

DEPARTMENT: HEALTH

BY: C. B. MOSHER, MD, MPH, H.O.
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RECOMMENDED ACTION AND JUSTIFICATION:

Recommend resolution approving Children's Medical Services (CMS) Plan and Budget Justification for Fiscal Year 2006-2007 in the amount of \$35,628 for California Children's Services (CCS), \$84,903 for Child Health and Disability Program (CHDP), and \$17,385 for the Health Care Program for Children in Foster Care (HCPCFC) and authorizing Chair to sign the CHDP and CCS Children's Medical Services Certification Statements for Fiscal Year 2006-2007.

BACKGROUND AND HISTORY OF BOARD ACTIONS:

The CCS Program provides payment for services for children with medically eligible conditions, including diagnosis, treatment and school-based therapy services for physically handicapped children. State and County are to share in the administrative costs (H&S Code 268[a]) and Diagnosis Therapy and Treatment (DTT) Services of the CCS Program at the local level (H&S Code 265[a][b][d]). The County of Mariposa is responsible for 50% of administrative costs of the non-Medi-Cal County caseload (County 4,177, State \$4,176), and 50% of the DTT (County \$18,977, State \$18,977).

The County works directly with the State CHDP Office for administration of the CHDP Program, which provides health assessment for the early detection, and prevention of disease and disabilities of children. State Law (H&S 321.2) requires each County to have a CHDP Program.

The Health Care Program for HCPCFC provides for a Foster Care Public Health Nurse (PHN) under Section 16501.3(b) of the Welfare and Institutions Code.

These on going programs, CCS, CHDP, and HCPCFC, are State-mandated. The State has combined these three programs into CMS.

ALTERNATIVES AND CONSEQUENCES OF NEGATIVE ACTION:

1. Direct staff to modify program budget request.
2. Elimination of these mandated programs may be a violation of H&S Codes.

Financial Impact? Yes No Current FY Cost: \$ Annual Recurring Cost: \$156,893
 Budgeted In Current FY? Yes No Partially Funded
 Amount in Budget: \$ 156,893 List Attachments, number pages consecutively
 Additional Funding Needed: \$ 0
 Source: Mariposa County Joint CHDP/CCS Plan & Budget
 Internal Transfer _____
 Unanticipated Revenue _____ 4/5's vote
 Transfer Between Funds _____ 4/5's vote
 Contingency _____ 4/5's vote
 General Other

CLERK'S USE ONLY:

Res. No.: 06-514 Ord. No. _____
 Vote - Ayes: 5 Noes: _____
 Absent: _____
 Approved
 Minute Order Attached No Action Necessary

COUNTY ADMINISTRATIVE OFFICER:

Requested Action Recommended
 No Opinion
 Comments:

The foregoing instrument is a correct copy of the original on file in this office.

Date: _____
Attest: MARGIE WILLIAMS, Clerk of the Board
County of Mariposa, State of California

By: _____
Deputy

CAO: 