

August 20, 2024

HCPCFC PROGRAM LETTER: 24-01 REVISED

TO:

HEALTHCARE PROGRAM FOR CHILDREN IN FOSTER CARE ADMINISTRATORS, MEDICAL CONSULTANTS, AND DEPARTMENT

OF HEALTH CARE SERVICES STAFF

SUBJECT: HEALTH CARE PROGRAM FOR CHILDREN IN FOSTER CARE FISCAL

YEAR 2024-2025 ALLOCATION

The purpose of this letter is to provide Health Care Programs for Children in Foster Care (HCPCFC) with their Fiscal Year (FY) 2024-2025 allocation.

This letter serves as each local program's approved state HCPCFC budget and enables each local program to use this letter to develop its budget. Budget approval letters will not be issued. Detailed budget information may be found in the Integrated Systems of Care Division (ISCD) Plan and Fiscal Guidelines (PFGs), until the Department of Health Care Services (DHCS) releases the HCPCFC Financial Policy and Procedure.

Acceptance of funds constitutes an agreement that the receiving local program and its agency will comply with all federal and state requirements pertaining to the HCPCFC program and adhere to all applicable policies and procedures set forth by the California Department of Social Services (CDSS) and DHCS. Periodically, the federal program responsible for oversight of the Medicaid program and related state administrative expenditures, will conduct programmatic audits. Finding of a federal audit exception and subsequent liability for repayment of federal Medicaid funds related to the HCPCFC program audit exception, are the exclusive and sole responsibility of each local program.

Each local program remains responsible for overseeing and tracking its expenditures. An audit file must be maintained. At a minimum this audit file should include:

- Documentation of required time studies, performed during one or more representative months of the fiscal quarter for each budgeted position claimed under Federal Financial Participation (FFP).
- » Documentation in support of claimed expenditures.



August 20, 2024 HCPCFC PROGRAM LETTER 24-01 REVISED Page 2 of 12

» Documentation to demonstrate compliance with all federal and state requirements pertaining to the HCPCFC program, and adherence to all applicable policies and procedures set forth by the CDSS and the DHCS.

Counties should maintain and be prepared to produce the audit file to State and Federal entities within seven (7) calendar days of a request.

Budget Reporting Instructions

- Willize the HCPCFC Budget Workbook.
 Budget workbooks may be found in the Templates section of the ISCD Budget Portal and by requested to hcpc.gov. Questions regarding the ISCD Budget Portal may be directed to ISCD Budget Portal may be directed to ISCDFiscal@dhcs.ca.gov.
- » Sign electronically using Adobe Acrobat Pro DC Self-signed with Digital ID² function or DocuSign.³
 If access to either of these options is not available, scanned signature will be accepted, with the original kept in the local audit file. Electronic signature will be required in FY 2024-25.
- » Submit electronically to the ISCD Budget Portal.
- » Submit only two documents to the ISCD Budget Portal:
 - One Excel version of the HCPCFC Budget Workbook and
 - One signed PDF version of the HCPCFC Budget Workbook
- » Submit only the information requested in the HCPCFC Budget Workbook. Be prepared to provide ISCD with additional documentation to demonstrate compliance with program requirements, upon request.
- Submit by October 1, 2024.
 If all necessary signatures cannot be obtained by this date, submit completed excel workbooks by the deadline and contact HCPCFC@dhcs.ca.gov to request an extension for submission of required signatures.

¹ ISCD Budget Portal

² Manage Digital IDS in Adobe

³ Docusign, How to Sign a Document

August 20, 2024 HCPCFC PROGRAM LETTER 24-01 REVISED Page 3 of 12

Staffing Allowances

DHCS will only allow specific staff classifications in the HCPCFC Administrative budget, they are as follows:

- Supervising Public Health Nurse (PHN): Counties will receive 1 Supervising Public Health Nurse to supervise no more than 10 PHN.
- Public Health Assistant (PHA): Counties will receive .25 Full Time Equivalent (FTE) PHA for every 10 PHNs within the county. If less than 10 PHNs they will receive .25 FTE.
- Fiscal Support Staff: Counties will receive .25 FTE Fiscal Support staff for every 10 PHNs within the county. If less than 10 PHNs they will receive .25 FTE.
- Administrative Support Staff: Counties will receive .25 FTE Administrative Support staff for every 10 PHNs within the county. If less than 10 PHNs they will receive .25 FTE.

Senate Bill (SB) 108 amended SEC. 166. Item 4260-101-0001 of Section 2.00 of the Budget Act of 2024 to include provision 21 which allows the counties to deviate from the department's established allocation staffing methodology governing the use of the county HCPCFC administrative budget and California Children's Services Compliance Monitoring and Oversight (M&O) budget for purposes of extending flexibility to the counties regarding appropriate staffing necessary to implement and operationalize the HCPCFC program manual requirements and readiness activities for the CCS M&O.

To be eligible for this flexibility, the county must submit the *One-Time Flexibilities - SB* 108 Administrative Support Budget workbook to DHCS no later than October 1, 2024. The budget must be approved through the county's Board of Supervisors and proof of their approval must be included with your budget submission to DHCS. The budget must describe the county's proposed use of funds to support HCPCFC and CCS M&O activities, including direct and indirect administrative costs. DHCS will send the *One-Time Flexibilities - SB* 108 Administrative Support Budget workbook and instructions to all counties via email.

Fiscal questions may be directed to: ISCDFiscal@dhcs.ca.gov. All other questions may be directed to the central program inbox: HCPCFC@dhcs.ca.gov.

Sincerely,

ORIGINAL SIGNED BY

Cortney Maslyn, Chief Integrated Systems of Care Division Department of Health Care Services August 20, 2024 HCPCFC PROGRAM LETTER 24-01 REVISED Page 4 of 12

Attachments:

- 1. FY 2024-2025 HCPCFC Allocation Tables
 - A. Base Allocation
 - B. Psychotropic Medication Monitoring & Oversight
 - C. Caseload Relief
 - D. Administrative Allocation

August 20, 2024 HCPCFC PROGRAM LETTER 24-01 REVISED Page 5 of 12

Attachment 1A: Health Care Program for Children in Foster Care Base Allocation (07/01/2024 through 06/30/2025)

County/City	State General Funds	Federal Funds	Total Funds	
Alameda	\$182,045	\$546,134	\$728,179	
Alpine	\$3,000	\$9,000	\$12,000	
Amador	\$8,677	\$26,031	\$34,708	
Butte	\$68,375	\$205,126	\$273,501	
Calaveras	\$12,148	\$36,444	\$48,592	
Colusa	\$5,900	\$17,701	\$23,602	
Contra Costa	\$100,307	\$300,921	\$401,227	
Del Norte	\$16,313	\$48,939	\$65,252	
El Dorado	\$21,346	\$64,037	\$85,382	
Fresno	\$396,195	\$1,188,584	\$1,584,779	
Glenn	\$8,330	\$24,990	\$33,320	
Humboldt	\$51,889	\$155,667	\$207,555	
Imperial	\$47,724	\$143,172	\$190,895	
Inyo	\$3,000	\$9,000	\$12,000	
Kern	\$312,027	\$936,082	\$1,248,109	
Kings	\$58,657 \$14,230	\$175,971	\$234,628	
Lake		\$42,691	\$56,922	
Lassen	\$9,371	\$28,114	\$37,485	
Los Angeles	\$2,879,918	\$8,639,753	\$11,519,671	
Madera	\$39,220	\$117,661	\$156,881	
Marin	\$15,619	\$46,856	\$62,475	
Mariposa	\$3,000	\$9,000	\$12,000	
Mendocino	\$39,047	\$117,140	\$156,187	
Merced	\$106,901	\$320,704	\$427,606	
Modoc	\$2,950	\$8,851	\$11,801	
Mono	\$3,000	\$9,000	\$12,000	
Monterey	\$32,626	\$97,877	\$130,503	
Napa	\$14,751	\$44,253	\$59,004	
Nevada	\$7,636	\$22,907	\$30,543	
Orange	\$409,384	\$1,228,152	\$1,637,536	
Placer	\$27,940	\$83,820	\$111,761	
Plumas	\$4,339	\$13,016	\$17,354	
Riverside	\$570,951			
Sacramento	\$236,363	\$709,090	\$945,453	
San Benito	\$5,033	\$15,098	\$20,131	
San Bernardino	\$880,549	\$2,641,646	\$3,522,194	

