CALIFORNIA DEPARTMENT OF
Mental Health

Audits – Northern Region
1600 9th Street, Sacramento, CA 95814
(916) 455-1554, FAX (916) 445-1588

February 6, 2008

Cheryl L. Duerksen, Ph.D.
Director of Mental Health
Tulare County Health and
Human Services Agency
5957 South Mooney Boulevard
Visalia, CA 93277

Dear Dr. Duerksen:

AUDIT REPORT – TULARE COUNTY MENTAL HEALTH

We have conducted a desk examination of the Short-Doyle/Medi-Cal Cost Reporting and Data Collection (CR/DC) report of Tulare County Mental Health Services for the fiscal period July 1, 2002 to June 30, 2003. Our examination was made in accordance with Section 14170 of the Welfare and Institutions Code and was limited to a review of SD/MC units, Mode Costs, Utilization Review Costs, and Administrative Costs.

In our opinion, the amount shown in the accompanying Summary of Net Federal Share of Federal Short-Doyle/Medi-Cal Program Costs and EPSDT SGF (Schedule 1) represents the actual net program costs allowable under the above-mentioned statutes.

The effect of this revised allowable program costs is as follows:

	Net Program Costs		
	As Settled	As Revised	Adjustment
Federal Share of Short-Doyle/Medi-Cal	$ 8,695,000	$ 8,614,250	$ (80,750)
Federal Share of Healthy Families/Medi-Cal	$ 466,852	$ 444,833	$ (22,019)
State General Funds EPSDT Due State	$ 3,130,763	$ 3,080,298	$ (50,465)

If you disagree with any of the results of this audit you may request an informal appeal conference. This request must be in writing and received by the Department of Health Services within sixty (60) calendar days following the date of receipt of this report. Your notice of disagreement should be directed to Vicki Orlich, Chief, Administrative Appeals, Office of Legal Services, Department of Health Services, 1029 J Street, Suite 200, Sacramento, California 95814, and be in conformance with provisions of Sections 51016 and sequence, Title 22, of the California Code of Regulations.

Sincerely,

CHUKWUEMEKA OKEMIRI, CPA
Audits Supervisor – Northern Region

WALTER J. HILL, JR., MBA, EA
Chief of Audits

Enclosures

CERTIFIED MAIL

SCHEDULE 1

COUNTY OF TULARE
COMMUNITY MENTAL HEALTH SERVICES
SUMMARY OF NET REIMBURSABLE MEDI-CAL PROGRAM COSTS
FISCAL YEAR ENDED JUNE 30, 2003

		As Settled	Audit Adjustments	As Audited
NET REIMBURSABLE MEDI-CAL PROGRAM COSTS				
COUNTY - FFP				
MEDI-CAL - FFP		$ 4,402,124	$ (45,173)	$ 4,356,951
HEALTHY FAMILIES - FFP	(Sch. 2a)	64,286	(2,533)	61,753
TOTAL FFP - COUNTY PROVIDER	(Sch. 2a)	$ 4,466,410	$ (47,706)	$ 4,418,704
CONTRACT PROVIDERS - FFP	(Sch. 3b)			
MEDI-CAL - FFP		$ 4,292,876	$ (35,577)	$ 4,257,299
HEALTHY FAMILIES - FFP		402,566	(19,486)	383,080
TOTAL FFP - CONTRACT PROVIDER	(Sch. 3b)	$ 4,695,442	$ (55,063)	$ 4,640,379
TOTAL FFP - COUNTY PLUS CONTRACT PROVIDERS				
MEDI-CAL - FFP		$ 8,695,000	$ (80,750)	$ 8,614,250
HEALTHY FAMILIES - FFP		466,852	(22,019)	444,833
TOTAL FFP - CONTRACT PROVIDER		$ 9,161,852	$ (102,769)	$ 9,059,083
SUMMARY OF STATE GENERAL FUNDS				
EPSDT - SGF	(Sch. 4)	$ 3,130,763	$ (50,465)	$ 3,080,298

SCHEDULE 2

COUNTY OF TULARE
COMMUNITY MENTAL HEALTH SERVICES
SUMMARY OF MEDI-CAL PROGRAM COSTS BY MODE OF SERVICE
FISCAL YEAR ENDED JUNE 30, 2003

