assistance Program.
1127	Office Manager (Bilingual)	57,366	The Office Manager supervises the performance of assigned office staff and performs traditional administrative duties including file management, preparing correspondence, and attending to other administrative and clerical duties in support of the Program Manager, Program Supervisor/Team Lead, and professional staff.
1128	Billing Specialist	48,547	The Billing Specialist performs data entry, report writing and record compliance, and ensures timely completion of all billing and reimbursement functions. This position also works to compile, process, and maintain medical records of clinic patients in a manner consistent with medical, administrative, ethical, legal, and regulatory requirements of the health care system.
1129	Compliance Specialist	57,366	The Compliance Specialist develops and maintains systems to ensure appropriate documentation is completed within the program. The Compliance specialist also performs other duties, as assigned by the Program Manager to ensure overall program compliance and quality assurance within the program.
1130	Intern	-	The Intern performs a range of psychotherapeutic and rehabilitative interventions, including psychosocial assessment, individual and group counseling, crisis intervention and limited case management duties for clients under the supervision of staff.
1131	24/7 on-call capacity	81,640	This line allows the flexibility for assigned staff that cover crisis and 24/7 response to incur overtime above and beyond what their specific line item allows for. It is difficult to determine exactly which position will require certain levels of OT over the year.
1132	Vice President of Clinical Services	46,337	The Vice President is responsible for the oversight and management responsibility of all assigned programs operated by MHS in a designated region including contract compliance, performance outcomes, administrative and clinical supervision, budgetary compliance, financial performance, and community outreach. This position shares allocations across several programs.
1133	Vice President of Supportive Housing	6,620	The Vice President of Supportive Housing is responsible for defining and implementing portfolio-wide acquisition, master-leasing, and rehabilitation strategies to meet current and future housing needs for clients served by the agency and is responsible for the oversight of housing funds embedded in MHS programs.

PROGRAM EXPENSE				
	ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
	1134	Program Financial Analyst	17,930	This position is responsible for analyzing contract cost and production data, communicating irregularities, ensuring fiscal contract compliance, preparing and submitting monthly contract billings, responding to audit requests, and other program/contract related ad hoc reporting. Other duties include budget development, budget analysis and review, preparing and reviewing contract billings, and contract compliance for assigned contracts/programs.
	1135	0	-	
	1136	0	-	
	1137	0	-	
<b>Employee Benefits</b>			<b>377,395</b>	
	1201	Retirement	118,506	Cover the cost of providing a retirement fund benefit at an estimated 6% of salaries.
	1202	Worker's Compensation	19,751	Covers the cost of workers compensation expenses at 1.0% of salaries. Actual expenses might be higher or lower based on specific worker's compensation rates per class per year.
	1203	Health Insurance	239,138	Covers the cost of medical, and dental coverage per employee @ 11.72% of total salaries
	1204	Other (Specify)	-	
	1205	Other (Specify)	-	
	1206	Other (Specify)	-	
<b>Payroll Taxes &amp; Expenses:</b>			<b>161,463</b>	
	1301	OASDI	493	Calculating estimated expenses based on a factor of \$0.61 per employee per pay period
	1302	FICA/MEDICARE	151,095	Calculating estimated expenses based on a factor of 7.65% of salaries
	1303	SUI	9,875	Calculating estimated expenses based on a factor of 0.50% of salaries
	1304	Other (Specify)	-	
	1305	Other (Specify)	-	
	1306	Other (Specify)	-	
<b>2000: CLIENT SUPPORT</b>			<b>1,174,988</b>	
	2001	Child Care	2,571	estimated wrap expenses related to child care for clients
	2002	Client Housing Support	601,800	estimated expenses for housing support for clients
	2003	Client Transportation & Support	34,731	Cost of transporting clients by staff (mileage reimbursement or gas for vehicles) and bus passes/cards for client transportation needs.
	2004	Clothing, Food, & Hygiene	13,886	estimated expenses for food & for clothing
	2005	Education Support	2,571	estimated wrap expenses related to education support for clients
	2006	Employment Support	2,571	estimated wrap expenses related to employment support for clients
	2007	Household Items for Clients	20,429	estimated wrap expenses related to household items for clients
	2008	Medication Supports	487,386	estimated wrap expenses related to medication supports (psychiatrist) for clients - Psychiatrist service expense outside of the MHS, Inc. staff.
	2009	Program Supplies - Medical	8,400	Medical supplies that consist of miscellaneous items such as latex gloves, cotton, alcohol swipes, etc., in addition to charges for laboratory tests for clients (i.e. blood tests).
	2010	Utility Vouchers	643	estimated wrap expenses related to utility vouchers for clients
	2011	Other (Specify)	-	
	2012	Other (Specify)	-	
	2013	Other (Specify)	-	
	2014	Other (Specify)	-	
	2015	Other (Specify)	-	
	2016	Other (Specify)	-	
<b>3000: OPERATING EXPENSES</b>			<b>170,956</b>	
	3001	Telecommunications	44,312	Recurring costs of phones, cell phones, laptop data/internet device, and internet services. Also covers the monthly user fees for the VDI solution and MS Teams
	3002	Printing/Postage	7,520	Covers the cost of brochures, business cards, other program printing needs, postage and freight expenses.
	3003	Office, Household & Program Supplies	23,000	Office supplies utilized for program operation, including paper, pens, pencils, folders, staples, paper clips, printer cartridges, binders, folder tabs, client chart supplies. Housekeeping supplies such as cleaning products, bathroom products, non stationary paper goods, cleaning, and trash supplies. Recreational/occupational therapy supplies used by clients for their treatment plan.
	3004	Advertising	-	
	3005	Staff Development & Training	11,820	Staff development/training costs include CPR and First Aid trainings for staff, MHS course requirements (via Relias platform), and registrations for staff development and trainings held in collaboration with the program's mission (Forensic Mental Health, Evidence-based Trainings, etc.).

PROGRAM EXPENSE				
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE	
3006	Staff Mileage	32,034	In-County mileage reimbursements of staff (without clients) traveling to and from events, meetings and trainings in conjunction with program operations and responsibilities. This also includes gasoline costs for leased vehicles.	
3007	Subscriptions & Memberships	1,230	Covers the estimated cost of dues to memberships that benefit the program and subscriptions to housing, employment and other periodicals that benefit the program goals.	
3008	Vehicle Maintenance	-		
3009	Staff Travel (Out of County)	9,802	Out-of-County mileage reimbursements and/or leased vehicles gasoline, in addition to hotel, travel and flight expenses related to the attendance of conferences, training, and staff programmatic/training visits to the Corporate Office in San Diego.	
3010	Lodging	-		
3011	Other - Licenses/Taxes	29,874	Fresno County EHR system: Avatar expenses per user based on published County rates. Department Of Motor Vehicles registration renewals. Microsoft license expense for users at the program.	
3012	Other - Other Business Services	11,364	Associated costs for hiring of new employees such as TB screenings, assessments, drug screenings, background checks, and fingerprinting. Also includes the cost of movers, HIPPA shredding costs, Monthly user fees for Common Ground Software (for client support and treatment), payee services, and other	

4000: FACILITIES & EQUIPMENT		127,364		
4001	Building Maintenance	18,528	Minor repairs and maintenance for facility including, but not limited to replacement of locks, minor breakage, internal phone line repairs, building cleaning, and other repairs required for safe operation of the program at the leased facility.	
4002	Rent/Lease Building	65,273	covers the cost of leasing a facility for operations	
4003	Rent/Lease Equipment	2,650	covers the cost of renting a copier	
4004	Rent/Lease Vehicles	11,453	covers the cost of leasing two vehicles	
4005	Security	-		
4006	Utilities	14,400	covers the estimated cost of utilities for the facility	
4007	Minor equipment purchases and equipment repair/maintenance	15,060	Equipment repairs/maintenance that encompass the cost of a maintenance contract for the copier, monitoring of internet firewall, and the repair of other equipment not covered by maintenance agreements such as computers, printers, and telephones. Also covers the cost of maintenance and registration on the leased vehicles Minor equipment replacement of existing equipment that in the normal course of use is worn out and either cannot be repaired or is not practical to have repaired.	
4008	Other (Specify)	-		
4009	Other (Specify)	-		
4010	Other (Specify)	-		

5000: SPECIAL EXPENSES		1,900		
5001	Consultant (Network & Data Management)	-		
5002	HMIS (Health Management Information System)	1,300	Covers the cost of 4 users in the HMIS system	
5003	Contractual/Consulting Services (Specify)	-		
5004	Translation Services	600	Estimated cost of providing interpreters when there isn't a bilingual staff available. Actual costs might come in higher depending on clients and their needs.	
5005	Other (Specify)	-		
5006	Other (Specify)	-		
5007	Other (Specify)	-		
5008	Other (Specify)	-		

6000: ADMINISTRATIVE EXPENSES		596,618		
6001	Administrative Overhead	594,978	Indirect/administrative expense per Federally approved Indirect Rate of 14.9%.	
6002	Professional Liability Insurance	-		
6003	Accounting/Bookkeeping	-		
6004	External Audit	200	Accounting fees incurred by this program, including the required Federal Office of Management and Budget (OMB-133) audit.	
6005	Liability Insurance	1,440	Covers the cost of car insurance on the leased vehicles	
6006	Payroll Services	-		
6007	Depreciation (Provider-Owned Equipment to be Used for Program Purposes)	-		

PROGRAM EXPENSE				
	ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
	6008	Other (Specify)	-	
	6009	Other (Specify)	-	
	6010	Other (Specify)	-	
	6011	Other (Specify)	-	
	6012	Other (Specify)	-	

7000: FIXED ASSETS		2,337		
	7001	Computer Equipment & Software	2,337	Includes estimated minor software expenses
	7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	-	
	7003	Furniture & Fixtures	-	
	7004	Leasehold/Tenant/Building Improvements	-	
	7005	Other Assets over \$500 with Lifespan of 2 Years +	-	
	7006	Assets over \$5,000/unit (Specify)	-	
	7007	Other (Specify)	-	
	7008	Other (Specify)	-	

PROGRAM FUNDING SOURCES			
8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)			
	ACCT #	LINE ITEM	PROVIDE DETAILS OF METHODOLOGY(IES) USED IN DETERMINING MEDI-CAL SERVICE RATES AND/OR SERVICE UNITS, IF APPLICABLE AND/OR AS REQUIRED BY THE RFP.
	8001	Mental Health Services	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We
	8002	Case Management	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We
	8003	Crisis Services	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We
	8004	Medication Support	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We
	8005	Collateral	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We
	8006	Plan Development	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We
	8007	Assessment	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We
	8008	Rehabilitation	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We

**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Mental Health Systems, Inc. | Fresno FSP Program Site #1**  
**FY 2023 - 2024 | 07/01/23 - 06/30/24**

**PROGRAM EXPENSES**

1000: SALARIES & BENEFITS					
Employee Salaries					
Acct #	Position	FTE	Admin	Direct	Total
1101	Program Manager	1.00	\$ 102,274	\$ -	\$ 102,274
1102	Clinical Supervisor	1.00	70,920	17,730	88,650
1103	Program Supervisor/Team Lead (bilingual)	1.00	42,047	42,047	84,094
1104	Program Supervisor/Team Lead	1.00	39,770	39,770	79,539
1105	Program Supervisor/Team Lead	1.00	39,770	39,770	79,539
1106	Clinical Case Manager (bilingual)	1.00	-	61,360	61,360
1107	Clinical Case Manager (bilingual)	1.00	-	61,360	61,360
1108	Clinical Case Manager	1.00	-	59,093	59,093
1109	Clinical Case Manager	1.00	-	59,093	59,093
1110	Clinical Case Manager	1.00	-	59,093	59,093
1111	Clinical Case Manager	1.00	-	59,093	59,093
1112	Dual Recovery Case Manager (bilingual)	1.00	-	61,360	61,360
1113	Dual Recovery Case Manager	1.00	-	59,093	59,093
1114	Dual Recovery Case Manager	1.00	-	59,093	59,093
1115	Employment Case Manager (bilingual)	1.00	-	61,360	61,360
1116	Employment Case Manager	1.00	-	59,093	59,093
1117	Employment Case Manager	1.00	-	59,093	59,093
1118	Lead Housing Case Manager	1.00	-	61,360	61,360
1119	Housing Case Manager (bilingual)	1.00	-	59,093	59,093
1120	Housing Case Manager	1.00	-	56,826	56,826
1121	Peer Support Specialist (bilingual)	1.00	-	50,003	50,003
1122	Peer Support Specialist	1.00	-	47,736	47,736
1123	Peer Support Specialist	1.00	-	47,736	47,736
1124	Registered Nurse	1.00	-	86,362	86,362
1125	Licensed Vocational Nurse (bilingual)	1.00	-	75,005	75,005
1126	Licensed Vocational Nurse	1.00	-	72,738	72,738
1127	Office Manager (Bilingual)	1.00	59,093	-	59,093
1128	Billing Specialist	1.00	50,003	-	50,003
1129	Compliance Specialist	1.00	59,093	-	59,093
1130	Intern	3.00	-	-	-
1131	24/7 on-call capacity	1.00	-	84,094	84,094
1132	Vice President of Clinical Services	0.35	47,728	-	47,728
1133	Vice President of Supportive Housing	0.05	6,818	-	6,818
1134	Program Financial Analyst	0.25	18,465	-	18,465
1135			-	-	-
1136			-	-	-
1137			-	-	-
<b>Personnel Salaries Subtotal</b>		<b>33.65</b>	<b>\$ 535,980</b>	<b>\$ 1,498,453</b>	<b>\$ 2,034,433</b>

<b>Employee Benefits</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1201	Retirement	\$ 31,737	\$ 90,329	\$ 122,066
1202	Worker's Compensation	5,289	15,055	20,344
1203	Health Insurance	64,044	182,281	246,325
1204	Other (Specify)	-	-	-
1205	Other (Specify)	-	-	-
1206	Other (Specify)	-	-	-
<b>Employee Benefits Subtotal:</b>		<b>\$ 101,070</b>	<b>\$ 287,665</b>	<b>\$ 388,735</b>
<b>Payroll Taxes &amp; Expenses:</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1301	OASDI	\$ 128	\$ 365	\$ 493
1302	FICA/MEDICARE	40,465	115,169	155,634
1303	SUI	2,645	7,527	10,172
1304	Other (Specify)	-	-	-
1305	Other (Specify)	-	-	-
1306	Other (Specify)	-	-	-
<b>Payroll Taxes &amp; Expenses Subtotal:</b>		<b>\$ 43,238</b>	<b>\$ 123,061</b>	<b>\$ 166,299</b>
<b>EMPLOYEE SALARIES &amp; BENEFITS TOTAL:</b>		<b>\$ 680,288</b>	<b>\$ 1,909,179</b>	<b>\$ 2,589,467</b>



<b>2000: CLIENT SUPPORT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
2001	Child Care	\$ 2,571
2002	Client Housing Support	601,800
2003	Client Transportation & Support	34,731
2004	Clothing, Food, & Hygiene	13,886
2005	Education Support	2,571
2006	Employment Support	2,571
2007	Household Items for Clients	20,429
2008	Medication Supports	487,386
2009	Program Supplies - Medical	8,400
2010	Utility Vouchers	643
2011	Other (Specify)	-
2012	Other (Specify)	-
2013	Other (Specify)	-
2014	Other (Specify)	-
2015	Other (Specify)	-
2016	Other (Specify)	-
<b>DIRECT CLIENT CARE TOTAL</b>		<b>\$ 1,174,988</b>

<b>3000: OPERATING EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
3001	Telecommunications	\$ 44,312
3002	Printing/Postage	7,520
3003	Office, Household & Program Supplies	23,000
3004	Advertising	-
3005	Staff Development & Training	11,820
3006	Staff Mileage	32,034
3007	Subscriptions & Memberships	1,230
3008	Vehicle Maintenance	-
3009	Staff Travel (Out of County)	9,802
3010	Lodging	-
3011	Other - Licenses/Taxes	29,874
3012	Other - Other Business Services	11,436
<b>OPERATING EXPENSES TOTAL:</b>		<b>\$ 171,028</b>

<b>4000: FACILITIES &amp; EQUIPMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
4001	Building Maintenance	\$ 18,528
4002	Rent/Lease Building	67,229
4003	Rent/Lease Equipment	2,650
4004	Rent/Lease Vehicles	11,453
4005	Security	-
4006	Utilities	14,400
4007	Minor equipment purchases and equipment repair/maintenance	15,060
4008	Other (Specify)	-
4009	Other (Specify)	-
4010	Other (Specify)	-
<b>FACILITIES/EQUIPMENT TOTAL:</b>		<b>\$ 129,320</b>

<b>5000: SPECIAL EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
5001	Consultant (Network & Data Management)	\$ -
5002	HMIS (Health Management Information System)	1,300
5003	Contractual/Consulting Services (Specify)	
5004	Translation Services	600
5005	Other (Specify)	-
5006	Other (Specify)	-
5007	Other (Specify)	-
5008	Other (Specify)	-
<b>SPECIAL EXPENSES TOTAL:</b>		<b>\$ 1,900</b>

<b>6000: ADMINISTRATIVE EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
6001	Administrative Overhead	\$ 606,531
6002	Professional Liability Insurance	-
6003	Accounting/Bookkeeping	-
6004	External Audit	200
6005	Liability Insurance	1,440
6006	Payroll Services	-
6007	Depreciation (Provider-Owned Equipment to be Used for Program Purposes)	-
6008	Other (Specify)	-
6009	Other (Specify)	-
6010	Other (Specify)	-
6011	Other (Specify)	-
6012	Other (Specify)	-
<b>ADMINISTRATIVE EXPENSES TOTAL</b>		<b>\$ 608,171</b>

<b>7000: FIXED ASSETS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
7001	Computer Equipment & Software	\$ 2,337
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	-
7003	Furniture & Fixtures	-
7004	Leasehold/Tenant/Building Improvements	-
7005	Other Assets over \$500 with Lifespan of 2 Years +	-
7006	Assets over \$5,000/unit (Specify)	-
7007	Other (Specify)	-
7008	Other (Specify)	-
<b>FIXED ASSETS EXPENSES TOTAL</b>		<b>\$ 2,337</b>

<b>TOTAL PROGRAM EXPENSES</b>		<b>\$ 4,677,211</b>
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**PROGRAM FUNDING SOURCES**

<b>8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)</b>				
<b>Acct #</b>	<b>Line Item Description</b>	<b>Service Units</b>	<b>Rate</b>	<b>Amount</b>
8001	Mental Health Services	695,628	2.45	\$ 1,702,302
8002	Case Management	345,060	1.89	653,052
8003	Crisis Services	36,936	3.71	137,207
8004	Medication Support	265,560	4.52	1,201,546
8005	Collateral	17,820	2.45	43,608
8006	Plan Development	24,300	2.45	59,466
8007	Assessment	24,300	2.45	59,466
8008	Rehabilitation	19,440	2.45	47,572
<b>Estimated Specialty Mental Health Services Billing Totals:</b>		<b>1,429,044</b>		<b>\$ 3,904,220</b>
Estimated % of Clients who are Medi-Cal Beneficiaries				73%
Estimated Total Cost of Specialty Mental Health Services Provided to Medi-Cal Beneficiaries				2,832,600
Federal Financial Participation (FFP) %			100%	2,832,600
<b>MEDI-CAL FFP TOTAL</b>				<b>\$ 2,832,600</b>

<b>8100 - SUBSTANCE USE DISORDER FUNDS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8101	Drug Medi-Cal	\$ -
8102	SABG	\$ -
<b>SUBSTANCE USE DISORDER FUNDS TOTAL</b>		<b>\$ -</b>

<b>8200 - REALIGNMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8201	Realignment	\$ 34,158
<b>REALIGNMENT TOTAL</b>		<b>\$ 34,158</b>

<b>8300 - MENTAL HEALTH SERVICE ACT (MHSA)</b>			
<b>Acct #</b>	<b>MHSA Component</b>	<b>MHSA Program Name</b>	<b>Amount</b>
8301	CSS - Community Services & Supports	Adult FSP	\$ 1,793,453
8302	PEI - Prevention & Early Intervention		-
8303	INN - Innovations		-
8304	WET - Workforce Education & Training		-
8305	CFTN - Capital Facilities & Technology		-
<b>MHSA TOTAL</b>			<b>\$ 1,793,453</b>

<b>8400 - OTHER REVENUE</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8401	Client Fees	\$ -
8402	Client Insurance	5,000
8403	Grants (Specify)	-
8404	Client Rent Income	10,000
8405	Donations and other sources	2,000
<b>OTHER REVENUE TOTAL</b>		<b>\$ 17,000</b>

<b>TOTAL PROGRAM FUNDING SOURCES:</b>	<b>\$ 4,677,211</b>
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**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Mental Health Systems, Inc. | Fresno FSP Program Site #1**  
**FY 2023 - 2024 | 07/01/23 - 06/30/24 Budget Narrative**

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>1000: SALARIES &amp; BENEFITS</b>		<b>2,589,467</b>	
<b>Employee Salaries</b>		<b>2,034,433</b>	
1101	Program Manager	102,274	The Program Manager is responsible for the overall operation of the program
1102	Clinical Supervisor	88,650	The Clinical Supervisor is responsible for all program clinical supervision, clinical assessment guidelines, clinical assessment guideline review, in-service training and clinical consultation with staff.
1103	Program Supervisor/Team Lead (bilingual)	84,094	The Program Supervisor/Team Lead acts as a member of a multidisciplinary team and directly provides services to clients. In addition, the Program Supervisor/Team Lead assists the Program Manager in establishing, administering and directing the MHS DART program. The Program Supervisor/Team Lead demonstrates a strong working knowledge of best practices in Assertive Community Treatment, Full-Service Partnership treatment, Intensive Case Management, bio-psychosocial rehabilitation and recovery, and outpatient treatment. Along with assisting the Program Manager, the Program Supervisor/Team Lead provides supervision to assigned staff. The bulk of client services are provided in the community.
1104	Program Supervisor/Team Lead	79,539	The Program Supervisor/Team Lead acts as a member of a multidisciplinary team and directly provides services to clients. In addition, the Program Supervisor/Team Lead assists the Program Manager in establishing, administering and directing the MHS DART program. The Program Supervisor/Team Lead demonstrates a strong working knowledge of best practices in Assertive Community Treatment, Full-Service Partnership treatment, Intensive Case Management, bio-psychosocial rehabilitation and recovery, and outpatient treatment. Along with assisting the Program Manager, the Program Supervisor/Team Lead provides supervision to assigned staff. The bulk of client services are provided in the community.
1105	Program Supervisor/Team Lead	79,539	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.
1106	Clinical Case Manager (bilingual)	61,360	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.
1107	Clinical Case Manager (bilingual)	61,360	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
1108	Clinical Case Manager	59,093	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.
1109	Clinical Case Manager	59,093	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.
1110	Clinical Case Manager	59,093	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.
1111	Clinical Case Manager	59,093	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.
1112	Dual Recovery Case Manager (bilingual)	61,360	The Dual Recovery Case Manager provides substance abuse education and relapse prevention strategies, and implements social model interventions in the milieu.
1113	Dual Recovery Case Manager	59,093	The Dual Recovery Case Manager provides substance abuse education and relapse prevention strategies, and implements social model interventions in the milieu.
1114	Dual Recovery Case Manager	59,093	The Dual Recovery Case Manager provides substance abuse education and relapse prevention strategies, and implements social model interventions in the milieu.
1115	Employment Case Manager (bilingual)	61,360	Functions as an ACT/FSP PSC assisting clients with training for, seeking, finding, and keeping viable jobs.
1116	Employment Case Manager	59,093	Functions as an ACT/FSP PSC assisting clients with training for, seeking, finding, and keeping viable jobs.
1117	Employment Case Manager	59,093	Functions as an ACT/FSP PSC assisting clients with training for, seeking, finding, and keeping viable jobs.
1118	Lead Housing Case Manager	61,360	Locate housing opportunities, coordinate and oversee various kinds of housing related agreements, assists clients in obtaining necessary documents for housing placement, coordinates appropriate housing options for clients, etc.
1119	Housing Case Manager (bilingual)	59,093	Locate housing opportunities, coordinate and oversee various kinds of housing related agreements, assists clients in obtaining necessary documents for housing placement, coordinates appropriate housing options for clients, etc.

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
1120	Housing Case Manager	56,826	Locate housing opportunities, coordinate and oversee various kinds of housing related agreements, assists clients in obtaining necessary documents for housing placement, coordinates appropriate housing options for clients, etc.
1121	Peer Support Specialist (bilingual)	50,003	The Peer Support Specialist utilizes his or her experiences as a recipient of mental health and/or substance abuse services to enhance recovery efforts of clients. He or she serves as a member of a multidisciplinary team and shares practical and personal experience, knowledge and insight related to illness management, life skills, and the lifelong process of recovery. The Peer Support Specialist actively promotes greater understanding of clients' points of view and preferences.
1122	Peer Support Specialist	47,736	The Peer Support Specialist utilizes his or her experiences as a recipient of mental health and/or substance abuse services to enhance recovery efforts of clients. He or she serves as a member of a multidisciplinary team and shares practical and personal experience, knowledge and insight related to illness management, life skills, and the lifelong process of recovery. The Peer Support Specialist actively promotes greater understanding of clients' points of view and preferences.
1123	Peer Support Specialist	47,736	The Peer Support Specialist utilizes his or her experiences as a recipient of mental health and/or substance abuse services to enhance recovery efforts of clients. He or she serves as a member of a multidisciplinary team and shares practical and personal experience, knowledge and insight related to illness management, life skills, and the lifelong process of recovery. The Peer Support Specialist actively promotes greater understanding of clients' points of view and preferences.
1124	Registered Nurse	86,362	The Registered Nurse is responsible for monitoring the general psychiatric and physical health of all program clients. The Registered Nurse dispenses and accounts for all medication as ordered by the Psychiatrist (Consultant).
1125	Licensed Vocational Nurse (bilingual)	75,005	The Licensed Vocational Nurse administers medications, takes and records patients' vital signs, reports adverse reactions to medication or treatment to medical personnel in charge. The Licensed Vocational Nurse assesses ongoing symptomatology and provides crisis intervention as needed and assists clinical staff in implementing the Patient Assistance Program.
1126	Licensed Vocational Nurse	72,738	The Licensed Vocational Nurse administers medications, takes and records patients' vital signs, reports adverse reactions to medication or treatment to medical personnel in charge. The Licensed Vocational Nurse assesses ongoing symptomatology and provides crisis intervention as needed and assists clinical staff in implementing the Patient Assistance Program.
1127	Office Manager (Bilingual)	59,093	The Office Manager supervises the performance of assigned office staff and performs traditional administrative duties including file management, preparing correspondence, and attending to other administrative and clerical duties in support of the Program Manager, Program Supervisor/Team Lead, and professional staff.
1128	Billing Specialist	50,003	The Billing Specialist performs data entry, report writing and record compliance, and ensures timely completion of all billing and reimbursement functions. This position also works to compile, process, and maintain medical records of clinic patients in a manner consistent with medical, administrative, ethical, legal, and regulatory requirements of the health care system.
1129	Compliance Specialist	59,093	The Compliance Specialist develops and maintains systems to ensure appropriate documentation is completed within the program. The Compliance specialist also performs other duties, as assigned by the Program Manager to ensure overall program compliance and quality assurance within the program.
1130	Intern	-	The Intern performs a range of psychotherapeutic and rehabilitative interventions, including psychosocial assessment, individual and group counseling, crisis intervention and limited case management duties for clients under the supervision of staff.
1131	24/7 on-call capacity	84,094	This line allows the flexibility for assigned staff that cover crisis and 24/7 response to incur overtime above and beyond what their specific line item allows for. It is difficult to determine exactly which position will require certain levels of OT over the year.
1132	Vice President of Clinical Services	47,728	The Vice President is responsible for the oversight and management responsibility of all assigned programs operated by MHS in a designated region including contract compliance, performance outcomes, administrative and clinical supervision, budgetary compliance, financial performance, and community outreach. This position shares allocations across several programs.

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
1133	Vice President of Supportive Housing	6,818	The Vice President of Supportive Housing is responsible for defining and implementing portfolio-wide acquisition, master-leasing, and rehabilitation strategies to meet current and future housing needs for clients served by the agency and is responsible for the oversight of housing funds embedded in MHS programs.
1134	Program Financial Analyst	18,465	This position is responsible for analyzing contract cost and production data, communicating irregularities, ensuring fiscal contract compliance, preparing and submitting monthly contract billings, responding to audit requests, and other program/contract related ad hoc reporting. Other duties include budget development, budget analysis and review, preparing and reviewing contract billings, and contract compliance for assigned contracts/programs.
1135	0	-	
1136	0	-	
1137	0	-	

Employee Benefits		388,735	
1201	Retirement	122,066	Cover the cost of providing a retirement fund benefit at an estimated 6% of salaries.
1202	Worker's Compensation	20,344	Covers the cost of workers compensation expenses at 1.0% of salaries. Actual expenses might be higher or lower based on specific worker's compensation rates per class per year.
1203	Health Insurance	246,325	Covers the cost of medical, and dental coverage per employee @ 11.72% of total salaries
1204	Other (Specify)	-	
1205	Other (Specify)	-	
1206	Other (Specify)	-	

Payroll Taxes & Expenses:		166,299	
1301	OASDI	493	Calculating estimated expenses based on a factor of \$0.61 per employee per pay period
1302	FICA/MEDICARE	155,634	Calculating estimated expenses based on a factor of 7.65% of salaries
1303	SUI	10,172	Calculating estimated expenses based on a factor of 0.50% of salaries
1304	Other (Specify)	-	
1305	Other (Specify)	-	
1306	Other (Specify)	-	

2000: CLIENT SUPPORT		1,174,988	
2001	Child Care	2,571	estimated wrap expenses related to child care for clients
2002	Client Housing Support	601,800	estimated expenses for housing support for clients
2003	Client Transportation & Support	34,731	Cost of transporting clients by staff (mileage reimbursement or gas for vehicles) and bus passes/cards for client transportation needs.
2004	Clothing, Food, & Hygiene	13,886	estimated expenses for food & for clothing
2005	Education Support	2,571	estimated wrap expenses related to education support for clients
2006	Employment Support	2,571	estimated wrap expenses related to employment support for clients
2007	Household Items for Clients	20,429	estimated wrap expenses related to household items for clients
2008	Medication Supports	487,386	estimated wrap expenses related to medication supports (psychiatrist) for clients - Psychiatrist service expense outside of the MHS, Inc. staff.
2009	Program Supplies - Medical	8,400	Medical supplies that consist of miscellaneous items such as latex gloves, cotton, alcohol swipes, etc., in addition to charges for laboratory tests for clients (i.e. blood tests).
2010	Utility Vouchers	643	estimated wrap expenses related to utility vouchers for clients
2011	Other (Specify)	-	
2012	Other (Specify)	-	
2013	Other (Specify)	-	
2014	Other (Specify)	-	
2015	Other (Specify)	-	
2016	Other (Specify)	-	

3000: OPERATING EXPENSES		171,028	
3001	Telecommunications	44,312	Recurring costs of phones, cell phones, laptop data/internet device, and internet services. Also covers the monthly user fees for the VDI solution and MS Teams
3002	Printing/Postage	7,520	Covers the cost of brochures, business cards, other program printing needs, postage and freight expenses.
3003	Office, Household & Program Supplies	23,000	Office supplies utilized for program operation, including paper, pens, pencils, folders, staples, paper clips, printer cartridges, binders, folder tabs, client chart supplies. Housekeeping supplies such as cleaning products, bathroom products, non stationary paper goods, cleaning, and trash supplies. Recreational/occupational therapy supplies used by clients for their treatment plan.
3004	Advertising	-	

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
3005	Staff Development & Training	11,820	Staff development/training costs include CPR and First Aid trainings for staff, MHS course requirements (via Relias platform), and registrations for staff development and trainings held in collaboration with the program's mission (Forensic Mental Health, Evidence-based Trainings, etc.).
3006	Staff Mileage	32,034	In-County mileage reimbursements of staff (without clients) traveling to and from events, meetings and trainings in conjunction with program operations and responsibilities. This also includes gasoline costs for leased vehicles.
3007	Subscriptions & Memberships	1,230	Covers the estimated cost of dues to memberships that benefit the program and subscriptions to housing, employment and other periodicals that benefit the program goals.
3008	Vehicle Maintenance	-	
3009	Staff Travel (Out of County)	9,802	Out-of-County mileage reimbursements and/or leased vehicles gasoline, in addition to hotel, travel and flight expenses related to the attendance of conferences, training, and staff programmatic/training visits to the Corporate Office in San Diego.
3010	Lodging	-	
3011	Other - Licenses/Taxes	29,874	Fresno County EHR system: Avatar expenses per user based on published County rates. Department Of Motor Vehicles registration renewals. Microsoft license expense for users at the program.
3012	Other - Other Business Services	11,436	Associated costs for hiring of new employees such as TB screenings, assessments, drug screenings, background checks, and fingerprinting. Also includes the cost of movers, HIPPA shredding costs, Monthly user fees for Common Ground Software (for client support and treatment), payee services, and other

4000: FACILITIES & EQUIPMENT		129,320	
4001	Building Maintenance	18,528	Minor repairs and maintenance for facility including, but not limited to replacement of locks, minor breakage, internal phone line repairs, building cleaning, and other repairs required for safe operation of the program at the leased facility.
4002	Rent/Lease Building	67,229	covers the cost of leasing a facility for operations
4003	Rent/Lease Equipment	2,650	covers the cost of renting a copier
4004	Rent/Lease Vehicles	11,453	covers the cost of leasing two vehicles
4005	Security	-	
4006	Utilities	14,400	covers the estimated cost of utilities for the facility
4007	Minor equipment purchases and equipment repair/maintenance	15,060	Equipment repairs/maintenance that encompass the cost of a maintenance contract for the copier, monitoring of internet firewall, and the repair of other equipment not covered by maintenance agreements such as computers, printers, and telephones. Also covers the cost of maintenance and registration on the leased vehicles Minor equipment replacement of existing equipment that in the normal course of use is worn out and either cannot be repaired or is not practical to have repaired.
4008	Other (Specify)	-	
4009	Other (Specify)	-	
4010	Other (Specify)	-	

5000: SPECIAL EXPENSES		1,900	
5001	Consultant (Network & Data Management)	-	
5002	HMIS (Health Management Information System)	1,300	Covers the cost of 4 users in the HMIS system
5003	Contractual/Consulting Services (Specify)	-	
5004	Translation Services	600	Estimated cost of providing interpreters when there isn't a bilingual staff available. Actual costs might come in higher depending on clients and their needs.
5005	Other (Specify)	-	
5006	Other (Specify)	-	
5007	Other (Specify)	-	
5008	Other (Specify)	-	

6000: ADMINISTRATIVE EXPENSES		608,171	
6001	Administrative Overhead	606,531	Indirect/administrative expense per Federally approved Indirect Rate of 14.9%.
6002	Professional Liability Insurance	-	
6003	Accounting/Bookkeeping	-	
6004	External Audit	200	Accounting fees incurred by this program, including the required Federal Office of Management and Budget (OMB-133) audit.



PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
6005	Liability Insurance	1,440	Covers the cost of car insurance on the leased vehicles
6006	Payroll Services	-	
6007	Depreciation (Provider-Owned Equipment to be Used for Program Purposes)	-	
6008	Other (Specify)	-	
6009	Other (Specify)	-	
6010	Other (Specify)	-	
6011	Other (Specify)	-	
6012	Other (Specify)	-	

7000: FIXED ASSETS		2,337	
7001	Computer Equipment & Software	2,337	Includes estimated minor software expenses
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	-	
7003	Furniture & Fixtures	-	
7004	Leasehold/Tenant/Building Improvements	-	
7005	Other Assets over \$500 with Lifespan of 2 Years +	-	
7006	Assets over \$5,000/unit (Specify)	-	
7007	Other (Specify)	-	
7008	Other (Specify)	-	

PROGRAM FUNDING SOURCES			
8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)			
ACCT #	LINE ITEM	PROVIDE DETAILS OF METHODOLOGY(IES) USED IN DETERMINING MEDI-CAL SERVICE RATES AND/OR SERVICE UNITS, IF APPLICABLE AND/OR AS REQUIRED BY THE RFP.	
8001	Mental Health Services	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We	
8002	Case Management	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We	
8003	Crisis Services	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We	
8004	Medication Support	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We	
8005	Collateral	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We	
8006	Plan Development	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We	
8007	Assessment	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We	
8008	Rehabilitation	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We	

**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Mental Health Systems, Inc. | Fresno FSP Program Site #1**  
**FY 2024 - 2025 | 07/01/24 - 06/30/25**

**PROGRAM EXPENSES**

<b>1000: SALARIES &amp; BENEFITS</b>					
<b>Employee Salaries</b>					
<b>Acct #</b>	<b>Position</b>	<b>FTE</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1101	Program Manager	1.00	\$ 105,352	\$ -	\$ 105,352
1102	Clinical Supervisor	1.00	73,033	18,258	91,291
1103	Program Supervisor/Team Lead (bilingual)	1.00	43,306	43,306	86,611
1104	Program Supervisor/Team Lead	1.00	40,966	40,966	81,931
1105	Program Supervisor/Team Lead	1.00	40,966	40,966	81,931
1106	Clinical Case Manager (bilingual)	1.00	-	63,211	63,211
1107	Clinical Case Manager (bilingual)	1.00	-	63,211	63,211
1108	Clinical Case Manager	1.00	-	60,861	60,861
1109	Clinical Case Manager	1.00	-	60,861	60,861
1110	Clinical Case Manager	1.00	-	60,861	60,861
1111	Clinical Case Manager	1.00	-	60,861	60,861
1112	Dual Recovery Case Manager (bilingual)	1.00	-	63,211	63,211
1113	Dual Recovery Case Manager	1.00	-	60,861	60,861
1114	Dual Recovery Case Manager	1.00	-	60,861	60,861
1115	Employment Case Manager (bilingual)	1.00	-	63,211	63,211
1116	Employment Case Manager	1.00	-	60,861	60,861
1117	Employment Case Manager	1.00	-	60,861	60,861
1118	Lead Housing Case Manager	1.00	-	63,211	63,211
1119	Housing Case Manager (bilingual)	1.00	-	60,861	60,861
1120	Housing Case Manager	1.00	-	58,531	58,531
1121	Peer Support Specialist (bilingual)	1.00	-	51,501	51,501
1122	Peer Support Specialist	1.00	-	49,171	49,171
1123	Peer Support Specialist	1.00	-	49,171	49,171
1124	Registered Nurse	1.00	-	88,962	88,962
1125	Licensed Vocational Nurse (bilingual)	1.00	-	77,251	77,251
1126	Licensed Vocational Nurse	1.00	-	74,922	74,922
1127	Office Manager (Bilingual)	1.00	60,861	-	60,861
1128	Billing Specialist	1.00	51,501	-	51,501
1129	Compliance Specialist	1.00	60,861	-	60,861
1130	Intern	3.00	-	-	-
1131	24/7 on-call capacity	1.00	-	86,611	86,611
1132	Vice President of Clinical Services	0.35	49,162	-	49,162
1133	Vice President of Supportive Housing	0.05	7,023	-	7,023
1134	Program Financial Analyst	0.25	19,022	-	19,022
1135			-	-	-
1136			-	-	-
1137			-	-	-
<b>Personnel Salaries Subtotal</b>		<b>33.65</b>	<b>\$ 552,051</b>	<b>\$ 1,543,419</b>	<b>\$ 2,095,470</b>

<b>Employee Benefits</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1201	Retirement	\$ 32,689	\$ 93,039	\$ 125,728
1202	Worker's Compensation	5,448	15,507	20,955
1203	Health Insurance	65,965	187,743	253,708
1204	Other (Specify)	-	-	-
1205	Other (Specify)	-	-	-
1206	Other (Specify)	-	-	-
<b>Employee Benefits Subtotal:</b>		<b>\$ 104,102</b>	<b>\$ 296,289</b>	<b>\$ 400,391</b>
<b>Payroll Taxes &amp; Expenses:</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1301	OASDI	\$ 128	\$ 365	\$ 493
1302	FICA/MEDICARE	41,679	118,624	160,303
1303	SUI	2,724	7,753	10,477
1304	Other (Specify)	-	-	-
1305	Other (Specify)	-	-	-
1306	Other (Specify)	-	-	-
<b>Payroll Taxes &amp; Expenses Subtotal:</b>		<b>\$ 44,531</b>	<b>\$ 126,742</b>	<b>\$ 171,273</b>
<b>EMPLOYEE SALARIES &amp; BENEFITS TOTAL:</b>		<b>\$ 700,684</b>	<b>\$ 1,966,450</b>	<b>\$ 2,667,134</b>

<b>2000: CLIENT SUPPORT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
2001	Child Care	\$ 2,571
2002	Client Housing Support	601,800
2003	Client Transportation & Support	34,731
2004	Clothing, Food, & Hygiene	13,886
2005	Education Support	2,571
2006	Employment Support	2,571
2007	Household Items for Clients	20,429
2008	Medication Supports	487,386
2009	Program Supplies - Medical	8,400
2010	Utility Vouchers	643
2011	Other (Specify)	-
2012	Other (Specify)	-
2013	Other (Specify)	-
2014	Other (Specify)	-
2015	Other (Specify)	-
2016	Other (Specify)	-
<b>DIRECT CLIENT CARE TOTAL</b>		<b>\$ 1,174,988</b>

<b>3000: OPERATING EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
3001	Telecommunications	\$ 44,312
3002	Printing/Postage	7,520
3003	Office, Household & Program Supplies	23,000
3004	Advertising	-
3005	Staff Development & Training	11,820
3006	Staff Mileage	32,034
3007	Subscriptions & Memberships	1,230
3008	Vehicle Maintenance	-
3009	Staff Travel (Out of County)	9,802
3010	Lodging	-
3011	Other - Licenses/Taxes	29,874
3012	Other - Other Business Services	11,509
<b>OPERATING EXPENSES TOTAL:</b>		<b>\$ 171,101</b>

<b>4000: FACILITIES &amp; EQUIPMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
4001	Building Maintenance	\$ 18,528
4002	Rent/Lease Building	69,247
4003	Rent/Lease Equipment	2,650
4004	Rent/Lease Vehicles	11,453
4005	Security	-
4006	Utilities	14,400
4007	Minor equipment purchases and equipment repair/maintenance	15,060
4008	Other (Specify)	-
4009	Other (Specify)	-
4010	Other (Specify)	-
<b>FACILITIES/EQUIPMENT TOTAL:</b>		<b>\$ 131,338</b>

<b>5000: SPECIAL EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
5001	Consultant (Network & Data Management)	\$ -
5002	HMIS (Health Management Information System)	1,300
5003	Contractual/Consulting Services (Specify)	
5004	Translation Services	600
5005	Other (Specify)	-
5006	Other (Specify)	-
5007	Other (Specify)	-
5008	Other (Specify)	-
<b>SPECIAL EXPENSES TOTAL:</b>		<b>\$ 1,900</b>

<b>6000: ADMINISTRATIVE EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
6001	Administrative Overhead	\$ 618,415
6002	Professional Liability Insurance	-
6003	Accounting/Bookkeeping	-
6004	External Audit	200
6005	Liability Insurance	1,440
6006	Payroll Services	-
6007	Depreciation (Provider-Owned Equipment to be Used for Program Purposes)	-
6008	Other (Specify)	-
6009	Other (Specify)	-
6010	Other (Specify)	-
6011	Other (Specify)	-
6012	Other (Specify)	-
<b>ADMINISTRATIVE EXPENSES TOTAL</b>		<b>\$ 620,055</b>

<b>7000: FIXED ASSETS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
7001	Computer Equipment & Software	\$ 2,337
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	-
7003	Furniture & Fixtures	-
7004	Leasehold/Tenant/Building Improvements	-
7005	Other Assets over \$500 with Lifespan of 2 Years +	-
7006	Assets over \$5,000/unit (Specify)	-
7007	Other (Specify)	-
7008	Other (Specify)	-
<b>FIXED ASSETS EXPENSES TOTAL</b>		<b>\$ 2,337</b>

<b>TOTAL PROGRAM EXPENSES</b>		<b>\$ 4,768,853</b>
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**PROGRAM FUNDING SOURCES**

<b>8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)</b>				
<b>Acct #</b>	<b>Line Item Description</b>	<b>Service Units</b>	<b>Rate</b>	<b>Amount</b>
8001	Mental Health Services	695,629	2.50	\$ 1,736,263
8002	Case Management	345,060	1.93	666,079
8003	Crisis Services	36,936	3.79	139,944
8004	Medication Support	265,560	4.61	1,225,515
8005	Collateral	17,820	2.50	44,478
8006	Plan Development	24,300	2.50	60,652
8007	Assessment	24,300	2.50	60,652
8008	Rehabilitation	19,440	2.50	48,521
<b>Estimated Specialty Mental Health Services Billing Totals:</b>		<b>1,429,045</b>		<b>\$ 3,982,105</b>
Estimated % of Clients who are Medi-Cal Beneficiaries				74%
Estimated Total Cost of Specialty Mental Health Services Provided to Medi-Cal Beneficiaries				2,958,400
Federal Financial Participation (FFP) %			100%	2,958,400
<b>MEDI-CAL FFP TOTAL</b>				<b>\$ 2,958,400</b>

<b>8100 - SUBSTANCE USE DISORDER FUNDS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8101	Drug Medi-Cal	\$ -
8102	SABG	\$ -
<b>SUBSTANCE USE DISORDER FUNDS TOTAL</b>		<b>\$ -</b>

<b>8200 - REALIGNMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8201	Realignment	\$ 0
<b>REALIGNMENT TOTAL</b>		<b>\$ 0</b>

<b>8300 - MENTAL HEALTH SERVICE ACT (MHSA)</b>			
<b>Acct #</b>	<b>MHSA Component</b>	<b>MHSA Program Name</b>	<b>Amount</b>
8301	CSS - Community Services & Supports	Adult FSP	\$ 1,793,453
8302	PEI - Prevention & Early Intervention		-
8303	INN - Innovations		-
8304	WET - Workforce Education & Training		-
8305	CFTN - Capital Facilities & Technology		-
<b>MHSA TOTAL</b>			<b>\$ 1,793,453</b>

<b>8400 - OTHER REVENUE</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8401	Client Fees	\$ -
8402	Client Insurance	5,000
8403	Grants (Specify)	-
8404	Client Rent Income	10,000
8405	Donations and other sources	2,000
<b>OTHER REVENUE TOTAL</b>		<b>\$ 17,000</b>

**TOTAL PROGRAM FUNDING SOURCES: \$ 4,768,853**

**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Mental Health Systems, Inc. | Fresno FSP Program Site #1**  
**FY 2024 - 2025 | 07/01/24 - 06/30/25 Budget Narrative**

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>1000: SALARIES &amp; BENEFITS</b>		<b>2,667,134</b>	
<b>Employee Salaries</b>		<b>2,095,470</b>	
1101	Program Manager	105,352	The Program Manager is responsible for the overall operation of the program
1102	Clinical Supervisor	91,291	The Clinical Supervisor is responsible for all program clinical supervision, clinical assessment guidelines, clinical assessment guideline review, in-service training and clinical consultation with staff.
1103	Program Supervisor/Team Lead (bilingual)	86,611	The Program Supervisor/Team Lead acts as a member of a multidisciplinary team and directly provides services to clients. In addition, the Program Supervisor/Team Lead assists the Program Manager in establishing, administering and directing the MHS DART program. The Program Supervisor/Team Lead demonstrates a strong working knowledge of best practices in Assertive Community Treatment, Full-Service Partnership treatment, Intensive Case Management, bio-psychosocial rehabilitation and recovery, and outpatient treatment. Along with assisting the Program Manager, the Program Supervisor/Team Lead provides supervision to assigned staff. The bulk of client services are provided in the community.
1104	Program Supervisor/Team Lead	81,931	The Program Supervisor/Team Lead acts as a member of a multidisciplinary team and directly provides services to clients. In addition, the Program Supervisor/Team Lead assists the Program Manager in establishing, administering and directing the MHS DART program. The Program Supervisor/Team Lead demonstrates a strong working knowledge of best practices in Assertive Community Treatment, Full-Service Partnership treatment, Intensive Case Management, bio-psychosocial rehabilitation and recovery, and outpatient treatment. Along with assisting the Program Manager, the Program Supervisor/Team Lead provides supervision to assigned staff. The bulk of client services are provided in the community.
1105	Program Supervisor/Team Lead	81,931	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.
1106	Clinical Case Manager (bilingual)	63,211	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.
1107	Clinical Case Manager (bilingual)	63,211	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.

PROGRAM EXPENSE				
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE	
1108	Clinical Case Manager	60,861	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.	
1109	Clinical Case Manager	60,861	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.	
1110	Clinical Case Manager	60,861	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.	
1111	Clinical Case Manager	60,861	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.	
1112	Dual Recovery Case Manager (bilingual)	63,211	The Dual Recovery Case Manager provides substance abuse education and relapse prevention strategies, and implements social model interventions in the milieu.	
1113	Dual Recovery Case Manager	60,861	The Dual Recovery Case Manager provides substance abuse education and relapse prevention strategies, and implements social model interventions in the milieu.	
1114	Dual Recovery Case Manager	60,861	The Dual Recovery Case Manager provides substance abuse education and relapse prevention strategies, and implements social model interventions in the milieu.	
1115	Employment Case Manager (bilingual)	63,211	Functions as an ACT/FSP PSC assisting clients with training for, seeking, finding, and keeping viable jobs.	
1116	Employment Case Manager	60,861	Functions as an ACT/FSP PSC assisting clients with training for, seeking, finding, and keeping viable jobs.	
1117	Employment Case Manager	60,861	Functions as an ACT/FSP PSC assisting clients with training for, seeking, finding, and keeping viable jobs.	
1118	Lead Housing Case Manager	63,211	Locate housing opportunities, coordinate and oversee various kinds of housing related agreements, assists clients in obtaining necessary documents for housing placement, coordinates appropriate housing options for clients, etc.	
1119	Housing Case Manager (bilingual)	60,861	Locate housing opportunities, coordinate and oversee various kinds of housing related agreements, assists clients in obtaining necessary documents for housing placement, coordinates appropriate housing options for clients, etc.	
1120	Housing Case Manager	58,531	Locate housing opportunities, coordinate and oversee various kinds of housing related agreements, assists clients in obtaining necessary documents for housing placement, coordinates appropriate housing options for clients, etc.	



PROGRAM EXPENSE				
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE	
1121	Peer Support Specialist (bilingual)	51,501	The Peer Support Specialist utilizes his or her experiences as a recipient of mental health and/or substance abuse services to enhance recovery efforts of clients. He or she serves as a member of a multidisciplinary team and shares practical and personal experience, knowledge and insight related to illness management, life skills, and the lifelong process of recovery. The Peer Support Specialist actively promotes greater understanding of clients' points of view and preferences.	
1122	Peer Support Specialist	49,171	The Peer Support Specialist utilizes his or her experiences as a recipient of mental health and/or substance abuse services to enhance recovery efforts of clients. He or she serves as a member of a multidisciplinary team and shares practical and personal experience, knowledge and insight related to illness management, life skills, and the lifelong process of recovery. The Peer Support Specialist actively promotes greater understanding of clients' points of view and preferences.	
1123	Peer Support Specialist	49,171	The Peer Support Specialist utilizes his or her experiences as a recipient of mental health and/or substance abuse services to enhance recovery efforts of clients. He or she serves as a member of a multidisciplinary team and shares practical and personal experience, knowledge and insight related to illness management, life skills, and the lifelong process of recovery. The Peer Support Specialist actively promotes greater understanding of clients' points of view and preferences.	
1124	Registered Nurse	88,962	The Registered Nurse is responsible for monitoring the general psychiatric and physical health of all program clients. The Registered Nurse dispenses and accounts for all medication as ordered by the Psychiatrist (Consultant).	
1125	Licensed Vocational Nurse (bilingual)	77,251	The Licensed Vocational Nurse administers medications, takes and records patients' vital signs, reports adverse reactions to medication or treatment to medical personnel in charge. The Licensed Vocational Nurse assesses ongoing symptomatology and provides crisis intervention as needed and assists clinical staff in implementing the Patient Assistance Program.	
1126	Licensed Vocational Nurse	74,922	The Licensed Vocational Nurse administers medications, takes and records patients' vital signs, reports adverse reactions to medication or treatment to medical personnel in charge. The Licensed Vocational Nurse assesses ongoing symptomatology and provides crisis intervention as needed and assists clinical staff in implementing the Patient Assistance Program.	
1127	Office Manager (Bilingual)	60,861	The Office Manager supervises the performance of assigned office staff and performs traditional administrative duties including file management, preparing correspondence, and attending to other administrative and clerical duties in support of the Program Manager, Program Supervisor/Team Lead, and professional staff.	
1128	Billing Specialist	51,501	The Billing Specialist performs data entry, report writing and record compliance, and ensures timely completion of all billing and reimbursement functions. This position also works to compile, process, and maintain medical records of clinic patients in a manner consistent with medical, administrative, ethical, legal, and regulatory requirements of the health care system.	
1129	Compliance Specialist	60,861	The Compliance Specialist develops and maintains systems to ensure appropriate documentation is completed within the program. The Compliance specialist also performs other duties, as assigned by the Program Manager to ensure overall program compliance and quality assurance within the program.	
1130	Intern	-	The Intern performs a range of psychotherapeutic and rehabilitative interventions, including psychosocial assessment, individual and group counseling, crisis intervention and limited case management duties for clients under the supervision of staff.	
1131	24/7 on-call capacity	86,611	This line allows the flexibility for assigned staff that cover crisis and 24/7 response to incur overtime above and beyond what their specific line item allows for. It is difficult to determine exactly which position will require certain levels of OT over the year.	
1132	Vice President of Clinical Services	49,162	The Vice President is responsible for the oversight and management responsibility of all assigned programs operated by MHS in a designated region including contract compliance, performance outcomes, administrative and clinical supervision, budgetary compliance, financial performance, and community outreach. This position shares allocations across several programs.	
1133	Vice President of Supportive Housing	7,023	The Vice President of Supportive Housing is responsible for defining and implementing portfolio-wide acquisition, master-leasing, and rehabilitation strategies to meet current and future housing needs for clients served by the agency and is responsible for the oversight of housing funds embedded in MHS programs.	

PROGRAM EXPENSE				
	ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
	1134	Program Financial Analyst	19,022	This position is responsible for analyzing contract cost and production data, communicating irregularities, ensuring fiscal contract compliance, preparing and submitting monthly contract billings, responding to audit requests, and other program/contract related ad hoc reporting. Other duties include budget development, budget analysis and review, preparing and reviewing contract billings, and contract compliance for assigned contracts/programs.
	1135	0	-	
	1136	0	-	
	1137	0	-	
<b>Employee Benefits</b>			<b>400,391</b>	
	1201	Retirement	125,728	Cover the cost of providing a retirement fund benefit at an estimated 6% of salaries.
	1202	Worker's Compensation	20,955	Covers the cost of workers compensation expenses at 1.0% of salaries. Actual expenses might be higher or lower based on specific worker's compensation rates per class per year.
	1203	Health Insurance	253,708	Covers the cost of medical, and dental coverage per employee @ 11.72% of total salaries
	1204	Other (Specify)	-	
	1205	Other (Specify)	-	
	1206	Other (Specify)	-	
<b>Payroll Taxes &amp; Expenses:</b>			<b>171,273</b>	
	1301	OASDI	493	Calculating estimated expenses based on a factor of \$0.61 per employee per pay period
	1302	FICA/MEDICARE	160,303	Calculating estimated expenses based on a factor of 7.65% of salaries
	1303	SUI	10,477	Calculating estimated expenses based on a factor of 0.50% of salaries
	1304	Other (Specify)	-	
	1305	Other (Specify)	-	
	1306	Other (Specify)	-	
<b>2000: CLIENT SUPPORT</b>			<b>1,174,988</b>	
	2001	Child Care	2,571	estimated wrap expenses related to child care for clients
	2002	Client Housing Support	601,800	estimated expenses for housing support for clients
	2003	Client Transportation & Support	34,731	Cost of transporting clients by staff (mileage reimbursement or gas for vehicles) and bus passes/cards for client transportation needs.
	2004	Clothing, Food, & Hygiene	13,886	estimated expenses for food & for clothing
	2005	Education Support	2,571	estimated wrap expenses related to education support for clients
	2006	Employment Support	2,571	estimated wrap expenses related to employment support for clients
	2007	Household Items for Clients	20,429	estimated wrap expenses related to household items for clients
	2008	Medication Supports	487,386	estimated wrap expenses related to medication supports (psychiatrist) for clients - Psychiatrist service expense outside of the MHS, Inc. staff.
	2009	Program Supplies - Medical	8,400	Medical supplies that consist of miscellaneous items such as latex gloves, cotton, alcohol swipes, etc., in addition to charges for laboratory tests for clients (i.e. blood tests).
	2010	Utility Vouchers	643	estimated wrap expenses related to utility vouchers for clients
	2011	Other (Specify)	-	
	2012	Other (Specify)	-	
	2013	Other (Specify)	-	
	2014	Other (Specify)	-	
	2015	Other (Specify)	-	
	2016	Other (Specify)	-	
<b>3000: OPERATING EXPENSES</b>			<b>171,101</b>	
	3001	Telecommunications	44,312	Recurring costs of phones, cell phones, laptop data/internet device, and internet services. Also covers the monthly user fees for the VDI solution and MS Teams
	3002	Printing/Postage	7,520	Covers the cost of brochures, business cards, other program printing needs, postage and freight expenses.
	3003	Office, Household & Program Supplies	23,000	Office supplies utilized for program operation, including paper, pens, pencils, folders, staples, paper clips, printer cartridges, binders, folder tabs, client chart supplies. Housekeeping supplies such as cleaning products, bathroom products, non stationary paper goods, cleaning, and trash supplies. Recreational/occupational therapy supplies used by clients for their treatment plan.
	3004	Advertising	-	
	3005	Staff Development & Training	11,820	Staff development/training costs include CPR and First Aid trainings for staff, MHS course requirements (via Relias platform), and registrations for staff development and trainings held in collaboration with the program's mission (Forensic Mental Health, Evidence-based Trainings, etc.).

PROGRAM EXPENSE				
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE	
3006	Staff Mileage	32,034	In-County mileage reimbursements of staff (without clients) traveling to and from events, meetings and trainings in conjunction with program operations and responsibilities. This also includes gasoline costs for leased vehicles.	
3007	Subscriptions & Memberships	1,230	Covers the estimated cost of dues to memberships that benefit the program and subscriptions to housing, employment and other periodicals that benefit the program goals.	
3008	Vehicle Maintenance	-		
3009	Staff Travel (Out of County)	9,802	Out-of-County mileage reimbursements and/or leased vehicles gasoline, in addition to hotel, travel and flight expenses related to the attendance of conferences, training, and staff programmatic/training visits to the Corporate Office in San Diego.	
3010	Lodging	-		
3011	Other - Licenses/Taxes	29,874	Fresno County EHR system: Avatar expenses per user based on published County rates. Department Of Motor Vehicles registration renewals. Microsoft license expense for users at the program.	
3012	Other - Other Business Services	11,509	Associated costs for hiring of new employees such as TB screenings, assessments, drug screenings, background checks, and fingerprinting. Also includes the cost of movers, HIPPA shredding costs, Monthly user fees for Common Ground Software (for client support and treatment), payee services, and other	

4000: FACILITIES & EQUIPMENT		131,338		
4001	Building Maintenance	18,528	Minor repairs and maintenance for facility including, but not limited to replacement of locks, minor breakage, internal phone line repairs, building cleaning, and other repairs required for safe operation of the program at the leased facility.	
4002	Rent/Lease Building	69,247	covers the cost of leasing a facility for operations	
4003	Rent/Lease Equipment	2,650	covers the cost of renting a copier	
4004	Rent/Lease Vehicles	11,453	covers the cost of leasing two vehicles	
4005	Security	-		
4006	Utilities	14,400	covers the estimated cost of utilities for the facility	
4007	Minor equipment purchases and equipment repair/maintenance	15,060	Equipment repairs/maintenance that encompass the cost of a maintenance contract for the copier, monitoring of internet firewall, and the repair of other equipment not covered by maintenance agreements such as computers, printers, and telephones. Also covers the cost of maintenance and registration on the leased vehicles Minor equipment replacement of existing equipment that in the normal course of use is worn out and either cannot be repaired or is not practical to have repaired.	
4008	Other (Specify)	-		
4009	Other (Specify)	-		
4010	Other (Specify)	-		

5000: SPECIAL EXPENSES		1,900		
5001	Consultant (Network & Data Management)	-		
5002	HMIS (Health Management Information System)	1,300	Covers the cost of 4 users in the HMIS system	
5003	Contractual/Consulting Services (Specify)	-		
5004	Translation Services	600	Estimated cost of providing interpreters when there isn't a bilingual staff available. Actual costs might come in higher depending on clients and their needs.	
5005	Other (Specify)	-		
5006	Other (Specify)	-		
5007	Other (Specify)	-		
5008	Other (Specify)	-		

6000: ADMINISTRATIVE EXPENSES		620,055		
6001	Administrative Overhead	618,415	Indirect/administrative expense per Federally approved Indirect Rate of 14.9%.	
6002	Professional Liability Insurance	-		
6003	Accounting/Bookkeeping	-		
6004	External Audit	200	Accounting fees incurred by this program, including the required Federal Office of Management and Budget (OMB-133) audit.	
6005	Liability Insurance	1,440	Covers the cost of car insurance on the leased vehicles	
6006	Payroll Services	-		
6007	Depreciation (Provider-Owned Equipment to be Used for Program Purposes)	-		

PROGRAM EXPENSE				
	ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
	6008	Other (Specify)	-	
	6009	Other (Specify)	-	
	6010	Other (Specify)	-	
	6011	Other (Specify)	-	
	6012	Other (Specify)	-	

7000: FIXED ASSETS		2,337		
	7001	Computer Equipment & Software	2,337	Includes estimated minor software expenses
	7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	-	
	7003	Furniture & Fixtures	-	
	7004	Leasehold/Tenant/Building Improvements	-	
	7005	Other Assets over \$500 with Lifespan of 2 Years +	-	
	7006	Assets over \$5,000/unit (Specify)	-	
	7007	Other (Specify)	-	
	7008	Other (Specify)	-	

PROGRAM FUNDING SOURCES			
8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)			
	ACCT #	LINE ITEM	PROVIDE DETAILS OF METHODOLOGY(IES) USED IN DETERMINING MEDI-CAL SERVICE RATES AND/OR SERVICE UNITS, IF APPLICABLE AND/OR AS REQUIRED BY THE RFP.
	8001	Mental Health Services	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We are
	8002	Case Management	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We are
	8003	Crisis Services	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We are
	8004	Medication Support	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We are
	8005	Collateral	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We are
	8006	Plan Development	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We are
	8007	Assessment	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We are
	8008	Rehabilitation	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We are

**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Mental Health Systems, Inc. | Fresno FSP Program Site #2 (Optional Site)**  
**FY 2020 - 2021 Ramp-up | 05/01/21 - 06/30/21**

**PROGRAM EXPENSES**

<b>1000: SALARIES &amp; BENEFITS</b>					
<b>Employee Salaries</b>					
<b>Acct #</b>	<b>Position</b>	<b>FTE</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1101	Program Manager	1.00	\$ 15,600	\$ -	\$ 15,600
1102	Clinical Supervisor	1.00	8,112	2,028	10,140
1103	Program Supervisor/Team Lead (bilingual)	1.00	6,414	6,414	12,827
1104	Program Supervisor/Team Lead	1.00	3,034	3,034	6,067
1105	Program Supervisor/Team Lead	1.00	-	-	-
1106	Clinical Case Manager (bilingual)	1.00	-	-	-
1107	Clinical Case Manager (bilingual)	1.00	-	-	-
1108	Clinical Case Manager	1.00	-	6,760	6,760
1109	Clinical Case Manager	1.00	-	6,760	6,760
1110	Clinical Case Manager	1.00	-	4,507	4,507
1111	Clinical Case Manager	1.00	-	4,507	4,507
1112	Dual Recovery Case Manager (bilingual)	1.00	-	7,020	7,020
1113	Dual Recovery Case Manager	1.00	-	4,507	4,507
1114	Dual Recovery Case Manager	1.00	-	-	-
1115	Employment Case Manager (bilingual)	1.00	-	7,020	7,020
1116	Employment Case Manager	1.00	-	4,507	4,507
1117	Employment Case Manager	1.00	-	-	-
1118	Lead Housing Case Manager	1.00	-	7,020	7,020
1119	Housing Case Manager (bilingual)	1.00	-	4,507	4,507
1120	Housing Case Manager	1.00	-	-	-
1121	Peer Support Specialist (bilingual)	1.00	-	5,720	5,720
1122	Peer Support Specialist	1.00	-	3,640	3,640
1123	Peer Support Specialist	1.00	-	-	-
1124	Registered Nurse	1.00	-	6,587	6,587
1125	Licensed Vocational Nurse (bilingual)	1.00	-	-	-
1126	Licensed Vocational Nurse	1.00	-	8,320	8,320
1127	Office Manager (Bilingual)	1.00	9,013	-	9,013
1128	Billing Specialist	1.00	3,813	-	3,813
1129	Compliance Specialist	1.00	9,013	-	9,013
1130	Intern	3.00	-	-	-
1131	24/7 on-call capacity	1.00	-	12,827	12,827
1132	Vice President of Clinical Services	0.35	7,280	-	7,280
1133	Vice President of Supportive Housing	0.05	1,040	-	1,040
1134	Program Financial Analyst	0.25	2,817	-	2,817
1135			-	-	-
1136			-	-	-
1137			-	-	-
<b>Personnel Salaries Subtotal</b>		<b>33.65</b>	<b>\$ 66,135</b>	<b>\$ 105,684</b>	<b>\$ 171,819</b>

<b>Employee Benefits</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1201	Retirement	\$ 326	\$ 533	\$ 859
1202	Worker's Compensation	653	1,065	1,718
1203	Health Insurance	2,286	3,726	6,012
1204	Other (Specify)	-	-	-
1205	Other (Specify)	-	-	-
1206	Other (Specify)	-	-	-
<b>Employee Benefits Subtotal:</b>		<b>\$ 3,265</b>	<b>\$ 5,324</b>	<b>\$ 8,589</b>
<b>Payroll Taxes &amp; Expenses:</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1301	OASDI	\$ 187	\$ 306	\$ 493
1302	FICA/MEDICARE	4,995	8,149	13,144
1303	SUI	326	533	859
1304	Other (Specify)	-	-	-
1305	Other (Specify)	-	-	-
1306	Other (Specify)	-	-	-
<b>Payroll Taxes &amp; Expenses Subtotal:</b>		<b>\$ 5,508</b>	<b>\$ 8,988</b>	<b>\$ 14,496</b>
<b>EMPLOYEE SALARIES &amp; BENEFITS TOTAL:</b>		<b>\$ 74,908</b>	<b>\$ 119,996</b>	<b>\$ 194,904</b>

<b>2000: CLIENT SUPPORT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
2001	Child Care	\$ 429
2002	Client Housing Support	16,150
2003	Client Transportation & Support	5,789
2004	Clothing, Food, & Hygiene	2,314
2005	Education Support	429
2006	Employment Support	429
2007	Household Items for Clients	7,571
2008	Medication Supports	37,491
2009	Program Supplies - Medical	3,400
2010	Utility Vouchers	107
2011	Other (Specify)	-
2012	Other (Specify)	-
2013	Other (Specify)	-
2014	Other (Specify)	-
2015	Other (Specify)	-
2016	Other (Specify)	-
<b>DIRECT CLIENT CARE TOTAL</b>		<b>\$ 74,109</b>

<b>3000: OPERATING EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
3001	Telecommunications	\$ 16,892
3002	Printing/Postage	7,400
3003	Office, Household & Program Supplies	25,570
3004	Advertising	-
3005	Staff Development & Training	31,390
3006	Staff Mileage	2,468
3007	Subscriptions & Memberships	150
3008	Vehicle Maintenance	-
3009	Staff Travel (Out of County)	1,838
3010	Lodging	-
3011	Other - Licenses/Taxes	5,196
3012	Other - Other Business Services	13,452
<b>OPERATING EXPENSES TOTAL:</b>		<b>\$ 104,356</b>

<b>4000: FACILITIES &amp; EQUIPMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
4001	Building Maintenance	\$ 24,338
4002	Rent/Lease Building	15,750
4003	Rent/Lease Equipment	650
4004	Rent/Lease Vehicles	13,909
4005	Security	-
4006	Utilities	-
4007	Minor equipment purchases and equipment repair/maintenance	13,760
4008	Other (Specify)	-
4009	Other (Specify)	-
4010	Other (Specify)	-
<b>FACILITIES/EQUIPMENT TOTAL:</b>		<b>\$ 68,407</b>

<b>5000: SPECIAL EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
5001	Consultant (Network & Data Management)	\$ -
5002	HMIS (Health Management Information System)	1,300
5003	Contractual/Consulting Services (Specify)	
5004	Translation Services	100
5005	Other (Specify)	-
5006	Other (Specify)	-
5007	Other (Specify)	-
5008	Other (Specify)	-
<b>SPECIAL EXPENSES TOTAL:</b>		<b>\$ 1,400</b>

<b>6000: ADMINISTRATIVE EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
6001	Administrative Overhead	\$ 78,957
6002	Professional Liability Insurance	-
6003	Accounting/Bookkeeping	-
6004	External Audit	200
6005	Liability Insurance	240
6006	Payroll Services	-
6007	Depreciation (Provider-Owned Equipment to be Used for Program Purposes)	-
6008	Other (Specify)	-
6009	Other (Specify)	-
6010	Other (Specify)	-
6011	Other (Specify)	-
6012	Other (Specify)	-
<b>ADMINISTRATIVE EXPENSES TOTAL</b>		<b>\$ 79,397</b>

<b>7000: FIXED ASSETS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
7001	Computer Equipment & Software	\$ 38,156
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	5,000
7003	Furniture & Fixtures	43,140
7004	Leasehold/Tenant/Building Improvements	-
7005	Other Assets over \$500 with Lifespan of 2 Years +	-
7006	Assets over \$5,000/unit (Specify)	-
7007	Other (Specify)	-
7008	Other (Specify)	-
<b>FIXED ASSETS EXPENSES TOTAL</b>		<b>\$ 86,296</b>

<b>TOTAL PROGRAM EXPENSES</b>		<b>\$ 608,869</b>
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**PROGRAM FUNDING SOURCES**

<b>8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)</b>				
<b>Acct #</b>	<b>Line Item Description</b>	<b>Service Units</b>	<b>Rate</b>	<b>Amount</b>
8001	Mental Health Services	0	-	\$ -
8002	Case Management	0	-	-
8003	Crisis Services	0	-	-
8004	Medication Support	0	-	-
8005	Collateral	0	-	-
8006	Plan Development	0	-	-
8007	Assessment	0	-	-
8008	Rehabilitation	0	-	-
<b>Estimated Specialty Mental Health Services Billing Totals:</b>		<b>0</b>		<b>\$ -</b>
			Estimated % of Clients who are Medi-Cal Beneficiaries	0%
			Estimated Total Cost of Specialty Mental Health Services Provided to Medi-Cal Beneficiaries	-
			Federal Financial Participation (FFP) %	0%
<b>MEDI-CAL FFP TOTAL</b>				<b>\$ -</b>

<b>8100 - SUBSTANCE USE DISORDER FUNDS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8101	Drug Medi-Cal	\$ -
8102	SABG	\$ -
<b>SUBSTANCE USE DISORDER FUNDS TOTAL</b>		<b>\$ -</b>

<b>8200 - REALIGNMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8201	Realignment	\$ -
<b>REALIGNMENT TOTAL</b>		<b>\$ -</b>

<b>8300 - MENTAL HEALTH SERVICE ACT (MHSA)</b>			
<b>Acct #</b>	<b>MHSA Component</b>	<b>MHSA Program Name</b>	<b>Amount</b>
8301	CSS - Community Services & Supports	Fresno FSP	\$ 608,869
8302	PEI - Prevention & Early Intervention		-
8303	INN - Innovations		-
8304	WET - Workforce Education & Training		-
8305	CFTN - Capital Facilities & Technology		-
<b>MHSA TOTAL</b>			<b>\$ 608,869</b>

<b>8400 - OTHER REVENUE</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8401	Client Fees	\$ -
8402	Client Insurance	-
8403	Grants (Specify)	-
8404	Other (Specify)	-
8405	Other (Specify)	-
<b>OTHER REVENUE TOTAL</b>		<b>\$ -</b>

<b>TOTAL PROGRAM FUNDING SOURCES:</b>	<b>\$ 608,869</b>
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**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Mental Health Systems, Inc. | Fresno FSP Program Site #2 (Optional Site)**  
**FY 2020 - 2021 Ramp-up | 05/01/21 - 06/30/21 Budget Narrative**

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>1000: SALARIES &amp; BENEFITS</b>		<b>194,904</b>	
<b>Employee Salaries</b>		<b>171,819</b>	
1101	Program Manager	15,600	The Program Manager is responsible for the overall operation of the program
1102	Clinical Supervisor	10,140	The Clinical Supervisor is responsible for all program clinical supervision, clinical assessment guidelines, clinical assessment guideline review, in-service training and clinical consultation with staff.
1103	Program Supervisor/Team Lead (bilingual)	12,827	The Program Supervisor/Team Lead acts as a member of a multidisciplinary team and directly provides services to clients. In addition, the Program Supervisor/Team Lead assists the Program Manager in establishing, administering and directing the MHS DART program. The Program Supervisor/Team Lead demonstrates a strong working knowledge of best practices in Assertive Community Treatment, Full-Service Partnership treatment, Intensive Case Management, bio-psychosocial rehabilitation and recovery, and outpatient treatment. Along with assisting the Program Manager, the Program Supervisor/Team Lead provides supervision to assigned staff. The bulk of client services are provided in the community.
1104	Program Supervisor/Team Lead	6,067	The Program Supervisor/Team Lead acts as a member of a multidisciplinary team and directly provides services to clients. In addition, the Program Supervisor/Team Lead assists the Program Manager in establishing, administering and directing the MHS DART program. The Program Supervisor/Team Lead demonstrates a strong working knowledge of best practices in Assertive Community Treatment, Full-Service Partnership treatment, Intensive Case Management, bio-psychosocial rehabilitation and recovery, and outpatient treatment. Along with assisting the Program Manager, the Program Supervisor/Team Lead provides supervision to assigned staff. The bulk of client services are provided in the community.
1105	Program Supervisor/Team Lead	-	The Program Supervisor/Team Lead acts as a member of a multidisciplinary team and directly provides services to clients. In addition, the Program Supervisor/Team Lead assists the Program Manager in establishing, administering and directing the MHS DART program. The Program Supervisor/Team Lead demonstrates a strong working knowledge of best practices in Assertive Community Treatment, Full-Service Partnership treatment, Intensive Case Management, bio-psychosocial rehabilitation and recovery, and outpatient treatment. Along with assisting the Program Manager, the Program Supervisor/Team Lead provides supervision to assigned staff. The bulk of client services are provided in the community.
1106	Clinical Case Manager (bilingual)	-	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.
1107	Clinical Case Manager (bilingual)	-	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.