August 20, 2024 HCPCFC PROGRAM LETTER 24-01 REVISED Page 6 of 12

Attachment 1A: Health Care Program for Children in Foster Care Base Allocation (07/01/2024 through 06/30/2025)

(6776 17202 1 till degri 0076012020)							
County/City	State General Funds	Federal Funds	Total Funds				
San Diego	\$320,878	\$962,634	\$1,283,511				
San Francisco	\$113,670	\$341,009	\$454,678				
San Joaquin	\$214,150	\$642,450	\$856,600				
San Luis Obispo	\$47,550	\$142,651	\$190,201				
San Mateo	\$21,346	\$64,037	\$85,382				
Santa Barbara	\$68,375	\$205,126	\$273,501				
Santa Clara	\$81,391	\$244,173	\$325,563				
Santa Cruz	\$24,990	\$74,970	\$99,960				
Shasta	\$69,764	\$209,291	\$279,054				
Sierra	\$3,000	\$9,000	\$12,000				
Siskiyou	\$13,189	\$39,567	\$52,757				
Solano	\$58,136	\$174,409	\$232,545 \$326,952 \$368,602 \$59,004				
Sonoma	\$81,738	\$245,214					
Stanislaus	\$92,150	\$276,451					
Sutter	\$14,751	\$44,253					
Tehama	\$21,172	\$63,516	\$84,688 \$14,577				
Trinity	\$3,644	\$10,933					
Tulare	\$153,411	\$460,232	\$613,642				
Tuolumne	\$11,974	\$35,923	\$47,897				
Ventura	\$74,796	\$224,389	\$299,185				
Yolo	\$45,641	\$136,924	\$182,565				
Yuba	\$29,849	\$89,547	\$119,396				
City of Berkeley	\$6,247	\$18,742	\$24,990				
Total	\$8,170,573	\$24,511,719	\$32,682,292				

August 20, 2024 HCPCFC PROGRAM LETTER 24-01 REVISED Page 7 of 12

Attachment 1B: Health Care Program for Children in Foster Care Psychotropic Medication Monitoring and Oversight Allocation (07/01/2024 through 06/30/2025)

County/City	State General Funds		Total Funds		
Alameda	\$40,795	\$122,386	\$163,181		
Alpine	\$3,659	\$10,975	\$14,634		
Amador	\$3,659	\$10,975	\$14,634 \$73,171		
Butte	\$18,293	\$54,878			
Calaveras		\$3,659 \$10,975			
Colusa	\$3,659	\$10,975	\$14,634 \$14,634		
Contra Costa	\$36,585	\$109,756	\$146,341		
Del Norte	\$3,659	\$10,975	\$14,634		
El Dorado	\$10,976	\$32,926	\$43,902		
Fresno	\$54,878	\$164,634	\$219,512		
Glenn	\$3,659	\$10,975	\$14,634		
Humboldt	\$7,317	\$21,951	\$29,268		
Imperial	\$14,634	\$43,903	\$58,537		
Inyo	\$3,659	\$10,975	\$14,634		
Kern	\$40,244	\$120,732	\$160,976		
Kings	\$7,317	\$21,951	\$29,268		
Lake	\$7,317	\$21,951	\$29,268		
Lassen	\$3,659	\$10,975	\$14,634		
Los Angeles	\$526,829	\$1,580,488	\$2,107,317		
Madera	\$3,659	\$10,975	\$14,634		
Marin	\$3,659	\$10,975	\$14,634		
Mariposa	\$3,659	\$10,975	\$14,634		
Mendocino	\$10,976	\$32,926	\$43,902		
Merced	\$10,976	\$32,926	\$43,902		
Modoc	\$3,659	\$10,975	\$14,634		
Mono	\$3,659	\$10,975	\$14,634		
Monterey	\$14,634	\$43,903	\$58,537		
Napa	\$3,659	\$10,975	\$14,634		
Nevada	\$3,659	\$10,975	\$14,634		
Orange	\$47,561	\$142,683	\$190,244		
Placer	\$7,317	\$21,951	\$29,268		
Plumas	\$3,659	\$10,975	\$14,634		
Riverside	\$102,439	\$307,317	\$409,756		
Sacramento	\$73,171	\$219,512	\$292,683		
San Benito	\$3,659	\$10,975	\$14,634		
San Bernardino	\$142,683	\$428,049	\$570,732		
San Diego	\$80,488	\$241,463	\$321,951		

August 20, 2024 HCPCFC PROGRAM LETTER 24-01 REVISED Page 8 of 12

Attachment 1B: Health Care Program for Children in Foster Care Psychotropic Medication Monitoring and Oversight Allocation (07/01/2024 through 06/30/2025)

(6176 172024 till odgif 00/30/2023)							
County/City	State General Funds	Federal Funds	Total Funds				
San Francisco	\$25,610	\$76,829	\$102,439				
San Joaquin	\$51,220	\$153,658	\$204,878				
San Luis Obispo	\$14,634	\$43,903	\$58,537				
San Mateo	\$10,976	\$32,926	\$43,902				
Santa Barbara	\$14,634	\$43,903	\$58,537				
Santa Clara	\$36,585	\$109,756	\$146,341				
Santa Cruz	\$7,317	\$21,951	\$29,268				
Shasta	\$14,634	\$43,903	\$58,537				
Sierra	\$3,658	\$10,976	\$14,634				
Siskiyou	\$3,658	\$10,976	\$14,634 \$43,902 \$73,171				
Solano	\$10,975	\$32,927					
Sonoma	\$18,292	\$54,879					
Stanislaus \$29,267		\$87,806	\$117,073				
Sutter	\$7,316	\$21,952	\$29,268				
Tehama	\$3,658	\$10,976	\$14,634				
Trinity	\$3,658	\$10,976	\$14,634				
Tulare	\$21,951	\$65,855	\$87,806				
Tuolumne	\$3,658	\$10,977	\$14,635				
Ventura	\$25,609	\$76,831	\$102,440				
Yolo	\$14,634	\$43,904	\$58,538				
Yuba	\$7,316	\$21,953	\$29,269				
City of Berkeley	\$3,107	\$9,322	\$12,429				
Total	\$1,650,000	\$4,950,000	\$6,600,000				