COUNTY OPERATED FEDERAL

			As Settled	Audit Adjustments	As Audited
Total Medi-Cal Gross Reimbursement					
1	Inpatient SD/MC and Crossover	(MH 1968, Ln 11, 11A)	$ 0	$ 0	$ 0
2.	Outpatient SD/MC and Crossover	(MH 1968, Ln 11, 11A)	6,735,187	(75,447)	6,659,740
3	Enhanced SD/MC (Children) - I/P	(MH1968, Ln 16, 16A)	0	0	0
4.	Enhanced SD/MC (Children) - O/P	(MH1968, Ln 16, 16A)	0	0	0
5.	Enhanced SD/MC (Refugees) - I/P	(MH1968, Ln 22)	0	0	0
6	Enhanced SD/MC (Refugees) - O/P	(MH1968, Ln 22)	0	0	0
7	Healthy Families Gross Reimbursement-I/P	(MH1968, Ln 27, 27A)	0	0	0
8	Healthy Families Gross Reimbursement-O/P	(MH1968, Ln 27, 27A)	33,494	(811)	32,683
9	Total		$ 6,768,681	$ (76,258)	$ 6,692,423
Less: Patient & Other Payor Revenues					
10	Inpatient SD/MC and Crossover	(MH 1968, Ln 28, 28A)	$ 0	$ 0	$ 0
11.	Outpatient SD/MC and Crossover	(MH 1968, Ln 28, 28A)	104,097	0	104,097
12.	Enhanced SD/MC (Children)-I/P	(MH 1968, Ln 29)	0	0	0
13.	Enhanced SD/MC (Children)-O/P	(MH 1968, Ln 29)	0	0	0
14.	Enhanced SD/MC (Refugees) - I/P	(MH1968, Ln 30)	0	0	0
15	Enhanced SD/MC (Refugees) - O/P	(MH1968, Ln 30)	0	0	0
16.	Healthy Families Patient Revenue-I/P	(MH 1968, Ln 31)	0	0	0
17.	Healthy Families Patient Revenue-O/P	(MH 1968, Ln 31)	0	0	0
18	Total		$ 104,097	$ 0	$ 104,097
Medi-Cal Net Reimbursement for Direct Services					
19.	Inpatient SD/MC (Incl Children Enhanced)	(Ln 1,3 - Ln 10,12)	$ 0	$ 0	$ 0
20.	Outpatient SD/MC (Incl Children Enhanced)	(Ln 2,4 - Ln 11,13)	6,631,090	(75,447)	6,555,643
21.	Enhanced SD/MC (Refugees)-I/P	(Ln 5 - Ln 14)	0	0	0
22.	Enhanced SD/MC (Refugees)-O/P	(Ln 6 - Ln 15)	0	0	0
23.	Healthy Families-I/P	(Ln 7 - Ln 16)	0	0	0
24.	Healthy Families-O/P	(Ln 8 - Ln 17)	33,494	(811)	32,683
25	Total		$ 6,664,584	$ (76,258)	$ 6,588,326
Medi-Cal MAA Reimbursement					
26.	Service Functions 01-09	(MH1979, Ln 11, Col. A)	$ 0	$ 0	$ 0
27	Service Functions 11-19, 31-39	(MH1979, Ln 12, Col. A)	0	0	0
28	Service Functions 21-19	(MH1979, Ln 13, Col. A)	0	0	0
29	Total		$ 0	$ 0	$ 0

SCHEDULE 2a

COUNTY OF TULARE
COMMUNITY MENTAL HEALTH SERVICES
SUMMARY OF MEDI-CAL PROGRAM COSTS BY MODE OF SERVICE
FISCAL YEAR ENDED JUNE 30, 2003