PROGRAM EXPENSE				
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE	
1108	Clinical Case Manager	6,760	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.	
1109	Clinical Case Manager	6,760	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.	
1110	Clinical Case Manager	4,507	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.	
1111	Clinical Case Manager	4,507	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.	
1112	Dual Recovery Case Manager (bilingual)	7,020	The Dual Recovery Case Manager provides substance abuse education and relapse prevention strategies, and implements social model interventions in the milieu.	
1113	Dual Recovery Case Manager	4,507	The Dual Recovery Case Manager provides substance abuse education and relapse prevention strategies, and implements social model interventions in the milieu.	
1114	Dual Recovery Case Manager	-	The Dual Recovery Case Manager provides substance abuse education and relapse prevention strategies, and implements social model interventions in the milieu.	
1115	Employment Case Manager (bilingual)	7,020	Functions as an ACT/FSP PSC assisting clients with training for, seeking, finding, and keeping viable jobs.	
1116	Employment Case Manager	4,507	Functions as an ACT/FSP PSC assisting clients with training for, seeking, finding, and keeping viable jobs.	
1117	Employment Case Manager	-	Functions as an ACT/FSP PSC assisting clients with training for, seeking, finding, and keeping viable jobs.	
1118	Lead Housing Case Manager	7,020	Locate housing opportunities, coordinate and oversee various kinds of housing related agreements, assists clients in obtaining necessary documents for housing placement, coordinates appropriate housing options for clients, etc.	
1119	Housing Case Manager (bilingual)	4,507	Locate housing opportunities, coordinate and oversee various kinds of housing related agreements, assists clients in obtaining necessary documents for housing placement, coordinates appropriate housing options for clients, etc.	

PROGRAM EXPENSE				
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE	
1120	Housing Case Manager	-	Locate housing opportunities, coordinate and oversee various kinds of housing related agreements, assists clients in obtaining necessary documents for housing placement, coordinates appropriate housing options for clients, etc.	
1121	Peer Support Specialist (bilingual)	5,720	The Peer Support Specialist utilizes his or her experiences as a recipient of mental health and/or substance abuse services to enhance recovery efforts of clients. He or she serves as a member of a multidisciplinary team and shares practical and personal experience, knowledge and insight related to illness management, life skills, and the lifelong process of recovery. The Peer Support Specialist actively promotes greater understanding of clients' points of view and preferences.	
1122	Peer Support Specialist	3,640	The Peer Support Specialist utilizes his or her experiences as a recipient of mental health and/or substance abuse services to enhance recovery efforts of clients. He or she serves as a member of a multidisciplinary team and shares practical and personal experience, knowledge and insight related to illness management, life skills, and the lifelong process of recovery. The Peer Support Specialist actively promotes greater understanding of clients' points of view and preferences.	
1123	Peer Support Specialist	-	The Peer Support Specialist utilizes his or her experiences as a recipient of mental health and/or substance abuse services to enhance recovery efforts of clients. He or she serves as a member of a multidisciplinary team and shares practical and personal experience, knowledge and insight related to illness management, life skills, and the lifelong process of recovery. The Peer Support Specialist actively promotes greater understanding of clients' points of view and preferences.	
1124	Registered Nurse	6,587	The Registered Nurse is responsible for monitoring the general psychiatric and physical health of all program clients. The Registered Nurse dispenses and accounts for all medication as ordered by the Psychiatrist (Consultant).	
1125	Licensed Vocational Nurse (bilingual)	-	The Licensed Vocational Nurse administers medications, takes and records patients' vital signs, reports adverse reactions to medication or treatment to medical personnel in charge. The Licensed Vocational Nurse assesses ongoing symptomatology and provides crisis intervention as needed and assists clinical staff in implementing the Patient Assistance Program.	
1126	Licensed Vocational Nurse	8,320	The Licensed Vocational Nurse administers medications, takes and records patients' vital signs, reports adverse reactions to medication or treatment to medical personnel in charge. The Licensed Vocational Nurse assesses ongoing symptomatology and provides crisis intervention as needed and assists clinical staff in implementing the Patient Assistance Program.	
1127	Office Manager (Bilingual)	9,013	The Office Manager supervises the performance of assigned office staff and performs traditional administrative duties including file management, preparing correspondence, and attending to other administrative and clerical duties in support of the Program Manager, Program Supervisor/Team Lead, and professional staff.	
1128	Billing Specialist	3,813	The Billing Specialist performs data entry, report writing and record compliance, and ensures timely completion of all billing and reimbursement functions. This position also works to compile, process, and maintain medical records of clinic patients in a manner consistent with medical, administrative, ethical, legal, and regulatory requirements of the health care system.	
1129	Compliance Specialist	9,013	The Compliance Specialist develops and maintains systems to ensure appropriate documentation is completed within the program. The Compliance specialist also performs other duties, as assigned by the Program Manager to ensure overall program compliance and quality assurance within the program.	
1130	Intern	-	The Intern performs a range of psychotherapeutic and rehabilitative interventions, including psychosocial assessment, individual and group counseling, crisis intervention and limited case management duties for clients under the supervision of staff.	
1131	24/7 on-call capacity	12,827	This line allows the flexibility for assigned staff that cover crisis and 24/7 response to incur overtime above and beyond what their specific line item allows for. It is difficult to determine exactly which position will require certain levels of OT over the year.	
1132	Vice President of Clinical Services	7,280	The Vice President is responsible for the oversight and management responsibility of all assigned programs operated by MHS in a designated region including contract compliance, performance outcomes, administrative and clinical supervision, budgetary compliance, financial performance, and community outreach. This position shares allocations across several programs.	
1133	Vice President of Supportive Housing	1,040	The Vice President of Supportive Housing is responsible for defining and implementing portfolio-wide acquisition, master-leasing, and rehabilitation strategies to meet current and future housing needs for clients served by the agency and is responsible for the oversight of housing funds embedded in MHS programs.	

PROGRAM EXPENSE				
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE	
1134	Program Financial Analyst	2,817	This position is responsible for analyzing contract cost and production data, communicating irregularities, ensuring fiscal contract compliance, preparing and submitting monthly contract billings, responding to audit requests, and other program/contract related ad hoc reporting. Other duties include budget development, budget analysis and review, preparing and reviewing contract billings, and contract compliance for assigned contracts/programs.	
1135	0	-		
1136	0	-		
1137	0	-		
<b>Employee Benefits</b>		<b>8,589</b>		
1201	Retirement	859	Cover the cost of providing a retirement fund benefit at an estimated 6% of salaries. In year one, the percentage is highly reduced since new employees are not eligible.	
1202	Worker's Compensation	1,718	Covers the cost of workers compensation expenses at 1.0% of salaries. Actual expenses might be higher or lower based on specific worker's compensation rates per class per year.	
1203	Health Insurance	6,012	Covers the cost of medical, and dental coverage per employee. In year 1 we are estimating a lower percentage as employees are not eligible for the first 3 months	
1204	Other (Specify)	-		
1205	Other (Specify)	-		
1206	Other (Specify)	-		
<b>Payroll Taxes &amp; Expenses:</b>		<b>14,496</b>		
1301	OASDI	493	Calculating estimated expenses based on a factor of \$0.61 per employee per pay period	
1302	FICA/MEDICARE	13,144	Calculating estimated expenses based on a factor of 7.65% of salaries	
1303	SUI	859	Calculating estimated expenses based on a factor of 0.50% of salaries	
1304	Other (Specify)	-		
1305	Other (Specify)	-		
1306	Other (Specify)	-		

2000: CLIENT SUPPORT				
		74,109		
2001	Child Care	429	estimated wrap expenses related to child care for clients	
2002	Client Housing Support	16,150	estimated expenses for housing support for clients	
2003	Client Transportation & Support	5,789	Cost of transporting clients by staff (mileage reimbursement or gas for vehicles) and bus passes/cards for client transportation needs.	
2004	Clothing, Food, & Hygiene	2,314	estimated expenses for food & for clothing	
2005	Education Support	429	estimated wrap expenses related to education support for clients	
2006	Employment Support	429	estimated wrap expenses related to employment support for clients	
2007	Household Items for Clients	7,571	estimated wrap expenses related to household items for clients	
2008	Medication Supports	37,491	estimated wrap expenses related to medication supports (psychiatrist) for clients - Psychiatrist service expense outside of the MHS, Inc. staff.	
2009	Program Supplies - Medical	3,400	Medical supplies that consist of miscellaneous items such as latex gloves, cotton, alcohol swipes, etc., in addition to charges for laboratory tests for clients (i.e. blood tests).	
2010	Utility Vouchers	107	estimated wrap expenses related to utility vouchers for clients	
2011	Other (Specify)	-		
2012	Other (Specify)	-		
2013	Other (Specify)	-		
2014	Other (Specify)	-		
2015	Other (Specify)	-		
2016	Other (Specify)	-		

3000: OPERATING EXPENSES				
		104,356		
3001	Telecommunications	16,892	Recurring costs of phones, cell phones, laptop data/internet device, and internet services.	
3002	Printing/Postage	7,400	Covers the cost of brochures, business cards, other program printing needs, postage and freight expenses.	
3003	Office, Household & Program Supplies	25,570	Office supplies utilized for program operation, including paper, pens, pencils, folders, staples, paper clips, printer cartridges, binders, folder tabs, client chart supplies. Housekeeping supplies such as cleaning products, bathroom products, non stationary paper goods, cleaning, and trash supplies. Recreational/occupational therapy supplies used by clients for their treatment plan.	
3004	Advertising	-		
3005	Staff Development & Training	31,390	Staff development/training costs include CPR and First Aid trainings for staff, MHS course requirements (via Relias platform), and registrations for staff development and trainings held in collaboration with the program's mission (Forensic Mental Health, Evidence-based Trainings, etc.).	

PROGRAM EXPENSE				
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE	
3006	Staff Mileage	2,468	In-County mileage reimbursements of staff (without clients) traveling to and from events, meetings and trainings in conjunction with program operations and responsibilities. This also includes gasoline costs for leased vehicles.	
3007	Subscriptions & Memberships	150	Covers the estimated cost of dues to memberships that benefit the program and subscriptions to housing, employment and other periodicals that benefit the program goals.	
3008	Vehicle Maintenance	-		
3009	Staff Travel (Out of County)	1,838	Out-of-County mileage reimbursements and/or leased vehicles gasoline, in addition to hotel, travel and flight expenses related to the attendance of conferences, training, and staff programmatic/training visits to the Corporate Office in San Diego.	
3010	Lodging	-		
3011	Other - Licenses/Taxes	5,196	Fresno County EHR system: Avatar expenses per user based on published County rates. Department Of Motor Vehicles registration renewals. Microsoft license expense for users at the program.	
3012	Other - Other Business Services	13,452	Associated costs for hiring of new employees such as TB screenings, assessments, drug screenings, background checks, and fingerprinting. Also includes the cost of movers, HIPPA shredding costs, Monthly user fees for Common Ground Software (for client support and treatment), payee services, and other	

4000: FACILITIES & EQUIPMENT		68,407		
4001	Building Maintenance	24,338	Minor repairs and maintenance for facility including, but not limited to replacement of locks, minor breakage, internal phone line repairs, building cleaning, and other repairs required for safe operation of the program at the leased facility. Also covers costs of preparing the facility for initial operations in year 1. Estimating 30 cabling drops will be needed.	
4002	Rent/Lease Building	15,750	covers the cost of leasing a facility for operations as well as CAM and Utility expenses paid through the lease agreement.	
4003	Rent/Lease Equipment	650	covers the cost of rent a copier	
4004	Rent/Lease Vehicles	13,909	Covers the cost of 2 down payments for leased vehicles and two leased vehicles	
4005	Security	-		
4006	Utilities	-		
4007	Minor equipment purchases and equipment repair/maintenance	13,760	Equipment repairs/maintenance that encompass the cost of a maintenance contract for the copier, monitoring of internet firewall, and the repair of other equipment not covered by maintenance agreements such as computers, printers, and telephones. Minor equipment replacement of existing equipment that in the normal course of use is worn out and either cannot be repaired or is not practical to have repaired.	
4008	Other (Specify)	-		
4009	Other (Specify)	-		
4010	Other (Specify)	-		

5000: SPECIAL EXPENSES		1,400		
5001	Consultant (Network & Data Management)	-		
5002	HMIS (Health Management Information System)	1,300	Covers the cost of 4 HMIS Licenses	
5003	Contractual/Consulting Services (Specify)	-		
5004	Translation Services	100	Estimated cost of providing interpreters when there isn't a bilingual staff available. Actual costs might come in higher depending on clients and their needs.	
5005	Other (Specify)	-		
5006	Other (Specify)	-		
5007	Other (Specify)	-		
5008	Other (Specify)	-		

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>6000: ADMINISTRATIVE EXPENSES</b>		<b>79,397</b>	
6001	Administrative Overhead	78,957	Indirect/administrative expense per Federally approved Indirect Rate of 14.9%.
6002	Professional Liability Insurance	-	
6003	Accounting/Bookkeeping	-	
6004	External Audit	200	Accounting fees incurred by this program, including the required Federal Office of Management and Budget (OMB-133) audit.
6005	Liability Insurance	240	Covers the cost of car insurance on the leased vehicles
6006	Payroll Services	-	
6007	Depreciation (Provider-Owned Equipment to be Used for Program Purposes)	-	
6008	Other (Specify)	-	
6009	Other (Specify)	-	
6010	Other (Specify)	-	
6011	Other (Specify)	-	
6012	Other (Specify)	-	

<b>7000: FIXED ASSETS</b>		<b>86,296</b>	
7001	Computer Equipment & Software	38,156	Includes: 7 thin clients, 26 Chromebook, 33 sets of accessories for thin client/Chromebook, 33 headsets, 33 monitors, 1 projector, 1 projector mounting kit, 1 port-switch, 26 wireless cards, projector installation.
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	5,000	25 cellphones
7003	Furniture & Fixtures	43,140	Includes the following: estimated based on initial facility floor plans, actual items purchase might change slightly for optimal facility set-up. 10 desks, 3 cubicle system sets, 33 staff chairs, 5 foyer chairs, 2 side tables, 1 brochure table, lobby artwork, 2 conference room tables, 35 conference room chairs, 10 filing cabinets, 10 bookcases, 1 locked fridge, 8 small sofas (individual counseling), 8 small tables, 8 additional desk chairs
7004	Leasehold/Tenant/Building Improvements	-	
7005	Other Assets over \$500 with Lifespan of 2 Years +	-	
7006	Assets over \$5,000/unit (Specify)	-	
7007	Other (Specify)	-	
7008	Other (Specify)	-	

PROGRAM FUNDING SOURCES		
8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)		
ACCT #	LINE ITEM	PROVIDE DETAILS OF METHODOLOGY(IES) USED IN DETERMINING MEDI-CAL SERVICE RATES AND/OR SERVICE UNITS, IF APPLICABLE AND/OR AS REQUIRED BY THE RFP.
8001	Mental Health Services	
8002	Case Management	
8003	Crisis Services	
8004	Medication Support	
8005	Collateral	
8006	Plan Development	
8007	Assessment	
8008	Rehabilitation	

**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Mental Health Systems, Inc. | Fresno FSP Program Site #2 (Optional Site)**  
**FY 2021 - 2022 | 07/01/21 - 06/30/22**

**PROGRAM EXPENSES**

1000: SALARIES & BENEFITS					
Employee Salaries					
Acct #	Position	FTE	Admin	Direct	Total
1101	Program Manager	1.00	\$ 93,600	\$ -	\$ 93,600
1102	Clinical Supervisor	1.00	64,896	16,224	81,120
1103	Program Supervisor/Team Lead (bilingual)	1.00	38,480	38,480	76,960
1104	Program Supervisor/Team Lead	1.00	36,400	36,400	72,800
1105	Program Supervisor/Team Lead	1.00	36,400	36,400	72,800
1106	Clinical Case Manager (bilingual)	1.00	-	56,160	56,160
1107	Clinical Case Manager (bilingual)	1.00	-	56,160	56,160
1108	Clinical Case Manager	1.00	-	54,080	54,080
1109	Clinical Case Manager	1.00	-	54,080	54,080
1110	Clinical Case Manager	1.00	-	54,080	54,080
1111	Clinical Case Manager	1.00	-	54,080	54,080
1112	Dual Recovery Case Manager (bilingual)	1.00	-	56,160	56,160
1113	Dual Recovery Case Manager	1.00	-	54,080	54,080
1114	Dual Recovery Case Manager	1.00	-	54,080	54,080
1115	Employment Case Manager (bilingual)	1.00	-	56,160	56,160
1116	Employment Case Manager	1.00	-	54,080	54,080
1117	Employment Case Manager	1.00	-	54,080	54,080
1118	Lead Housing Case Manager	1.00	-	56,160	56,160
1119	Housing Case Manager (bilingual)	1.00	-	54,080	54,080
1120	Housing Case Manager	1.00	-	52,000	52,000
1121	Peer Support Specialist (bilingual)	1.00	-	45,760	45,760
1122	Peer Support Specialist	1.00	-	43,680	43,680
1123	Peer Support Specialist	1.00	-	43,680	43,680
1124	Registered Nurse	1.00	-	79,040	79,040
1125	Licensed Vocational Nurse (bilingual)	1.00	-	68,640	68,640
1126	Licensed Vocational Nurse	1.00	-	66,560	66,560
1127	Office Manager (Bilingual)	1.00	54,080	-	54,080
1128	Billing Specialist	1.00	45,760	-	45,760
1129	Compliance Specialist	1.00	54,080	-	54,080
1130	Intern	3.00	-	-	-
1131	24/7 on-call capacity	1.00	-	76,960	76,960
1132	Vice President of Clinical Services	0.35	43,680	-	43,680
1133	Vice President of Supportive Housing	0.05	6,240	-	6,240
1134	Program Financial Analyst	0.25	16,900	-	16,900
1135			-	-	-
1136			-	-	-
1137			-	-	-
<b>Personnel Salaries Subtotal</b>		<b>33.65</b>	<b>\$ 490,516</b>	<b>\$ 1,371,344</b>	<b>\$ 1,861,860</b>



<b>Employee Benefits</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1201	Retirement	\$ 29,045	\$ 82,667	\$ 111,712
1202	Worker's Compensation	4,841	13,778	18,619
1203	Health Insurance	57,188	162,768	219,956
1204	Other (Specify)	-	-	-
1205	Other (Specify)	-	-	-
1206	Other (Specify)	-	-	-
<b>Employee Benefits Subtotal:</b>		<b>\$ 91,074</b>	<b>\$ 259,213</b>	<b>\$ 350,287</b>
<b>Payroll Taxes &amp; Expenses:</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1301	OASDI	\$ 128	\$ 365	\$ 493
1302	FICA/MEDICARE	37,032	105,400	142,432
1303	SUI	2,420	6,889	9,309
1304	Other (Specify)	-	-	-
1305	Other (Specify)	-	-	-
1306	Other (Specify)	-	-	-
<b>Payroll Taxes &amp; Expenses Subtotal:</b>		<b>\$ 39,580</b>	<b>\$ 112,654</b>	<b>\$ 152,234</b>
<b>EMPLOYEE SALARIES &amp; BENEFITS TOTAL:</b>		<b>\$ 621,170</b>	<b>\$ 1,743,211</b>	<b>\$ 2,364,381</b>

<b>2000: CLIENT SUPPORT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
2001	Child Care	\$ 2,571
2002	Client Housing Support	601,800
2003	Client Transportation & Support	34,731
2004	Clothing, Food, & Hygiene	13,886
2005	Education Support	2,571
2006	Employment Support	2,571
2007	Household Items for Clients	20,429
2008	Medication Supports	487,386
2009	Program Supplies - Medical	8,400
2010	Utility Vouchers	643
2011	Other (Specify)	-
2012	Other (Specify)	-
2013	Other (Specify)	-
2014	Other (Specify)	-
2015	Other (Specify)	-
2016	Other (Specify)	-
<b>DIRECT CLIENT CARE TOTAL</b>		<b>\$ 1,174,988</b>

<b>3000: OPERATING EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
3001	Telecommunications	\$ 44,312
3002	Printing/Postage	7,520
3003	Office, Household & Program Supplies	23,000
3004	Advertising	-
3005	Staff Development & Training	11,820
3006	Staff Mileage	32,034
3007	Subscriptions & Memberships	1,230
3008	Vehicle Maintenance	-
3009	Staff Travel (Out of County)	9,802
3010	Lodging	-
3011	Other - Licenses/Taxes	29,874
3012	Other - Other Business Services	11,248
<b>OPERATING EXPENSES TOTAL:</b>		<b>\$ 170,840</b>

<b>4000: FACILITIES &amp; EQUIPMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
4001	Building Maintenance	\$ 18,528
4002	Rent/Lease Building	94,500
4003	Rent/Lease Equipment	2,650
4004	Rent/Lease Vehicles	11,453
4005	Security	-
4006	Utilities	-
4007	Minor equipment purchases and equipment repair/maintenance	21,658
4008	Other (Specify)	-
4009	Other (Specify)	-
4010	Other (Specify)	-
<b>FACILITIES/EQUIPMENT TOTAL:</b>		<b>\$ 148,789</b>

<b>5000: SPECIAL EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
5001	Consultant (Network & Data Management)	\$ -
5002	HMIS (Health Management Information System)	1,300
5003	Contractual/Consulting Services (Specify)	
5004	Translation Services	600
5005	Other (Specify)	-
5006	Other (Specify)	-
5007	Other (Specify)	-
5008	Other (Specify)	-
<b>SPECIAL EXPENSES TOTAL:</b>		<b>\$ 1,900</b>

<b>6000: ADMINISTRATIVE EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
6001	Administrative Overhead	\$ 575,866
6002	Professional Liability Insurance	-
6003	Accounting/Bookkeeping	-
6004	External Audit	200
6005	Liability Insurance	1,440
6006	Payroll Services	-
6007	Depreciation (Provider-Owned Equipment to be Used for Program Purposes)	-
6008	Other (Specify)	-
6009	Other (Specify)	-
6010	Other (Specify)	-
6011	Other (Specify)	-
6012	Other (Specify)	-
<b>ADMINISTRATIVE EXPENSES TOTAL</b>		<b>\$ 577,506</b>

<b>7000: FIXED ASSETS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
7001	Computer Equipment & Software	\$ 2,337
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	-
7003	Furniture & Fixtures	-
7004	Leasehold/Tenant/Building Improvements	-
7005	Other Assets over \$500 with Lifespan of 2 Years +	-
7006	Assets over \$5,000/unit (Specify)	-
7007	Other (Specify)	-
7008	Other (Specify)	-
<b>FIXED ASSETS EXPENSES TOTAL</b>		<b>\$ 2,337</b>

<b>TOTAL PROGRAM EXPENSES</b>		<b>\$ 4,440,741</b>
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**PROGRAM FUNDING SOURCES**

<b>8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)</b>				
<b>Acct #</b>	<b>Line Item Description</b>	<b>Service Units</b>	<b>Rate</b>	<b>Amount</b>
8001	Mental Health Services	695,631	2.32	\$ 1,614,687
8002	Case Management	345,060	1.80	619,437
8003	Crisis Services	36,936	3.52	130,145
8004	Medication Support	265,560	4.29	1,139,699
8005	Collateral	17,820	2.32	41,363
8006	Plan Development	24,300	2.32	56,405
8007	Assessment	24,300	2.32	56,405
8008	Rehabilitation	19,440	2.32	45,124
<b>Estimated Specialty Mental Health Services Billing Totals:</b>		<b>1,429,047</b>		<b>\$ 3,703,264</b>
Estimated % of Clients who are Medi-Cal Beneficiaries				71%
Estimated Total Cost of Specialty Mental Health Services Provided to Medi-Cal Beneficiaries				2,630,288
Federal Financial Participation (FFP) %			100%	2,630,288
<b>MEDI-CAL FFP TOTAL</b>				<b>\$ 2,630,288</b>

<b>8100 - SUBSTANCE USE DISORDER FUNDS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8101	Drug Medi-Cal	\$ -
8102	SABG	\$ -
<b>SUBSTANCE USE DISORDER FUNDS TOTAL</b>		<b>\$ -</b>

<b>8200 - REALIGNMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8201	Realignment	\$ 0
<b>REALIGNMENT TOTAL</b>		<b>\$ 0</b>

<b>8300 - MENTAL HEALTH SERVICE ACT (MHSA)</b>			
<b>Acct #</b>	<b>MHSA Component</b>	<b>MHSA Program Name</b>	<b>Amount</b>
8301	CSS - Community Services & Supports	Fresno FSP	\$ 1,793,453
8302	PEI - Prevention & Early Intervention		-
8303	INN - Innovations		-
8304	WET - Workforce Education & Training		-
8305	CFTN - Capital Facilities & Technology		-
<b>MHSA TOTAL</b>			<b>\$ 1,793,453</b>

<b>8400 - OTHER REVENUE</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8401	Client Fees	\$ -
8402	Client Insurance	5,000
8403	Grants (Specify)	-
8404	Client Rent Income	10,000
8405	Donations, Etc.	2,000
<b>OTHER REVENUE TOTAL</b>		<b>\$ 17,000</b>

**TOTAL PROGRAM FUNDING SOURCES: \$ 4,440,741**

**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Mental Health Systems, Inc. | Fresno FSP Program Site #2 (Optional Site)**  
**FY 2021 - 2022 | 07/01/21 - 06/30/22 Budget Narrative**

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>1000: SALARIES &amp; BENEFITS</b>		<b>2,364,381</b>	
<b>Employee Salaries</b>		<b>1,861,860</b>	
1101	Program Manager	93,600	The Program Manager is responsible for the overall operation of the program
1102	Clinical Supervisor	81,120	The Clinical Supervisor is responsible for all program clinical supervision, clinical assessment guidelines, clinical assessment guideline review, in-service training and clinical consultation with staff.
1103	Program Supervisor/Team Lead (bilingual)	76,960	The Program Supervisor/Team Lead acts as a member of a multidisciplinary team and directly provides services to clients. In addition, the Program Supervisor/Team Lead assists the Program Manager in establishing, administering and directing the MHS DART program. The Program Supervisor/Team Lead demonstrates a strong working knowledge of best practices in Assertive Community Treatment, Full-Service Partnership treatment, Intensive Case Management, bio-psychosocial rehabilitation and recovery, and outpatient treatment. Along with assisting the Program Manager, the Program Supervisor/Team Lead provides supervision to assigned staff. The bulk of client services are provided in the community.
1104	Program Supervisor/Team Lead	72,800	The Program Supervisor/Team Lead acts as a member of a multidisciplinary team and directly provides services to clients. In addition, the Program Supervisor/Team Lead assists the Program Manager in establishing, administering and directing the MHS DART program. The Program Supervisor/Team Lead demonstrates a strong working knowledge of best practices in Assertive Community Treatment, Full-Service Partnership treatment, Intensive Case Management, bio-psychosocial rehabilitation and recovery, and outpatient treatment. Along with assisting the Program Manager, the Program Supervisor/Team Lead provides supervision to assigned staff. The bulk of client services are provided in the community.
1105	Program Supervisor/Team Lead	72,800	The Program Supervisor/Team Lead acts as a member of a multidisciplinary team and directly provides services to clients. In addition, the Program Supervisor/Team Lead assists the Program Manager in establishing, administering and directing the MHS DART program. The Program Supervisor/Team Lead demonstrates a strong working knowledge of best practices in Assertive Community Treatment, Full-Service Partnership treatment, Intensive Case Management, bio-psychosocial rehabilitation and recovery, and outpatient treatment. Along with assisting the Program Manager, the Program Supervisor/Team Lead provides supervision to assigned staff. The bulk of client services are provided in the community.
1106	Clinical Case Manager (bilingual)	56,160	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.
1107	Clinical Case Manager (bilingual)	56,160	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.

PROGRAM EXPENSE				
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE	
1108	Clinical Case Manager	54,080	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.	
1109	Clinical Case Manager	54,080	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.	
1110	Clinical Case Manager	54,080	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.	
1111	Clinical Case Manager	54,080	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.	
1112	Dual Recovery Case Manager (bilingual)	56,160	The Dual Recovery Case Manager provides substance abuse education and relapse prevention strategies, and implements social model interventions in the milieu.	
1113	Dual Recovery Case Manager	54,080	The Dual Recovery Case Manager provides substance abuse education and relapse prevention strategies, and implements social model interventions in the milieu.	
1114	Dual Recovery Case Manager	54,080	The Dual Recovery Case Manager provides substance abuse education and relapse prevention strategies, and implements social model interventions in the milieu.	
1115	Employment Case Manager (bilingual)	56,160	Functions as an ACT/FSP PSC assisting clients with training for, seeking, finding, and keeping viable jobs.	
1116	Employment Case Manager	54,080	Functions as an ACT/FSP PSC assisting clients with training for, seeking, finding, and keeping viable jobs.	
1117	Employment Case Manager	54,080	Functions as an ACT/FSP PSC assisting clients with training for, seeking, finding, and keeping viable jobs.	
1118	Lead Housing Case Manager	56,160	Locate housing opportunities, coordinate and oversee various kinds of housing related agreements, assists clients in obtaining necessary documents for housing placement, coordinates appropriate housing options for clients, etc.	
1119	Housing Case Manager (bilingual)	54,080	Locate housing opportunities, coordinate and oversee various kinds of housing related agreements, assists clients in obtaining necessary documents for housing placement, coordinates appropriate housing options for clients, etc.	
1120	Housing Case Manager	52,000	Locate housing opportunities, coordinate and oversee various kinds of housing related agreements, assists clients in obtaining necessary documents for housing placement, coordinates appropriate housing options for clients, etc.	

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
1121	Peer Support Specialist (bilingual)	45,760	The Peer Support Specialist utilizes his or her experiences as a recipient of mental health and/or substance abuse services to enhance recovery efforts of clients. He or she serves as a member of a multidisciplinary team and shares practical and personal experience, knowledge and insight related to illness management, life skills, and the lifelong process of recovery. The Peer Support Specialist actively promotes greater understanding of clients' points of view and preferences.
1122	Peer Support Specialist	43,680	The Peer Support Specialist utilizes his or her experiences as a recipient of mental health and/or substance abuse services to enhance recovery efforts of clients. He or she serves as a member of a multidisciplinary team and shares practical and personal experience, knowledge and insight related to illness management, life skills, and the lifelong process of recovery. The Peer Support Specialist actively promotes greater understanding of clients' points of view and preferences.
1123	Peer Support Specialist	43,680	The Peer Support Specialist utilizes his or her experiences as a recipient of mental health and/or substance abuse services to enhance recovery efforts of clients. He or she serves as a member of a multidisciplinary team and shares practical and personal experience, knowledge and insight related to illness management, life skills, and the lifelong process of recovery. The Peer Support Specialist actively promotes greater understanding of clients' points of view and preferences.
1124	Registered Nurse	79,040	The Registered Nurse is responsible for monitoring the general psychiatric and physical health of all program clients. The Registered Nurse dispenses and accounts for all medication as ordered by the Psychiatrist (Consultant).
1125	Licensed Vocational Nurse (bilingual)	68,640	The Licensed Vocational Nurse administers medications, takes and records patients' vital signs, reports adverse reactions to medication or treatment to medical personnel in charge. The Licensed Vocational Nurse assesses ongoing symptomatology and provides crisis intervention as needed and assists clinical staff in implementing the Patient Assistance Program.
1126	Licensed Vocational Nurse	66,560	The Licensed Vocational Nurse administers medications, takes and records patients' vital signs, reports adverse reactions to medication or treatment to medical personnel in charge. The Licensed Vocational Nurse assesses ongoing symptomatology and provides crisis intervention as needed and assists clinical staff in implementing the Patient Assistance Program.
1127	Office Manager (Bilingual)	54,080	The Office Manager supervises the performance of assigned office staff and performs traditional administrative duties including file management, preparing correspondence, and attending to other administrative and clerical duties in support of the Program Manager, Program Supervisor/Team Lead, and professional staff.
1128	Billing Specialist	45,760	The Billing Specialist performs data entry, report writing and record compliance, and ensures timely completion of all billing and reimbursement functions. This position also works to compile, process, and maintain medical records of clinic patients in a manner consistent with medical, administrative, ethical, legal, and regulatory requirements of the health care system.
1129	Compliance Specialist	54,080	The Compliance Specialist develops and maintains systems to ensure appropriate documentation is completed within the program. The Compliance specialist also performs other duties, as assigned by the Program Manager to ensure overall program compliance and quality assurance within the program.
1130	Intern	-	The Intern performs a range of psychotherapeutic and rehabilitative interventions, including psychosocial assessment, individual and group counseling, crisis intervention and limited case management duties for clients under the supervision of staff.
1131	24/7 on-call capacity	76,960	This line allows the flexibility for assigned staff that cover crisis and 24/7 response to incur overtime above and beyond what their specific line item allows for. It is difficult to determine exactly which position will require certain levels of OT over the year.
1132	Vice President of Clinical Services	43,680	The Vice President is responsible for the oversight and management responsibility of all assigned programs operated by MHS in a designated region including contract compliance, performance outcomes, administrative and clinical supervision, budgetary compliance, financial performance, and community outreach. This position shares allocations across several programs.
1133	Vice President of Supportive Housing	6,240	The Vice President of Supportive Housing is responsible for defining and implementing portfolio-wide acquisition, master-leasing, and rehabilitation strategies to meet current and future housing needs for clients served by the agency and is responsible for the oversight of housing funds embedded in MHS programs.

PROGRAM EXPENSE				
	ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
	1134	Program Financial Analyst	16,900	This position is responsible for analyzing contract cost and production data, communicating irregularities, ensuring fiscal contract compliance, preparing and submitting monthly contract billings, responding to audit requests, and other program/contract related ad hoc reporting. Other duties include budget development, budget analysis and review, preparing and reviewing contract billings, and contract compliance for assigned contracts/programs.
	1135	0	-	
	1136	0	-	
	1137	0	-	
<b>Employee Benefits</b>			<b>350,287</b>	
	1201	Retirement	111,712	Cover the cost of providing a retirement fund benefit at an estimated 6% of salaries.
	1202	Worker's Compensation	18,619	Covers the cost of workers compensation expenses at 1.0% of salaries. Actual expenses might be higher or lower based on specific worker's compensation rates per class per year.
	1203	Health Insurance	219,956	Covers the cost of medical, and dental coverage per employee @ 11.72% of total salaries
	1204	Other (Specify)	-	
	1205	Other (Specify)	-	
	1206	Other (Specify)	-	
<b>Payroll Taxes &amp; Expenses:</b>			<b>152,234</b>	
	1301	OASDI	493	Calculating estimated expenses based on a factor of \$0.61 per employee per pay period
	1302	FICA/MEDICARE	142,432	Calculating estimated expenses based on a factor of 7.65% of salaries
	1303	SUI	9,309	Calculating estimated expenses based on a factor of 0.50% of salaries
	1304	Other (Specify)	-	
	1305	Other (Specify)	-	
	1306	Other (Specify)	-	
<b>2000: CLIENT SUPPORT</b>			<b>1,174,988</b>	
	2001	Child Care	2,571	estimated wrap expenses related to child care for clients
	2002	Client Housing Support	601,800	estimated expenses for housing support for clients
	2003	Client Transportation & Support	34,731	Cost of transporting clients by staff (mileage reimbursement or gas for vehicles) and bus passes/cards for client transportation needs.
	2004	Clothing, Food, & Hygiene	13,886	estimated expenses for food & for clothing
	2005	Education Support	2,571	estimated wrap expenses related to education support for clients
	2006	Employment Support	2,571	estimated wrap expenses related to employment support for clients
	2007	Household Items for Clients	20,429	estimated wrap expenses related to household items for clients
	2008	Medication Supports	487,386	estimated wrap expenses related to medication supports (psychiatrist) for clients - Psychiatrist service expense outside of the MHS, Inc. staff.
	2009	Program Supplies - Medical	8,400	Medical supplies that consist of miscellaneous items such as latex gloves, cotton, alcohol swipes, etc., in addition to charges for laboratory tests for clients (i.e. blood tests).
	2010	Utility Vouchers	643	estimated wrap expenses related to utility vouchers for clients
	2011	Other (Specify)	-	
	2012	Other (Specify)	-	
	2013	Other (Specify)	-	
	2014	Other (Specify)	-	
	2015	Other (Specify)	-	
	2016	Other (Specify)	-	
<b>3000: OPERATING EXPENSES</b>			<b>170,840</b>	
	3001	Telecommunications	44,312	Recurring costs of phones, cell phones, laptop data/internet device, and internet services. Also covers the monthly user fees for the VDI solution and MS Teams
	3002	Printing/Postage	7,520	Covers the cost of brochures, business cards, other program printing needs, postage and freight expenses.
	3003	Office, Household & Program Supplies	23,000	Office supplies utilized for program operation, including paper, pens, pencils, folders, staples, paper clips, printer cartridges, binders, folder tabs, client chart supplies. Housekeeping supplies such as cleaning products, bathroom products, non stationary paper goods, cleaning, and trash supplies. Recreational/occupational therapy supplies used by clients for their treatment plan.
	3004	Advertising	-	
	3005	Staff Development & Training	11,820	Staff development/training costs include CPR and First Aid trainings for staff, MHS course requirements (via Relias platform), and registrations for staff development and trainings held in collaboration with the program's mission (Forensic Mental Health, Evidence-based Trainings, etc.).