August 20, 2024 HCPCFC PROGRAM LETTER 24-01 REVISED Page 9 of 12

Attachment 1C: Health Care Program for Children in Foster Care Caseload Relief Allocation (07/01/2024 through 06/30/2025)

County/City	State General Funds	Federal Funds	Total Funds				
Alameda	\$97,126	\$291,374	\$388,500				
Alpine	\$0	\$0	\$0				
Amador	\$3,996	\$11,989	\$15,985				
Butte	\$36,351	\$109,051 \$1					
Calaveras	\$5,836	\$5,836 \$17,509 \$2					
Colusa	\$3,172	\$9,516	\$12,688				
Contra Costa	\$67,880	\$203,639	\$271,519				
Del Norte	\$4,821	\$14,464	\$19,285				
El Dorado	\$19,095	\$57,285	\$76,380				
Fresno	\$133,095	\$399,283	\$532,378				
Glenn	\$5,075	\$15,226	\$20,301				
Humboldt	\$23,346	\$70,036	\$93,382				
Imperial	\$28,611	\$85,832	\$114,443				
Inyo	\$1,161	\$3,483	\$4,644				
Kern	\$109,940	\$329,818	\$439,758				
Kings	\$24,171	\$72,511	\$96,682				
Lake	\$10,341	\$10,341 \$31,021 \$					
Lassen	\$4,314	\$12,942	\$17,256				
Los Angeles	\$1,389,880	\$4,169,636	\$5,559,516				
Madera	\$21,125	\$63,376	\$84,501				
Marin	\$5,963	\$17,890	\$23,853				
Mariposa	\$1,903	\$5,710	\$7,613				
Mendocino	\$17,318	\$51,956	\$69,274				
Merced	\$33,495	\$100,487	\$133,982				
Modoc	\$963	\$2,889	\$3,852				
Mono	\$0	\$0	\$0				
Monterey	\$27,659	\$82,978	\$110,637				
Napa	\$8,310	\$24,932	\$33,242				
Nevada	\$3,996	\$11,989	\$15,985				
Orange	\$150,604	\$451,810	\$602,414				

August 20, 2024 HCPCFC PROGRAM LETTER 24-01 REVISED Page 10 of 12

Attachment 1C: Health Care Program for Children in Foster Care Caseload Relief Allocation

(07/01/2024 through 06/30/2025)

County/City	State General Funds		Total Funds	
Placer	\$14,211	\$42,632	\$56,843	
Plumas	\$3,172	\$9,516	\$12,688	
Riverside	\$219,497	\$658,493	\$877,990	
Sacramento	\$151,429	\$454,285	\$605,714	
San Benito	\$3,679	\$11,038	\$14,717	
San Bernardino	\$381,013	\$1,143,039	\$1,524,052	
San Diego	\$173,441	\$520,324	\$693,765	
San Francisco	\$57,856	\$173,568	\$231,424	
San Joaquin	\$98,139	\$294,419	\$392,558	
San Luis Obispo	\$26,328	\$78,981	\$105,309	
San Mateo	\$18,206	\$54,621	\$72,827	
Santa Barbara	\$28,357	\$85,071	\$113,428	
Santa Clara	\$74,668	\$224,002	\$298,670	
Santa Cruz	\$17,382	\$52,147	\$69,529	
Shasta	\$28,166	\$84,500	\$112,666 \$0	
Sierra	\$0	\$0		
Siskiyou	\$6,725	\$20,174	\$26,899	
Solano	\$27,469	\$82,407	\$109,876	
Sonoma	\$33,433	\$100,297	\$133,730	
Stanislaus	\$48,214	\$144,641	\$192,855	
Sutter	\$11,102	\$33,305	\$44,407	
Tehama	\$13,830	\$41,489	\$55,319	
Trinity	\$3,299	\$9,896	\$13,195	
Tulare	\$67,371	\$202,115	\$269,486	
Tuolumne	\$6,660	\$19,983	\$26,643	
Ventura	\$53,606	\$160,818	\$214,424	
Yolo	\$27,216	\$81,647	\$108,863	
Yuba	\$13,701	\$41,109	\$54,810	
City of Berkeley	\$2,283	\$6,851	\$9,134	
Total	\$3,850,000	\$11,550,000	\$15,400,000	

August 20, 2024 HCPCFC PROGRAM LETTER 24-01 REVISED Page 11 of 12

Attachment 1D: Health Care Program for Children in Foster Care Administrative Allocation⁴ (07/01/2024 through 06/30/2025)

A THE RESIDENCE OF THE PARTY OF	(07/01/2024 tillough 00/00/2020)					
County/City	State General Funds	Federal Funds	Total Funds			
Alameda	\$179,986	\$179,986	\$359,972			
Alpine	\$136,413	\$136,413	\$272,826			
Amador	\$168,230	\$168,230	\$336,459			
Butte	\$160,019	\$160,019	\$320,037			
Calaveras	\$148,193	\$148,193	\$296,385			
Colusa	\$168,815	\$168,815	\$337,630			
Contra Costa	\$230,009	\$230,009	\$460,018			
Del Norte	\$128,386	\$128,386	\$256,771			
El Dorado	\$160,239	\$160,239	\$320,477			
Fresno	\$177,400	\$177,400	\$354,800			
Glenn	\$158,434	\$158,434	\$316,868			
Humboldt	\$172,319	\$172,319	\$344,637			
Imperial	\$151,222	\$151,222	\$302,444			
Inyo	\$166,402	\$166,402	\$332,803			
Kern	\$179,074	\$179,074	\$358,147			
Kings	\$139,869	\$139,869	\$279,738			
Lake	\$162,061	\$162,061	\$324,121			
Lassen	\$125,143	\$125,143	\$250,286			
Los Angeles	\$1,703,756	\$1,703,756	\$3,407,511			
Madera	\$156,683	\$156,683	\$313,366			
Marin	\$181,202	\$181,202	\$362,403			
Mariposa	\$174,431	\$174,431	\$348,861			
Mendocino	\$150,628	\$150,628	\$301,255			
Merced	\$113,628	\$113,628	\$227,256			
Modoc	\$92,890	\$92,890	\$185,780			
Mono	\$162,199	\$162,199	\$324,398			
Monterey	\$130,725	\$130,725	\$261,450			
Napa	\$206,808	\$206,808	\$413,616			
Nevada	\$153,604	\$153,604	\$307,208			
Orange	\$213,870	\$213,870	\$427,739			

⁴ DHCS reallocated the CHDP Program budget county allocation starting in FY 24-25 to the HCPCFC Administrative Budget and the California Children's Services (CCS) Monitoring and Oversight. Please refer to the CCS Monitoring and Oversight Allocation Letter for state's approved budget.