COUNTY OPERATED FEDERAL		As Settled	Audit Adjustments	As Audited
Amount Negotiated Rates Exceed Cost				
30. Inpatient SD/MC (Incl Children Enhan)	(MH 1968, Ln 38, 38A)	$ 0	$ 0	$ 0
31. Outpatient SD/MC (Incl Children Enhan)	(MH 1968, Ln 38, 38A)	0	0	0
32. Enhanced SD/MC (Refugees)-I/P	(MH1968, Ln 39)	0	0	0
33. Enhanced SD/MC (Refugees)-O/P	(MH1968, Ln 39)	0	0	0
34. Healthy Families-I/P	(MH 1968, Ln 40, 40A)	0	0	0
35. Healthy Families-O/P	(MH 1968, Ln 40, 40A)	0	0	0
36. Total		$ 0	$ 0	$ 0
Medi-Cal Administrative Reimbursement				
37. Administrative Reimbursement Limit	(MH 1979, Ln 4)	$ 2,454,894	$ (23,892)	$ 2,431,002
38. Medi-Cal Administration	(MH 1979, Ln 5)	$ 1,606,213	$ 0	$ 1,606,213
39. Medi-Cal Reimbursement	(Lower of Ln 37, Ln 38)	$ 1,606,213	$ 0	$ 1,606,213
Healthy Families Administrative Reimbursement				
40. Healthy Families Administrative Reimbursement Limit	(MH1979, Ln 8)	$ 65,091	$ (3,066)	$ 62,025
41. Healthy Families Administration	(MH1979, Ln 9)	$ 68,600	$ 0	$ 68,600
42. Healthy Families Administrative Reimbursement	(Lower of Ln 40, Ln 41)	$ 65,091	$ (3,066)	$ 62,025
Utilization Review Reimbursement				
43. Skilled Professional	(MH1979, Ln 14, Col. D)	$ 230,882	$ 0	$ 230,882
44. Other Medi-Cal U.R.	(MH1979, Ln 15, Col. D)	$ 25,650	$ 0	$ 25,650
Net SD/MC Reimbursement - FFP				
45. Direct Services	(MH1979, Ln 16,16A)	$ 3,413,030	$ (44,881)	$ 3,368,149
46. Enhanced (Children)	(MH1979, Ln 17,17A)	0	0	0
47. Enhanced (Refugees)	(MH1979, Ln 18)	0	0	0
48. MAA	(MH 1979, Ln 11, 12 & 13)	0	0	0
49. Administrative Reimbursement	(MH1979, Ln 6)	803,107	(1)	803,107
50. U.R. Skilled Professional	(MH1979, Ln 14)	173,162	(1)	173,162
51. U.R. Other	(MH1979, Ln 15)	12,825	0	12,825
52. Negotiated Rate-Payback	(MH1979, Ln 20)	0	0	0
53. Subtotal- FFP		$ 4,402,124	$ (44,882)	$ 4,357,242
54. Contract Limitation Adjustment	(MH 1979, Ln 22)	$ 0	$ 0	$ 0
55. Quality Assurance Review Results	(Adj # 51)	0	291	291
56. Total SD/MC Reimbursement - FFP		$ 4,402,124	$ (45,173)	$ 4,356,951
Net Healthy Families Reimbursement - FFP				
57. Healthy Families Net Reimbursement	(MH1979, Ln 24,24A)	$ 21,814	$ (532)	$ 21,282
58. Negotiated Rate Exceed Costs	(MH1979, Ln 26)	0	0	0
59. Administrative Reimbursement	(MH1979, Ln 10)	42,472	(2,001)	40,471
60. Total Healthy Families Reimbursement - FFP		$ 64,286	$ (2,533)	$ 61,753
61. Total - FFP (Ln 56 + Ln 60)		$ 4,466,410	$ (47,706)	$ 4,418,704
				(To Sch. 1)

COUNTY OF TULARE
SUMMARY OF CONTRACT PROVIDERS' MEDI-CAL COST
FISCAL PERIOD ENDED JUNE 30, 2003

Legal Entity Number	Legal Entity	(1) Regular M/Cal and EPSDT Gross Cost	(2) EPSDT Enhanced - Children Gross Cost	(3) Enhanced - Refugees Gross Cost	(4) Total Gross Cost (Excl. HFP)	(5) Healthy Families Gross Cost	(6) Regular M/Cal and EPSDT Gross Cost	(7) EPSDT Enhanced - Children Gross Cost	(8) Enhanced - Refugees Gross Cost	(9) Total Gross Cost (Excl. HFP)	(10) Healthy Families Gross Cost
		I N P A T I E N T					O U T P A T I E N T				
		(MH 1968, Ln 5, 5A, 10,10A)	(MH 1968, Ln 16, 16A)	(MH 1968, Ln 22)	(Col 1 to 3)	(MH 1968, Ln 27, 27A)	(MH 1968, Ln 5, 5A, 10,10A)	(MH 1968, Ln 16, 16A)	(MH 1968, Ln 22)	(Col. 6 to 8)	(MH 1968, Ln 27, 27A)
00115	Seeneca Center and Day Treatment	$ 0	$ 0	$ 0	$ 0	$ 0	$ 38,184	$	$ 0	$ 38,184	$ 0
00386	Milhouse Children's services Inc	$ 0	$ 0	$ 0	$ 0	$ 0	$ 39,072	$ 0	$ 0	$ 39,072	$ 0
00406	Turning Point of Central	$ 0	$ 0	$ 0	$ 0	$ 0	$ 5,686,140	$ 0	$ 0	$ 5,686,140	$ 417,384
00418	Tulare Youth Services Bureau	$ 0	$ 0	$ 0	$ 0	$ 0	$ 2,315,525	$ 0	$ 0	$ 2,315,525	$ 170,182
00484	North Valley Schools Inc.	$ 0	$ 0	$ 0	$ 0	$ 0	$ 57,033	$ 0	$ 0	$ 57,033	$ 0
00512	River Oak Center for Children	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
00541	Charis Youth Center	$ 0	$ 0	$ 0	$ 0	$ 0	$ 14,518	$ 0	$ 0	$ 14,518	$ 0
00689	Alliance for Community Care	$ 0	$ 0	$ 0	$ 0	$ 0	$ 10,998	$ 0	$ 0	$ 10,998	$ 0
00793	Canyon Acres Children's Services	$ 0	$ 0	$ 0	$ 0	$ 0	$ 92,237	$ 0	$ 0	$ 92,237	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 8,253,707	$ 0	$ 0	$ 8,253,707	$ 587,566