PROGRAM EXPENSE				
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE	
3006	Staff Mileage	32,034	In-County mileage reimbursements of staff (without clients) traveling to and from events, meetings and trainings in conjunction with program operations and responsibilities. This also includes gasoline costs for leased vehicles.	
3007	Subscriptions & Memberships	1,230	Covers the estimated cost of dues to memberships that benefit the program and subscriptions to housing, employment and other periodicals that benefit the program goals.	
3008	Vehicle Maintenance	-		
3009	Staff Travel (Out of County)	9,802	Out-of-County mileage reimbursements and/or leased vehicles gasoline, in addition to hotel, travel and flight expenses related to the attendance of conferences, training, and staff programmatic/training visits to the Corporate Office in San Diego.	
3010	Lodging	-		
3011	Other - Licenses/Taxes	29,874	Fresno County EHR system: Avatar expenses per user based on published County rates. Department Of Motor Vehicles registration renewals. Microsoft license expense for users at the program.	
3012	Other - Other Business Services	11,248	Associated costs for hiring of new employees such as TB screenings, assessments, drug screenings, background checks, and fingerprinting. Also includes the cost of movers, HIPPA shredding costs, Monthly user fees for Common Ground Software (for client support and treatment), payee services, and other	

4000: FACILITIES & EQUIPMENT		148,789		
4001	Building Maintenance	18,528	Minor repairs and maintenance for facility including, but not limited to replacement of locks, minor breakage, internal phone line repairs, building cleaning, and other repairs required for safe operation of the program at the leased facility.	
4002	Rent/Lease Building	94,500	covers the cost of leasing a facility for operations. Also includes CAM and Utility charges through the lease agreement	
4003	Rent/Lease Equipment	2,650	covers the cost of renting a copier	
4004	Rent/Lease Vehicles	11,453	covers the cost of leasing two vehicles	
4005	Security	-		
4006	Utilities	-		
4007	Minor equipment purchases and equipment repair/maintenance	21,658	Equipment repairs/maintenance that encompass the cost of a maintenance contract for the copier, monitoring of internet firewall, and the repair of other equipment not covered by maintenance agreements such as computers, printers, and telephones. Also covers the cost of maintenance and registration on the leased vehicles Minor equipment replacement of existing equipment that in the normal course of use is worn out and either cannot be repaired or is not practical to have repaired.	
4008	Other (Specify)	-		
4009	Other (Specify)	-		
4010	Other (Specify)	-		

5000: SPECIAL EXPENSES		1,900		
5001	Consultant (Network & Data Management)	-		
5002	HMIS (Health Management Information System)	1,300	Covers the cost of 4 users in the HMIS system	
5003	Contractual/Consulting Services (Specify)	-		
5004	Translation Services	600	Estimated cost of providing interpreters when there isn't a bilingual staff available. Actual costs might come in higher depending on clients and their needs.	
5005	Other (Specify)	-		
5006	Other (Specify)	-		
5007	Other (Specify)	-		
5008	Other (Specify)	-		

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>6000: ADMINISTRATIVE EXPENSES</b>		<b>577,506</b>	
6001	Administrative Overhead	575,866	Indirect/administrative expense per Federally approved Indirect Rate of 14.9%.
6002	Professional Liability Insurance	-	
6003	Accounting/Bookkeeping	-	
6004	External Audit	200	Accounting fees incurred by this program, including the required Federal Office of Management and Budget (OMB-133) audit.
6005	Liability Insurance	1,440	Covers the cost of car insurance on the leased vehicles
6006	Payroll Services	-	
6007	Depreciation (Provider-Owned Equipment to be Used for Program Purposes)	-	
6008	Other (Specify)	-	
6009	Other (Specify)	-	
6010	Other (Specify)	-	
6011	Other (Specify)	-	
6012	Other (Specify)	-	

7000: FIXED ASSETS			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>7000: FIXED ASSETS</b>		<b>2,337</b>	
7001	Computer Equipment & Software	2,337	Includes estimated minor software expenses
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	-	
7003	Furniture & Fixtures	-	
7004	Leasehold/Tenant/Building Improvements	-	
7005	Other Assets over \$500 with Lifespan of 2 Years +	-	
7006	Assets over \$5,000/unit (Specify)	-	
7007	Other (Specify)	-	
7008	Other (Specify)	-	

PROGRAM FUNDING SOURCES			
8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)			
ACCT #	LINE ITEM	PROVIDE DETAILS OF METHODOLOGY(IES) USED IN DETERMINING MEDI-CAL SERVICE RATES AND/OR SERVICE UNITS, IF APPLICABLE AND/OR AS REQUIRED BY THE RFP.	
8001	Mental Health Services	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We are currently estimating approximately 60% of the funding will come from M/C eligible clients.	
8002	Case Management	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We are currently estimating approximately 60% of the funding will come from M/C eligible clients.	
8003	Crisis Services	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We are currently estimating approximately 60% of the funding will come from M/C eligible clients.	
8004	Medication Support	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We are currently estimating approximately 60% of the funding will come from M/C eligible clients.	
8005	Collateral	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We are currently estimating approximately 60% of the funding will come from M/C eligible clients.	
8006	Plan Development	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We are currently estimating approximately 60% of the funding will come from M/C eligible clients.	
8007	Assessment	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We are currently estimating approximately 60% of the funding will come from M/C eligible clients.	
8008	Rehabilitation	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We are currently estimating approximately 60% of the funding will come from M/C eligible clients.	

**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Mental Health Systems, Inc. | Fresno FSP Program Site #2 (Optional Site)**  
**FY 2022 - 2023 | 07/01/22 - 06/30/23**

**PROGRAM EXPENSES**

<b>1000: SALARIES &amp; BENEFITS</b>					
<b>Employee Salaries</b>					
<b>Acct #</b>	<b>Position</b>	<b>FTE</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1101	Program Manager	1.00	\$ 99,299	\$ -	\$ 99,299
1102	Clinical Supervisor	1.00	68,856	17,214	86,070
1103	Program Supervisor/Team Lead (bilingual)	1.00	40,820	40,820	81,640
1104	Program Supervisor/Team Lead	1.00	38,615	38,615	77,230
1105	Program Supervisor/Team Lead	1.00	38,615	38,615	77,230
1106	Clinical Case Manager (bilingual)	1.00	-	59,571	59,571
1107	Clinical Case Manager (bilingual)	1.00	-	59,571	59,571
1108	Clinical Case Manager	1.00	-	57,366	57,366
1109	Clinical Case Manager	1.00	-	57,366	57,366
1110	Clinical Case Manager	1.00	-	57,366	57,366
1111	Clinical Case Manager	1.00	-	57,366	57,366
1112	Dual Recovery Case Manager (bilingual)	1.00	-	59,571	59,571
1113	Dual Recovery Case Manager	1.00	-	57,366	57,366
1114	Dual Recovery Case Manager	1.00	-	57,366	57,366
1115	Employment Case Manager (bilingual)	1.00	-	59,571	59,571
1116	Employment Case Manager	1.00	-	57,366	57,366
1117	Employment Case Manager	1.00	-	57,366	57,366
1118	Lead Housing Case Manager	1.00	-	59,571	59,571
1119	Housing Case Manager (bilingual)	1.00	-	57,366	57,366
1120	Housing Case Manager	1.00	-	55,162	55,162
1121	Peer Support Specialist (bilingual)	1.00	-	48,547	48,547
1122	Peer Support Specialist	1.00	-	46,342	46,342
1123	Peer Support Specialist	1.00	-	46,342	46,342
1124	Registered Nurse	1.00	-	83,845	83,845
1125	Licensed Vocational Nurse (bilingual)	1.00	-	72,821	72,821
1126	Licensed Vocational Nurse	1.00	-	70,616	70,616
1127	Office Manager (Bilingual)	1.00	57,366	-	57,366
1128	Billing Specialist	1.00	48,547	-	48,547
1129	Compliance Specialist	1.00	57,366	-	57,366
1130	Intern	3.00	-	-	-
1131	24/7 on-call capacity	1.00	-	81,640	81,640
1132	Vice President of Clinical Services	0.35	46,337	-	46,337
1133	Vice President of Supportive Housing	0.05	6,620	-	6,620
1134	Program Financial Analyst	0.25	17,930	-	17,930
1135			-	-	-
1136			-	-	-
1137			-	-	-
<b>Personnel Salaries Subtotal</b>		<b>33.65</b>	<b>\$ 520,371</b>	<b>\$ 1,454,728</b>	<b>\$ 1,975,099</b>

<b>Employee Benefits</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1201	Retirement	\$ 30,812	\$ 87,694	\$ 118,506
1202	Worker's Compensation	5,135	14,616	19,751
1203	Health Insurance	60,496	172,177	232,673
1204	Other (Specify)	-	-	-
1205	Other (Specify)	-	-	-
1206	Other (Specify)	-	-	-
<b>Employee Benefits Subtotal:</b>		<b>\$ 96,443</b>	<b>\$ 274,487</b>	<b>\$ 370,930</b>
<b>Payroll Taxes &amp; Expenses:</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1301	OASDI	\$ 128	\$ 365	\$ 493
1302	FICA/MEDICARE	39,285	111,810	151,095
1303	SUI	2,568	7,307	9,875
1304	Other (Specify)	-	-	-
1305	Other (Specify)	-	-	-
1306	Other (Specify)	-	-	-
<b>Payroll Taxes &amp; Expenses Subtotal:</b>		<b>\$ 41,981</b>	<b>\$ 119,482.00</b>	<b>\$ 161,463.00</b>
<b>EMPLOYEE SALARIES &amp; BENEFITS TOTAL:</b>		<b>\$ 658,795</b>	<b>\$ 1,848,697</b>	<b>\$ 2,507,492</b>

<b>2000: CLIENT SUPPORT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
2001	Child Care	\$ 2,571
2002	Client Housing Support	601,800
2003	Client Transportation & Support	34,731
2004	Clothing, Food, & Hygiene	13,886
2005	Education Support	2,571
2006	Employment Support	2,571
2007	Household Items for Clients	20,429
2008	Medication Supports	487,386
2009	Program Supplies - Medical	8,400
2010	Utility Vouchers	643
2011	Other (Specify)	-
2012	Other (Specify)	-
2013	Other (Specify)	-
2014	Other (Specify)	-
2015	Other (Specify)	-
2016	Other (Specify)	-
<b>DIRECT CLIENT CARE TOTAL</b>		<b>\$ 1,174,988</b>

<b>3000: OPERATING EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
3001	Telecommunications	\$ 44,312
3002	Printing/Postage	7,520
3003	Office, Household & Program Supplies	23,000
3004	Advertising	-
3005	Staff Development & Training	11,820
3006	Staff Mileage	32,034
3007	Subscriptions & Memberships	1,230
3008	Vehicle Maintenance	-
3009	Staff Travel (Out of County)	9,802
3010	Lodging	-
3011	Other - Licenses/Taxes	29,874
3012	Other - Other Business Services	11,385
<b>OPERATING EXPENSES TOTAL:</b>		<b>\$ 170,977</b>

<b>4000: FACILITIES &amp; EQUIPMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
4001	Building Maintenance	\$ 18,528
4002	Rent/Lease Building	100,255
4003	Rent/Lease Equipment	2,650
4004	Rent/Lease Vehicles	11,453
4005	Security	-
4006	Utilities	-
4007	Minor equipment purchases and equipment repair/maintenance	21,663
4008	Other (Specify)	-
4009	Other (Specify)	-
4010	Other (Specify)	-
<b>FACILITIES/EQUIPMENT TOTAL:</b>		<b>\$ 154,549</b>

<b>5000: SPECIAL EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
5001	Consultant (Network & Data Management)	\$ -
5002	HMIS (Health Management Information System)	1,300
5003	Contractual/Consulting Services (Specify)	
5004	Translation Services	600
5005	Other (Specify)	
5006	Other (Specify)	-
5007	Other (Specify)	-
5008	Other (Specify)	-
<b>SPECIAL EXPENSES TOTAL:</b>		<b>\$ 1,900</b>

<b>6000: ADMINISTRATIVE EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
6001	Administrative Overhead	\$ 598,069
6002	Professional Liability Insurance	-
6003	Accounting/Bookkeeping	-
6004	External Audit	200
6005	Liability Insurance	1,440
6006	Payroll Services	-
6007	Depreciation (Provider-Owned Equipment to be Used for Program Purposes)	-
6008	Other (Specify)	-
6009	Other (Specify)	-
6010	Other (Specify)	-
6011	Other (Specify)	-
6012	Other (Specify)	-
<b>ADMINISTRATIVE EXPENSES TOTAL</b>		<b>\$ 599,709</b>

<b>7000: FIXED ASSETS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
7001	Computer Equipment & Software	\$ 2,337
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	-
7003	Furniture & Fixtures	-
7004	Leasehold/Tenant/Building Improvements	-
7005	Other Assets over \$500 with Lifespan of 2 Years +	-
7006	Assets over \$5,000/unit (Specify)	-
7007	Other (Specify)	-
7008	Other (Specify)	-
<b>FIXED ASSETS EXPENSES TOTAL</b>		<b>\$ 2,337</b>

<b>TOTAL PROGRAM EXPENSES</b>		<b>\$ 4,611,952</b>
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**PROGRAM FUNDING SOURCES**

<b>8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)</b>				
<b>Acct #</b>	<b>Line Item Description</b>	<b>Service Units</b>	<b>Rate</b>	<b>Amount</b>
8001	Mental Health Services	695,631	2.41	\$ 1,678,129
8002	Case Management	345,060	1.87	643,775
8003	Crisis Services	36,936	3.66	135,258
8004	Medication Support	265,560	4.46	1,184,478
8005	Collateral	17,820	2.41	42,989
8006	Plan Development	24,300	2.41	58,621
8007	Assessment	24,300	2.41	58,621
8008	Rehabilitation	19,440	2.41	46,897
<b>Estimated Specialty Mental Health Services Billing Totals:</b>		<b>1,429,047</b>		<b>\$ 3,848,768</b>
Estimated % of Clients who are Medi-Cal Beneficiaries				73%
Estimated Total Cost of Specialty Mental Health Services Provided to Medi-Cal Beneficiaries				2,801,499
Federal Financial Participation (FFP) %			100%	2,801,499
<b>MEDI-CAL FFP TOTAL</b>				<b>\$ 2,801,499</b>

<b>8100 - SUBSTANCE USE DISORDER FUNDS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8101	Drug Medi-Cal	\$ -
8102	SABG	\$ -
<b>SUBSTANCE USE DISORDER FUNDS TOTAL</b>		<b>\$ -</b>

<b>8200 - REALIGNMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8201	Realignment	\$ 0
<b>REALIGNMENT TOTAL</b>		<b>\$ 0</b>

<b>8300 - MENTAL HEALTH SERVICE ACT (MHSA)</b>			
<b>Acct #</b>	<b>MHSA Component</b>	<b>MHSA Program Name</b>	<b>Amount</b>
8301	CSS - Community Services & Supports	Fresno FSP	\$ 1,793,453
8302	PEI - Prevention & Early Intervention		-
8303	INN - Innovations		-
8304	WET - Workforce Education & Training		-
8305	CFTN - Capital Facilities & Technology		-
<b>MHSA TOTAL</b>			<b>\$ 1,793,453</b>

<b>8400 - OTHER REVENUE</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8401	Client Fees	\$ -
8402	Client Insurance	5,000
8403	Grants (Specify)	-
8404	Client Rent Income	10,000
8405	Donations, Etc.	2,000
<b>OTHER REVENUE TOTAL</b>		<b>\$ 17,000</b>

**TOTAL PROGRAM FUNDING SOURCES: \$ 4,611,952**

**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Mental Health Systems, Inc. | Fresno FSP Program Site #2 (Optional Site)**  
**FY 2022 - 2023 | 07/01/22 - 06/30/23 Budget Narrative**

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>1000: SALARIES &amp; BENEFITS</b>		<b>2,507,492</b>	
<b>Employee Salaries</b>		<b>1,975,099</b>	
1101	Program Manager	99,299	The Program Manager is responsible for the overall operation of the program
1102	Clinical Supervisor	86,070	The Clinical Supervisor is responsible for all program clinical supervision, clinical assessment guidelines, clinical assessment guideline review, in-service training and clinical consultation with staff.
1103	Program Supervisor/Team Lead (bilingual)	81,640	The Program Supervisor/Team Lead acts as a member of a multidisciplinary team and directly provides services to clients. In addition, the Program Supervisor/Team Lead assists the Program Manager in establishing, administering and directing the MHS DART program. The Program Supervisor/Team Lead demonstrates a strong working knowledge of best practices in Assertive Community Treatment, Full-Service Partnership treatment, Intensive Case Management, bio-psychosocial rehabilitation and recovery, and outpatient treatment. Along with assisting the Program Manager, the Program Supervisor/Team Lead provides supervision to assigned staff. The bulk of client services are provided in the community.
1104	Program Supervisor/Team Lead	77,230	The Program Supervisor/Team Lead acts as a member of a multidisciplinary team and directly provides services to clients. In addition, the Program Supervisor/Team Lead assists the Program Manager in establishing, administering and directing the MHS DART program. The Program Supervisor/Team Lead demonstrates a strong working knowledge of best practices in Assertive Community Treatment, Full-Service Partnership treatment, Intensive Case Management, bio-psychosocial rehabilitation and recovery, and outpatient treatment. Along with assisting the Program Manager, the Program Supervisor/Team Lead provides supervision to assigned staff. The bulk of client services are provided in the community.
1105	Program Supervisor/Team Lead	77,230	The Program Supervisor/Team Lead acts as a member of a multidisciplinary team and directly provides services to clients. In addition, the Program Supervisor/Team Lead assists the Program Manager in establishing, administering and directing the MHS DART program. The Program Supervisor/Team Lead demonstrates a strong working knowledge of best practices in Assertive Community Treatment, Full-Service Partnership treatment, Intensive Case Management, bio-psychosocial rehabilitation and recovery, and outpatient treatment. Along with assisting the Program Manager, the Program Supervisor/Team Lead provides supervision to assigned staff. The bulk of client services are provided in the community.
1106	Clinical Case Manager (bilingual)	59,571	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.
1107	Clinical Case Manager (bilingual)	59,571	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.



PROGRAM EXPENSE				
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE	
1108	Clinical Case Manager	57,366	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.	
1109	Clinical Case Manager	57,366	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.	
1110	Clinical Case Manager	57,366	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.	
1111	Clinical Case Manager	57,366	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.	
1112	Dual Recovery Case Manager (bilingual)	59,571	The Dual Recovery Case Manager provides substance abuse education and relapse prevention strategies, and implements social model interventions in the milieu.	
1113	Dual Recovery Case Manager	57,366	The Dual Recovery Case Manager provides substance abuse education and relapse prevention strategies, and implements social model interventions in the milieu.	
1114	Dual Recovery Case Manager	57,366	The Dual Recovery Case Manager provides substance abuse education and relapse prevention strategies, and implements social model interventions in the milieu.	
1115	Employment Case Manager (bilingual)	59,571	Functions as an ACT/FSP PSC assisting clients with training for, seeking, finding, and keeping viable jobs.	
1116	Employment Case Manager	57,366	Functions as an ACT/FSP PSC assisting clients with training for, seeking, finding, and keeping viable jobs.	
1117	Employment Case Manager	57,366	Functions as an ACT/FSP PSC assisting clients with training for, seeking, finding, and keeping viable jobs.	
1118	Lead Housing Case Manager	59,571	Locate housing opportunities, coordinate and oversee various kinds of housing related agreements, assists clients in obtaining necessary documents for housing placement, coordinates appropriate housing options for clients, etc.	
1119	Housing Case Manager (bilingual)	57,366	Locate housing opportunities, coordinate and oversee various kinds of housing related agreements, assists clients in obtaining necessary documents for housing placement, coordinates appropriate housing options for clients, etc.	
1120	Housing Case Manager	55,162	Locate housing opportunities, coordinate and oversee various kinds of housing related agreements, assists clients in obtaining necessary documents for housing placement, coordinates appropriate housing options for clients, etc.	

PROGRAM EXPENSE				
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE	
1121	Peer Support Specialist (bilingual)	48,547	The Peer Support Specialist utilizes his or her experiences as a recipient of mental health and/or substance abuse services to enhance recovery efforts of clients. He or she serves as a member of a multidisciplinary team and shares practical and personal experience, knowledge and insight related to illness management, life skills, and the lifelong process of recovery. The Peer Support Specialist actively promotes greater understanding of clients' points of view and preferences.	
1122	Peer Support Specialist	46,342	The Peer Support Specialist utilizes his or her experiences as a recipient of mental health and/or substance abuse services to enhance recovery efforts of clients. He or she serves as a member of a multidisciplinary team and shares practical and personal experience, knowledge and insight related to illness management, life skills, and the lifelong process of recovery. The Peer Support Specialist actively promotes greater understanding of clients' points of view and preferences.	
1123	Peer Support Specialist	46,342	The Peer Support Specialist utilizes his or her experiences as a recipient of mental health and/or substance abuse services to enhance recovery efforts of clients. He or she serves as a member of a multidisciplinary team and shares practical and personal experience, knowledge and insight related to illness management, life skills, and the lifelong process of recovery. The Peer Support Specialist actively promotes greater understanding of clients' points of view and preferences.	
1124	Registered Nurse	83,845	The Registered Nurse is responsible for monitoring the general psychiatric and physical health of all program clients. The Registered Nurse dispenses and accounts for all medication as ordered by the Psychiatrist (Consultant).	
1125	Licensed Vocational Nurse (bilingual)	72,821	The Licensed Vocational Nurse administers medications, takes and records patients' vital signs, reports adverse reactions to medication or treatment to medical personnel in charge. The Licensed Vocational Nurse assesses ongoing symptomatology and provides crisis intervention as needed and assists clinical staff in implementing the Patient Assistance Program.	
1126	Licensed Vocational Nurse	70,616	The Licensed Vocational Nurse administers medications, takes and records patients' vital signs, reports adverse reactions to medication or treatment to medical personnel in charge. The Licensed Vocational Nurse assesses ongoing symptomatology and provides crisis intervention as needed and assists clinical staff in implementing the Patient Assistance Program.	
1127	Office Manager (Bilingual)	57,366	The Office Manager supervises the performance of assigned office staff and performs traditional administrative duties including file management, preparing correspondence, and attending to other administrative and clerical duties in support of the Program Manager, Program Supervisor/Team Lead, and professional staff.	
1128	Billing Specialist	48,547	The Billing Specialist performs data entry, report writing and record compliance, and ensures timely completion of all billing and reimbursement functions. This position also works to compile, process, and maintain medical records of clinic patients in a manner consistent with medical, administrative, ethical, legal, and regulatory requirements of the health care system.	
1129	Compliance Specialist	57,366	The Compliance Specialist develops and maintains systems to ensure appropriate documentation is completed within the program. The Compliance specialist also performs other duties, as assigned by the Program Manager to ensure overall program compliance and quality assurance within the program.	
1130	Intern	-	The Intern performs a range of psychotherapeutic and rehabilitative interventions, including psychosocial assessment, individual and group counseling, crisis intervention and limited case management duties for clients under the supervision of staff.	
1131	24/7 on-call capacity	81,640	This line allows the flexibility for assigned staff that cover crisis and 24/7 response to incur overtime above and beyond what their specific line item allows for. It is difficult to determine exactly which position will require certain levels of OT over the year.	
1132	Vice President of Clinical Services	46,337	The Vice President is responsible for the oversight and management responsibility of all assigned programs operated by MHS in a designated region including contract compliance, performance outcomes, administrative and clinical supervision, budgetary compliance, financial performance, and community outreach. This position shares allocations across several programs.	
1133	Vice President of Supportive Housing	6,620	The Vice President of Supportive Housing is responsible for defining and implementing portfolio-wide acquisition, master-leasing, and rehabilitation strategies to meet current and future housing needs for clients served by the agency and is responsible for the oversight of housing funds embedded in MHS programs.	

PROGRAM EXPENSE				
	ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
	1134	Program Financial Analyst	17,930	This position is responsible for analyzing contract cost and production data, communicating irregularities, ensuring fiscal contract compliance, preparing and submitting monthly contract billings, responding to audit requests, and other program/contract related ad hoc reporting. Other duties include budget development, budget analysis and review, preparing and reviewing contract billings, and contract compliance for assigned contracts/programs.
	1135	0	-	
	1136	0	-	
	1137	0	-	
<b>Employee Benefits</b>			<b>370,930</b>	
	1201	Retirement	118,506	Cover the cost of providing a retirement fund benefit at an estimated 6% of salaries.
	1202	Worker's Compensation	19,751	Covers the cost of workers compensation expenses at 1.0% of salaries. Actual expenses might be higher or lower based on specific worker's compensation rates per class per year.
	1203	Health Insurance	232,673	Covers the cost of medical, and dental coverage per employee @ 11.72% of total salaries
	1204	Other (Specify)	-	
	1205	Other (Specify)	-	
	1206	Other (Specify)	-	
<b>Payroll Taxes &amp; Expenses:</b>			<b>161,463</b>	
	1301	OASDI	493	Calculating estimated expenses based on a factor of \$0.61 per employee per pay period
	1302	FICA/MEDICARE	151,095	Calculating estimated expenses based on a factor of 7.65% of salaries
	1303	SUI	9,875	Calculating estimated expenses based on a factor of 0.50% of salaries
	1304	Other (Specify)	-	
	1305	Other (Specify)	-	
	1306	Other (Specify)	-	
<b>2000: CLIENT SUPPORT</b>			<b>1,174,988</b>	
	2001	Child Care	2,571	estimated wrap expenses related to child care for clients
	2002	Client Housing Support	601,800	estimated expenses for housing support for clients
	2003	Client Transportation & Support	34,731	Cost of transporting clients by staff (mileage reimbursement or gas for vehicles) and bus passes/cards for client transportation needs.
	2004	Clothing, Food, & Hygiene	13,886	estimated expenses for food & for clothing
	2005	Education Support	2,571	estimated wrap expenses related to education support for clients
	2006	Employment Support	2,571	estimated wrap expenses related to employment support for clients
	2007	Household Items for Clients	20,429	estimated wrap expenses related to household items for clients
	2008	Medication Supports	487,386	estimated wrap expenses related to medication supports (psychiatrist) for clients - Psychiatrist service expense outside of the MHS, Inc. staff.
	2009	Program Supplies - Medical	8,400	Medical supplies that consist of miscellaneous items such as latex gloves, cotton, alcohol swipes, etc., in addition to charges for laboratory tests for clients (i.e. blood tests).
	2010	Utility Vouchers	643	estimated wrap expenses related to utility vouchers for clients
	2011	Other (Specify)	-	
	2012	Other (Specify)	-	
	2013	Other (Specify)	-	
	2014	Other (Specify)	-	
	2015	Other (Specify)	-	
	2016	Other (Specify)	-	
<b>3000: OPERATING EXPENSES</b>			<b>170,977</b>	
	3001	Telecommunications	44,312	Recurring costs of phones, cell phones, laptop data/internet device, and internet services. Also covers the monthly user fees for the VDI solution and MS Teams
	3002	Printing/Postage	7,520	Covers the cost of brochures, business cards, other program printing needs, postage and freight expenses.
	3003	Office, Household & Program Supplies	23,000	Office supplies utilized for program operation, including paper, pens, pencils, folders, staples, paper clips, printer cartridges, binders, folder tabs, client chart supplies. Housekeeping supplies such as cleaning products, bathroom products, non stationary paper goods, cleaning, and trash supplies. Recreational/occupational therapy supplies used by clients for their treatment plan.
	3004	Advertising	-	
	3005	Staff Development & Training	11,820	Staff development/training costs include CPR and First Aid trainings for staff, MHS course requirements (via Relias platform), and registrations for staff development and trainings held in collaboration with the program's mission (Forensic Mental Health, Evidence-based Trainings, etc.).

PROGRAM EXPENSE				
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE	
3006	Staff Mileage	32,034	In-County mileage reimbursements of staff (without clients) traveling to and from events, meetings and trainings in conjunction with program operations and responsibilities. This also includes gasoline costs for leased vehicles.	
3007	Subscriptions & Memberships	1,230	Covers the estimated cost of dues to memberships that benefit the program and subscriptions to housing, employment and other periodicals that benefit the program goals.	
3008	Vehicle Maintenance	-		
3009	Staff Travel (Out of County)	9,802	Out-of-County mileage reimbursements and/or leased vehicles gasoline, in addition to hotel, travel and flight expenses related to the attendance of conferences, training, and staff programmatic/training visits to the Corporate Office in San Diego.	
3010	Lodging	-		
3011	Other - Licenses/Taxes	29,874	Fresno County EHR system: Avatar expenses per user based on published County rates. Department Of Motor Vehicles registration renewals. Microsoft license expense for users at the program.	
3012	Other - Other Business Services	11,385	Associated costs for hiring of new employees such as TB screenings, assessments, drug screenings, background checks, and fingerprinting. Also includes the cost of movers, HIPPA shredding costs, Monthly user fees for Common Ground Software (for client support and treatment), payee services, and other	

4000: FACILITIES & EQUIPMENT		154,549		
4001	Building Maintenance	18,528	Minor repairs and maintenance for facility including, but not limited to replacement of locks, minor breakage, internal phone line repairs, building cleaning, and other repairs required for safe operation of the program at the leased facility.	
4002	Rent/Lease Building	100,255	covers the cost of leasing a facility for operations. Also includes CAM and Utility charges through the lease agreement	
4003	Rent/Lease Equipment	2,650	covers the cost of renting a copier	
4004	Rent/Lease Vehicles	11,453	covers the cost of leasing two vehicles	
4005	Security	-		
4006	Utilities	-		
4007	Minor equipment purchases and equipment repair/maintenance	21,663	Equipment repairs/maintenance that encompass the cost of a maintenance contract for the copier, monitoring of internet firewall, and the repair of other equipment not covered by maintenance agreements such as computers, printers, and telephones. Also covers the cost of maintenance and registration on the leased vehicles Minor equipment replacement of existing equipment that in the normal course of use is worn out and either cannot be repaired or is not practical to have repaired.	
4008	Other (Specify)	-		
4009	Other (Specify)	-		
4010	Other (Specify)	-		

5000: SPECIAL EXPENSES		1,900		
5001	Consultant (Network & Data Management)	-		
5002	HMIS (Health Management Information System)	1,300	Covers the cost of 4 users in the HMIS system	
5003	Contractual/Consulting Services (Specify)	-		
5004	Translation Services	600	Estimated cost of providing interpreters when there isn't a bilingual staff available. Actual costs might come in higher depending on clients and their needs.	
5005	Other (Specify)	-		
5006	Other (Specify)	-		
5007	Other (Specify)	-		
5008	Other (Specify)	-		

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>6000: ADMINISTRATIVE EXPENSES</b>		<b>599,709</b>	
6001	Administrative Overhead	598,069	Indirect/administrative expense per Federally approved Indirect Rate of 14.9%.
6002	Professional Liability Insurance	-	
6003	Accounting/Bookkeeping	-	
6004	External Audit	200	Accounting fees incurred by this program, including the required Federal Office of Management and Budget (OMB-133) audit.
6005	Liability Insurance	1,440	Covers the cost of car insurance on the leased vehicles
6006	Payroll Services	-	
6007	Depreciation (Provider-Owned Equipment to be Used for Program Purposes)	-	
6008	Other (Specify)	-	
6009	Other (Specify)	-	
6010	Other (Specify)	-	
6011	Other (Specify)	-	
6012	Other (Specify)	-	

7000: FIXED ASSETS			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>7000: FIXED ASSETS</b>		<b>2,337</b>	
7001	Computer Equipment & Software	2,337	Includes estimated minor software expenses
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	-	
7003	Furniture & Fixtures	-	
7004	Leasehold/Tenant/Building Improvements	-	
7005	Other Assets over \$500 with Lifespan of 2 Years +	-	
7006	Assets over \$5,000/unit (Specify)	-	
7007	Other (Specify)	-	
7008	Other (Specify)	-	

PROGRAM FUNDING SOURCES			
8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)			
ACCT #	LINE ITEM	PROVIDE DETAILS OF METHODOLOGY(IES) USED IN DETERMINING MEDI-CAL SERVICE RATES AND/OR SERVICE UNITS, IF APPLICABLE AND/OR AS REQUIRED BY THE RFP.	
8001	Mental Health Services	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We are currently estimating approximately 60% of the funding will come from M/C eligible clients.	
8002	Case Management	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We are currently estimating approximately 60% of the funding will come from M/C eligible clients.	
8003	Crisis Services	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We are currently estimating approximately 60% of the funding will come from M/C eligible clients.	
8004	Medication Support	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We are currently estimating approximately 60% of the funding will come from M/C eligible clients.	
8005	Collateral	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We are currently estimating approximately 60% of the funding will come from M/C eligible clients.	
8006	Plan Development	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We are currently estimating approximately 60% of the funding will come from M/C eligible clients.	
8007	Assessment	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We are currently estimating approximately 60% of the funding will come from M/C eligible clients.	
8008	Rehabilitation	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We are currently estimating approximately 60% of the funding will come from M/C eligible clients.	