August 20, 2024 HCPCFC PROGRAM LETTER 24-01 REVISED Page 12 of 12

Attachment 1D: Health Care Program for Children in Foster Care Administrative Allocation⁴ (07/01/2024 through 06/30/2025)

	State Consul					
County/City	State General Funds	Federal Funds	Total Funds			
Placer	\$171,636	\$171,636	\$343,272			
Plumas	\$139,854	\$139,854	\$279,707			
Riverside	\$294,838	\$294,838	\$589,676			
Sacramento	\$198,302 \$198,302	\$198,302 \$198,302	\$396,603			
San Benito	\$138,303	\$138,303	\$276,606			
San Bernardino	\$391,661	\$391,661	\$783,322			
San Diego	\$170,810	\$170,810	\$341,620			
San Francisco	\$249,473	\$249,473	\$498,946			
San Joaquin	\$171,377	\$171,377	\$342,753			
San Luis Obispo	\$188,360	\$188,360	\$376,719			
San Mateo	\$227,028	\$227,028	\$454,056			
Santa Barbara	\$185,801	\$185,801	\$371,602			
Santa Clara	\$218,297	\$218,297	\$436,594			
Santa Cruz	\$176,789	\$176,789	\$353,578			
Shasta	\$158,163	\$158,163	\$316,326			
Sierra	\$156,591	\$156,591	\$313,182			
Siskiyou	\$143,143	\$143,143	\$286,286			
Solano	\$182,239	\$182,239	\$364,477			
Sonoma	\$200,722	\$200,722	\$401,444			
Stanislaus	\$171,030	\$171,030	\$342,060			
Sutter	\$163,154	\$163,154	\$326,308			
Tehama	\$202,803	\$202,803	\$405,605			
Trinity	\$147,140	\$147,140	\$294,280			
Tulare	\$154,549	\$154,549	\$309,098			
Tuolumne	\$155,903	\$155,903	\$311,805			
Ventura	\$174,044	\$174,044	\$348,088			
Yolo	\$185,730	\$185,730	\$371,459			
Yuba	\$193,018	\$193,018	\$386,036			
City of Berkeley	\$215,125	\$215,125	\$430,250			
Total	\$11,878,510	\$11,878,510	\$23,757,020			



CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES

Health Care Program for Children in Foster Care

	Agency Inf	ormation	County/City:		Fiscal Year:
	Agency IIII	omation	Fresno		2024-25
	Street Address:	1221 Fulton St	Health	Officer Name:	Dr. Trinidad Solis
1	City:	Fresno	HCPCFC	Central Email	CWSPHNs@fresnocountyc
	Zip Code:	93721			1221 Fulton St., Fresno, CA
	Authorized HCPC	FC Representative	Dir		Services Agency
	Name, Title: Ankara Lee, Supervising				Sanja Bugay
		(559) 600-6591			(559) 600-2301
		alee@fresnocountyca.gov			sbugay@fresnocountyca.g
\vdash		rd of Supervisors		Chief Proba	
-					AND ADDRESS AND AD
	Name: Bernice Seidel Phone: (559) 600-1601				Kirk Haynes
		bseidel@fresnocountyca.g			(559) 600-1298
	Email:		Email:	khaynes@fresnocountyca.g	
	List All HCPCFC		C Program Sta	ff	
V.	Name:	Title:	Support	PHN	Email:
			Staff	1.5.5.5	
1	Ankara Lee	pervising Public Health Nu	No	Yes	alee@fresnocountyca.gov
2	Stacey Cunningham	Public Health Nurse	No	Yes	ningham@fresnocountyca
3	Sanjeevan Sidhu	Public Health Nurse	No	Yes	asidhu@fresnocountyca.go
4	Stella Holliman	Public Health Nurse	No	Yes	olliman@fresnocountyca.gl
5	Gursimran Deol	Public Health Nurse	No	Yes	gdeol@fresnocountyca.gov
6	Matthew Johnson	Public Health Nurse	No	Yes	tjohnson@fresnocountyca.
/	Nuchi Lee	Public Health Nurse	No	Yes	nlee@fresnocountyca.gov
8	Shouapa Thao	Public Health Nurse	No	Yes	nothao@fresnocountyca.gc
9	Vacant	Public Health Nurse	No	Yes	
10	Nestor Yalong	Public Health Nurse	No	Yes	yalong@fresnocountyca.gc
11	Megan Gunn	Public Health Nurse	No	Yes	ngunn@fresnocountyca.go
12	Vacant	Public Health Nurse	No	Yes	
13	Alysia Bonner	Supervising Office Assistant	Yes	No	oonner@fresnocountyca.gc
14	Pa Xiong	Office Assistant	Yes	No	axiong@fresnocountyca.go
15	Vanessa Chavez	Office Assistant	Yes	No	chavez@fresnocountyca.go
16	Madeleine Yakoub	Program Technician	Yes	No	yakoub@fresnocountyca.ge
17	Vacant	Health Education Assistant	Yes	No	
18	Chashua Lor	Staff Analyst	Yes		chlor@fresnocountyca.gov
Vie	w additional rows by selecti	ng the "+" to the left.			,



CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES

Health Care Program for Children in Foster Care

Certification Statement	County/City:	Fiscal Year:
certification statement	Fresno	2024-25

I certify that the Health Care Program for Children in Foster Care (HCPCFC) will comply with all applicable state and federal and state laws and regulations, including all federal laws and regulations governing recipients of federal funds granted to states for medical assistance pursuant to Title XIX of the Social Security Act (42 U.S.C. Section 1396 et seq.). I further certify that the HCPCFC will comply with all rules promulgated by DHCS pursuant to these authorities, including the HCPCFC Program Manual. I further agree that this HCPCFC may be subject to sanctions or other remedies if this HCPCFC violates any of the above.

Ankara Lee, Supervising Public Health Nurse	Ann Lee	10/1/2024
HCPCFC/County Authorized Representative	Signature	Date
Nathan Magsig	25	1115/24
Local Governing Body Chairperson Name,	Signature	Date

ATTEST:

BERNICE E. SEIDEL

Clerk of the Board of Supervisors County of Fresno, State of California

By Alexandri Viii Deput



		Base Budg	et Work	sheet				County/City Name: Fresno		Fiscal Year: 2024-25	×0
Col	lumn				1A	18	1	2A	2	3A	3
I. P	ersonnel Expenses				Total Base			Enhanced	F-bd	Non-	Non-
-	T	T T			FTE %	Annual Salary	Total Budget	FTE %	Enhanced Total	Enhanced FTE	Enhanced
#		Title	DSS	PHN	FIE 70			FIE 76	10(a)	%	Total
_	Ankara Lee	Supervising Public Health	No	Yes	65%	\$155,469	\$101,055	75%	\$75,791	25%	\$25,264
_	Stacey Cunningham	Public Health Nurse	No	Yes	65%	\$129,407	\$84,115	75%	\$63,086	25%	\$21,029
		Public Health Nurse	No	Yes	65%	\$110,849	\$72,052	75%	\$54,039	25%	\$18,013
4	Stella Holliman	Public Health Nurse	No	Yes	65%	\$129,407	\$84,115	75%	\$63,086	25%	\$21,029
5	Gursimran Deol	Public Health Nurse	No	Yes	65%	\$102,106	\$66,369	75%	\$49,777	25%	\$16,592
6	Matthew Johnson	Public Health Nurse	No	Yes	65%	\$121,983	\$79,289	75%	\$59,467	25%	\$19,822
7	Nuchi Lee	Public Health Nurse	No	Yes	65%	\$92,797	\$60,318	75%	\$45,239	25%	\$15,080
8	Shouapa Thao	Public Health Nurse	No	Yes	0%	\$0	\$0	0%	\$0	100%	\$0
9	Vacant	Public Health Nurse	No	Yes	40%	\$95,472	\$38,189	75%	\$28,642	25%	\$9,547
10	Nestor Yalong	Public Health Nurse	No	Yes	0%	\$0	\$0	0%	\$0	100%	\$0
11	Megan Gunn	Public Health Nurse	No	Yes	0%	\$0	\$0	0%	\$0	100%	\$0
12	Vacant	Public Health Nurse	No	Yes	0%	\$0	\$0	0%	\$0	100%	\$0
13	Alysia Bonner	Supervising Office Assistar	Yes	No	75%	\$62,658	\$46,994	0%	\$0	100%	\$46,994
14	Pa Xiong	Office Assistant	Yes	No	75%	\$48,795	\$36,596	0%	\$0	100%	\$36,596
15	Vanessa Chavez	Office Assistant	Yes	No	75%	\$37,306	\$27,980	0%	\$0	100%	\$27,980
16	Madeleine Yakoub	Program Technician	Yes	No	50%	\$46,350	\$23,175	0%	\$0	100%	\$23,175
17	Vacant	Health Education Assistant	Yes	No	75%	\$42,575	\$31,931	0%	\$0	100%	\$31,931
18	Chashua Lor	Staff Analyst	Yes	No	0%	\$0	\$0	0%	\$0	100%	\$0
Viev	w additional rows by selecting	the "+" to the left.									- 40
Tota	al Net Salaries and Wages				100000000000000000000000000000000000000	1444444444	\$752,176		\$439,125	200000000000000000000000000000000000000	\$313.051
Staf	ff Benefits (Specify %)		75.85	774%			\$570,584		\$333,110		\$237,473
I. To	otal Personnel Expenses				10.10.000		\$1,322,760		\$772,235		\$550,524
II. T	otal Operating Expenses (List	t in Narrative)				44444444	\$13,565		\$10,174		\$3,391
III. Total Capital Expenses (List in Narrative)					\$0				50		
IV. Indirect Expenses (List in Narrative)						.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
1.	Internal (Specify %)		18.59	23%	111111111111111111111111111111111111111	100000000000000000000000000000000000000	\$248,454				\$248,454
2. External (Specify %) 0%				\$0			0.0000000000000000000000000000000000000	\$0			
V. T	Total Indirect Expenses (List i	n Narrative)			22423	0000000000	\$248,454				\$248,454
V. T	otal Other Expenses (List in N	Varrative)					\$0				\$0
					Budge	t Grand Total	\$1,584,779		\$782,409	5454455555	\$802,369

I certify that the Health Care Program for Children in Foster Care (HCPCFC) will comply with all applicable state and federal and state laws and regulations, including all federal laws and regulations governing recipients of federal funds granted to states for medical assistance pursuant to Title XIX of the Social Security Act (42 U.S.C. Section 1396 et seq.). I further certify that the HCPCFC will comply with all rules promulgated by DHCS pursuant to these authorities, and that all listed expenses adhere to program goals, scope, and activity requirements. I further agree that this HCPCFC may be subject to sanctions or other remedies if this HCPCFC violates any of the above. HCPCFC staffing is limited to Public Health Nurses and their Direct Support Staff. By signing below, I certify that the listed individual's Civil Service Classification, Duty Statement, and all budgeted activities adhere to HCPCFC program scope and meet the definition of Public Health Nurse, as defined by California Code of Regulations Section 1305, or Directly Supporting Staff, as defined by Code of Federal Regulations Section 432.2.

Ankara Lee, Supervising Public Health Nurse Authorized HCPCFC Signor Name, Title

Ann Lee
Signature

10/1/2024





	Base Budget Narrative	County/City Name:	Fiscal Year:
	base baager Harranye	Fresno	2024-25
I. Personnel E	Expenses Identify and Explain Any Changes in Personnel/Personnel Ex	penses	
Salary and Be	enefits for 13 positions, total of 8.45 FTE. Benefits calculated with est	imated total and ben	efits rate for the
positions. In	cludes retirement, health insurance, OASDI, Unemployment Insuranc	e, and Benefits Admir	nistration.
" 0 "			
	Expenses Identify and Explain All Operating Expense Line Items		
	mileage reimburseemnt of at \$0.67/mile for program staff to travel to		
	and associated garage/maintenance costs. Registration costs for PH		
	fessional competence and gain program specific skills. Also includes	ancillary costs relate	d to attending
training and	meetings penses Identify and Explain All Capital Expense Line Items		
	and a strain y and a september 2010 to 100 t		
IV. Indirect Ex	penses Identify and Explain All Indirect Expense Line Items		
	Fresno County Department of Public Health's indirect rate is 24.43%	of personnel costs a	pproved for use by
Internal:	Fresno County's Auditor Controller/Treasurer-Tax Collector. Reduce		
	remain within HCPCFC allocation		
External:			
V. Other Expe	enses Identify and Explain All Other Expense Line Items		
-	the Health Care Program for Children in Foster Care (HCPCFC) will co		
	vs and regulations, including all fedéral laws and regulations governi		
states for me	dical assistance pursuant to Title XIX of the Social Security Act (42 U.	S.C. Section 1396 et	seq.). I further certify
that the HCP	CFC will comply with all rules promulgated by DHCS pursuant to the	se authorities, and th	at all listed evnences

that the HCPCFC will comply with all rules promulgated by DHCS pursuant to these authorities, and that all listed expenses adhere to program goals, scope, and activity requirements. I further agree that this HCPCFC may be subject to sanctions or other remedies if this HCPCFC violates any of the above.

STATE OF THE STATE	5 1101 Gr C 11010100 Gr, Gr 1110 G5010.		
Ankara Lee, Supervising Public Health Nurse	Ann Lee	10/1/2024	
Authorized HCPCFC Signor Name, Title	Signature	Date	