**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Mental Health Systems, Inc. | Fresno FSP Program Site #2 (Optional Site)**  
**FY 2023 - 2024 | 07/01/23 - 06/30/24**

**PROGRAM EXPENSES**

1000: SALARIES & BENEFITS					
Employee Salaries					
Acct #	Position	FTE	Admin	Direct	Total
1101	Program Manager	1.00	\$ 102,274	\$ -	\$ 102,274
1102	Clinical Supervisor	1.00	70,920	17,730	88,650
1103	Program Supervisor/Team Lead (bilingual)	1.00	42,047	42,047	84,094
1104	Program Supervisor/Team Lead	1.00	39,770	39,770	79,539
1105	Program Supervisor/Team Lead	1.00	39,770	39,770	79,539
1106	Clinical Case Manager (bilingual)	1.00	-	61,360	61,360
1107	Clinical Case Manager (bilingual)	1.00	-	61,360	61,360
1108	Clinical Case Manager	1.00	-	59,093	59,093
1109	Clinical Case Manager	1.00	-	59,093	59,093
1110	Clinical Case Manager	1.00	-	59,093	59,093
1111	Clinical Case Manager	1.00	-	59,093	59,093
1112	Dual Recovery Case Manager (bilingual)	1.00	-	61,360	61,360
1113	Dual Recovery Case Manager	1.00	-	59,093	59,093
1114	Dual Recovery Case Manager	1.00	-	59,093	59,093
1115	Employment Case Manager (bilingual)	1.00	-	61,360	61,360
1116	Employment Case Manager	1.00	-	59,093	59,093
1117	Employment Case Manager	1.00	-	59,093	59,093
1118	Lead Housing Case Manager	1.00	-	61,360	61,360
1119	Housing Case Manager (bilingual)	1.00	-	59,093	59,093
1120	Housing Case Manager	1.00	-	56,826	56,826
1121	Peer Support Specialist (bilingual)	1.00	-	50,003	50,003
1122	Peer Support Specialist	1.00	-	47,736	47,736
1123	Peer Support Specialist	1.00	-	47,736	47,736
1124	Registered Nurse	1.00	-	86,362	86,362
1125	Licensed Vocational Nurse (bilingual)	1.00	-	75,005	75,005
1126	Licensed Vocational Nurse	1.00	-	72,738	72,738
1127	Office Manager (Bilingual)	1.00	59,093	-	59,093
1128	Billing Specialist	1.00	50,003	-	50,003
1129	Compliance Specialist	1.00	59,093	-	59,093
1130	Intern	3.00	-	-	-
1131	24/7 on-call capacity	1.00	-	84,094	84,094
1132	Vice President of Clinical Services	0.35	47,728	-	47,728
1133	Vice President of Supportive Housing	0.05	6,818	-	6,818
1134	Program Financial Analyst	0.25	18,465	-	18,465
1135			-	-	-
1136			-	-	-
1137			-	-	-
<b>Personnel Salaries Subtotal</b>		<b>33.65</b>	<b>\$ 535,980</b>	<b>\$ 1,498,453</b>	<b>\$ 2,034,433</b>

<b>Employee Benefits</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1201	Retirement	\$ 31,737	\$ 90,329	\$ 122,066
1202	Worker's Compensation	5,289	15,055	20,344
1203	Health Insurance	62,400	177,593	239,993
1204	Other (Specify)	-	-	-
1205	Other (Specify)	-	-	-
1206	Other (Specify)	-	-	-
<b>Employee Benefits Subtotal:</b>		<b>\$ 99,426</b>	<b>\$ 282,977</b>	<b>\$ 382,403</b>
<b>Payroll Taxes &amp; Expenses:</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1301	OASDI	\$ 128	\$ 365	\$ 493
1302	FICA/MEDICARE	40,465	115,169	155,634
1303	SUI	2,645	7,527	10,172
1304	Other (Specify)	-	-	-
1305	Other (Specify)	-	-	-
1306	Other (Specify)	-	-	-
<b>Payroll Taxes &amp; Expenses Subtotal:</b>		<b>\$ 43,238</b>	<b>\$ 123,061</b>	<b>\$ 166,299</b>
<b>EMPLOYEE SALARIES &amp; BENEFITS TOTAL:</b>		<b>\$ 678,644</b>	<b>\$ 1,904,491</b>	<b>\$ 2,583,135</b>

<b>2000: CLIENT SUPPORT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
2001	Child Care	\$ 2,571
2002	Client Housing Support	601,800
2003	Client Transportation & Support	34,731
2004	Clothing, Food, & Hygiene	13,886
2005	Education Support	2,571
2006	Employment Support	2,571
2007	Household Items for Clients	20,429
2008	Medication Supports	487,386
2009	Program Supplies - Medical	8,400
2010	Utility Vouchers	643
2011	Other (Specify)	-
2012	Other (Specify)	-
2013	Other (Specify)	-
2014	Other (Specify)	-
2015	Other (Specify)	-
2016	Other (Specify)	-
<b>DIRECT CLIENT CARE TOTAL</b>		<b>\$ 1,174,988</b>

<b>3000: OPERATING EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
3001	Telecommunications	\$ 44,312
3002	Printing/Postage	7,520
3003	Office, Household & Program Supplies	23,000
3004	Advertising	-
3005	Staff Development & Training	11,820
3006	Staff Mileage	32,034
3007	Subscriptions & Memberships	1,230
3008	Vehicle Maintenance	-
3009	Staff Travel (Out of County)	9,802
3010	Lodging	-
3011	Other - Licenses/Taxes	29,874
3012	Other - Other Business Services	11,451
<b>OPERATING EXPENSES TOTAL:</b>		<b>\$ 171,043</b>

<b>4000: FACILITIES &amp; EQUIPMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
4001	Building Maintenance	\$ 18,528
4002	Rent/Lease Building	97,335
4003	Rent/Lease Equipment	2,650
4004	Rent/Lease Vehicles	11,453
4005	Security	-
4006	Utilities	-
4007	Minor equipment purchases and equipment repair/maintenance	21,660
4008	Other (Specify)	-
4009	Other (Specify)	-
4010	Other (Specify)	-
<b>FACILITIES/EQUIPMENT TOTAL:</b>		<b>\$ 151,626</b>



<b>5000: SPECIAL EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
5001	Consultant (Network & Data Management)	\$ -
5002	HMIS (Health Management Information System)	1,300
5003	Contractual/Consulting Services (Specify)	
5004	Translation Services	600
5005	Other (Specify)	-
5006	Other (Specify)	-
5007	Other (Specify)	-
5008	Other (Specify)	-
<b>SPECIAL EXPENSES TOTAL:</b>		<b>\$ 1,900</b>

<b>6000: ADMINISTRATIVE EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
6001	Administrative Overhead	\$ 608,914
6002	Professional Liability Insurance	-
6003	Accounting/Bookkeeping	-
6004	External Audit	200
6005	Liability Insurance	1,440
6006	Payroll Services	-
6007	Depreciation (Provider-Owned Equipment to be Used for Program Purposes)	-
6008	Other (Specify)	-
6009	Other (Specify)	-
6010	Other (Specify)	-
6011	Other (Specify)	-
6012	Other (Specify)	-
<b>ADMINISTRATIVE EXPENSES TOTAL</b>		<b>\$ 610,554</b>

<b>7000: FIXED ASSETS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
7001	Computer Equipment & Software	\$ 2,337
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	-
7003	Furniture & Fixtures	-
7004	Leasehold/Tenant/Building Improvements	-
7005	Other Assets over \$500 with Lifespan of 2 Years +	-
7006	Assets over \$5,000/unit (Specify)	-
7007	Other (Specify)	-
7008	Other (Specify)	-
<b>FIXED ASSETS EXPENSES TOTAL</b>		<b>\$ 2,337</b>

<b>TOTAL PROGRAM EXPENSES</b>		<b>\$ 4,695,583</b>
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**PROGRAM FUNDING SOURCES**

<b>8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)</b>				
<b>Acct #</b>	<b>Line Item Description</b>	<b>Service Units</b>	<b>Rate</b>	<b>Amount</b>
8001	Mental Health Services	695,631	2.46	\$ 1,709,122
8002	Case Management	345,060	1.90	655,664
8003	Crisis Services	36,936	3.73	137,756
8004	Medication Support	265,560	4.54	1,206,352
8005	Collateral	17,820	2.46	43,783
8006	Plan Development	24,300	2.46	59,703
8007	Assessment	24,300	2.46	59,703
8008	Rehabilitation	19,440	2.46	47,763
<b>Estimated Specialty Mental Health Services Billing Totals:</b>		<b>1,429,047</b>		<b>\$ 3,919,846</b>
Estimated % of Clients who are Medi-Cal Beneficiaries				74%
Estimated Total Cost of Specialty Mental Health Services Provided to Medi-Cal Beneficiaries				2,885,130
Federal Financial Participation (FFP) %			100%	2,885,130
<b>MEDI-CAL FFP TOTAL</b>				<b>\$ 2,885,130</b>

<b>8100 - SUBSTANCE USE DISORDER FUNDS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8101	Drug Medi-Cal	\$ -
8102	SABG	\$ -
<b>SUBSTANCE USE DISORDER FUNDS TOTAL</b>		<b>\$ -</b>

<b>8200 - REALIGNMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8201	Realignment	\$ 0
<b>REALIGNMENT TOTAL</b>		<b>\$ 0</b>

<b>8300 - MENTAL HEALTH SERVICE ACT (MHSA)</b>			
<b>Acct #</b>	<b>MHSA Component</b>	<b>MHSA Program Name</b>	<b>Amount</b>
8301	CSS - Community Services & Supports	Fresno FSP	\$ 1,793,453
8302	PEI - Prevention & Early Intervention		-
8303	INN - Innovations		-
8304	WET - Workforce Education & Training		-
8305	CFTN - Capital Facilities & Technology		-
<b>MHSA TOTAL</b>			<b>\$ 1,793,453</b>

<b>8400 - OTHER REVENUE</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8401	Client Fees	\$ -
8402	Client Insurance	5,000
8403	Grants (Specify)	-
8404	Client Rent Income	10,000
8405	Donations, Etc.	2,000
<b>OTHER REVENUE TOTAL</b>		<b>\$ 17,000</b>

<b>TOTAL PROGRAM FUNDING SOURCES:</b>	<b>\$ 4,695,583</b>
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**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Mental Health Systems, Inc. | Fresno FSP Program Site #2 (Optional Site)**  
**FY 2023 - 2024 | 07/01/23 - 06/30/24 Budget Narrative**

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>1000: SALARIES &amp; BENEFITS</b>		<b>2,583,135</b>	
<b>Employee Salaries</b>		<b>2,034,433</b>	
1101	Program Manager	102,274	The Program Manager is responsible for the overall operation of the program
1102	Clinical Supervisor	88,650	The Clinical Supervisor is responsible for all program clinical supervision, clinical assessment guidelines, clinical assessment guideline review, in-service training and clinical consultation with staff.
1103	Program Supervisor/Team Lead (bilingual)	84,094	The Program Supervisor/Team Lead acts as a member of a multidisciplinary team and directly provides services to clients. In addition, the Program Supervisor/Team Lead assists the Program Manager in establishing, administering and directing the MHS DART program. The Program Supervisor/Team Lead demonstrates a strong working knowledge of best practices in Assertive Community Treatment, Full-Service Partnership treatment, Intensive Case Management, bio-psychosocial rehabilitation and recovery, and outpatient treatment. Along with assisting the Program Manager, the Program Supervisor/Team Lead provides supervision to assigned staff. The bulk of client services are provided in the community.
1104	Program Supervisor/Team Lead	79,539	The Program Supervisor/Team Lead acts as a member of a multidisciplinary team and directly provides services to clients. In addition, the Program Supervisor/Team Lead assists the Program Manager in establishing, administering and directing the MHS DART program. The Program Supervisor/Team Lead demonstrates a strong working knowledge of best practices in Assertive Community Treatment, Full-Service Partnership treatment, Intensive Case Management, bio-psychosocial rehabilitation and recovery, and outpatient treatment. Along with assisting the Program Manager, the Program Supervisor/Team Lead provides supervision to assigned staff. The bulk of client services are provided in the community.
1105	Program Supervisor/Team Lead	79,539	The Program Supervisor/Team Lead acts as a member of a multidisciplinary team and directly provides services to clients. In addition, the Program Supervisor/Team Lead assists the Program Manager in establishing, administering and directing the MHS DART program. The Program Supervisor/Team Lead demonstrates a strong working knowledge of best practices in Assertive Community Treatment, Full-Service Partnership treatment, Intensive Case Management, bio-psychosocial rehabilitation and recovery, and outpatient treatment. Along with assisting the Program Manager, the Program Supervisor/Team Lead provides supervision to assigned staff. The bulk of client services are provided in the community.
1106	Clinical Case Manager (bilingual)	61,360	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.
1107	Clinical Case Manager (bilingual)	61,360	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.

PROGRAM EXPENSE				
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE	
1108	Clinical Case Manager	59,093	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.	
1109	Clinical Case Manager	59,093	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.	
1110	Clinical Case Manager	59,093	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.	
1111	Clinical Case Manager	59,093	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.	
1112	Dual Recovery Case Manager (bilingual)	61,360	The Dual Recovery Case Manager provides substance abuse education and relapse prevention strategies, and implements social model interventions in the milieu.	
1113	Dual Recovery Case Manager	59,093	The Dual Recovery Case Manager provides substance abuse education and relapse prevention strategies, and implements social model interventions in the milieu.	
1114	Dual Recovery Case Manager	59,093	The Dual Recovery Case Manager provides substance abuse education and relapse prevention strategies, and implements social model interventions in the milieu.	
1115	Employment Case Manager (bilingual)	61,360	Functions as an ACT/FSP PSC assisting clients with training for, seeking, finding, and keeping viable jobs.	
1116	Employment Case Manager	59,093	Functions as an ACT/FSP PSC assisting clients with training for, seeking, finding, and keeping viable jobs.	
1117	Employment Case Manager	59,093	Functions as an ACT/FSP PSC assisting clients with training for, seeking, finding, and keeping viable jobs.	
1118	Lead Housing Case Manager	61,360	Locate housing opportunities, coordinate and oversee various kinds of housing related agreements, assists clients in obtaining necessary documents for housing placement, coordinates appropriate housing options for clients, etc.	
1119	Housing Case Manager (bilingual)	59,093	Locate housing opportunities, coordinate and oversee various kinds of housing related agreements, assists clients in obtaining necessary documents for housing placement, coordinates appropriate housing options for clients, etc.	
1120	Housing Case Manager	56,826	Locate housing opportunities, coordinate and oversee various kinds of housing related agreements, assists clients in obtaining necessary documents for housing placement, coordinates appropriate housing options for clients, etc.	

PROGRAM EXPENSE				
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE	
1121	Peer Support Specialist (bilingual)	50,003	The Peer Support Specialist utilizes his or her experiences as a recipient of mental health and/or substance abuse services to enhance recovery efforts of clients. He or she serves as a member of a multidisciplinary team and shares practical and personal experience, knowledge and insight related to illness management, life skills, and the lifelong process of recovery. The Peer Support Specialist actively promotes greater understanding of clients' points of view and preferences.	
1122	Peer Support Specialist	47,736	The Peer Support Specialist utilizes his or her experiences as a recipient of mental health and/or substance abuse services to enhance recovery efforts of clients. He or she serves as a member of a multidisciplinary team and shares practical and personal experience, knowledge and insight related to illness management, life skills, and the lifelong process of recovery. The Peer Support Specialist actively promotes greater understanding of clients' points of view and preferences.	
1123	Peer Support Specialist	47,736	The Peer Support Specialist utilizes his or her experiences as a recipient of mental health and/or substance abuse services to enhance recovery efforts of clients. He or she serves as a member of a multidisciplinary team and shares practical and personal experience, knowledge and insight related to illness management, life skills, and the lifelong process of recovery. The Peer Support Specialist actively promotes greater understanding of clients' points of view and preferences.	
1124	Registered Nurse	86,362	The Registered Nurse is responsible for monitoring the general psychiatric and physical health of all program clients. The Registered Nurse dispenses and accounts for all medication as ordered by the Psychiatrist (Consultant).	
1125	Licensed Vocational Nurse (bilingual)	75,005	The Licensed Vocational Nurse administers medications, takes and records patients' vital signs, reports adverse reactions to medication or treatment to medical personnel in charge. The Licensed Vocational Nurse assesses ongoing symptomatology and provides crisis intervention as needed and assists clinical staff in implementing the Patient Assistance Program.	
1126	Licensed Vocational Nurse	72,738	The Licensed Vocational Nurse administers medications, takes and records patients' vital signs, reports adverse reactions to medication or treatment to medical personnel in charge. The Licensed Vocational Nurse assesses ongoing symptomatology and provides crisis intervention as needed and assists clinical staff in implementing the Patient Assistance Program.	
1127	Office Manager (Bilingual)	59,093	The Office Manager supervises the performance of assigned office staff and performs traditional administrative duties including file management, preparing correspondence, and attending to other administrative and clerical duties in support of the Program Manager, Program Supervisor/Team Lead, and professional staff.	
1128	Billing Specialist	50,003	The Billing Specialist performs data entry, report writing and record compliance, and ensures timely completion of all billing and reimbursement functions. This position also works to compile, process, and maintain medical records of clinic patients in a manner consistent with medical, administrative, ethical, legal, and regulatory requirements of the health care system.	
1129	Compliance Specialist	59,093	The Compliance Specialist develops and maintains systems to ensure appropriate documentation is completed within the program. The Compliance specialist also performs other duties, as assigned by the Program Manager to ensure overall program compliance and quality assurance within the program.	
1130	Intern	-	The Intern performs a range of psychotherapeutic and rehabilitative interventions, including psychosocial assessment, individual and group counseling, crisis intervention and limited case management duties for clients under the supervision of staff.	
1131	24/7 on-call capacity	84,094	This line allows the flexibility for assigned staff that cover crisis and 24/7 response to incur overtime above and beyond what their specific line item allows for. It is difficult to determine exactly which position will require certain levels of OT over the year.	
1132	Vice President of Clinical Services	47,728	The Vice President is responsible for the oversight and management responsibility of all assigned programs operated by MHS in a designated region including contract compliance, performance outcomes, administrative and clinical supervision, budgetary compliance, financial performance, and community outreach. This position shares allocations across several programs.	

PROGRAM EXPENSE				
	ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
	1133	Vice President of Supportive Housing	6,818	The Vice President of Supportive Housing is responsible for defining and implementing portfolio-wide acquisition, master-leasing, and rehabilitation strategies to meet current and future housing needs for clients served by the agency and is responsible for the oversight of housing funds embedded in MHS programs.
	1134	Program Financial Analyst	18,465	This position is responsible for analyzing contract cost and production data, communicating irregularities, ensuring fiscal contract compliance, preparing and submitting monthly contract billings, responding to audit requests, and other program/contract related ad hoc reporting. Other duties include budget development, budget analysis and review, preparing and reviewing contract billings, and contract compliance for assigned contracts/programs.
	1135	0	-	
	1136	0	-	
	1137	0	-	

Employee Benefits 382,403				
	1201	Retirement	122,066	Cover the cost of providing a retirement fund benefit at an estimated 6% of salaries.
	1202	Worker's Compensation	20,344	Covers the cost of workers compensation expenses at 1.0% of salaries. Actual expenses might be higher or lower based on specific worker's compensation rates per class per year.
	1203	Health Insurance	239,993	Covers the cost of medical, and dental coverage per employee @ 11.72% of total salaries
	1204	Other (Specify)	-	
	1205	Other (Specify)	-	
	1206	Other (Specify)	-	

Payroll Taxes & Expenses: 166,299				
	1301	OASDI	493	Calculating estimated expenses based on a factor of \$0.61 per employee per pay period
	1302	FICA/MEDICARE	155,634	Calculating estimated expenses based on a factor of 7.65% of salaries
	1303	SUI	10,172	Calculating estimated expenses based on a factor of 0.50% of salaries
	1304	Other (Specify)	-	
	1305	Other (Specify)	-	
	1306	Other (Specify)	-	

2000: CLIENT SUPPORT 1,174,988				
	2001	Child Care	2,571	estimated wrap expenses related to child care for clients
	2002	Client Housing Support	601,800	estimated expenses for housing support for clients
	2003	Client Transportation & Support	34,731	Cost of transporting clients by staff (mileage reimbursement or gas for vehicles) and bus passes/cards for client transportation needs.
	2004	Clothing, Food, & Hygiene	13,886	estimated expenses for food & for clothing
	2005	Education Support	2,571	estimated wrap expenses related to education support for clients
	2006	Employment Support	2,571	estimated wrap expenses related to employment support for clients
	2007	Household Items for Clients	20,429	estimated wrap expenses related to household items for clients
	2008	Medication Supports	487,386	estimated wrap expenses related to medication supports (psychiatrist) for clients - Psychiatrist service expense outside of the MHS, Inc. staff.
	2009	Program Supplies - Medical	8,400	Medical supplies that consist of miscellaneous items such as latex gloves, cotton, alcohol swipes, etc., in addition to charges for laboratory tests for clients (i.e. blood tests).
	2010	Utility Vouchers	643	estimated wrap expenses related to utility vouchers for clients
	2011	Other (Specify)	-	
	2012	Other (Specify)	-	
	2013	Other (Specify)	-	
	2014	Other (Specify)	-	
	2015	Other (Specify)	-	
	2016	Other (Specify)	-	

3000: OPERATING EXPENSES 171,043				
	3001	Telecommunications	44,312	Recurring costs of phones, cell phones, laptop data/internet device, and internet services. Also covers the monthly user fees for the VDI solution and MS Teams
	3002	Printing/Postage	7,520	Covers the cost of brochures, business cards, other program printing needs, postage and freight expenses.
	3003	Office, Household & Program Supplies	23,000	Office supplies utilized for program operation, including paper, pens, pencils, folders, staples, paper clips, printer cartridges, binders, folder tabs, client chart supplies. Housekeeping supplies such as cleaning products, bathroom products, non stationary paper goods, cleaning, and trash supplies. Recreational/occupational therapy supplies used by clients for their treatment plan.

PROGRAM EXPENSE				
	ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
	3004	Advertising	-	
	3005	Staff Development & Training	11,820	Staff development/training costs include CPR and First Aid trainings for staff, MHS course requirements (via Relias platform), and registrations for staff development and trainings held in collaboration with the program's mission (Forensic Mental Health, Evidence-based Trainings, etc.).
	3006	Staff Mileage	32,034	In-County mileage reimbursements of staff (without clients) traveling to and from events, meetings and trainings in conjunction with program operations and responsibilities. This also includes gasoline costs for leased vehicles.
	3007	Subscriptions & Memberships	1,230	Covers the estimated cost of dues to memberships that benefit the program and subscriptions to housing, employment and other periodicals that benefit the program goals.
	3008	Vehicle Maintenance	-	
	3009	Staff Travel (Out of County)	9,802	Out-of-County mileage reimbursements and/or leased vehicles gasoline, in addition to hotel, travel and flight expenses related to the attendance of conferences, training, and staff programmatic/training visits to the Corporate Office in San Diego.
	3010	Lodging	-	
	3011	Other - Licenses/Taxes	29,874	Fresno County EHR system: Avatar expenses per user based on published County rates. Department Of Motor Vehicles registration renewals. Microsoft license expense for users at the program.
	3012	Other - Other Business Services	11,451	Associated costs for hiring of new employees such as TB screenings, assessments, drug screenings, background checks, and fingerprinting. Also includes the cost of movers, HIPPA shredding costs, Monthly user fees for Common Ground Software (for client support and treatment), payee services, and other

4000: FACILITIES & EQUIPMENT			151,626	
	4001	Building Maintenance	18,528	Minor repairs and maintenance for facility including, but not limited to replacement of locks, minor breakage, internal phone line repairs, building cleaning, and other repairs required for safe operation of the program at the leased facility.
	4002	Rent/Lease Building	97,335	covers the cost of leasing a facility for operations. Also includes CAM and Utility charges through the lease agreement
	4003	Rent/Lease Equipment	2,650	covers the cost of renting a copier
	4004	Rent/Lease Vehicles	11,453	covers the cost of leasing two vehicles
	4005	Security	-	
	4006	Utilities	-	
	4007	Minor equipment purchases and equipment repair/maintenance	21,660	Equipment repairs/maintenance that encompass the cost of a maintenance contract for the copier, monitoring of internet firewall, and the repair of other equipment not covered by maintenance agreements such as computers, printers, and telephones. Also covers the cost of maintenance and registration on the leased vehicles Minor equipment replacement of existing equipment that in the normal course of use is worn out and either cannot be repaired or is not practical to have repaired.
	4008	Other (Specify)	-	
	4009	Other (Specify)	-	
	4010	Other (Specify)	-	

5000: SPECIAL EXPENSES			1,900	
	5001	Consultant (Network & Data Management)	-	
	5002	HMIS (Health Management Information)	1,300	Covers the cost of 4 users in the HMIS system
	5003	Contractual/Consulting Services (Specify)	-	
	5004	Translation Services	600	Estimated cost of providing interpreters when there isn't a bilingual staff available. Actual costs might come in higher depending on clients and their needs.
	5005	Other (Specify)	-	
	5006	Other (Specify)	-	
	5007	Other (Specify)	-	
	5008	Other (Specify)	-	

6000: ADMINISTRATIVE EXPENSES			610,554	
	6001	Administrative Overhead	608,914	Indirect/administrative expense per Federally approved Indirect Rate of 14.9%.
	6002	Professional Liability Insurance	-	
	6003	Accounting/Bookkeeping	-	
	6004	External Audit	200	Accounting fees incurred by this program, including the required Federal Office of Management and Budget (OMB-133) audit.
	6005	Liability Insurance	1,440	Covers the cost of car insurance on the leased vehicles
	6006	Payroll Services	-	

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
6007	Depreciation (Provider-Owned Equipment to be Used for Program Purposes)	-	
6008	Other (Specify)	-	
6009	Other (Specify)	-	
6010	Other (Specify)	-	
6011	Other (Specify)	-	
6012	Other (Specify)	-	

7000: FIXED ASSETS		2,337	
7001	Computer Equipment & Software	2,337	Includes estimated minor software expenses
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	-	
7003	Furniture & Fixtures	-	
7004	Leasehold/Tenant/Building Improvements	-	
7005	Other Assets over \$500 with Lifespan of 2 Years +	-	
7006	Assets over \$5,000/unit (Specify)	-	
7007	Other (Specify)	-	
7008	Other (Specify)	-	

PROGRAM FUNDING SOURCES			
8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)			
ACCT #	LINE ITEM	PROVIDE DETAILS OF METHODOLOGY(IES) USED IN DETERMINING MEDI-CAL SERVICE RATES AND/OR SERVICE UNITS, IF APPLICABLE AND/OR AS REQUIRED BY THE RFP.	
8001	Mental Health Services	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We are currently estimating approximately 60% of the funding will come from M/C eligible clients.	
8002	Case Management	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We are currently estimating approximately 60% of the funding will come from M/C eligible clients.	
8003	Crisis Services	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We are currently estimating approximately 60% of the funding will come from M/C eligible clients.	
8004	Medication Support	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We are currently estimating approximately 60% of the funding will come from M/C eligible clients.	
8005	Collateral	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We are currently estimating approximately 60% of the funding will come from M/C eligible clients.	
8006	Plan Development	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We are currently estimating approximately 60% of the funding will come from M/C eligible clients.	
8007	Assessment	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We are currently estimating approximately 60% of the funding will come from M/C eligible clients.	
8008	Rehabilitation	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We are currently estimating approximately 60% of the funding will come from M/C eligible clients.	



**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Mental Health Systems, Inc. | Fresno FSP Program Site #2 (Optional Site)**  
**FY 2024 - 2025 | 07/01/24 - 06/30/25**

**PROGRAM EXPENSES**

1000: SALARIES & BENEFITS					
Employee Salaries					
Acct #	Position	FTE	Admin	Direct	Total
1101	Program Manager	1.00	\$ 105,352	\$ -	\$ 105,352
1102	Clinical Supervisor	1.00	73,033	18,258	91,291
1103	Program Supervisor/Team Lead (bilingual)	1.00	43,306	43,306	86,611
1104	Program Supervisor/Team Lead	1.00	40,966	40,966	81,931
1105	Program Supervisor/Team Lead	1.00	40,966	40,966	81,931
1106	Clinical Case Manager (bilingual)	1.00	-	63,211	63,211
1107	Clinical Case Manager (bilingual)	1.00	-	63,211	63,211
1108	Clinical Case Manager	1.00	-	60,861	60,861
1109	Clinical Case Manager	1.00	-	60,861	60,861
1110	Clinical Case Manager	1.00	-	60,861	60,861
1111	Clinical Case Manager	1.00	-	60,861	60,861
1112	Dual Recovery Case Manager (bilingual)	1.00	-	63,211	63,211
1113	Dual Recovery Case Manager	1.00	-	60,861	60,861
1114	Dual Recovery Case Manager	1.00	-	60,861	60,861
1115	Employment Case Manager (bilingual)	1.00	-	63,211	63,211
1116	Employment Case Manager	1.00	-	60,861	60,861
1117	Employment Case Manager	1.00	-	60,861	60,861
1118	Lead Housing Case Manager	1.00	-	63,211	63,211
1119	Housing Case Manager (bilingual)	1.00	-	60,861	60,861
1120	Housing Case Manager	1.00	-	58,531	58,531
1121	Peer Support Specialist (bilingual)	1.00	-	51,501	51,501
1122	Peer Support Specialist	1.00	-	49,171	49,171
1123	Peer Support Specialist	1.00	-	49,171	49,171
1124	Registered Nurse	1.00	-	88,962	88,962
1125	Licensed Vocational Nurse (bilingual)	1.00	-	77,251	77,251
1126	Licensed Vocational Nurse	1.00	-	74,922	74,922
1127	Office Manager (Bilingual)	1.00	60,861	-	60,861
1128	Billing Specialist	1.00	51,501	-	51,501
1129	Compliance Specialist	1.00	60,861	-	60,861
1130	Intern	3.00	-	-	-
1131	24/7 on-call capacity	1.00	-	86,611	86,611
1132	Vice President of Clinical Services	0.35	49,162	-	49,162
1133	Vice President of Supportive Housing	0.05	7,023	-	7,023
1134	Program Financial Analyst	0.25	19,022	-	19,022
1135			-	-	-
1136			-	-	-
1137			-	-	-
<b>Personnel Salaries Subtotal</b>		<b>33.65</b>	<b>\$ 552,051</b>	<b>\$ 1,543,419</b>	<b>\$ 2,095,470</b>

<b>Employee Benefits</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1201	Retirement	\$ 32,689	\$ 93,039	\$ 125,728
1202	Worker's Compensation	5,448	15,507	20,955
1203	Health Insurance	64,272	182,924	247,196
1204	Other (Specify)	-	-	-
1205	Other (Specify)	-	-	-
1206	Other (Specify)	-	-	-
<b>Employee Benefits Subtotal:</b>		<b>\$ 102,409</b>	<b>\$ 291,470</b>	<b>\$ 393,879</b>
<b>Payroll Taxes &amp; Expenses:</b>				
<b>Acct #</b>	<b>Description</b>	<b>Admin</b>	<b>Direct</b>	<b>Total</b>
1301	OASDI	\$ 128	\$ 365	\$ 493
1302	FICA/MEDICARE	41,679	118,624	160,303
1303	SUI	2,724	7,753	10,477
1304	Other (Specify)	-	-	-
1305	Other (Specify)	-	-	-
1306	Other (Specify)	-	-	-
<b>Payroll Taxes &amp; Expenses Subtotal:</b>		<b>\$ 44,531</b>	<b>\$ 126,742</b>	<b>\$ 171,273</b>
<b>EMPLOYEE SALARIES &amp; BENEFITS TOTAL:</b>		<b>\$ 698,991</b>	<b>\$ 1,961,631</b>	<b>\$ 2,660,622</b>

<b>2000: CLIENT SUPPORT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
2001	Child Care	\$ 2,571
2002	Client Housing Support	601,800
2003	Client Transportation & Support	34,731
2004	Clothing, Food, & Hygiene	13,886
2005	Education Support	2,571
2006	Employment Support	2,571
2007	Household Items for Clients	20,429
2008	Medication Supports	487,386
2009	Program Supplies - Medical	8,400
2010	Utility Vouchers	643
2011	Other (Specify)	-
2012	Other (Specify)	-
2013	Other (Specify)	-
2014	Other (Specify)	-
2015	Other (Specify)	-
2016	Other (Specify)	-
<b>DIRECT CLIENT CARE TOTAL</b>		<b>\$ 1,174,988</b>

<b>3000: OPERATING EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
3001	Telecommunications	\$ 44,312
3002	Printing/Postage	7,520
3003	Office, Household & Program Supplies	23,000
3004	Advertising	-
3005	Staff Development & Training	11,820
3006	Staff Mileage	32,034
3007	Subscriptions & Memberships	1,230
3008	Vehicle Maintenance	-
3009	Staff Travel (Out of County)	9,802
3010	Lodging	-
3011	Other - Licenses/Taxes	29,874
3012	Other - Other Business Services	11,531
<b>OPERATING EXPENSES TOTAL:</b>		<b>\$ 171,123</b>

<b>4000: FACILITIES &amp; EQUIPMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
4001	Building Maintenance	\$ 18,528
4002	Rent/Lease Building	106,360
4003	Rent/Lease Equipment	2,650
4004	Rent/Lease Vehicles	11,453
4005	Security	-
4006	Utilities	-
4007	Minor equipment purchases and equipment repair/maintenance	21,660
4008	Other (Specify)	-
4009	Other (Specify)	-
4010	Other (Specify)	-
<b>FACILITIES/EQUIPMENT TOTAL:</b>		<b>\$ 160,651</b>

<b>5000: SPECIAL EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
5001	Consultant (Network & Data Management)	\$ -
5002	HMIS (Health Management Information System)	1,300
5003	Contractual/Consulting Services (Specify)	
5004	Translation Services	600
5005	Other (Specify)	-
5006	Other (Specify)	-
5007	Other (Specify)	-
5008	Other (Specify)	-
<b>SPECIAL EXPENSES TOTAL:</b>		<b>\$ 1,900</b>

<b>6000: ADMINISTRATIVE EXPENSES</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
6001	Administrative Overhead	\$ 621,816
6002	Professional Liability Insurance	-
6003	Accounting/Bookkeeping	-
6004	External Audit	200
6005	Liability Insurance	1,440
6006	Payroll Services	-
6007	Depreciation (Provider-Owned Equipment to be Used for Program Purposes)	-
6008	Other (Specify)	-
6009	Other (Specify)	-
6010	Other (Specify)	-
6011	Other (Specify)	-
6012	Other (Specify)	-
<b>ADMINISTRATIVE EXPENSES TOTAL</b>		<b>\$ 623,456</b>

<b>7000: FIXED ASSETS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
7001	Computer Equipment & Software	\$ 2,337
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	-
7003	Furniture & Fixtures	-
7004	Leasehold/Tenant/Building Improvements	-
7005	Other Assets over \$500 with Lifespan of 2 Years +	-
7006	Assets over \$5,000/unit (Specify)	-
7007	Other (Specify)	-
7008	Other (Specify)	-
<b>FIXED ASSETS EXPENSES TOTAL</b>		<b>\$ 2,337</b>

<b>TOTAL PROGRAM EXPENSES</b>		<b>\$ 4,795,077</b>
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**PROGRAM FUNDING SOURCES**

<b>8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)</b>				
<b>Acct #</b>	<b>Line Item Description</b>	<b>Service Units</b>	<b>Rate</b>	<b>Amount</b>
8001	Mental Health Services	695,630	2.51	\$ 1,745,981
8002	Case Management	345,060	1.94	669,807
8003	Crisis Services	36,936	3.81	140,728
8004	Medication Support	265,560	4.64	1,232,374
8005	Collateral	17,820	2.51	44,727
8006	Plan Development	24,300	2.51	60,991
8007	Assessment	24,300	2.51	60,991
8008	Rehabilitation	19,440	2.51	48,793
<b>Estimated Specialty Mental Health Services Billing Totals:</b>		<b>1,429,046</b>		<b>\$ 4,004,393</b>
Estimated % of Clients who are Medi-Cal Beneficiaries				75%
Estimated Total Cost of Specialty Mental Health Services Provided to Medi-Cal Beneficiaries				2,984,624
Federal Financial Participation (FFP) %			100%	2,984,624
<b>MEDI-CAL FFP TOTAL</b>				<b>\$ 2,984,624</b>

<b>8100 - SUBSTANCE USE DISORDER FUNDS</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8101	Drug Medi-Cal	\$ -
8102	SABG	\$ -
<b>SUBSTANCE USE DISORDER FUNDS TOTAL</b>		<b>\$ -</b>

<b>8200 - REALIGNMENT</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8201	Realignment	\$ 0
<b>REALIGNMENT TOTAL</b>		<b>\$ 0</b>

<b>8300 - MENTAL HEALTH SERVICE ACT (MHSA)</b>			
<b>Acct #</b>	<b>MHSA Component</b>	<b>MHSA Program Name</b>	<b>Amount</b>
8301	CSS - Community Services & Supports	Fresno FSP	\$ 1,793,453
8302	PEI - Prevention & Early Intervention		-
8303	INN - Innovations		-
8304	WET - Workforce Education & Training		-
8305	CFTN - Capital Facilities & Technology		-
<b>MHSA TOTAL</b>			<b>\$ 1,793,453</b>

<b>8400 - OTHER REVENUE</b>		
<b>Acct #</b>	<b>Line Item Description</b>	<b>Amount</b>
8401	Client Fees	\$ -
8402	Client Insurance	5,000
8403	Grants (Specify)	-
8404	Client Rent Income	10,000
8405	Donations, Etc.	2,000
<b>OTHER REVENUE TOTAL</b>		<b>\$ 17,000</b>

**TOTAL PROGRAM FUNDING SOURCES: \$ 4,795,077**

**ADULT FULL SERVICE PARTNERSHIP PROGRAM**  
**Mental Health Systems, Inc. | Fresno FSP Program Site #2 (Optional Site)**  
**FY 2024 - 2025 | 07/01/24 - 06/30/25 Budget Narrative**

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
<b>1000: SALARIES &amp; BENEFITS</b>		<b>2,660,622</b>	
<b>Employee Salaries</b>		<b>2,095,470</b>	
1101	Program Manager	105,352	The Program Manager is responsible for the overall operation of the program
1102	Clinical Supervisor	91,291	The Clinical Supervisor is responsible for all program clinical supervision, clinical assessment guidelines, clinical assessment guideline review, in-service training and clinical consultation with staff.
1103	Program Supervisor/Team Lead (bilingual)	86,611	The Program Supervisor/Team Lead acts as a member of a multidisciplinary team and directly provides services to clients. In addition, the Program Supervisor/Team Lead assists the Program Manager in establishing, administering and directing the MHS DART program. The Program Supervisor/Team Lead demonstrates a strong working knowledge of best practices in Assertive Community Treatment, Full-Service Partnership treatment, Intensive Case Management, bio-psychosocial rehabilitation and recovery, and outpatient treatment. Along with assisting the Program Manager, the Program Supervisor/Team Lead provides supervision to assigned staff. The bulk of client services are provided in the community.
1104	Program Supervisor/Team Lead	81,931	The Program Supervisor/Team Lead acts as a member of a multidisciplinary team and directly provides services to clients. In addition, the Program Supervisor/Team Lead assists the Program Manager in establishing, administering and directing the MHS DART program. The Program Supervisor/Team Lead demonstrates a strong working knowledge of best practices in Assertive Community Treatment, Full-Service Partnership treatment, Intensive Case Management, bio-psychosocial rehabilitation and recovery, and outpatient treatment. Along with assisting the Program Manager, the Program Supervisor/Team Lead provides supervision to assigned staff. The bulk of client services are provided in the community.
1105	Program Supervisor/Team Lead	81,931	The Program Supervisor/Team Lead acts as a member of a multidisciplinary team and directly provides services to clients. In addition, the Program Supervisor/Team Lead assists the Program Manager in establishing, administering and directing the MHS DART program. The Program Supervisor/Team Lead demonstrates a strong working knowledge of best practices in Assertive Community Treatment, Full-Service Partnership treatment, Intensive Case Management, bio-psychosocial rehabilitation and recovery, and outpatient treatment. Along with assisting the Program Manager, the Program Supervisor/Team Lead provides supervision to assigned staff. The bulk of client services are provided in the community.
1106	Clinical Case Manager (bilingual)	63,211	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.
1107	Clinical Case Manager (bilingual)	63,211	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
1108	Clinical Case Manager	60,861	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.
1109	Clinical Case Manager	60,861	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.
1110	Clinical Case Manager	60,861	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.
1111	Clinical Case Manager	60,861	The Clinical Case Manager provides psychosocial rehabilitation individual and group services to assist clients with mental health and substance use disorders accessing needed medical, educational, social, prevocational, vocational, housing, or other community services. The focus is on supporting treatment and recovery goals, and making connections for clients, such as linking to community resources, initiating referrals to the next level of care, and coordinating with physical health providers to ensure whole person health service delivery. Clinical Case Managers advocate for clients in their best interest and communicate with State, County and community service partners, including Health and Human Services, Behavioral Health, Justice System, Probation, Courts, and Housing providers.
1112	Dual Recovery Case Manager (bilingual)	63,211	The Dual Recovery Case Manager provides substance abuse education and relapse prevention strategies, and implements social model interventions in the milieu.
1113	Dual Recovery Case Manager	60,861	The Dual Recovery Case Manager provides substance abuse education and relapse prevention strategies, and implements social model interventions in the milieu.
1114	Dual Recovery Case Manager	60,861	The Dual Recovery Case Manager provides substance abuse education and relapse prevention strategies, and implements social model interventions in the milieu.
1115	Employment Case Manager (bilingual)	63,211	Functions as an ACT/FSP PSC assisting clients with training for, seeking, finding, and keeping viable jobs.
1116	Employment Case Manager	60,861	Functions as an ACT/FSP PSC assisting clients with training for, seeking, finding, and keeping viable jobs.
1117	Employment Case Manager	60,861	Functions as an ACT/FSP PSC assisting clients with training for, seeking, finding, and keeping viable jobs.
1118	Lead Housing Case Manager	63,211	Locate housing opportunities, coordinate and oversee various kinds of housing related agreements, assists clients in obtaining necessary documents for housing placement, coordinates appropriate housing options for clients, etc.
1119	Housing Case Manager (bilingual)	60,861	Locate housing opportunities, coordinate and oversee various kinds of housing related agreements, assists clients in obtaining necessary documents for housing placement, coordinates appropriate housing options for clients, etc.

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
1120	Housing Case Manager	58,531	Locate housing opportunities, coordinate and oversee various kinds of housing related agreements, assists clients in obtaining necessary documents for housing placement, coordinates appropriate housing options for clients, etc.
1121	Peer Support Specialist (bilingual)	51,501	The Peer Support Specialist utilizes his or her experiences as a recipient of mental health and/or substance abuse services to enhance recovery efforts of clients. He or she serves as a member of a multidisciplinary team and shares practical and personal experience, knowledge and insight related to illness management, life skills, and the lifelong process of recovery. The Peer Support Specialist actively promotes greater understanding of clients' points of view and preferences.
1122	Peer Support Specialist	49,171	The Peer Support Specialist utilizes his or her experiences as a recipient of mental health and/or substance abuse services to enhance recovery efforts of clients. He or she serves as a member of a multidisciplinary team and shares practical and personal experience, knowledge and insight related to illness management, life skills, and the lifelong process of recovery. The Peer Support Specialist actively promotes greater understanding of clients' points of view and preferences.
1123	Peer Support Specialist	49,171	The Peer Support Specialist utilizes his or her experiences as a recipient of mental health and/or substance abuse services to enhance recovery efforts of clients. He or she serves as a member of a multidisciplinary team and shares practical and personal experience, knowledge and insight related to illness management, life skills, and the lifelong process of recovery. The Peer Support Specialist actively promotes greater understanding of clients' points of view and preferences.
1124	Registered Nurse	88,962	The Registered Nurse is responsible for monitoring the general psychiatric and physical health of all program clients. The Registered Nurse dispenses and accounts for all medication as ordered by the Psychiatrist (Consultant).
1125	Licensed Vocational Nurse (bilingual)	77,251	The Licensed Vocational Nurse administers medications, takes and records patients' vital signs, reports adverse reactions to medication or treatment to medical personnel in charge. The Licensed Vocational Nurse assesses ongoing symptomatology and provides crisis intervention as needed and assists clinical staff in implementing the Patient Assistance Program.
1126	Licensed Vocational Nurse	74,922	The Licensed Vocational Nurse administers medications, takes and records patients' vital signs, reports adverse reactions to medication or treatment to medical personnel in charge. The Licensed Vocational Nurse assesses ongoing symptomatology and provides crisis intervention as needed and assists clinical staff in implementing the Patient Assistance Program.
1127	Office Manager (Bilingual)	60,861	The Office Manager supervises the performance of assigned office staff and performs traditional administrative duties including file management, preparing correspondence, and attending to other administrative and clerical duties in support of the Program Manager, Program Supervisor/Team Lead, and professional staff.
1128	Billing Specialist	51,501	The Billing Specialist performs data entry, report writing and record compliance, and ensures timely completion of all billing and reimbursement functions. This position also works to compile, process, and maintain medical records of clinic patients in a manner consistent with medical, administrative, ethical, legal, and regulatory requirements of the health care system.
1129	Compliance Specialist	60,861	The Compliance Specialist develops and maintains systems to ensure appropriate documentation is completed within the program. The Compliance specialist also performs other duties, as assigned by the Program Manager to ensure overall program compliance and quality assurance within the program.
1130	Intern	-	The Intern performs a range of psychotherapeutic and rehabilitative interventions, including psychosocial assessment, individual and group counseling, crisis intervention and limited case management duties for clients under the supervision of staff.
1131	24/7 on-call capacity	86,611	This line allows the flexibility for assigned staff that cover crisis and 24/7 response to incur overtime above and beyond what their specific line item allows for. It is difficult to determine exactly which position will require certain levels of OT over the year.
1132	Vice President of Clinical Services	49,162	The Vice President is responsible for the oversight and management responsibility of all assigned programs operated by MHS in a designated region including contract compliance, performance outcomes, administrative and clinical supervision, budgetary compliance, financial performance, and community outreach. This position shares allocations across several programs.



PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
1133	Vice President of Supportive Housing	7,023	The Vice President of Supportive Housing is responsible for defining and implementing portfolio-wide acquisition, master-leasing, and rehabilitation strategies to meet current and future housing needs for clients served by the agency and is responsible for the oversight of housing funds embedded in MHS programs.
1134	Program Financial Analyst	19,022	This position is responsible for analyzing contract cost and production data, communicating irregularities, ensuring fiscal contract compliance, preparing and submitting monthly contract billings, responding to audit requests, and other program/contract related ad hoc reporting. Other duties include budget development, budget analysis and review, preparing and reviewing contract billings, and contract compliance for assigned contracts/programs.
1135	0	-	
1136	0	-	
1137	0	-	
<b>Employee Benefits</b>		<b>393,879</b>	
1201	Retirement	125,728	Cover the cost of providing a retirement fund benefit at an estimated 6% of salaries.
1202	Worker's Compensation	20,955	Covers the cost of workers compensation expenses at 1.0% of salaries. Actual expenses might be higher or lower based on specific worker's compensation rates per class per year.
1203	Health Insurance	247,196	Covers the cost of medical, and dental coverage per employee @ 11.72% of total salaries
1204	Other (Specify)	-	
1205	Other (Specify)	-	
1206	Other (Specify)	-	
<b>Payroll Taxes &amp; Expenses:</b>		<b>171,273</b>	
1301	OASDI	493	Calculating estimated expenses based on a factor of \$0.61 per employee per pay period
1302	FICA/MEDICARE	160,303	Calculating estimated expenses based on a factor of 7.65% of salaries
1303	SUI	10,477	Calculating estimated expenses based on a factor of 0.50% of salaries
1304	Other (Specify)	-	
1305	Other (Specify)	-	
1306	Other (Specify)	-	
<b>2000: CLIENT SUPPORT</b>		<b>1,174,988</b>	
2001	Child Care	2,571	estimated wrap expenses related to child care for clients
2002	Client Housing Support	601,800	estimated expenses for housing support for clients
2003	Client Transportation & Support	34,731	Cost of transporting clients by staff (mileage reimbursement or gas for vehicles) and bus passes/cards for client transportation needs.
2004	Clothing, Food, & Hygiene	13,886	estimated expenses for food & for clothing
2005	Education Support	2,571	estimated wrap expenses related to education support for clients
2006	Employment Support	2,571	estimated wrap expenses related to employment support for clients
2007	Household Items for Clients	20,429	estimated wrap expenses related to household items for clients
2008	Medication Supports	487,386	estimated wrap expenses related to medication supports (psychiatrist) for clients - Psychiatrist service expense outside of the MHS, Inc. staff.
2009	Program Supplies - Medical	8,400	Medical supplies that consist of miscellaneous items such as latex gloves, cotton, alcohol swipes, etc., in addition to charges for laboratory tests for clients (i.e. blood tests).
2010	Utility Vouchers	643	estimated wrap expenses related to utility vouchers for clients
2011	Other (Specify)	-	
2012	Other (Specify)	-	
2013	Other (Specify)	-	
2014	Other (Specify)	-	
2015	Other (Specify)	-	
2016	Other (Specify)	-	
<b>3000: OPERATING EXPENSES</b>		<b>171,123</b>	
3001	Telecommunications	44,312	Recurring costs of phones, cell phones, laptop data/internet device, and internet services. Also covers the monthly user fees for the VDI solution and MS Teams
3002	Printing/Postage	7,520	Covers the cost of brochures, business cards, other program printing needs, postage and freight expenses.

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
3003	Office, Household & Program Supplies	23,000	Office supplies utilized for program operation, including paper, pens, pencils, folders, staples, paper clips, printer cartridges, binders, folder tabs, client chart supplies. Housekeeping supplies such as cleaning products, bathroom products, non stationary paper goods, cleaning, and trash supplies. Recreational/occupational therapy supplies used by clients for their treatment plan.
3004	Advertising	-	
3005	Staff Development & Training	11,820	Staff development/training costs include CPR and First Aid trainings for staff, MHS course requirements (via Relias platform), and registrations for staff development and trainings held in collaboration with the program's mission (Forensic Mental Health, Evidence-based Trainings, etc.).
3006	Staff Mileage	32,034	In-County mileage reimbursements of staff (without clients) traveling to and from events, meetings and trainings in conjunction with program operations and responsibilities. This also includes gasoline costs for leased vehicles.
3007	Subscriptions & Memberships	1,230	Covers the estimated cost of dues to memberships that benefit the program and subscriptions to housing, employment and other periodicals that benefit the program goals.
3008	Vehicle Maintenance	-	
3009	Staff Travel (Out of County)	9,802	Out-of-County mileage reimbursements and/or leased vehicles gasoline, in addition to hotel, travel and flight expenses related to the attendance of conferences, training, and staff programmatic/training visits to the Corporate Office in San Diego.
3010	Lodging	-	
3011	Other - Licenses/Taxes	29,874	Fresno County EHR system: Avatar expenses per user based on published County rates. Department Of Motor Vehicles registration renewals. Microsoft license expense for users at the program.
3012	Other - Other Business Services	11,531	Associated costs for hiring of new employees such as TB screenings, assessments, drug screenings, background checks, and fingerprinting. Also includes the cost of movers, HIPPA shredding costs, Monthly user fees for Common Ground Software (for client support and treatment), payee services, and other

4000: FACILITIES & EQUIPMENT		160,651	
4001	Building Maintenance	18,528	Minor repairs and maintenance for facility including, but not limited to replacement of locks, minor breakage, internal phone line repairs, building cleaning, and other repairs required for safe operation of the program at the leased facility.
4002	Rent/Lease Building	106,360	covers the cost of leasing a facility for operations. Also includes CAM and Utility charges through the lease agreement
4003	Rent/Lease Equipment	2,650	covers the cost of renting a copier
4004	Rent/Lease Vehicles	11,453	covers the cost of leasing two vehicles
4005	Security	-	
4006	Utilities	-	
4007	Minor equipment purchases and equipment repair/maintenance	21,660	Equipment repairs/maintenance that encompass the cost of a maintenance contract for the copier, monitoring of internet firewall, and the repair of other equipment not covered by maintenance agreements such as computers, printers, and telephones. Also covers the cost of maintenance and registration on the leased vehicles Minor equipment replacement of existing equipment that in the normal course of use is worn out and either cannot be repaired or is not practical to have repaired.
4008	Other (Specify)	-	
4009	Other (Specify)	-	
4010	Other (Specify)	-	

5000: SPECIAL EXPENSES		1,900	
5001	Consultant (Network & Data Management)	-	
5002	HMIS (Health Management Information System)	1,300	Covers the cost of 4 users in the HMIS system
5003	Contractual/Consulting Services (Specify)	-	
5004	Translation Services	600	Estimated cost of providing interpreters when there isn't a bilingual staff available. Actual costs might come in higher depending on clients and their needs.
5005	Other (Specify)	-	

PROGRAM EXPENSE			
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
5006	Other (Specify)	-	
5007	Other (Specify)	-	
5008	Other (Specify)	-	

6000: ADMINISTRATIVE EXPENSES		623,456	
6001	Administrative Overhead	621,816	Indirect/administrative expense per Federally approved Indirect Rate of 14.9%.
6002	Professional Liability Insurance	-	
6003	Accounting/Bookkeeping	-	
6004	External Audit	200	Accounting fees incurred by this program, including the required Federal Office of Management and Budget (OMB-133) audit.
6005	Liability Insurance	1,440	Covers the cost of car insurance on the leased vehicles
6006	Payroll Services	-	
6007	Depreciation (Provider-Owned Equipment to be Used for Program Purposes)	-	
6008	Other (Specify)	-	
6009	Other (Specify)	-	
6010	Other (Specify)	-	
6011	Other (Specify)	-	
6012	Other (Specify)	-	

7000: FIXED ASSETS		2,337	
7001	Computer Equipment & Software	2,337	Includes estimated minor software expenses
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	-	
7003	Furniture & Fixtures	-	
7004	Leasehold/Tenant/Building Improvements	-	
7005	Other Assets over \$500 with Lifespan of 2 Years +	-	
7006	Assets over \$5,000/unit (Specify)	-	
7007	Other (Specify)	-	
7008	Other (Specify)	-	

PROGRAM FUNDING SOURCES			
8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)			
ACCT #	LINE ITEM	PROVIDE DETAILS OF METHODOLOGY(IES) USED IN DETERMINING MEDI-CAL SERVICE RATES AND/OR SERVICE UNITS, IF APPLICABLE AND/OR AS REQUIRED BY THE RFP.	
8001	Mental Health Services	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We are currently estimating approximately 60% of the funding will come from M/C eligible clients.	
8002	Case Management	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We are currently estimating approximately 60% of the funding will come from M/C eligible clients.	
8003	Crisis Services	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We are currently estimating approximately 60% of the funding will come from M/C eligible clients.	
8004	Medication Support	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We are currently estimating approximately 60% of the funding will come from M/C eligible clients.	
8005	Collateral	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We are currently estimating approximately 60% of the funding will come from M/C eligible clients.	
8006	Plan Development	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We are currently estimating approximately 60% of the funding will come from M/C eligible clients.	
8007	Assessment	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We are currently estimating approximately 60% of the funding will come from M/C eligible clients.	
8008	Rehabilitation	Service delivery value (minutes x rates) for Medi-Cal beneficiaries and Medi-Cal allowed services. We are currently estimating approximately 60% of the funding will come from M/C eligible clients.	

**ELECTRONIC HEALTH RECORD SOFTWARE CHARGES**

CONTRACTOR(S) understand that COUNTY utilizes NetSmart’s Avatar for its Electronic Health Records Management. CONTRACTOR(S) agree to reimburse COUNTY for all user license fees for accessing NetSmart’s Avatar, as set forth below.

Description	FY 2020-21	FY 2021-22	FY 2022-23	FY 2023-24	FY 2024-25
<b>General Users</b>					
<b>Avatar Named User Hosting</b> (per active user per month; every Avatar “active” log on ID is a named user)	\$37.00	\$37.00	\$37.00	\$37.00	\$37.00
<b>Avatar Named User Maintenance*</b> (per active user per month)	\$14.00	\$14.42	\$14.85	\$15.30	\$15.76
<b>Cloud Hosting- Perceptive Disaster Recovery</b> (per active user per month)	\$4.66	\$4.66	\$4.66	\$4.66	\$4.66
<b>eRx Users</b>					
<b>Full Suite Prescriber</b> (per active user per month; applicable to an active Prescriber user)	\$104.00	\$104.00	\$104.00	\$104.00	\$104.00
<b>ePrescribing Controlled Substances Tokens</b> (per active user per month; applicable to an active Prescriber user of Controlled Substances)	\$8.00	\$8.00	\$8.00	\$8.00	\$8.00
<b>Non-Prescribing User</b> (per active user per month; applicable to an active Non-Prescriber user)	\$13.00	\$13.00	\$13.00	\$13.00	\$13.00
<b>Reaching Recovery Users</b>					
<b>Reaching Recovery</b> (per adult client/person served per year; applicable to adult treatment programs except contracted triage/CI, CSU or PHF)	\$10.00	\$10.00	\$10.00	\$10.00	\$10.00
<b>ProviderConnect Users</b>					
<b>Individual Subscription<sup>1</sup></b> (per user per month; applicable to provider-user whose claims are reviewed and posted by Managed Care)	\$41.25	\$41.25	\$41.25	\$41.25	\$41.25

Should CONTRACTOR(S) choose not to utilize NetSmart’s Avatar for its Electronic Health Records management, CONTRACTOR(S) will be responsible for obtaining its own system for Electronic Health Records management.

<sup>1</sup>Annual Maintenance increases by 3% each FY on July 1<sup>st</sup> and may be subject to change pending the COUNTY’s agreement terms with NetSmart.



# Department of Behavioral Health

## Policy and Procedure Guide

PPG 1.3.4 V#: 3

**Section:** Administration

**Effective Date:** 08/01/2004

**Revised Date:** 11/28/2018

**Policy Title:** Code of Conduct

Approved by: Dawan Utecht (Director of Behavioral Health), Elizabeth Vasquez (Compliance Officer)

### **POLICY:**

Fresno County is firmly committed to full compliance with all applicable laws, regulations, rules, and guidelines that apply to its behavioral health operations and services. At the core of this commitment are Fresno County's employees, contractors (including contractor's employees/subcontractors), volunteers and students, also referred to as "Covered Persons", and the manner in which they conduct themselves. To assure that Fresno County's commitment is shared by all Covered Persons, this Code of Conduct (the "Code") has been established. All Covered Persons will be required to acknowledge and certify their compliance with this Code.

### **PURPOSE:**

To provide specific conduct standards prescribed by the Fresno County Mental Health Plan/Drug Medi-Cal Organized Delivery System (DMC-ODS) Compliance Program designed to detect and prevent fraud, waste, and abuse. This Code of Conduct is maintained in addition to the County's Code of Ethics already in effect.

### **REFERENCE:**

Fresno County Department of Behavioral Health Compliance Plan; 42 CFR 438.608.

### **DEFINITIONS:**

**Covered Persons** – All employees, contractors (including contractor's employees and subcontractors), volunteers, interns, and students working in behavioral health programs.

**Excluded/Ineligible Person** – Any Covered Person who is or may become suspended, excluded, or ineligible from participation in any Federal healthcare program.

### **PROCEDURE:**

- I. A copy of the Code of Conduct (Attachment I) will be provided to all Covered Persons at the time of their initial compliance training which must be provided within 30 business days of hire or contract effective date. This Code will also be provided during the annual General Compliance training or within 30 business days after any revision is finalized.
- II. Upon initial receipt and review of the Code, Covered Persons shall certify their intention to abide with it by signing the Acknowledgement and Agreement form,

#### **MISSION STATEMENT**

DBH, in partnership with our diverse community, is dedicated to providing quality, culturally responsive behavioral health services to promote wellness, recovery, and resiliency for individuals and families in our community.

Template Review Date 11/29/18



## Department of Behavioral Health Policy and Procedure Guide

Section: Administration

Revised Date: 11/28/2018

PPG 1.3.4 V#: 3

### Policy Title: Code of Conduct

which is provided by the Compliance Office at the time of training. The Compliance Office will retain these signed forms. Covered Persons shall certify within 30 business days after distribution of a revised Code.

- III. The Compliance Office will track these certifications and regularly report to the Compliance Committee and the Director of the Department of Behavioral Health regarding progress towards 100% certification by all Covered Persons.
- IV. The Code will be prominently posted in all Fresno County facilities and Behavioral Health Contractor sites.
- V. This Code is not intended to be an exhaustive list of all standards by which Covered Persons are to be governed. Rather, it is intended to convey the County's commitment to the high standards set forth by the County.

**Fresno County Mental Health Plan - (Attachment I)  
Compliance Program**

CODE OF CONDUCT:

All Fresno County Behavioral/Mental Health Employees, Contractors (including Contractor's Employees/Subcontractors), Volunteers and Students will:

1. Read, acknowledge, and abide by this Code of Conduct.
2. Be responsible for reviewing and understanding Compliance Program policies and procedures including the possible consequences for failure to comply or failure to report such non-compliance.
3. NOT engage in any activity in violation of the County's Compliance Program, nor engage in any other conduct which violates any applicable law, regulation, rule, or guideline. Conduct yourself honestly, fairly, courteously, and with a high degree of integrity in your professional dealings related to their employment/contract with the County and avoid any conduct that could reasonably be expected to reflect adversely upon the integrity of the County and the services it provides.
4. Practice good faith in transactions occurring during the course of business and never use or exploit professional relationships or confidential information for personal purposes.
5. Promptly report any activity or suspected violation of this Code of Conduct, the policies and procedures of the County, the Compliance Program, or any other applicable law, regulation, rule or guideline. All reports may be made anonymously. Fresno County prohibits retaliation against any person making a report. Any person engaging in any form of retaliation will be subject to disciplinary or other appropriate action by the County.
6. Comply with not only the letter of Compliance Program and mental health policies and procedures, but also with the spirit of those policies and procedures as well as other rules or guidelines adopted by the County. Consult with your supervisor or the Compliance Office regarding any Compliance Program standard or other applicable law, regulation, rule or guideline.
7. Comply with all laws governing the confidentiality and privacy of information. Protect and retain records and documents as required by County contract/standards, professional standards, governmental regulations, or organizational policies.
8. Comply with all applicable laws, regulations, rules, guidelines, and County policies and procedures when providing and billing mental health services. Bill only for eligible services actually rendered and fully documented. Use billing codes that accurately describe the services provided. Ensure that no false, fraudulent, inaccurate, or fictitious claims for payment or reimbursement of any kind are prepared or submitted. Ensure that claims are prepared and submitted accurately and timely and are consistent with all applicable laws, regulations, rules and guidelines. Act promptly to investigate and correct problems if errors in claims or billings are discovered.
9. Immediately notify your supervisor, Department Head, Administrator, or the Compliance Office if you become or may become an Ineligible/Excluded Person and therefore excluded from participation in the Federal health care programs.

Documentation Standards for Client Records

The documentation standards are described below under key topics related to client care. All standards must be addressed in the client record; however, there is no requirement that the record have a specific document or section addressing these topics. All medical records shall be maintained for a minimum of 10 years from the date of the end of the Agreement.

A. Assessments

1. The following areas will be included as appropriate as a part of a comprehensive client record.
  - Relevant physical health conditions reported by the client will be prominently identified and updated as appropriate.
  - Presenting problems and relevant conditions affecting the client's physical health and mental health status will be documented, for example: living situation, daily activities, and social support.
  - Documentation will describe client's strengths in achieving client plan goals.
  - Special status situations that present a risk to clients or others will be prominently documented and updated as appropriate.
  - Documentations will include medications that have been described by mental health plan physicians, dosage of each medication, dates of initial prescriptions and refills, and documentations of informed consent for medications.
  - Client self-report of allergies and adverse reactions to medications, or lack of known allergies/sensitivities will be clearly documented.
  - A mental health history will be documented, including: previous treatment dates, providers, therapeutic interventions and responses, sources of clinical data, relevant family information and relevant results of relevant lab tests and consultations reports.
  - For children and adolescents, pre-natal and perinatal events and complete developmental history will be documented.
  - Documentations will include past and present use of tobacco, alcohol, and caffeine, as well as illicit, prescribed and over-the-counter drugs.
  - A relevant mental status examination will be documented.
  - A DSM-5 diagnosis, or a diagnosis from the most current ICD, will be documented, consistent with the presenting problems, history mental status evaluation and/or other assessment data.



2. Timeliness/Frequency Standard for Assessment

- An assessment will be completed at intake and updated as needed to document changes in the client's condition.
- Client conditions will be assessed at least annually and, in most cases, at more frequent intervals.

B. Client Plans

1. Client plans will:

- have specific observable and/or specific quantifiable goals
- identify the proposed type(s) of intervention
- have a proposed duration of intervention(s)
- be signed (or electronic equivalent) by:
  - the person providing the service(s), or
  - a person representing a team or program providing services, or
  - a person representing the MHP providing services
  - when the client plan is used to establish that the services are provided under the direction of an approved category of staff, and if the below staff are not the approved category,
    - a physician
    - a licensed/ "waivered" psychologist
    - a licensed/ "associate" social worker
    - a licensed/ registered/marriage and family therapist or
    - a registered nurse
- In addition,
  - client plans will be consistent with the diagnosis, and the focus of intervention will be consistent with the client plan goals, and there will be documentation of the client's participation in and agreement with the plan. Examples of the documentation include, but are not limited to, reference to the client's participation and agreement in the body of the plan, client signature on the plan, or a description of the client's participation and agreement in progress notes.
  - client signature on the plan will be used as the means by which the CONTRACTOR(S) documents the participation of the client

- when the client's signature is required on the client plan and the client refuses or is unavailable for signature, the client plan will include a written explanation of the refusal or unavailability.
- The CONTRACTOR(S) will give a copy of the client plan to the client on request.

2. Timeliness/Frequency of Client Plan:

- Will be updated at least annually
- The CONTRACTOR(S) will establish standards for timeliness and frequency for the individual elements of the client plan described in item 1.

C. Progress Notes

1. Items that must be contained in the client record related to the client's progress in treatment include:

- The client record will provide timely documentation of relevant aspects of client care
- Mental health staff/practitioners will use client records to document client encounters, including relevant clinical decisions and interventions
- All entries in the client record will include the signature of the person providing the service (or electronic equivalent); the person's professional degree, licensure or job title; and the relevant identification number, if applicable
- All entries will include the date services were provided
- The record will be legible
- The client record will document follow-up care, or as appropriate, a discharge summary

2. Timeliness/Frequency of Progress Notes:

Progress notes shall be documented at the frequency by type of service indicated below:

A. Every Service Contact

- Mental Health Services
- Medication Support Services
- Crisis Intervention

**ADULT PAF  
5/1/07**

**FULL SERVICE PARTNERSHIP**  
Adult Partnership Assessment Form  
FOR AGES 26-59 YEARS

PARTNERSHIP INFORMATION

County	<input style="width: 95%;" type="text"/>	*
CSI County Client Number (CCN)	<input style="width: 95%;" type="text"/>	
County Partner ID (optional)	<input style="width: 95%;" type="text"/>	
Partner's First Name	<input style="width: 95%;" type="text"/>	*
Partner's Last Name	<input style="width: 95%;" type="text"/>	*
Partnership Date (mm/dd/yyyy)	<input style="width: 95%;" type="text"/>	*
Partner's Date of Birth (mm/dd/yyyy)	<input style="width: 95%;" type="text"/>	*

Who referred the partner? (mark one)

<input type="radio"/> Self	<input type="radio"/> Emergency Room	<input type="radio"/> Homeless Shelter
<input type="radio"/> Family Member (e.g., parent, guardian, sibling, aunt, uncle, grandparent, child)	<input type="radio"/> Mental Health Facility / Community Agency	<input type="radio"/> Street Outreach
<input type="radio"/> Significant Other (e.g., boyfriend / girlfriend, spouse)	<input type="radio"/> Social Services Agency	<input type="radio"/> Jail / Prison
<input type="radio"/> Friend / Neighbor (i.e., unrelated other)	<input type="radio"/> Substance Abuse Treatment Facility / Agency	<input type="radio"/> Acute Psychiatric / State Hospital
<input type="radio"/> School	<input type="radio"/> Faith-based Organization	<input type="radio"/> Other
<input type="radio"/> Primary Care / Medical Office	<input type="radio"/> Other County / Community Agency	

ADMINISTRATIVE INFORMATION

**PARTNERSHIP STATUS**

Provider Number / NPI (Optional)	<input style="width: 95%;" type="text"/>	
Full Service Partnership Program ID	<input style="width: 95%;" type="text"/>	*
Partnership Service Coordinator ID	<input style="width: 95%;" type="text"/>	*

**PROGRAM INFORMATION**

In which additional program(s) is the partner CURRENTLY involved? (mark all that apply)

AB2034	<input type="checkbox"/>	
Governor's Homeless Initiative (GHI)	<input type="checkbox"/>	
MHSA Housing Program	<input type="checkbox"/>	

**RESIDENTIAL INFORMATION - includes hospitalization and incarceration**

SETTING	TONIGHT	YESTERDAY (as of 11:59 p.m the day BEFORE partnership)	DURING THE PAST 12 MONTHS INDICATE THE TOTAL # OCCURRENCES	DURING THE PAST 12 MONTHS INDICATE THE TOTAL # DAYS (must = 365 days)	PRIOR TO THE LAST 12 MONTHS (mark all that apply)
<b>GENERAL LIVING ARRANGEMENT</b>					
In an apartment or house alone / with spouse / partner / minor children / other dependents / roommate – must hold lease or share in rent / mortgage	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
With one or both biological / adoptive parents	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
With adult family member(s) other than parents	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
Single Room Occupancy (must hold lease)	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
<b>SHELTER / HOMELESS</b>					
Emergency Shelter / Temporary Housing (includes people living with friends but paying no rent)	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
Homeless (includes people living in their cars)	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
<b>SUPERVISED PLACEMENT</b>					
Unlicensed but supervised individual placement (includes paid caretakers, personal care attendants)	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
Assisted Living Facility	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
Unlicensed but supervised congregate placement (includes group living homes, sober living homes)	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
Licensed Community Care Facility (Board and Care)	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
<b>HOSPITAL</b>					
Acute Medical Hospital	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
Acute Psychiatric Hospital / Psychiatric Health Facility (PHF)	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
State Psychiatric Hospital	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
<b>RESIDENTIAL PROGRAM</b>					
Licensed Residential Treatment (includes crisis, short-term, long-term, substance abuse, dual diagnosis residential programs)	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
Skilled Nursing Facility (physical)	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
Skilled Nursing Facility (psychiatric)	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
Long-Term Institutional Care [Institution for Mental Disease (IMD), Mental Health Rehabilitation Center (MHRC)]	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>

**RESIDENTIAL INFORMATION - includes hospitalization and incarceration (Continued)**

<b>JUSTICE PLACEMENT</b>					
Jail	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
Prison			<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
<b>OTHER</b>					
Other	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
Unknown	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>

**EDUCATION**

Highest level of education completed:

<input type="radio"/> No High School Diploma / No GED	<input type="radio"/> Associate's Degree (e.g., A.A., A.S.) / Technical or Vocational Degree
<input type="radio"/> GED Coursework	<input type="radio"/> Bachelor's Degree (e.g., B.A., B.S.)
<input type="radio"/> High School Diploma / GED	<input type="radio"/> Master's Degree (e.g., M.A., M.S.)
<input type="radio"/> Some College / Some Technical or Vocational Training	<input type="radio"/> Doctoral Degree (e.g., M.D., Ph.D.)

<b>For the educational settings below, indicate where the partner.....</b>	<b>was DURING THE PAST 12 MONTHS # of weeks</b>	<b>is CURRENTLY (mark all that apply)</b>
Not in school of any kind	<input type="text"/>	<input type="checkbox"/>
High School / Adult Education	<input type="text"/>	<input type="checkbox"/>
Technical / Vocational School	<input type="text"/>	<input type="checkbox"/>
Community College / 4 year College	<input type="text"/>	<input type="checkbox"/>
Graduate School	<input type="text"/>	<input type="checkbox"/>
Other	<input type="text"/>	<input type="checkbox"/>

Does one of the partner's current recovery goals include any kind of education at this time?  Yes  No

EMPLOYMENT

**EMPLOYMENT DURING THE PAST 12 MONTHS**

Indicate the partner's employment status...	# OF WEEKS	AVERAGE HOURS per WEEK	AVERAGE HOURLY WAGE
<b>Competitive Employment:</b>			
Paid employment in the community in a position that is also open to individuals without a disability.	<input type="text"/>	<input type="text"/>	\$ <input type="text"/>
<b>Supported Employment:</b>			
Competitive Employment (see above) with ongoing on-site or off-site job-related support services provided.	<input type="text"/>	<input type="text"/>	\$ <input type="text"/>
<b>Transitional Employment / Enclave:</b>			
Paid jobs in the community that are 1) open only to individuals with a disability AND 2) are either time-limited for the purpose of moving to a more permanent job OR are part of a group of disabled individuals who are working as a team in the midst of teams of non-disabled individuals who are performing the same work.	<input type="text"/>	<input type="text"/>	\$ <input type="text"/>
<b>Paid In-House Work (Sheltered Workshop / Work Experience / Agency-Owned Business):</b>			
Paid jobs open only to program participants with a disability. A <i>Sheltered Workshop</i> usually offers sub-minimum wage work in a simulated environment. A <i>Work Experience (Adjustment) Program</i> within an agency provides exposure to the standard expectations and advantages of employment. An <i>Agency-Owned Business</i> serves customers outside the agency and provides realistic work experiences and can be located at the program site or in the community.	<input type="text"/>	<input type="text"/>	\$ <input type="text"/>
<b>Non-paid (Volunteer) Work Experience:</b>			
Non-paid (volunteer) jobs in an agency or volunteer work in the community that provides exposure to the standard expectations of employment.	<input type="text"/>	<input type="text"/>	
<b>Other Gainful / Employment Activity:</b>			
Any informal employment activity that increases the partner's income (e.g., recycling, gardening, babysitting) OR participation in formal structured classes and / or workshops providing instruction on issues pertinent to getting a job. (Does NOT include such activities as panhandling or illegal activities such as prostitution.)	<input type="text"/>	<input type="text"/>	\$ <input type="text"/>
Unemployed	<input type="text"/>		

**CURRENT EMPLOYMENT**

Indicate the partner's employment status...

**AVERAGE  
HOURS per  
WEEK**

**AVERAGE  
HOURLY WAGE**

**Competitive Employment:**

Paid employment in the community in a position that is also open to individuals without a disability.

\$

**Supported Employment:**

Competitive Employment (see above) with ongoing on-site or off-site job-related support services provided.

\$

**Transitional Employment / Enclave:**

Paid jobs in the community that are 1) open only to individuals with a disability AND 2) are either time-limited for the purpose of moving to a more permanent job OR are part of a group of disabled individuals who are working as a team in the midst of teams of non-disabled individuals who are performing the same work.

\$

**Paid In-House Work (Sheltered Workshop / Work Experience / Agency-Owned Business):**

Paid jobs open only to program participants with a disability. A *Sheltered Workshop* usually offers sub-minimum wage work in a simulated environment. A *Work Experience (Adjustment) Program* within an agency provides exposure to the standard expectations and advantages of employment. An *Agency-Owned Business* serves customers outside the agency and provides realistic work experiences and can be located at the program site or in the community.

\$

**Non-paid (Volunteer) Work Experience:**

Non-paid (volunteer) jobs in an agency or volunteer work in the community that provides exposure to the standard expectations of employment.

**Other Gainful / Employment Activity:**

Any informal employment activity that increases the partner's income (e.g., recycling, gardening, babysitting) OR participation in formal structured classes and / or workshops providing instruction on issues pertinent to getting a job. (Does NOT include such activities as panhandling or illegal activities such as prostitution.)

\$

The partner is not employed at this time.

Does one of the partner's current recovery goals include any kind of employment at this time?