	P:	sychotropic Medication Monitoring & O	versight	Budget '	Worksheet			County/City I	Name:	Fiscal Year:	
_								Fresno		2024-25	
Col	umn				1A	1B	1	2A	2	3A	3
-	ersonnel Expenses				Total Base	Annual	Total Budget	Enhanced	Enhanced	Non- Enhanced	Non- Enhanced
#	Name	Title	DSS	PHN	FTE %	Salary		FTE %	Total	FTE %	Total
1	Ankara Lee	Supervising Public Health Nurse	No	Yes	0%	\$0	\$0	0%	\$0	100%	\$0
	Stacey Cunningham	Public Health Nurse	No	Yes	0%	\$0	\$0	0%	\$0	100%	\$0
	Sanjeevan Sidhu	Public Health Nurse	No	Yes	0%	\$0	\$0	0%	\$0	100%	\$0
4	Stella Holliman	Public Health Nurse	No	Yes	0%	\$0	\$0	0%	\$0	100%	\$0
5	Gursimran Deol	Public Health Nurse	No	Yes	0%	\$0	\$0	0%	\$0	100%	\$0
6	Matthew Johnson	Public Health Nurse	No	Yes	0%	\$0	\$0	0%	\$0	100%	50
7	Nuchi Lee	Public Health Nurse	No	Yes	0%	\$0	\$0	0%	\$0	100%	SO
8	Shouapa Thao	Public Health Nurse	No	Yes	85%	\$88,770	\$75,455	75%	\$56,591	25%	\$18,864
9	Vacant	Public Health Nurse	No	Yes	25%	\$95,472	\$23,868	75%	\$17,901	25%	\$5,967
10	Nestor Yalong	Public Health Nurse	No	Yes	0%	\$0	\$0	0%	\$0	100%	\$0
11	Megan Gunn	Public Health Nurse	No	Yes	0%	50	SO	0%	SO	100%	\$0
12	Vacant	Public Health Nurse	No	Yes	0%	\$0	\$0	0%	\$0	100%	\$0
13	Alysia Bonner	Supervising Office Assistant	Yes	No	0%	\$0	\$0	0%	50	100%	\$0
14	Pa Xiong	Office Assistant	Yes	No	0%	\$0	\$0	0%	\$0	100%	SO
15	Vanessa Chavez	Office Assistant	Yes	No	0%	\$0	50	0%	SO	100%	\$0
16	Madeleine Yakoub	Program Technician	Yes	No	0%	\$0	50	0%	\$0	100%	\$0
17	Vacant	Health Education Assistant	Yes	No	0%	\$0	\$0	0%	\$0	100%	SO
18	Chashua Lor	Staff Analyst	Yes	No	0%	\$0	50	0%	50	100%	\$0
Viev	v additional rows by selecting the "-	*" to the left.		-				-			
Tota	al Net Salaries and Wages						\$99,323	1000000000	\$74,492	100000000000000000000000000000000000000	\$24,831
Staf	f Benefits (Specify %)		75.82	116%			\$75,308		\$56,481		\$18,827
I. To	otal Personnel Expenses					******	\$174,631		\$130,973		\$43,658
II. To	otal Operating Expenses (List in Na	rrative)			********	111111111111	\$6,000		\$4,500		\$1,500
II. T	otal Capital Expenses (List in Narra	tive)			200000000000000000000000000000000000000		\$0		200000000000000000000000000000000000000		SO
IV. I	ndirect Expenses (List in Narrative)				14.44.44						
1.	Internal (Specify %)		21.	53%	1455		\$38,881	11111111111	100000000000000000000000000000000000000		\$38,881
2.	External (Specify %)		0	%	2000000	140000000000000000000000000000000000000	\$0				SO
V. T	otal Indirect Expenses (List in Narra	ative)				14.000	\$38,881	11.11.11.11.11.11			\$38,881
V. To	otal Other Expenses (List in Narrati	ve)			F10000000	*******	\$0	121211111111	200000000000000000000000000000000000000		SO
					Budget	Grand Total	\$219,512	10000000	\$135,473	*********	\$84,039

I certify that the Health Care Program for Children in Foster Care (HCPCFC) will comply with all applicable state and federal and state laws and regulations, including all federal laws and regulations governing recipients of federal funds granted to states for medical assistance pursuant to Title XIX of the Social Security Act (42 U.S.C. Section 1396 et seq.). I further certify that the HCPCFC will comply with all rules promulgated by DHCS pursuant to these authorities, and that all listed expenses adhere to program goals, scope, and activity requirements. I further agree that this HCPCFC may be subject to sanctions or other remedies if this HCPCFC violates any of the above. HCPCFC staffing is limited to Public Health Nurses and their Direct Support Staff. By signing below, I certify that the listed individual's Civil Service Classification, Duty Statement, and all budgeted activities adhere to HCPCFC program scope and meet the definition of Public Health Nurse, as defined by California Code of Regulations Section 1305, or Directly Supporting Staff, as defined by Code of Federal Regulations Section 432.2.

Ankara Lee, Supervising Public Health Nurse	Ann Lee	10/1/2024	
Authorized HCPCFC Signor Name Title	Signature	Date	



CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES

Health Care Program for Children in Foster Care

Psychot	ropic Medication Monitoring & Oversight Budget Narrative	County/City Name:	Fiscal Year:
Psychol	nopic Medication Monitoring & Oversight budget Narrative	Fresno	2024-25
I. Personnel E	xpenses Identify and Explain Any Changes in Personnel/Personnel Ex	penses	
	enefits for 2 positions, total of 1.10 FTE PHN. Includes retirement, her	alth insurance, OASDI	, Unemployment
Insurance, an	d Benefits Administration.		
	Expenses Identify and Explain All Operating Expense Line Items		
	mileage reimburseemnt of at \$0.67/mile for program staff to travel to		
	and associated garage/maintenance costs. Registration costs for PH		
	fessional competence and gain program specific skills. Also includes	ancillary costs related	d to attending
training and r	meetings Denses Identify and Explain All Capital Expense Line Items		
	the state of the s		
IV. Indirect Ex	penses Identify and Explain All Indirect Expense Line Items		1
I a kanna a la	Fresno County Department of Public Health's indirect rate is 24.43%		
Internal:	Fresno County's Auditor Controller/Treasurer-Tax Collector. Reduce	d indirect costs rate t	o 21.525% to remain
	within HCPCFC allocation		
External:			
	the state of the second		
V. Other Expe	nses Identify and Explain All Other Expense Line Items		
I certify that t	the Health Care Program for Children in Foster Care (HCPCFC) will co	mnly with all applica	hie state and fodoral

I certify that the Health Care Program for Children in Foster Care (HCPCFC) will comply with all applicable state and federal and state laws and regulations, including all federal laws and regulations governing recipients of federal funds granted to states for medical assistance pursuant to Title XIX of the Social Security Act (42 U.S.C. Section 1396 et seq.). I further certify that the HCPCFC will comply with all rules promulgated by DHCS pursuant to these authorities, and that all listed expenses adhere to program goals, scope, and activity requirements. I further agree that this HCPCFC may be subject to sanctions or other remedies if this HCPCFC violates any of the above.