Yes  No

SOURCES OF FINANCIAL SUPPORT

Indicate all the sources of financial support used to meet the needs of the partner:	DURING THE PAST 12 MONTHS (mark all that apply)	CURRENTLY (mark all that apply)
Partner's Wages	<input type="checkbox"/>	<input type="checkbox"/>
Partner's Spouse / Significant Other's Wages	<input type="checkbox"/>	<input type="checkbox"/>
Savings	<input type="checkbox"/>	<input type="checkbox"/>
Other Family Member / Friend	<input type="checkbox"/>	<input type="checkbox"/>
Retirement / Social Security Income	<input type="checkbox"/>	<input type="checkbox"/>
Veteran's Assistance Benefits	<input type="checkbox"/>	<input type="checkbox"/>
Loan / Credit	<input type="checkbox"/>	<input type="checkbox"/>
Housing Subsidy	<input type="checkbox"/>	<input type="checkbox"/>
General Relief / General Assistance	<input type="checkbox"/>	<input type="checkbox"/>
Food Stamps	<input type="checkbox"/>	<input type="checkbox"/>
Temporary Assistance for Needy Families (TANF)	<input type="checkbox"/>	<input type="checkbox"/>
Supplemental Security Income / State Supplementary Payment (SSI / SSP) Program	<input type="checkbox"/>	<input type="checkbox"/>
Social Security Disability Insurance (SSDI)	<input type="checkbox"/>	<input type="checkbox"/>
State Disability Insurance (SDI)	<input type="checkbox"/>	<input type="checkbox"/>
American Indian Tribal Benefits (e.g., per capita, revenue sharing, trust disbursements)	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>
No Financial Support	<input type="checkbox"/>	<input type="checkbox"/>



LEGAL ISSUES / DESIGNATIONS

**JUSTICE SYSTEM INVOLVEMENT**

**ARREST INFORMATION**

Indicate the number of times the partner was arrested DURING THE PAST 12 MONTHS:

Was the partner arrested anytime PRIOR TO THE LAST 12 MONTHS?  Yes  No

**PROBATION INFORMATION**

Is the partner CURRENTLY on probation?  Yes  No

Was the partner on probation DURING THE PAST 12 MONTHS?  Yes  No

Was the partner on probation anytime PRIOR TO THE LAST 12 MONTHS?  Yes  No

**PAROLE INFORMATION**

Was the partner on any kind of parole DURING THE PAST 12 MONTHS?  Yes  No

Was the partner on any kind of parole anytime PRIOR TO THE LAST 12 MONTHS?  Yes  No

**CONSERVATORSHIP / PAYEE INFORMATION**

**CONSERVATORSHIP INFORMATION**

Is the partner CURRENTLY on conservatorship?  Yes  No

Was the partner on conservatorship DURING THE PAST 12 MONTHS?  Yes  No

Was the partner on conservatorship anytime PRIOR TO THE LAST 12 MONTHS?  Yes  No

**PAYEE INFORMATION**

Does the partner CURRENTLY have a payee?  Yes  No

Did the partner have a payee DURING THE PAST 12 MONTHS?  Yes  No

Did the partner have a payee anytime PRIOR TO THE LAST 12 MONTHS?  Yes  No

**CUSTODY INFORMATION**

Indicate the total number of children the partner has who are CURRENTLY:

Placed on W & I Code 300 Status:  
(Dependent of the court)

Placed in Foster Care:

Legally Reunified with partner:

Adopted out:

EMERGENCY INTERVENTION

Please indicate the number of emergency interventions (e.g., emergency room visit, crisis stabilization unit) the partner had DURING THE PAST 12 MONTHS that were:

Physical Health Related

Mental Health / Substance Abuse Related

HEALTH STATUS

Does the partner have a primary care physician CURRENTLY?

Yes  No

Did the partner have a primary care physician DURING THE PAST 12 MONTHS?

Yes  No

SUBSTANCE ABUSE

In the opinion of the partnership service coordinator, has the partner ever had a co-occurring mental illness and substance use problem?

Yes  No

In the opinion of the partnership service coordinator, does the partner CURRENTLY have an active co-occurring mental illness and substance use problem?

Yes  No

Is the partner CURRENTLY receiving substance abuse services?

Yes  No

COUNTY USE QUESTIONS

**COUNTY USE QUESTIONS**

**VALUES**

To be tracked on the **KEY EVENT TRACKING** form:

County Use Field # 1

County Use Field # 2

County Use Field # 3

To be tracked on the **QUARTERLY ASSESSMENT** form:

County Use Field # 1

County Use Field # 2

County Use Field # 3

**ADULT KET**  
**5/1/07**

**FULL SERVICE PARTNERSHIP**  
Adult Key Event Tracking Form  
FOR AGES 26-59 YEARS

**PARTNERSHIP INFORMATION**

County	<input type="text"/>	*
CSI County Client Number (CCN)	<input type="text"/>	
County Partner ID (optional)	<input type="text"/>	
Partner's First Name	<input type="text"/>	*
Partner's Last Name	<input type="text"/>	*
Date Completed (mm/dd/yyyy)	<input type="text"/>	*
Partner's Date of Birth (mm/dd/yyyy)	<input type="text"/>	*

**CHANGE IN ADMINISTRATIVE INFORMATION** (Skip this section if there are no changes)

<b>PARTNERSHIP STATUS</b>	
Date of Provider Number Change (mm/dd/yyyy): / NPI	<input type="text"/>
NEW Provider Number: / NPI	<input type="text"/>
<hr/>	
Date of Full Service Partnership Program ID Change (mm/dd/yyyy):	<input type="text"/>
NEW Full Service Partnership Program ID:	<input type="text"/>
<hr/>	
Date of Partnership Service Coordinator ID Change (mm/dd/yyyy):	<input type="text"/>
NEW Partnership Service Coordinator ID:	<input type="text"/>

**CHANGE IN ADMINISTRATIVE INFORMATION** (Skip this section if there are no changes) (Continued)

Date of Partnership Status Change (mm/dd/yyyy):

Indicate NEW partnership status:

- Discontinuation / Interruption of Full Service Partnership and / or community services / program (indicate reason below)
- Reestablishment of Full Service Partnership and / or community services / program

If there is a DISCONTINUATION / INTERRUPTION of Full Service Partnership and / or community services / program, indicate the reason (mark one):

- Target population criteria are not met.
- Partner decided to discontinue Full Service Partnership participation after partnership established.
- Partner moved to another county / service area.
- After repeated attempts to contact partner, s/he cannot be located.
- Community services / program interrupted – Partner's circumstances reflect a need for residential / institutional mental health services at this time [such as an Institution for Mental Disease (IMD), Mental Health Rehabilitation Center (MHRC), State Hospital].
- Community services / program interrupted – Partner will be serving JAIL sentence.
- Community services / program interrupted – Partner will be serving PRISON sentence.
- Partner has successfully met his / her goals such that discontinuation of Full Service Partnership is appropriate.
- Partner is deceased.

**PROGRAM INFORMATION**

Program Name	Date of Program Change (mm/dd/yyyy)	Currently Involved?
AB2034	<input type="text"/>	<input type="radio"/> Now enrolled in the AB2034 Program <input type="radio"/> No longer participating in the AB2034 Program
Governor's Homeless Initiative (GHI)	<input type="text"/>	<input type="radio"/> Now enrolled in the GHI Program <input type="radio"/> No longer participating in the GHI Program
MHSA Housing Program	<input type="text"/>	<input type="radio"/> Now enrolled in the MHSA Housing Program <input type="radio"/> No longer participating in the MHSA Housing Program

**RESIDENTIAL INFORMATION** - includes hospitalization and incarceration (Skip this section if there are no changes)

Date of Residential Status Change (mm/dd/yyyy):

<b>SETTING</b>	<b>Indicate the new residential status (mark one):</b>
<b>GENERAL LIVING ARRANGEMENT</b>	
In an apartment or house alone / with spouse / partner / minor children / other dependents / roommate – must hold lease or share in rent / mortgage	<input type="radio"/>
With one or both biological / adoptive parents	<input type="radio"/>
With adult family member(s) other than parents	<input type="radio"/>
Single Room Occupancy (must hold lease)	<input type="radio"/>
<b>SHELTER / HOMELESS</b>	
Emergency Shelter / Temporary Housing (includes people living with friends but paying no rent)	<input type="radio"/>
Homeless (includes people living in their cars)	<input type="radio"/>
<b>SUPERVISED PLACEMENT</b>	
Unlicensed but supervised individual placement (includes paid caretakers, personal care attendants)	<input type="radio"/>
Assisted Living Facility	<input type="radio"/>
Unlicensed but supervised congregate placement (includes group living homes, sober living homes)	<input type="radio"/>
Licensed Community Care Facility (Board and Care)	<input type="radio"/>
<b>HOSPITAL</b>	
Acute Medical Hospital	<input type="radio"/>
Acute Psychiatric Hospital / Psychiatric Health Facility (PHF)	<input type="radio"/>
State Psychiatric Hospital	<input type="radio"/>
<b>RESIDENTIAL PROGRAM</b>	
Licensed Residential Treatment (includes crisis, short-term, long-term, substance abuse, dual diagnosis residential programs)	<input type="radio"/>
Skilled Nursing Facility (physical)	<input type="radio"/>
Skilled Nursing Facility (psychiatric)	<input type="radio"/>
Long-Term Institutional Care [Institution for Mental Disease (IMD), Mental Health Rehabilitation Center (MHRC)]	<input type="radio"/>
<b>JUSTICE PLACEMENT</b>	
Jail	<input type="radio"/>
<b>OTHER</b>	
Other	<input type="radio"/>
Unknown	<input type="radio"/>

**EDUCATION** (Skip this section if there are no changes)

**GRADE LEVEL INFORMATION**

Date of Grade Level Completion (mm/dd/yyyy):

Level of education completed:

- No High School Diploma / No GED
- GED Coursework
- High School Diploma / GED
- Some College / Some Technical or Vocational Training
- Associate's Degree (e.g., A.A., A.S.) / Technical or Vocational Degree
- Bachelor's Degree (e.g., B.A., B.S.)
- Master's Degree (e.g., M.A., M.S.)
- Doctoral Degree (e.g., M.D., Ph.D.)

**EDUCATIONAL SETTING INFORMATION**

Date of Educational Setting Change (mm/dd/yyyy):

If there are any educational setting changes, indicate ALL new and ongoing statuses including those previously reported.

	Setting
Not in school of any kind	<input type="checkbox"/>
High School / Adult Education	<input type="checkbox"/>
Technical / Vocational School	<input type="checkbox"/>
Community College / 4 year College	<input type="checkbox"/>
Graduate School	<input type="checkbox"/>
Other	<input type="checkbox"/>

If stopping school, did the partner complete a class and/or program?  Yes  No

Does one of the partner's current recovery goals include any kind of education at this time?  Yes  No

**EMPLOYMENT** (Skip this section if there are no changes)

Date of Employment Change (mm/dd/yyyy):

**CURRENT EMPLOYMENT**

If there are any changes to the partner's employment, indicate ALL new and ongoing statuses including those previously reported.

**AVERAGE  
HOURS per  
WEEK**

**AVERAGE  
HOURLY WAGE**

**Competitive Employment:**

Paid employment in the community in a position that is also open to individuals without a disability.

\$

**Supported Employment:**

Competitive Employment (see above) with ongoing on-site or off-site job-related support services provided.

\$

**Transitional Employment / Enclave:**

Paid jobs in the community that are 1) open only to individuals with a disability AND 2) are either time-limited for the purpose of moving to a more permanent job OR are part of a group of disabled individuals who are working as a team in the midst of teams of non-disabled individuals who are performing the same work.

\$

**Paid In-House Work (Sheltered Workshop / Work Experience / Agency-Owned Business):**

Paid jobs open only to program participants with a disability. A *Sheltered Workshop* usually offers sub-minimum wage work in a simulated environment. A *Work Experience (Adjustment) Program* within an agency provides exposure to the standard expectations and advantages of employment. An *Agency-Owned Business* serves customers outside the agency and provides realistic work experiences and can be located at the program site or in the community.

\$

**Non-paid (Volunteer) Work Experience:**

Non-paid (volunteer) jobs in an agency or volunteer work in the community that provides exposure to the standard expectations of employment.

**Other Gainful / Employment Activity:**

Any informal employment activity that increases the partner's income (e.g., recycling, gardening, babysitting) OR participation in formal structured classes and / or workshops providing instruction on issues pertinent to getting a job. (Does NOT include such activities as panhandling or illegal activities such as prostitution.)

\$

The partner is not employed at this time.

Does one of the partner's current recovery goals include any kind of employment at this time?

Yes  No

**LEGAL ISSUES / DESIGNATIONS** (Skip this section if there are no changes)

**ARREST INFORMATION**  
 Date Partner Arrested (mm/dd/yyyy):

**PROBATION INFORMATION**  
 Date of Probation Status Change (mm/dd/yyyy):   
 Indicate new probation status:  
 Removed from Probation  
 Placed on Probation

**CONSERVATORSHIP INFORMATION**  
 Date of Conservatorship Status Change (mm/dd/yyyy):   
 Indicate new conservatorship status:  
 Removed from conservatorship  
 Placed on conservatorship

**PAYEE INFORMATION**  
 Date of Payee Status Change (mm/dd/yyyy):   
 Indicate new payee status:  
 Removed from payee status  
 Placed on payee status

**EMERGENCY INTERVENTION** (Skip this section if there are no changes)

Date of Emergency Intervention (mm/dd/yyyy):

Indicate the type of emergency intervention: (e.g., emergency room visit, crisis stabilization unit)  
 Physical Health Related  
 Mental Health / Substance Abuse Related

**COUNTY USE QUESTIONS** (Skip this section if there are no changes)

COUNTY USE QUESTIONS	DATE of CHANGE (mm/dd/yyyy)	NEW VALUE
County Use Field # 1	<input type="text"/>	<input type="text"/>
County Use Field # 2	<input type="text"/>	<input type="text"/>
County Use Field # 3	<input type="text"/>	<input type="text"/>



**OLDER ADULT KET**  
**5/1/07**

**FULL SERVICE PARTNERSHIP**  
 Older Adult Key Event Tracking Form  
 FOR AGES 60+ YEARS

PARTNERSHIP INFORMATION

County	<input type="text"/>	*
CSI County Client Number (CCN)	<input type="text"/>	
County Partner ID (optional)	<input type="text"/>	
Partner's First Name	<input type="text"/>	*
Partner's Last Name	<input type="text"/>	*
Date Completed (mm/dd/yyyy)	<input type="text"/>	*
Partner's Date of Birth (mm/dd/yyyy)	<input type="text"/>	*

**CHANGE IN ADMINISTRATIVE INFORMATION** (Skip this section if there are no changes)

**PARTNERSHIP STATUS**

Date of Provider Number Change (mm/dd/yyyy):   
 / NPI

NEW Provider Number:   
 / NPI

Date of Full Service Partnership Program ID Change (mm/dd/yyyy):

NEW Full Service Partnership Program ID:

Date of Partnership Service Coordinator ID Change (mm/dd/yyyy):

NEW Partnership Service Coordinator ID:

Date of Partnership Status Change (mm/dd/yyyy):

Indicate NEW partnership status:

- Discontinuation / Interruption of Full Service Partnership and / or community services / program (indicate reason below)
- Reestablishment of Full Service Partnership and / or community services / program

If there is a DISCONTINUATION / INTERRUPTION of Full Service Partnership and / or community services / program, indicate the reason (mark one):

- Target population criteria are not met.
- Partner decided to discontinue Full Service Partnership participation after partnership established.
- Partner moved to another county / service area.
- After repeated attempts to contact partner, s/he cannot be located.
- Community services / program interrupted – Partner's circumstances reflect a need for residential / institutional mental health services at this time [such as an Institution for Mental Disease (IMD), Mental Health Rehabilitation Center (MHRC), State Hospital].
- Community services / program interrupted – Partner will be serving JAIL sentence.
- Community services / program interrupted – Partner will be serving PRISON sentence.
- Partner has successfully met his / her goals such that discontinuation of Full Service Partnership is appropriate.
- Partner is deceased.

**PROGRAM INFORMATION**

Program Name	Date of Program Change (mm/dd/yyyy)	Currently Involved?
AB2034	<input type="text"/>	<input type="radio"/> Now enrolled in the AB2034 Program <input type="radio"/> No longer participating in the AB2034 Program
Governor's Homeless Initiative (GHI)	<input type="text"/>	<input type="radio"/> Now enrolled in the GHI Program <input type="radio"/> No longer participating in the GHI Program
MHSA Housing Program	<input type="text"/>	<input type="radio"/> Now enrolled in the MHSA Housing Program <input type="radio"/> No longer participating in the MHSA Housing Program

**RESIDENTIAL INFORMATION - includes hospitalization and incarceration** (Skip this section if there are no changes)

Date of Residential Status Change (mm/dd/yyyy):

**SETTING**

Indicate the new residential status (mark one):

**GENERAL LIVING ARRANGEMENT**

In an apartment or house alone / with spouse / partner / minor children / other dependents / roommate – must hold lease or share in rent / mortgage

With one or both biological / adoptive parents

With adult family member(s) other than parents

Single Room Occupancy (must hold lease)

**SHELTER / HOMELESS**

Emergency Shelter / Temporary Housing (includes people living with friends but paying no rent)

Homeless (includes people living in their cars)

**SUPERVISED PLACEMENT**

Unlicensed but supervised individual placement (includes paid caretakers, personal care attendants)

Assisted Living Facility

Unlicensed but supervised congregate placement (includes group living homes, sober living homes)

Licensed Community Care Facility (Board and Care)

**HOSPITAL**

Acute Medical Hospital

Acute Psychiatric Hospital / Psychiatric Health Facility (PHF)

State Psychiatric Hospital

**RESIDENTIAL PROGRAM**

Licensed Residential Treatment (includes crisis, short-term, long-term, substance abuse, dual diagnosis residential programs)

Skilled Nursing Facility (physical)

Skilled Nursing Facility (psychiatric)

Long-Term Institutional Care [Institution for Mental Disease (IMD), Mental Health Rehabilitation Center (MHRC)]

**JUSTICE PLACEMENT**

Jail

**OTHER**

Other

Unknown

**EDUCATION** (Skip this section if there are no changes)

**GRADE LEVEL INFORMATION**

Date of Grade Level Completion (mm/dd/yyyy):

Level of education completed:

- No High School Diploma / No GED
- GED Coursework
- High School Diploma / GED
- Some College / Some Technical or Vocational Training
- Associate's Degree (e.g., A.A., A.S.) / Technical or Vocational Degree
- Bachelor's Degree (e.g., B.A., B.S.)
- Master's Degree (e.g., M.A., M.S.)
- Doctoral Degree (e.g., M.D., Ph.D.)

**EDUCATIONAL SETTING INFORMATION**

Date of Educational Setting Change (mm/dd/yyyy):

If there are any educational setting changes, indicate ALL new and ongoing statuses including those previously reported.

	Setting
Not in school of any kind	<input type="checkbox"/>
High School / Adult Education	<input type="checkbox"/>
Technical / Vocational School	<input type="checkbox"/>
Community College / 4 year College	<input type="checkbox"/>
Graduate School	<input type="checkbox"/>
Other	<input type="checkbox"/>

If stopping school, did the partner complete a class and/or program?  Yes  No

Does one of the partner's current recovery goals include any kind of education at this time?  Yes  No

**EMPLOYMENT** (Skip this section if there are no changes)

Date of Employment Change (mm/dd/yyyy):

**CURRENT EMPLOYMENT**

If there are any changes to the partner's employment, indicate ALL new and ongoing statuses including those previously reported.

**AVERAGE  
HOURS per  
WEEK**

**AVERAGE  
HOURLY WAGE**

**Competitive Employment:**

Paid employment in the community in a position that is also open to individuals without a disability.

\$

**Supported Employment:**

Competitive Employment (see above) with ongoing on-site or off-site job-related support services provided.

\$

**Transitional Employment / Enclave:**

Paid jobs in the community that are 1) open only to individuals with a disability AND 2) are either time-limited for the purpose of moving to a more permanent job OR are part of a group of disabled individuals who are working as a team in the midst of teams of non-disabled individuals who are performing the same work.

\$

**Paid In-House Work (Sheltered Workshop / Work Experience / Agency-Owned Business):**

Paid jobs open only to program participants with a disability. A *Sheltered Workshop* usually offers sub-minimum wage work in a simulated environment. A *Work Experience (Adjustment) Program* within an agency provides exposure to the standard expectations and advantages of employment. An *Agency-Owned Business* serves customers outside the agency and provides realistic work experiences and can be located at the program site or in the community.

\$

**Non-paid (Volunteer) Work Experience:**

Non-paid (volunteer) jobs in an agency or volunteer work in the community that provides exposure to the standard expectations of employment.

**Other Gainful / Employment Activity:**

Any informal employment activity that increases the partner's income (e.g., recycling, gardening, babysitting) OR participation in formal structured classes and / or workshops providing instruction on issues pertinent to getting a job. (Does NOT include such activities as panhandling or illegal activities such as prostitution.)

\$

The partner is not employed at this time.

Does one of the partner's current recovery goals include any kind of employment at this time?

Yes  No

**LEGAL ISSUES / DESIGNATIONS** (Skip this section if there are no changes)

**ARREST INFORMATION**

Date Partner Arrested (mm/dd/yyyy):

**PROBATION INFORMATION**

Date of Probation Status Change (mm/dd/yyyy):

Indicate new probation status:

Removed from Probation

Placed on Probation

**CONSERVATORSHIP INFORMATION**

Date of Conservatorship Status Change (mm/dd/yyyy):

Indicate new conservatorship status:

Removed from conservatorship

Placed on conservatorship

**PAYEE INFORMATION**

Date of Payee Status Change (mm/dd/yyyy):

Indicate new payee status:

Removed from payee status

Placed on payee status

**EMERGENCY INTERVENTION** (Skip this section if there are no changes)

Date of Emergency Intervention (mm/dd/yyyy):

Indicate the type of emergency intervention: (e.g., emergency room visit, crisis stabilization unit)

Physical Health Related

Mental Health / Substance Abuse Related

**COUNTY USE QUESTIONS** (Skip this section if there are no changes)

COUNTY USE QUESTIONS	DATE of CHANGE (mm/dd/yyyy)	NEW VALUE
County Use Field # 1	<input type="text"/>	<input type="text"/>
County Use Field # 2	<input type="text"/>	<input type="text"/>
County Use Field # 3	<input type="text"/>	<input type="text"/>

**ADULT 3M**  
**5/1/07**

**FULL SERVICE PARTNERSHIP**  
Adult Quarterly Assessment Form  
FOR AGES 26-59 YEARS

PARTNERSHIP INFORMATION

County	<input type="text"/>	*
CSI County Client Number (CCN)	<input type="text"/>	
County Partner ID (optional)	<input type="text"/>	
Partner's First Name	<input type="text"/>	*
Partner's Last Name	<input type="text"/>	*
Date Completed (mm/dd/yyyy)	<input type="text"/>	*
Partner's Date of Birth (mm/dd/yyyy)	<input type="text"/>	*

SOURCES OF FINANCIAL SUPPORT

Indicate all the sources of financial support used to meet the needs of the partner:	CURRENTLY (mark all that apply)
Partner's Wages	<input type="checkbox"/>
Partner's Spouse / Significant Other's Wages	<input type="checkbox"/>
Savings	<input type="checkbox"/>
Other Family Member / Friend	<input type="checkbox"/>
Retirement / Social Security Income	<input type="checkbox"/>
Veteran's Assistance Benefits	<input type="checkbox"/>
Loan / Credit	<input type="checkbox"/>
Housing Subsidy	<input type="checkbox"/>
General Relief / General Assistance	<input type="checkbox"/>
Food Stamps	<input type="checkbox"/>
Temporary Assistance for Needy Families (TANF)	<input type="checkbox"/>
Supplemental Security Income / State Supplementary Payment (SSI / SSP) Program	<input type="checkbox"/>
Social Security Disability Insurance (SSDI)	<input type="checkbox"/>
State Disability Insurance (SDI)	<input type="checkbox"/>
American Indian Tribal Benefits (e.g., per capita, revenue sharing, trust disbursements)	<input type="checkbox"/>
Other	<input type="checkbox"/>
No Financial Support	<input type="checkbox"/>

LEGAL ISSUES / DESIGNATIONS

**CUSTODY INFORMATION**

Indicate the total number of children the partner has who are CURRENTLY:

Placed on W & I Code 300 Status: (Dependent of the court)	<input type="text"/>
Placed in Foster Care:	<input type="text"/>
Legally Reunified with partner:	<input type="text"/>
Adopted out:	<input type="text"/>

HEALTH STATUS

Does the partner have a primary care physician CURRENTLY?  Yes  No

SUBSTANCE ABUSE

In the opinion of the partnership service coordinator, does the partner CURRENTLY have an active co-occurring mental illness and substance use problem?  Yes  No

Is the partner CURRENTLY receiving substance abuse services?  Yes  No

COUNTY USE QUESTIONS

COUNTY USE QUESTIONS	NEW VALUE
County Use Field # 1	<input type="text"/>
County Use Field # 2	<input type="text"/>
County Use Field # 3	<input type="text"/>



## STATE MENTAL HEALTH REQUIREMENTS

### 1. CONTROL REQUIREMENTS

The COUNTY and its subcontractors shall provide services in accordance with all applicable Federal and State statutes and regulations.

### 2. PROFESSIONAL LICENSURE

All (professional level) persons employed by the COUNTY Mental Health Program (directly or through contract) providing Short-Doyle/Medi-Cal services have met applicable professional licensure requirements pursuant to Business and Professions and Welfare and Institutions Codes.

### 3. CONFIDENTIALITY

CONTRACTOR shall conform to and COUNTY shall monitor compliance with all State of California and Federal statutes and regulations regarding confidentiality, including but not limited to confidentiality of information requirements at 42, Code of Federal Regulations sections 2.1 *et seq*; California Welfare and Institutions Code, sections 14100.2, 11977, 11812, 5328; Division 10.5 and 10.6 of the California Health and Safety Code; Title 22, California Code of Regulations, section 51009; and Division 1, Part 2.6, Chapters 1-7 of the California Civil Code.

### 4. NON-DISCRIMINATION

#### A. Eligibility for Services

CONTRACTOR shall prepare and make available to COUNTY and to the public all eligibility requirements to participate in the program plan set forth in the Agreement. No person shall, because of ethnic group identification, age, gender, color, disability, medical condition, national origin, race, ancestry, marital status, religion, religious creed, political belief or sexual preference be excluded from participation, be denied benefits of, or be subject to discrimination under any program or activity receiving Federal or State of California assistance.

#### B. Employment Opportunity

CONTRACTOR shall comply with COUNTY policy, and the Equal Employment Opportunity Commission guidelines, which forbids discrimination against any person on the grounds of race, color, national origin, sex, religion, age, disability status, or sexual preference in employment practices. Such practices include retirement, recruitment advertising, hiring, layoff, termination, upgrading, demotion, transfer, rates of pay or other forms of compensation, use of facilities, and other terms and conditions of employment.

C. Suspension of Compensation  
If an allegation of discrimination occurs, COUNTY may withhold all further funds, until CONTRACTOR can show clear and convincing evidence to the satisfaction of COUNTY that funds provided under this Agreement were not used in connection with the alleged discrimination.

D. Nepotism  
Except by consent of COUNTY's Department of Behavioral Health Director, or designee, no person shall be employed by CONTRACTOR who is related by blood or marriage to, or who is a member of the Board of Directors or an officer of CONTRACTOR.

**5. PATIENTS' RIGHTS**

CONTRACTOR shall comply with applicable laws and regulations, including but not limited to, laws, regulations, and State policies relating to patients' rights.

**STATE CONTRACTOR CERTIFICATION CLAUSES**

1. STATEMENT OF COMPLIANCE: Contractor has, unless exempted, complied with the non-discrimination program requirements. (Gov. Code § 12990 (a-f) and CCR, Title 2, Section 111 02) (Not applicable to public entities.)

2. DRUG-FREE WORKPLACE REQUIREMENTS: Contractor will comply with the requirements of the Drug-Free Workplace Act of 1990 and will provide a drug-free workplace by taking the following actions:

a. Publish a statement notifying employees that unlawful manufacture, distribution, dispensation, possession or use of a controlled substance is prohibited and specifying actions to be taken against employees for violations.

b. Establish a Drug-Free Awareness Program to inform employees about:

- 1) the dangers of drug abuse in the workplace;
- 2) the person's or organization's policy of maintaining a drug-free workplace;
- 3) any available counseling, rehabilitation and employee assistance programs; and,
- 4) penalties that may be imposed upon employees for drug abuse violations.

c. Every employee who works on the proposed Agreement will:

- 1) receive a copy of the company's drug-free workplace policy statement; and,

2) agree to abide by the terms of the company's statement as a condition of employment on the Agreement.

Failure to comply with these requirements may result in suspension of payments under the Agreement or termination of the Agreement or both and Contractor may be ineligible for award of any future State agreements if the department determines that any of the following has occurred: the Contractor has made false certification, or violated the certification by failing to carry out the requirements as noted above. (Gov. Code §8350 et seq.)

3. NATIONAL LABOR RELATIONS BOARD CERTIFICATION: Contractor certifies that no more than one (1) final unappealable finding of contempt of court by a Federal court has been issued against Contractor within the immediately preceding two-year period because of Contractor's failure to comply with an order of a Federal court, which orders Contractor to comply with an order of the National Labor Relations Board. (Pub. Contract Code §10296) (Not applicable to public entities.)

4. CONTRACTS FOR LEGAL SERVICES \$50,000 OR MORE- PRO BONO REQUIREMENT: Contractor hereby certifies that Contractor will comply with the requirements of Section 6072 of the Business and Professions Code, effective January 1, 2003.

Contractor agrees to make a good faith effort to provide a minimum number of hours of pro bono legal services during each year of the contract equal to the lesser of 30 multiplied by the number of full time attorneys in the firm's offices in the State, with the number of hours prorated on an actual day basis for any contract period of less than a full year or 10% of its contract with the State.

Failure to make a good faith effort may be cause for non-renewal of a state contract for legal services, and may be taken into account when determining the award of future contracts with the State for legal services.

5. EXPATRIATE CORPORATIONS: Contractor hereby declares that it is not an expatriate corporation or subsidiary of an expatriate corporation within the meaning of Public Contract Code Section 10286 and 10286.1, and is eligible to contract with the State of California.

6. SWEATFREE CODE OF CONDUCT:

a. All Contractors contracting for the procurement or laundering of apparel, garments or corresponding accessories, or the procurement of equipment, materials, or supplies, other than procurement related to a public works contract, declare under penalty of perjury that no apparel, garments or corresponding accessories, equipment, materials, or supplies furnished to the state pursuant to the contract have been laundered or produced in whole or in part by sweatshop labor, forced labor, convict labor, indentured labor under penal sanction, abusive forms of child labor or exploitation of children in sweatshop labor, or with the benefit of sweatshop labor, forced labor, convict labor, indentured labor under penal sanction, abusive forms of child labor or exploitation of children in sweatshop labor. The contractor further declares under penalty of perjury that they adhere to the Sweatfree Code of Conduct as set forth on the California

Department of Industrial Relations website located at [www.dir.ca.gov](http://www.dir.ca.gov), and Public Contract Code Section 6108.

b. The contractor agrees to cooperate fully in providing reasonable access to the contractor's records, documents, agents or employees, or premises if reasonably required by authorized officials of the contracting agency, the Department of Industrial Relations, or the Department of Justice to determine the contractor's compliance with the requirements under paragraph (a).

7. DOMESTIC PARTNERS: For contracts of \$100,000 or more, Contractor certifies that Contractor is in compliance with Public Contract Code section 10295.3.

8. GENDER IDENTITY: For contracts of \$100,000 or more, Contractor certifies that Contractor is in compliance with Public Contract Code section 10295.35.

### **DOING BUSINESS WITH THE STATE OF CALIFORNIA**

The following laws apply to persons or entities doing business with the State of California.

1. CONFLICT OF INTEREST: Contractor needs to be aware of the following provisions regarding current or former state employees. If Contractor has any questions on the status of any person rendering services or involved with the Agreement, the awarding agency must be contacted immediately for clarification.

Current State Employees (Pub. Contract Code §10410):

1). No officer or employee shall engage in any employment, activity or enterprise from which the officer or employee receives compensation or has a financial interest and which is sponsored or funded by any state agency, unless the employment, activity or enterprise is required as a condition of regular state employment.

2). No officer or employee shall contract on his or her own behalf as an independent contractor with any state agency to provide goods or services.

Former State Employees (Pub. Contract Code §10411):

1). For the two-year period from the date he or she left state employment, no former state officer or employee may enter into a contract in which he or she engaged in any of the negotiations, transactions, planning, arrangements or any part of the decision-making process relevant to the contract while employed in any capacity by any state agency.

2). For the twelve-month period from the date he or she left state employment, no former state officer or employee may enter into a contract with any state agency if he or she was employed by that state agency in a policy-making position in the same general subject area as the proposed contract within the 12-month period prior to his or her leaving state service.

If Contractor violates any provisions of above paragraphs, such action by Contractor shall render this Agreement void. (Pub. Contract Code §10420)

Members of boards and commissions are exempt from this section if they do not receive payment other than payment of each meeting of the board or commission, payment for preparatory time and payment for per diem. (Pub. Contract Code §10430 (e))

2. LABOR CODE/WORKERS' COMPENSATION: Contractor needs to be aware of the provisions which require every employer to be insured against liability for Worker's Compensation or to undertake self-insurance in accordance with the provisions, and Contractor affirms to comply with such provisions before commencing the performance of the work of this Agreement. (Labor Code Section 3700)

3. AMERICANS WITH DISABILITIES ACT: Contractor assures the State that it complies with the Americans with Disabilities Act (ADA) of 1990, which prohibits discrimination on the basis of disability, as well as all applicable regulations and guidelines issued pursuant to the ADA. (42 U.S.C. 12101 et seq.)

4. CONTRACTOR NAME CHANGE: An amendment is required to change the Contractor's name as listed on this Agreement. Upon receipt of legal documentation of the name change the State will process the amendment. Payment of invoices presented with a new name cannot be paid prior to approval of said amendment.

5. CORPORATE QUALIFICATIONS TO DO BUSINESS IN CALIFORNIA:

a. When agreements are to be performed in the state by corporations, the contracting agencies will be verifying that the contractor is currently qualified to do business in California in order to ensure that all obligations due to the state are fulfilled.

b. "Doing business" is defined in R&TC Section 23101 as actively engaging in any transaction for the purpose of financial or pecuniary gain or profit. Although there are some statutory exceptions to taxation, rarely will a corporate contractor performing within the state not be subject to the franchise tax.

c. Both domestic and foreign corporations (those incorporated outside of California) must be in good standing in order to be qualified to do business in California. Agencies will determine whether a corporation is in good standing by calling the Office of the Secretary of State.

6. RESOLUTION: A county, city, district, or other local public body must provide the State with a copy of a resolution, order, motion, or ordinance of the local governing body which by law has authority to enter into an agreement, authorizing execution of the agreement.

7. AIR OR WATER POLLUTION VIOLATION: Under the State laws, the Contractor shall not be: (1) in violation of any order or resolution not subject to review promulgated by the State Air Resources Board or an air pollution control district; (2) subject to cease and desist order not subject to review issued pursuant to Section 13301 of the Water Code for violation of waste discharge requirements or discharge prohibitions; or (3) finally determined to be in violation of provisions of federal law relating to air or water pollution.

8. PAYEE DATA RECORD FORM STD. 204: This form must be completed by all contractors that are not another state agency or other governmental entity.

9. INSPECTION and Audit of Records and access to Facilities.

The State, CMS, the Office of the Inspector General, the Comptroller General, and their designees may, at any time, inspect and audit any records or documents of CONTRACTOR or its subcontractors, and may, at any time, inspect the premises, physical facilities, and equipment where Medicaid-related activities or work is conducted. The right to audit under this section exists for 10 years from the final date of the contract period or from the date of completion of any audit, whichever is later.

Federal database checks

Consistent with the requirements at § 455.436 of this chapter, the State must confirm the identity and determine the exclusion status of CONTRACTOR, any subcontractor, as well as any person with an ownership or control interest, or who is an agent or managing employee of CONTRACTOR through routine checks of Federal databases. This includes the Social Security Administration's Death Master File, the National Plan and Provider Enumeration System (NPPES), the List of Excluded Individuals/Entities (LEIE), the System for Award Management (SAM), and any other databases as the State or Secretary may prescribe. These databases must be consulted upon contracting and no less frequently than monthly thereafter. If the State finds a party that is excluded, it must promptly notify the CONTRACTOR and take action consistent with § 438.610(c).

The State must ensure that CONTRACTOR with which the State contracts under this part is not located outside of the United States and that no claims paid by a CONTRACTOR to a network provider, out-of-network provider, subcontractor or financial institution located outside of the U.S. are considered in the development of actuarially sound capitation rates.

## **COMPLIANCE WITH STATE MEDI-CAL REQUIREMENTS**

The selected bidder(s) shall be required to maintain organizational provider certification by the host county. A copy of this renewal certificate must be furnished to County within thirty (30) days of receipt of certificate from host county. The selected bidder(s) must meet Medi-Cal organization provider standards as stated below. It is acknowledged that all references to Organizational Provider and/or Provider below shall refer to the selected bidder(s).

### **Medi-Cal Organizational Provider Standards**

1. The organizational provider possesses the necessary license to operate, if applicable, and any required certification.
2. The space owned, leased or operated by the provider and used for services or staff meets local fire codes.
3. The physical plant of any site owned, leased, or operated by the provider and used for services or staff is clean, sanitary and in good repair.
4. The organizational provider establishes and implements maintenance policies for any site owned, leased, or operated by the provider and used for services or staff to ensure the safety and well-being of beneficiaries and staff.
5. The organizational provider has a current administrative manual which includes: personnel policies and procedures, general operating procedures, service delivery policies, and procedures for reporting unusual occurrences relating to health and safety issues.
6. The organizational provider maintains client records in a manner that meets applicable state and federal standards.
7. The organization provider has staffing adequate to allow the County to claim federal financial participation for the services the Provider delivers to beneficiaries, as described in Division 1, Chapter 11, Subchapter 4 of Title 9, CCR, when applicable.
8. The organizational provider has as head of service a licensed mental health professional or other appropriate individual as described in Title 9, CCR, Sections 622 through 630.
9. For organizational providers that provide or store medications, the provider stores and dispenses medications in compliance with all pertinent state and federal standards. In particular:
  - A. All drugs obtained by prescription are labeled in compliance with federal and state laws. Prescription labels are altered only by persons legally authorized to do so.
  - B. Drugs intended for external use only or food stuffs are stored separately from drugs for internal use.

- C. All drugs are stored at proper temperatures, room temperature drugs at 59-86 degrees F and refrigerated drugs at 36-46 degrees F.
  - D. Drugs are stored in a locked area with access limited to those medical personnel authorized to prescribe, dispense or administer medication.
  - E. Drugs are not retained after the expiration date. IM multi-dose vials are dated and initialed when opened.
  - F. A drug log is maintained to ensure the provider disposes of expired, contaminated, deteriorated and abandoned drugs in a manner consistent with state and federal laws.
  - G. Policies and procedures are in place for dispensing, administering and storing medications.
10. The County may accept the host county's site certification and reserves the right to conduct an on-site certification review at least every three years. The County may also conduct additional certification reviews when:
- The provider makes major staffing changes.
  - The provider makes organizational and/or corporate structure changes (example: conversion from a non-profit status).
  - The provider adds day treatment or medication support services when medications shall be administered or dispensed from the provider site.
  - There are significant changes in the physical plant of the provider site (some physical plant changes could require a new fire clearance).
  - There is change of ownership or location.
  - There are complaints against the provider.
  - There are unusual events, accidents, or injuries requiring medical treatment for clients, staff or members of the community.



## **Fresno County Mental Health Plan**

### **Grievances**

Fresno County Mental Health Plan (MHP) provides beneficiaries with a grievance and appeal process and an expedited appeal process to resolve grievances and disputes at the earliest and the lowest possible level.

Title 9 of the California Code of Regulations requires that the MHP and its fee-for-service providers give verbal and written information to Medi-Cal beneficiaries regarding the following:

- How to access specialty mental health services
- How to file a grievance about services
- How to file for a State Fair Hearing

The MHP has developed a Consumer Guide, a beneficiary rights poster, a grievance form, an appeal form, and Request for Change of Provider Form. All of these beneficiary materials must be posted in prominent locations where Medi-Cal beneficiaries receive outpatient specialty mental health services, including the waiting rooms of providers' offices of service.

Please note that all fee-for-service providers and contract agencies are required to give their clients copies of all current beneficiary information annually at the time their treatment plans are updated and at intake.

Beneficiaries have the right to use the grievance and/or appeal process without any penalty, change in mental health services, or any form of retaliation. All Medi-Cal beneficiaries can file an appeal or state hearing.

Grievances and appeals forms and self-addressed envelopes must be available for beneficiaries to pick up at all provider sites without having to make a verbal or written request. Forms can be sent to the following address:

Fresno County Mental Health Plan  
P.O. Box 45003  
Fresno, CA 93718-9886  
(800) 654-3937 (for more information)  
(559) 488-3055 (TTY)

### **Provider Problem Resolution and Appeals Process**

The MHP uses a simple, informal procedure in identifying and resolving provider concerns and problems regarding payment authorization issues, other complaints and concerns.

Informal provider problem resolution process – the provider may first speak to a Provider Relations Specialist (PRS) regarding his or her complaint or concern. The PRS will attempt to settle the complaint or concern with the provider. If the attempt is unsuccessful and the provider chooses to forego the informal grievance process, the provider will be advised to file a written complaint to the MHP address (listed above).

Formal provider appeal process – the provider has the right to access the provider appeal process at any time before, during, or after the provider problem resolution process has begun, when the complaint concerns a denied or modified request for MHP payment authorization, or the process or payment of a provider's claim to the MHP.

Payment authorization issues – the provider may appeal a denied or modified request for payment authorization or a dispute with the MHP regarding the processing or payment of a provider's claim to the MHP. The written appeal must be submitted to the MHP within 90 calendar days of the date of the receipt of the non-approval of payment.

The MHP shall have 60 calendar days from its receipt of the appeal to inform the provider in writing of the decision, including a statement of the reasons for the decision that addresses each issue raised by the provider, and any action required by the provider to implement the decision.

If the appeal concerns a denial or modification of payment authorization request, the MHP utilizes a Managed Care staff who was not involved in the initial denial or modification decision to determine the appeal decision.

If the Managed Care staff reverses the appealed decision, the provider will be asked to submit a revised request for payment within 30 calendar days of receipt of the decision

Other complaints – if there are other issues or complaints, which are not related to payment authorization issues, providers are encouraged to send a letter of complaint to the MHP. The provider will receive a written response from the MHP within 60 calendar days of receipt of the complaint. The decision rendered by the MHP is final.



# Department of Behavioral Health

## Policy and Procedure Guide

PPG 1.2.4

**Section:** Administration, DBH Policies & Procedures

**Effective Date:** 11/01/2010

**Revised Date:** 12/03/2018

**Policy Title:** Incident Reporting and Intensive Analysis

Approved by: Dawan Utecht (Director of Behavioral Health), Elizabeth Vasquez (Compliance Officer), Kannika Toonnachat (Division Manager - Technology and Quality Management)

### **POLICY:**

The Fresno County Department of Behavioral Health (DBH) requires all of its county-operated and contracted providers (through the Mental Health Plan (MHP) and Substance Use Disorder (SUD) services) to complete a written report of any incidents compromising the health and safety of clients, employees, or community members. The incident report must include a thorough description of: the incident itself, client information, type of event, location, people directly involved, action taken, and outcome (if known). The written report must be signed and submitted to the Department of Behavioral Health Incident Reporting email address [DBHIncidentReporting@co.fresno.ca.us](mailto:DBHIncidentReporting@co.fresno.ca.us) within **24 hours** of the incident or knowledge of the incident. An amendment to the original incident report may be submitted if all the required information is not readily available within the 24 hour reporting requirement. The Intensive Analysis Committee (IAC) will review selected incidents. Incidents that occur within the six months following discharge must also be reported.

### **PURPOSE:**

To ensure employees identify, document and report incidents consistently and promptly. To review incidents and recommend system, policy, and protocol changes. To increase best practice and safety in the provision of behavioral health care and substance use disorder services.

### **REFERENCE:**

California Evidence Code 1157, 1157.5, 1157.6 and 1157.7., Welfare and Institutions Code on Privileged Information\*\*, [DMH Letter 1995-04, page 7-12](#), Fresno County Management Directive, Chapter 1700, Subject 1750, Mental Health Plan, Policy No. RSK 100.0. MHP Contract boilerplate, Exhibit H. [Fresno County DBH Incident Report](#), [MHRC 24-Hour Unusual Occurrence Report-DHCS form](#), [PSD-RM 301 Report](#), [PHF 24-Hour Unusual Occurrence Report-DHCS form](#), [Unusual Occurrence Report](#).

**\*\*Note: California Evidence Code 1157 does not guarantee that all committee discussions, reports and records are protected from discovery and disclosure in all cases.**

#### **MISSION STATEMENT**

DBH, in partnership with our diverse community, is dedicated to providing quality, culturally responsive, behavioral health services to promote wellness, recovery, and resiliency for individuals and families in our community.

Template Review Date 3/28/16



# Department of Behavioral Health Policy and Procedure Guide

Section: Administration, DBH Policies &amp; Procedures

Effective

PPG 1.2.4

Policy Title: Reporting Incidents and Unusual Occurrences

## **DEFINITIONS:**

24 Hours – 24 clock hours

Department of Behavioral Health Incident Reporting email address (DBH Incident Reporting)-  
[DBHIncidentReporting@co.fresno.ca.us](mailto:DBHIncidentReporting@co.fresno.ca.us)

Department of Health Care Services- DHCS

Fresno County Department of Behavioral Health- DBH

Intensive Analysis Committee – IAC

Mental Health Plan- MHP

Mental Health Rehabilitation Center- MHRC

Psychiatric Health Facility- PHF

Quality Improvement Committee- QIC

Substance Use Disorder - SUD

Unusual Occurrence Report- UOR

**An Incident** is any event which jeopardizes the health and/or safety of clients, employees, or members of the community.

**Incidents** include, but are not limited to:

- All client deaths
- Attempted suicide (resulting in serious injury)
- Homicide or attempts at homicide
- Injury connected to services or at a service site (self-inflicted or by accident)
- Medical Emergency connected to services or at a service site
- Other (i.e. Clients escaping from a locked facility, medication errors)
- Violence, Abuse or Assault connected to services or at a service site (toward client, others or property; resulting in serious injury)

*The Fresno County DBH Incident Report, MHRC/PHF 24-hour Unusual Occurrence Report, PSD-RM 301 and/or Unusual Occurrence Report are all confidential reports and are not to be part of the client's medical record.*

- *DO NOT file a copy of or transcribe the Fresno County DBH Incident Report, MHRC/PHF 24-hour Unusual Occurrence Report, PSD-RM 301 and/or Unusual Occurrence Report in to the client's medical record.*
- *DO NOT document in the medical record that a Fresno County DBH Incident Report, MHRC/PHF 24-hour Unusual Occurrence Report, PSD-RM 301 and/or Unusual Occurrence Report was filed.*
- *Details of the incident that are relevant to clinical treatment may be documented in the client's medical record by the appropriate practitioner.*



# Department of Behavioral Health

## Policy and Procedure Guide

Section: Administration, DBH Policies &amp; Procedures

Effective

PPG 1.2.4

Policy Title: Reporting Incidents and Unusual Occurrences

### PROCEDURE:

- I. Employees having knowledge of an incident will follow the appropriate process listed in sections II or III below:
- II. DBH County Operated Programs
  - A. Employees involved in or first aware of an incident shall complete and submit encrypted Form PSD-RM 301-Incident Report: Non-Employee to a supervisor and/or Division Manager.
    1. Supervisor and/or Division Manager shall review the report for completeness and gather any further information needed. Supervisor, Division Manager, or designee sends the encrypted report to the DBH Incident Reporting email address, Division Manager and DBH Human Resources email address within 24 hours of an incident or knowledge of an incident.
    2. Intensive Analysis Chair or designated committee member will review the PSD-RM 301-Incident Report and request further information if needed.
- III. Contracted Providers
  - A. All contracted providers shall complete the Fresno County DBH Incident Report.
    1. The report shall be completed and signed by the employee involved in or first aware of an incident, reviewed and signed by a supervisor and/or Program Director and the encrypted Incident Report will be sent to the DBH Incident Reporting email address and designated Contract Staff Analyst within 24 hours of an incident or knowledge of an incident.
    2. Intensive Analysis Chair or designated committee member will review the DBH Incident Report. If further information is needed, designated Contract Staff Analyst shall assist in gathering requested information and provide the information to Intensive Analysis Chair or designated committee member.
  - B. In addition to completing the Fresno County DBH Incident Report under item III-A, Mental Health Rehabilitation Centers (MHRC) and Psychiatric Health Facilities (PHF) must also complete the respective below report.
    1. MHRC shall complete the DHCS MHRC 24-Hour Unusual Occurrence Report.
      - a. Report shall be completed and signed by staff involved in or first aware of an incident, reviewed and signed by a supervisor and/or



# Department of Behavioral Health

## Policy and Procedure Guide

Section: Administration, DBH Policies &amp; Procedures

Effective

PPG 1.2.4

### Policy Title: Reporting Incidents and Unusual Occurrences

Program Director and submitted to DHCS via fax: (916) 440-5600 or encrypted email to the DHCS designated reporting contact (per form instructions), Contract Staff Analyst and the DBH Incident Reporting email address within 24 hours of an incident or knowledge of an incident.

2. PHF shall complete the DHCS PHF 24-Hour Unusual Occurrence Report.
  - a. Report shall be completed and signed by staff involved in or first aware of an incident, reviewed and signed by a supervisor and/or Program Director and submitted to DHCS via fax: (916) 440-5600 or encrypted email to the DHCS designated reporting contact (per form instructions), Contract Staff Analyst and the DBH Incident Reporting email address within 24 hours of an incident or knowledge of an incident.

#### IV. Unusual Occurrence Reporting to DHCS

- A. Unusual Occurrences may include but are not limited to physical injury and death. The MHP will report Unusual Occurrences to DHCS as determined necessary. The Unusual Occurrence Report (UOR) shall include:
  1. A written description of the incident and outcome of the incident
  2. List of persons directly involved/having direct knowledge of the incident
  3. Report of providers investigation and conclusion.
- B. If a reported incident is determined to be an Unusual Occurrence, the UOR shall be completed and signed by a Division Manager or a designated IAC member. Contracted Providers (not licensed directly by the state) who have determined an incident to be an Unusual Occurrence may elect to submit their own UORs in lieu of a DBH Division Manager or IAC member. The UOR shall be emailed encrypted to the DHCS designated reporting contact (per DHCS instructions), Contract Staff Analyst (if applicable) and the DBH Incident Reporting email address within five (5) calendar days of an incident or knowledge of an incident. MHRC's and PHF's will continue to follow reporting guidelines detailed above in Section III, B1 and B2.
- C. UORs sent to DHCS may be subject to further investigation and/or information requested by DHCS, such as: Site Reviews and Plan(s) of Correction. All correspondence between contracted provider and DHCS regarding UORs shall also be sent to the Contract Staff Analyst and the DBH Incident Reporting email address for informational purposes.
- D. Site visits by DBH may be conducted as needed.



# Department of Behavioral Health

## Policy and Procedure Guide

Section: Administration, DBH Policies &amp; Procedures

Effective

PPG 1.2.4

### Policy Title: Reporting Incidents and Unusual Occurrences

- E. DBH may request contracted providers attest that an Intensive Analysis or similar (i.e. incident review, possible cause) has occurred. DBH may request additional analysis or information when necessary.
- V. The IAC will review incidents and recommend system, policy, and protocol changes, as needed, based on its findings. The IAC can conduct a case review with the employees involved to determine possible cause. The IAC shall track and trend incidents and report to the Quality Improvement Committee (QIC). The DBH Incident Reporting email address shall be monitored by the Intensive Analysis Chair, with supportive monitoring by the Quality Improvement Coordinator, Division Managers and Compliance Officer.
- A. The IAC will be comprised of the following:
1. Intensive Analysis Chair – Chair shall be a Licensed Marriage and Family Therapist, Licensed Clinical Social Worker, Psychologist, or Psychiatrist
  2. Deputy Director
  3. Quality Improvement Coordinator
  4. Division Manager from Clinical Operations
  5. Compliance Officer
  6. Quality Improvement Licensed Mental Health Clinician(s)
  7. Medical Director
  8. Other subject matter experts as deemed necessary
  9. +Case specific staff
- B. The IAC shall review incidents and identify those that require further review to determine possible cause.
- C. The IAC shall meet at least quarterly unless there are no incidents during the quarter. The IAC may meet more frequently as needed.
- D. The IAC shall make recommendations for changes in policy, procedure and practice.
- E. When necessary, the IAC may report personnel concerns to the appropriate HR department; the IAC does not make or take disciplinary actions but may be obligated to share employee concerns.
- F. Copies of Incident Reporting forms received and committee notes related to action items will be maintained by the IAC for 10 years.
- G. The IAC will report aggregate data and system recommendations at QIC.

## Incident Reporting (Attachment A)

### Fresno County Department of Behavioral Health-Incident Report

Send completed forms to [dbhincidentreporting@co.fresno.ca.us](mailto:dbhincidentreporting@co.fresno.ca.us) and designated contract analyst within 24 hours of an incident or knowledge of an incident. **DO NOT COPY OR REPRODUCE/NOT** part of the medical record.

**Client Information**

Last Name: Click or tap here to enter text. First Name: Click or tap here to enter text. Middle Initial: Click or tap here to enter text.  
 Date of Birth: Click or tap here to enter text. Client ID#: Click or tap here to enter text. Gender:  Male  Female  
 County of Origin: Click or tap here to enter text.  
 Client Address: Click or tap here to enter text. Client phone number: Click or tap here to enter text.  
 Name of Reporting Party: Click or tap here to enter text. Name of Facility: Click or tap here to enter text.  
 Facility Address: Click or tap here to enter text. Facility Phone Number: Click or tap here to enter text.

**Incident (check all that apply)**

Homicide/Homicide Attempt     Attempted Suicide(resulting in serious injury)     Death of Client     Medical Emergency  
 Injury (self-inflicted or by accident)     Violence/Abuse/Attempts to Assault (toward others, client and/or property)  
 Other- Specify (i.e. medication errors, client escaping from locked facility, fire, poisoning, epidemic outbreaks, other catastrophes/events that jeopardize the welfare and safety of clients, staff and /or members of the community): Click or tap here to enter text.

Date of Incident: Click or tap here to enter text. Time of Incident: Click or tap here to enter text. am pm  
 Location of Incident: Click or tap here to enter text.

Description of the Incident (Attach additional sheet if needed): Click or tap here to enter text.  
 Key People Directly Involved in Incident (witnesses, staff): Click or tap here to enter text.

**Action Taken (check all that apply)**

Consulted with Physician     Called 911/EMS     First Aid/CPR Administered     Law Enforcement Contacted  
 Client removed from building     Parent/Legal Guardian Contacted     Other (Specify): Click or tap here to enter text.

Description of Action Taken: Click or tap here to enter text.  
 Outcome of Incident (If Known): Click or tap here to enter text.

Form Completed by: \_\_\_\_\_  
Printed Name Signature Date

Reviewed by Supervisor/Program Manager: \_\_\_\_\_  
Printed Name Signature Date

**For Internal Use only:**

Report to Administration     Report to Intensive Analysis Committee for additional review     Request Additional Information  
 No Action     Unusual Occurrence     Other: Click or tap here to enter text.

Revised 12 /2017



**FRESNO COUNTY MENTAL HEALTH PLAN**  
**INCIDENT REPORTING**  
**(Attachment B)**

**ADDITIONAL PROTOCOL FOR COMPLETION OF  
INCIDENT REPORT**

- The Incident Report must be completed for all incidents involving clients. The staff person who becomes aware of the incident completes this form, and the supervisor co-signs it.
- When more than one client is involved in an incident, a separate form must be completed for each client.

Where the forms should be sent - within 24 hours from the time of the incident or first knowledge of the incident:

- Incident Report should be sent to:

DBHincidentreporting@fresnocountyca.gov **and** designated Contract Analyst

DBH is currently working on rolling out an electronic Incident Reporting Portal for all Fresno County MHP providers which will be updated in the Incident Reporting and Analysis PPG above. Once the Incident Reporting Portal is fully implemented all providers will be transitioned to electronic Incident Reporting.

<b>Vendor:</b>	<b>Contract#</b>	<b>Contact Person</b>	<b>Contact#</b>

**Fixed Asset and Sensitive Item Tracking**

Example Example

Item	Make/Brand	Model	Serial #	Fixed Asset	Sensitive Item	Date Requested (If Fixed Asset)	Date Approved (If Fixed Asset)	Purchase Date	Location	Condition	Fresno County Inventory Number	Cost
Copier	Canon	27CRT	9YHJY65R	x		3/27/2008	4/1/2008	4/10/2008	Heritage	New		\$6,500.00
DVD Player	Sony	DV2230	PXC4356A		x	n/a	n/a	4/1/2008	Heritage	New		\$450.00
Date Prepared:												
1												
2												
3												
4												
5												
6												
7												
8												
9												
10												
11												
12												
13												
14												
15												
16												
17												
18												
19												
20												
21												
22												
23												
24												
25												

Date Received: \_\_\_\_\_

## FIXED ASSET AND SENSITIVE ITEM TRACKING

Field Number	Field Description	Instruction or Comments	Required or Conditional
Header	Vendor	Indicate the legal name of the agency contracted to provide services.	Required
Header	Program	Indicate the title of the project as described in the contract with the County.	Required
Header	Contract #	Indicate the assigned County contract number. If not known, County staff can provide.	Required
Header	Contact Person	Indicate the first and last name of the primary agency contact for the contract.	Required
Header	Contact #	Indicate the most appropriate telephone number of the primary agency contact for the contract.	Required
Header	Date Prepared	Indicate the most current date that the tracking form was completed by the vendor.	Required
a	Item	Identify the item by providing a commonly recognized description of the item.	Required
b	Make/Brand	Identify the company that manufactured the item.	Required
c	Model	Identify the model number for the item, if applicable.	Conditional
d	Serial #	Identify the serial number for the item, if applicable.	Conditional
e	Fixed Asset	Mark the box with an "X" if the cost of the item is \$5,000 or more to indicate that the item is a fixed asset.	Conditional
f	Sensitive Item	Mark the box with an "X" if the item meets the criteria of a sensitive item as defined by the County.	Conditional
g	Date Requested	Indicate the date that the agency submitted a request to the County to purchase the item.	Required
h	Date Approved	Indicate the date that the County approved the request to purchase the item.	Required
i	Purchase Date	Indicate the date the agency purchased the item.	Required
j	Location	Indicate the physical location of the item	Required
k	Condition	Indicate the general condition of the item (New, Good, Worn, Bad).	Required
l	Fresno County Inventory Number	Indicate the FR # provided by the County for the item.	Conditional
m	Cost	Indicate the total purchase price of the item including sales tax and other costs, such as shipping.	Required

## National Standards for Culturally and Linguistically Appropriate Services (CLAS) in Health and Health Care

*The National CLAS Standards are intended to advance health equity, improve quality, and help eliminate health care disparities by establishing a blueprint for health and health care organizations to:*

### **Principal Standard:**

1. Provide effective, equitable, understandable, and respectful quality care and services that are responsive to diverse cultural health beliefs and practices, preferred languages, health literacy, and other communication needs.

### **Governance, Leadership, and Workforce:**

2. Advance and sustain organizational governance and leadership that promotes CLAS and health equity through policy, practices, and allocated resources.
3. Recruit, promote, and support a culturally and linguistically diverse governance, leadership, and workforce that are responsive to the population in the service area.
4. Educate and train governance, leadership, and workforce in culturally and linguistically appropriate policies and practices on an ongoing basis.

### **Communication and Language Assistance:**

5. Offer language assistance to individuals who have limited English proficiency and/or other communication needs, at no cost to them, to facilitate timely access to all health care and services.
6. Inform all individuals of the availability of language assistance services clearly and in their preferred language, verbally and in writing.
7. Ensure the competence of individuals providing language assistance, recognizing that the use of untrained individuals and/or minors as interpreters should be avoided.
8. Provide easy-to-understand print and multimedia materials and signage in the languages commonly used by the populations in the service area.

### **Engagement, Continuous Improvement, and Accountability:**

9. Establish culturally and linguistically appropriate goals, policies, and management accountability, and infuse them throughout the organization's planning and operations.
10. Conduct ongoing assessments of the organization's CLAS-related activities and integrate CLAS-related measures into measurement and continuous quality improvement activities.
11. Collect and maintain accurate and reliable demographic data to monitor and evaluate the impact of CLAS on health equity and outcomes and to inform service delivery.
12. Conduct regular assessments of community health assets and needs and use the results to plan and implement services that respond to the cultural and linguistic diversity of populations in the service area.
13. Partner with the community to design, implement, and evaluate policies, practices, and services to ensure cultural and linguistic appropriateness.
14. Create conflict and grievance resolution processes that are culturally and linguistically appropriate to identify, prevent, and resolve conflicts or complaints.
15. Communicate the organization's progress in implementing and sustaining CLAS to all stakeholders, constituents, and the general public.

## The Case for the Enhanced National CLAS Standards

*Of all the forms of inequality, injustice in health care is the most shocking and inhumane.*

— Dr. Martin Luther King, Jr.

Health equity is the attainment of the highest level of health for all people (U.S. Department of Health and Human Services [HHS] Office of Minority Health, 2011). Currently, individuals across the United States from various cultural backgrounds are unable to attain their highest level of health for several reasons, including the social determinants of health, or those conditions in which individuals are born, grow, live, work, and age (World Health Organization, 2012), such as socioeconomic status, education level, and the availability of health services (HHS Office of Disease Prevention and Health Promotion, 2010). Though health inequities are directly related to the existence of historical and current discrimination and social injustice, one of the most modifiable factors is the lack of culturally and linguistically appropriate services, broadly defined as care and services that are respectful of and responsive to the cultural and linguistic needs of all individuals.

Health inequities result in disparities that directly affect the quality of life for all individuals. Health disparities adversely affect neighborhoods, communities, and the broader society, thus making the issue not only an individual concern but also a public health concern. In the United States, it has been estimated that the combined cost of health disparities and subsequent deaths due to inadequate and/or inequitable care is \$1.24 trillion (LaVeist, Gaskin, & Richard, 2009). Culturally and linguistically appropriate services are increasingly recognized as effective in improving the quality of care and services (Beach et al., 2004; Goode, Dunne, & Bronheim, 2006). By providing a structure to implement culturally and linguistically appropriate services, the enhanced National CLAS Standards will improve an organization's ability to address health care disparities.

The enhanced National CLAS Standards align with the HHS Action Plan to Reduce Racial and Ethnic Health Disparities (HHS, 2011) and the National Stakeholder Strategy for Achieving Health Equity (HHS National Partnership for Action to End Health Disparities, 2011), which aim to promote health equity through providing clear plans and strategies to guide collaborative efforts that address racial and ethnic health disparities across the country. Similar to these initiatives, the enhanced National CLAS Standards are intended to advance health equity, improve quality, and help eliminate health care disparities by providing a blueprint for individuals and health and health care organizations to implement culturally and linguistically appropriate services. Adoption of these Standards will help advance better health and health care in the United States.

### Bibliography:

- Beach, M. C., Cooper, L. A., Robinson, K. A., Price, E. G., Gary, T. L., Jenckes, M. W., Powe, N.R. (2004). Strategies for improving minority healthcare quality. (AHRQ Publication No. 04-E008-02). Retrieved from the Agency of Healthcare Research and Quality website: <http://www.ahrq.gov/downloads/pub/evidence/pdf/minqual/minqual.pdf>
- Goode, T. D., Dunne, M. C., & Bronheim, S. M. (2006). The evidence base for cultural and linguistic competency in health care. (Commonwealth Fund Publication No. 962). Retrieved from The Commonwealth Fund website: [http://www.commonwealthfund.org/usr\\_doc/Goode\\_evidencebasecultlinguisticcomp\\_962.pdf](http://www.commonwealthfund.org/usr_doc/Goode_evidencebasecultlinguisticcomp_962.pdf)
- LaVeist, T. A., Gaskin, D. J., & Richard, P. (2009). The economic burden of health inequalities in the United States. Retrieved from the Joint Center for Political and Economic Studies website: <http://www.jointcenter.org/sites/default/files/upload/research/files/The%20Economic%20Burden%20of%20Health%20Inequalities%20in%20the%20United%20States.pdf>
- National Partnership for Action to End Health Disparities. (2011). National stakeholder strategy for achieving health equity. Retrieved from U.S. Department of Health and Human Services, Office of Minority Health website: <http://www.minorityhealth.hhs.gov/npa/templates/content.aspx?vl=1&lvlid=33&ID=286>
- U.S. Department of Health and Human Services. (2011). HHS action plan to reduce racial and ethnic health disparities: A nation free of disparities in health and health care. Retrieved from [http://minorityhealth.hhs.gov/npa/files/Plans/HHS/HHS\\_Plan\\_complete.pdf](http://minorityhealth.hhs.gov/npa/files/Plans/HHS/HHS_Plan_complete.pdf)
- U.S. Department of Health and Human Services, Office of Disease Prevention and Health Promotion. (2010). Healthy people 2020: Social determinants of health. Retrieved from <http://www.healthypeople.gov/2020/topicsobjectives2020/overview.aspx?topicid=39>
- U.S. Department of Health and Human Services, Office of Minority Health (2011). National Partnership for Action to End Health Disparities. Retrieved from <http://minorityhealth.hhs.gov/npa>
- World Health Organization. (2012). Social determinants of health. Retrieved from [http://www.who.int/social\\_determinants/en/](http://www.who.int/social_determinants/en/)

## CULTURAL COMPETENCE FORM

**Agency Name:** \_\_\_\_\_

**Program Category:** \_\_\_\_\_

Identify the Agency's ability to apply language, gender, and culturally specific competencies to the services provided by checking all that apply and/or provide the name of Agency that you have an arrangement with to respond to these referrals.

A	B		C
Language, Gender, and/or Cultural Competence	Have staff		Name of Agency that you have an arrangement with to respond to these referrals
	1	2	
	Included in staffing work plan	Not included in staffing work plan. Explain below	
Spanish (Language)			
Vietnamese (Language)			
Other Language:			
LGBT Staff			
African American Staff			
Latino Staff			
Native American Staff			
Asian American Staff			
Pacific Islander Staff			
Others:			

**NOTICE OF CHILD ABUSE REPORTING LAW**

The undersigned hereby acknowledges that Penal Code section 11166 and the contractual obligations between County of Fresno (COUNTY) and CONTRACTOR related to the provision of **Adult Full-Service Partnership Program Services**, require that the undersigned report all known or suspected child abuse or neglect to one or more of the agencies set forth in Penal Code (PC) section (§) 11165.9.

For purposes of the undersigned’s child abuse reporting requirements, “child abuse or neglect” includes physical injury inflicted by other than accidental means upon a child by another person, sexual abuse as defined in PC §11165.1, neglect as defined in PC §11165.2, willful cruelty or unjustifiable punishment as defined in PC §11165.3, and unlawful corporal punishment or injury as defined in PC §11165.4.

A child abuse report shall be made whenever the undersigned, in his or her professional capacity or within the scope of his or her employment, has knowledge of or observes a child whom the undersigned knows or reasonably suspects has been the victim of child abuse or neglect. (PC §11166.) The child abuse report shall be made to any police department or sheriff’s department (not including a school district police or security department), or to any county welfare department, including Fresno County Department of Social Services’ 24 Hour CARELINE. (See PC §11165.9.)

For purposes of child abuse reporting, a “reasonable suspicion” means that it is objectively reasonable for a person to entertain a suspicion, based upon facts that could cause a reasonable person in a like position, drawing, when appropriate, on his or her training and experience, to suspect child abuse or neglect. The pregnancy of a child does not, in and of itself, constitute a basis for reasonable suspicion of sexual abuse. (PC §11166(a)(1).)

Substantial penalties may be imposed for failure to comply with these child abuse reporting requirements.

Further information and a copy of the law may be obtained from the department head or designee.

I have read and understand the above statement and agree to comply with the child abuse reporting requirements.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**DISCLOSURE OF OWNERSHIP AND CONTROL INTEREST STATEMENT**

<b>I. Identifying Information</b>			
Name of entity		D/B/A	
Address (number, street)		City	State
			ZIP code
CLIA number	Taxpayer ID number (EIN)	Telephone number (       )	

II. Answer the following questions by checking "Yes" or "No." If any of the questions are answered "Yes," list names and addresses of individuals or corporations under "Remarks" on page 2. Identify each item number to be continued.

- |   | YES                      | NO                       |
|---|--------------------------|--------------------------|
| A. Are there any individuals or organizations having a direct or indirect ownership or control interest of five percent or more in the institution, organizations, or agency that have been convicted of a criminal offense related to the involvement of such persons or organizations in any of the programs established by Titles XVIII, XIX, or XX? ..... | <input type="checkbox"/> | <input type="checkbox"/> |
| B. Are there any directors, officers, agents, or managing employees of the institution, agency, or organization who have ever been convicted of a criminal offense related to their involvement in such programs established by Titles XVIII, XIX, or XX? .....   | <input type="checkbox"/> | <input type="checkbox"/> |
| C. Are there any individuals currently employed by the institution, agency, or organization in a managerial, accounting, auditing, or similar capacity who were employed by the institution's, organization's, or agency's fiscal intermediary or carrier within the previous 12 months? (Title XVIII providers only) .....                                   | <input type="checkbox"/> | <input type="checkbox"/> |

III. A. List names, addresses for individuals, or the EIN for organizations having direct or indirect ownership or a controlling interest in the entity. (See instructions for definition of ownership and controlling interest.) List any additional names and addresses under "Remarks" on page 2. If more than one individual is reported and any of these persons are related to each other, this must be reported under "Remarks."

NAME	ADDRESS	EIN

- B. Type of entity:     Sole proprietorship                       Partnership                       Corporation  
                               Unincorporated Associations                       Other (specify) \_\_\_\_\_

C. If the disclosing entity is a corporation, list names, addresses of the directors, and EINs for corporations under "Remarks."

- D. Are any owners of the disclosing entity also owners of other Medicare/Medicaid facilities? (Example: sole proprietor, partnership, or members of Board of Directors) If yes, list names, addresses of individuals, and provider numbers. ....

NAME	ADDRESS	PROVIDER NUMBER



**YES NO**

IV. A. Has there been a change in ownership or control within the last year? .....    
 If yes, give date. \_\_\_\_\_

B. Do you anticipate any change of ownership or control within the year?.....    
 If yes, when? \_\_\_\_\_

C. Do you anticipate filing for bankruptcy within the year?.....    
 If yes, when? \_\_\_\_\_

V. Is the facility operated by a management company or leased in whole or part by another organization?.....    
 If yes, give date of change in operations. \_\_\_\_\_

VI. Has there been a change in Administrator, Director of Nursing, or Medical Director within the last year?.....

VII. A. Is this facility chain affiliated? .....    
 (If yes, list name, address of corporation, and EIN.)

Name		EIN	
Address (number, name)	City	State	ZIP code

B. If the answer to question VII.A. is NO, was the facility ever affiliated with a chain?  
 (If yes, list name, address of corporation, and EIN.)

Name		EIN	
Address (number, name)	City	State	ZIP code

*Whoever knowingly and willfully makes or causes to be made a false statement or representation of this statement, may be prosecuted under applicable federal or state laws. In addition, knowingly and willfully failing to fully and accurately disclose the information requested may result in denial of a request to participate or where the entity already participates, a termination of its agreement or contract with the agency, as appropriate.*

Name of authorized representative (typed)	Title
Signature	Date

Remarks



**Certification Regarding Debarment, Suspension, and Other  
Responsibility Matters - Primary Covered Transactions**

INSTRUCTIONS FOR CERTIFICATION

1. By signing and submitting this proposal, the prospective primary participant is providing the certification set out below.
2. The inability of a person to provide the certification required below will not necessarily result in denial of participation in this covered transaction. The prospective participant shall submit an explanation of why it cannot provide the certification set out below. The certification or explanation will be considered in connection with the department or agency's determination whether to enter into this transaction. However, failure of the prospective primary participant to furnish a certification or an explanation shall disqualify such person from participation in this transaction.
3. The certification in this clause is a material representation of fact upon which reliance was placed when the department or agency determined to enter into this transaction. If it is later determined that the prospective primary participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, the department or agency may terminate this transaction for cause or default.
4. The prospective primary participant shall provide immediate written notice to the department or agency to which this proposal is submitted if at any time the prospective primary participant learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.
5. The terms covered transaction, debarred, suspended, ineligible, participant, person, primary covered transaction, principal, proposal, and voluntarily excluded, as used in this clause, have the meanings set out in the Definitions and Coverage sections of the rules implementing Executive Order 12549. You may contact the department or agency to which this proposal is being submitted for assistance in obtaining a copy of those regulations.
6. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.

**CERTIFICATION**

(1) The prospective primary participant certifies to the best of its knowledge and belief, that it, its owners, officers, corporate managers and partners:

(a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded by any Federal department or agency;

(b) Have not within a three-year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;

(c) (d) Have not within a three-year period preceding this application/proposal had one or more public transactions (Federal, State or local) terminated for cause or default.

(2) Where the prospective primary participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

Signature: \_\_\_\_\_

\_\_\_\_\_  
(Printed Name & Title)

Date: \_\_\_\_\_

\_\_\_\_\_  
(Name of Agency or Company)

## **SELF-DEALING TRANSACTION DISCLOSURE FORM**

In order to conduct business with the County of Fresno (hereinafter referred to as "County"), members of a contractor's board of directors (hereinafter referred to as "County Contractor"), must disclose any self-dealing transactions that they are a party to while providing goods, performing services, or both for the County. A self-dealing transaction is defined below:

*"A self-dealing transaction means a transaction to which the corporation is a party and in which one or more of its directors has a material financial interest"*

The definition above will be utilized for purposes of completing this disclosure form.

### INSTRUCTIONS

- (1) Enter board member's name, job title (if applicable), and date this disclosure is being made.
- (2) Enter the board member's company/agency name and address.
- (3) Describe in detail the nature of the self-dealing transaction that is being disclosed to the County. At a minimum, include a description of the following:
  - a. The name of the agency/company with which the corporation has the transaction; and
  - b. The nature of the material financial interest in the Corporation's transaction that the board member has.
- (4) Describe in detail why the self-dealing transaction is appropriate based on applicable provisions of the Corporations Code.
- (5) Form must be signed by the board member that is involved in the self-dealing transaction described in Sections (3) and (4).

<b>(1) Company Board Member Information:</b>			
<b>Name:</b>		<b>Date:</b>	
<b>Job Title:</b>			
<b>(2) Company/Agency Name and Address:</b>			
<b>(3) Disclosure (Please describe the nature of the self-dealing transaction you are a party to)</b>			
<b>(4) Explain why this self-dealing transaction is consistent with the requirements of Corporations Code 5233 (a)</b>			
<b>(5) Authorized Signature</b>			
<b>Signature:</b>		<b>Date:</b>	