Ankara Lee, Supervising Public Health N

Ann Lee

10/1/2024

Authorized HCPCFC Signor Name, Title

Signature

Date



		Caseload Relief Budget	147	L 4				County/City	Name:	Fiscal Year:	
		Caseload Keller Budger	vvorks	neet				Fresno		2024-25	
Col	umn				1A	1B	1	2A	2	3A	3
-	ersonnel Expenses				Total Base	Annual	Total Budget	Enhanced	Enhanced Total	Non-Enhanced	Non- Enhanced
#	Name	Title	DSS	PHN	FTE %	Salary		FTE %		FTE %	Total
1	Ankara Lee	Supervising Public Health Nurse	No	Yes	0%	\$0	\$0	0%	\$0	100%	\$0
2	Stacey Cunningham	Public Health Nurse	No	Yes	0%	\$0	\$0	0%	\$0	100%	\$0
3	Sanjeevan Sidhu	Public Health Nurse	No	Yes	0%	\$0	\$0	0%	\$0	100%	SO
4	Stella Holliman	Public Health Nurse	No	Yes	0%	\$0	\$0	0%	\$0	100%	\$0
5	Gursimran Deol	Public Health Nurse	No	Yes	- 0%	\$0	\$0	0%	\$0	100%	SO
6	Matthew Johnson	Public Health Nurse	No	Yes	0%	so	\$0	0%	\$0	100%	SO
7	Nuchi Lee	Public Health Nurse	No	Yes	0%	\$0	\$0	0%	\$0	100%	\$0
8	Shouapa Thao	Public Health Nurse	No	Yes	0%	\$0	\$0	0%	\$0	100%	50
9	Vacant	Public Health Nurse	No	Yes	0%	SO	\$0	0%	\$0	100%	50
10	Nestor Yalong	Public Health Nurse	No	Yes	65%	\$129,407	\$84,115	75%	\$63,086	25%	\$21,029
11	Megan Gunn	Public Health Nurse	No	Yes	65%	\$125,271	\$81,426	75%	\$61,070	25%	\$20,357
12	Vacant	Public Health Nurse	No	Yes	65%	\$95,472	\$62,057	75%	\$46,543	25%	\$15,514
13	Alysia Bonner	Supervising Office Assistant	Yes	No	25%	\$62,658	\$15,665	0%	\$0	100%	\$15,665
14	Pa Xiong	Office Assistant	Yes	No	25%	\$48,795	\$12,199	0%	SO	100%	\$12,199
15	Vanessa Chavez	Office Assistant	Yes	No	0%	SO	SO '	0%	50	100%	SO
16	Madeleine Yakoub	Program Technician	Yes	No	0%	SO	SO	0%	50	100%	50
17	Vacant	Health Education Assistant	Yes	No	0%	SO	\$0	0%	50	100%	50
18	Chashua Lor	Staff Analyst	Yes	No	0%	SO	\$0	0%	\$0	100%	50
Viev	v additional rows by selecting the "+	* to the left.									40
Tota	I PHN FTE %				195%	100000000	400000000000000000000000000000000000000	225%	0.0000000000000000000000000000000000000	Residence and the	
Tota	I Direct Support Staff FTE %				50%			0%			
Tota	Net Salaries and Wages				10000000	10000000	\$255,461	::::::::::::::::::::::::::::::::::::::	\$170,698		\$84.763
Staf	Benefits (Specify %)		70.23	985%			\$179,435		\$119,898		\$59,537
I. To	tal Personnel Expenses					1111111111	\$434,896		\$290,596		\$144,300
II. To	otal Operating Expenses (List in Na	rrative)			14.000.000	111111111111	\$3,000		\$2,250		\$750
III. T	otal Capital Expenses (List in Narra	tive)			100000000		SO				\$0
IV. I	ndirect Expenses (List in Narrative)				144444	transition.	404000000000000000000000000000000000000				
	Internal (Specify %)		21.5	58%			\$94,482				\$94,482
	External (Specify %)		0	%			SO				\$0
	otal Indirect Expenses (List in Narra	ative)					594,482				\$94,482
	otal Other Expenses (List in Narrativ			_			SO				\$94,462
					Design and	Grand Total	\$532,378		\$292.846		\$239,532

I certify that the Health Care Program for Children in Foster Care (HCPCFC) will comply with all applicable state and federal and state laws and regulations, including all federal laws and regulations governing recipients of federal funds granted to states for medical assistance pursuant to Title XIX of the Social Security Act (42 U.S.C. Section 1396 et seq.). I further certify that the HCPCFC will comply with all rules promulgated by DHCS pursuant to these authorities, and that all listed expenses adhere to program goals, scope, and activity requirements. I further agree that this HCPCFC may be subject to sanctions or other remedies if this HCPCFC violates any of the above. HCPCFC staffing is limited to Public Health Nurses and their Direct Support Staff. By signing below, I certify that the listed individual's Civil Service Classification, Duty Statement, and all budgeted activities adhere to HCPCFC program scope and meet the definition of Public Health Nurse, as defined by California Code of Regulations Section 1305, or Directly Supporting Staff, as defined by Code of Federal Regulations Section 432.2.

Ankara Lee, Supervising Public Health Nurse

Ann Lee 10/1/2024

Authorized HCPCFC Signor Name, Title Signature Date



CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES

Health Care Program for Children in Foster Care

	Cocaland Ballof Budget Nameting	County/City Name:	Fiscal Year:
	Caseload Relief Budget Narrative	Fresno	2024-25
I. Personnel E	expenses Identify and Explain Any Changes in Personnel/Personnel Ex	penses	
	enefits for 5 positions, total of 2.45 FTE. Includes retirement, health in		mployment
	d Benefits Administration.		
	Expenses Identify and Explain All Operating Expense Line Items		
	mileage reimburseemnt of at \$0.67/mile for program staff to travel to		
	and associated garage/maintenance costs. Registration costs for PHN		
	essional competence and gain program specific skills. Also includes	ancillary costs related	l to attending
training and r	meetings Denses Identify and Explain All Capital Expense Line Items		
III. Capital Exp	consess identify and explain All Capital expense line items		
DV (a diamet 5			
IV. Indirect Ex	penses Identify and Explain All Indirect Expense Line Items		
Internal:	Fresno County Department of Public Health's indirect rate is 24.43%		
internal.	Fresno County's Auditor Controller/Treasurer-Tax Collector. Reduced	d indirect costs rate t	o 21.5763% to
	remain within HCPCEC allocation		
External:			
V. Other Expe	nses Identify and Explain All Other Expense Line Items		
100			
I certify that t	the Health Care Program for Children in Foster Care (HCPCFC) will co	mply with all applical	ole state and federal
and state lav	vs and regulations, including all federal laws and regulations governing	na recipients of feder	al funds granted to

I certify that the Health Care Program for Children in Foster Care (HCPCFC) will comply with all applicable state and federal and state laws and regulations, including all federal laws and regulations governing recipients of federal funds granted to states for medical assistance pursuant to Title XIX of the Social Security Act (42 U.S.C. Section 1396 et seq.). I further certify that the HCPCFC will comply with all rules promulgated by DHCS pursuant to these authorities, and that all listed expenses adhere to program goals, scope, and activity requirements. I further agree that this HCPCFC may be subject to sanctions or other remedies if this HCPCFC violates any of the above.

Ankara Lee, Supervising Public Health Nurse

Ann Lee

10/1/2024

Authorized HCPCFC Signor Name, Title

Signature

Date



		Administrative Budget V	Vorkshee	et	1			County/City I Fresno	Name:	Fiscal Year: 2024-25	
Co	lumn				1A	18	1	2A	2	3A	3
	ersonnel Expenses	r			Total Base	Annual	Total Budget	Enhanced	Enhanced	Non- Enhanced	Non- Enhanced
#	Name	Title	DSS	PHN	FIE %	Salary	-	FTE %	Total	FTE %	Total
1	Ankara Lee	Supervising Public Health Nurse	No	Yes	0%	\$0	\$0	400000000000000000000000000000000000000		0%	\$0
2	Stacey Cunningham	Public Health Nurse	No	Yes	0%	\$0	\$0	33333333		0%	50
3	Sanjeevan Sidhu	Public Health Nurse	No	Yes	0%	\$0	\$0	222300000		0%	\$0
	Stella Holliman	Public Health Nurse	No	Yes	0%	50	\$0	100000000000000000000000000000000000000	200000000000000000000000000000000000000	0%	50
5	Gursimran Deol	Public Health Nurse	No	Yes	0%	\$0	\$0			0%	\$0
6	Matthew Johnson	Public Health Nurse	No	Yes	0%	SO	50			0%	\$0
7	Nuchi Lee	Public Health Nurse	No	Yes	0%	\$0	\$0			0%	SO
8	Shouapa Thao	Public Health Nurse	No	Yes	0%	SO	50			0%	\$0
9	Vacant	Public Health Nurse	No	Yes	0%	SO	\$0	111111111111	******	0%	SO
10	Nestor Yalong	Public Health Nurse	No	Yes	0%	50	50	2		0%	\$0
11	Megan Gunn	Public Health Nurse	No	Yes	0%	SO	\$0	200000000000000000000000000000000000000		100%	SO
12	Vacant	Public Health Nurse	No	Yes	0%	SO	50	0%	\$0	100%	02
13	Alysia Bonner	Supervising Office Assistant	Yes	No	0%	SO	SO	0%	SO	100%	50
14	Pa Xiong	Office Assistant	Yes	No	0%	SO	\$0	0%	SO	100%	SO
15	Vanessa Chavez	Office Assistant	Yes	No	25%	\$37,306	\$9,327	0%	SO	100%	\$9,327
16	Madeleine Yakoub	Program Technician	Yes	No	0%	- 50	\$0	0%	\$0	100%	SO
17	Vacant	Health Education Assistant	Yes	No	25%	\$42,575	\$10,644	0%	02	100%	\$10,644
18	Chashua Lor	Staff Analyst	Yes	No	25%	\$75,536	\$18,884	0%	50	100%	\$18,884
Vie	w additional rows by selecting the "+" to				-		\$ 10,00 i			100.0	310,004
Tot	al Net Salaries and Wages					1000000000	\$38,854	F-1000000000000000000000000000000000000		100000000	\$38,854
Stal	ff Benefits (Specify %)		76.930	0659%			\$29.891			********	\$29,891
. To	otal Personnel Expenses					14.63.63.63.63.6	\$68,745				\$68,745
I. T	otal Operating Expenses (List in Narrativ	re)					\$0		200000000	33333333	SO
11. 1	Total Capital Expenses (List in Narrative)				200000000000000000000000000000000000000	********	\$0		144444444		\$0
V. I	ndirect Expenses (List in Narrative)				********	10000000	conditions				:::: :::::::
١.	Internal (Specify %)		24.4	13%	100000000000000000000000000000000000000		\$16,794				\$16,794
2.	External (Specify %)		0'	%	********		SO				\$10,754
٧.	Total Indirect Expenses (List in Narrative)	•		110000000		\$16,794				\$16,794
/. T	otal Other Expenses (List in Narrative)				******	100000000000000000000000000000000000000	SO				50
						Grand Total	\$85,539	100000000	SO		\$85,539

I certify that the Health Care Program for Children in Foster Care (HCPCFC) will comply with all applicable state and federal and state laws and regulations, including all federal laws and regulations governing recipients of federal funds granted to states for medical assistance pursuant to Title XIX of the Social Security Act (42 U.S.C. Section 1396 et seq.). I further certify that the HCPCFC will comply with all rules promulgated by DHCS pursuant to these authorities, and that all listed expenses adhere to program goals, scope, and activity requirements. I further agree that this HCPCFC may be subject to sanctions or other remedies if this HCPCFC violates any of the above. HCPCFC staffing is limited to a Public Health Nurse Supervisor, Public Health Assistant, Fiscal Support Staff, and Administrative Support Staff.

Ankara Lee, Supervising Public Health Nurse	Ann Lee	10/1/2024	
Authorized HCPCFC Signor Name, Title	Signature	Date	



Ankara Lee, Supervising Public Health Nurse

Authorized HCPCFC Signor Name, Title

CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES

10/1/2024

Date

Health Care Program for Children in Foster Care

	Administrative Budget Narrative	County/City Name:	Fiscal Year:
		Fresno	2024-25
	expenses Identify and Explain Any Changes in Personnel/Personnel Ex		
	nefits for 3 positions, total of .75 FTE. Includes retirement, health ins	surance, OASDI, Uner	nployment
Insurance, an	d Benefits Administration.		
II. Operating	Expenses Identify and Explain All Operating Expense Line Items		
III. Capital Exp	penses Identify and Explain All Capital Expense Line Items		
IV. Indirect Ex	penses Identify and Explain All Indirect Expense Line Items		
lasta wa ali	Fresno County Department of Public Health's indirect rate is 24.43%	of personnel costs a	pproved for use by
Internal:	Fresno County's Auditor Controller/Treasurer-Tax Collector.		
External:			
V. Other Expe	nses Identify and Explain All Other Expense Line Items	,	
and state law states for me that the HCPO	the Health Care Program for Children in Foster Care (HCPCFC) will consider the Health Care Program for Children in Foster Care (HCPCFC) will consider and regulations, including all federal laws and regulations governing dical assistance pursuant to Title XIX of the Social Security Act (42 U.CFC will comply with all rules promulgated by DHCS pursuant to the ogram goals, scope, and activity requirements. I further agree that the other remedies if this HCPCFC violates and of the	ing recipients of fede S.C. Section 1396 et se authorities, and th is HCPCFC may be su	ral funds granted to seq.). I further certify at all listed expenses



		Budget	Budget Summary			5	County/City:					Fiscal Year.			
							Fresno					2024-25			
Funding Source:		Base			PMM&O			Caseload Relief		ď	County/City-Federal	le		Administrative	
A	8	U	۵	В	C	٥	80	U	٥	8	U	٥	8	U	٥
Category/Line Item	Total Budget	Enhanced	Non-Enhanced Total Budget	Total Budget	Enhanced	Non-Enhanced	Total Budget	Enhanced	Non-Enhanced	Total Budget	Enhanced	Non-Enhanced	Total Budget	Enhanced	Non-Enhanced
Total Personnel Expenses	\$1,322,760	\$772,235	\$550,524	\$174,631	\$130,973	\$43,658	\$434,896	\$290,596	\$144,300	05		So	\$68,745		\$68,745
I. Total Operating Expenses	\$13,565	\$10,174	\$3,391	\$6,000	\$4,500	\$1,500	\$3,000	\$2,250	8750	80		05	So		So
II. Total Capital Expenses	80		05	80		0\$	05		80	\$0		05	So		\$0
IV. Total Indirect Expenses	\$248,454		\$248,454	\$38,881		\$38,881	\$94,482		\$94,482	05		05	\$16,794		\$16,794
V. Total Other Expenses	05		\$0	0\$		os	05		0\$	05		80	So		05
Budget Grand Total	\$1,584,779	\$782,409	\$802,369	\$219,512	\$135,473	\$84,039	\$532,378	\$292,846	\$239,532	05		05	\$85,539		\$85,539
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Source of Funds:	Total Funds	Enhanced	Non-Enhanced	Total Funds	Enhanced	Non-Enhanced	Total Funds	Enhanced	Non-Enhanced	Total Funds	Enhanced	Non-Enhanced	Total Funds	Enhanced	Non-Enhanced
State/County Funds	\$596,787	\$195,602	\$401,185	\$75,888	\$33,868	\$42,020	\$192,978	\$73,212	\$119,766	os		80	\$42,770		\$42,770
Federal Funds (Title XIX)	166'286\$	\$586,807	\$401,185	\$143,624	\$101,605	\$42,020	\$339,401	\$219,635	\$119,766	05		SO	\$42,770		\$42,770
Budget Grand Total	\$1,584,778	\$782,409	\$802,369	\$219,512	\$135,473	\$84,039	\$532,378	\$292,846	\$239,532	OS		05	885,539		\$85,539
	-	,													

Ankara Lee, Supervising Public Health Nurse X MM 20.
Authorized HCPCFC Signor Name, Title Signature Date

Funding Allocation from the California Department of Health Care Services

Allocation Name: CDHCS Health Care Program for Children in Foster Care Fiscal Year 2024-2025 Allocation (Program Letter 24-01)

Fund/Subclass: 0001/10000

Organization #: 56201613, 56201618

Revenue Account #: 4380, 3530