COUNTY OF TULARE
SUMMARY OF CONTRACT PROVIDERS' MEDI-CAL COST
FISCAL PERIOD ENDED JUNE 30, 2003

Legal Entity Number	Legal Entity	(11) Total Revenue (Excl. HFP) INPATIENT (MH 1968, Ln 28 to 30)	(12) Healthy Families Revenue INPATIENT (MH 1968, Ln 31)	(13) Total Revenue (Excl. HFP) OUTPATIENT (MH 1968, Ln 28 to 30)	(14) Healthy Families Revenue OUTPATIENT (MH 1968, Ln 31)	(15) Total Net Cost (Excl. HFP) INPATIENT (Col 4-11)	(16) Net Cost Healthy Families INPATIENT (Col 5-12)	(17) Total Net Cost (Excl. HFP) OUTPATIENT (Col 9-13)	(18) Net Cost Healthy Families OUTPATIENT (Col 10-14)	(19) Total MAA FFP Reimbursement (MH 1979, Ln 11-13)
00115	Seeneca Center and Day Treatment	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 38,184	$ 0	$ 0
00386	Milhouse Children's services Inc.	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 39,072	$ 0	$ 0
00406	Turning Point of Central	$ 0	$ 0	$ 4,193	$ 0	$ 0	$ 0	$ 5,681,947	$ 417,384	$ 0
00418	Tulare Youth Services Bureau	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 2,315,525	$ 170,182	$ 0
00484	North Valley Schools Inc.	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 57,033	$ 0	$ 0
00512	River Oak Center for Children	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
00541	Chans Youth Center	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 14,518	$ 0	$ 0
00689	Alliance for Community Care	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 10,998	$ 0	$ 0
00793	Canyon Acres Children's Services	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 92,237	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
	GRAND TOTAL	$ 0	$ 0	$ 4,193	$ 0	$ 0	$ 0	$ 8,249,514	$ 587,566	$ 0

COUNTY OF TULARE
SUMMARY OF CONTRACT PROVIDERS' MEDI-CAL COST
FISCAL PERIOD ENDED JUNE 30, 2003

Legal Entity Number	Legal Entity	(20) Neg. Rates Exceed Costs (Excl. HFP) INPATIENT (MH 1968, Ln 38 to 39)	(21) Neg. Rates Exceed Costs Healthy Families INPATIENT (MH 1968, Ln 40, 40A)	(22) Neg. Rates Exceed Costs (Excl. HFP) OUTPATIENT (MH 1968, Ln 38 to 39)	(23) Neg. Rates Exceed Costs Healthy Families OUTPATIENT (MH 1968, Ln 40, 40A)	(24) Total SD/MC Reimbursement (FFP) (MH 1979, Line 21)	(25) Healthy Families Reimbursement (FFP) (MH 1979, Ln. 27)	(26) Total Reimbursement (FFP) (Col 24 + 25)	(27) FFP Contract Maximum	(28) Lower of FFP or Contract Maximum
00115	Seeneca Center and Day Treatment	$ 0	$ 0	$ 0	$ 0	$ 19,623	$ 0	$ 19,623	$ 38,580	$ 19,623
00386	Milhouse Children's services Inc.	$ 0	$ 0	$ 0	$ 0	$ 20,559	$ 0	$ 20,559	$ 85,071	$ 20,559
00406	Turning Point of Central	$ 0	$ 0	$ 0	$ 0	$ 2,929,348	$ 272,167	$ 3,201,515	$ 0	$ 3,201,515
00418	Tulare Youth Services Bureau	$ 0	$ 0	$ 0	$ 0	$ 1,192,401	$ 110,913	$ 1,303,314	$ 0	$ 1,303,314
00484	North Valley Schools Inc.	$ 0	$ 0	$ 0	$ 0	$ 29,622	$ 0	$ 29,622	$ 38,580	$ 29,622
00512	River Oak Center for Children	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$	$ 0
00541	Chans Youth Center	$ 0	$ 0	$ 0	$ 0	$ 7,433	$ 0	$ 7,433	$ 23,470	$ 7,433
00689	Alliance for Community Care	$ 0	$ 0	$ 0	$ 0	$ 10,998	$ 0	$ 10,998	$ 38,580	$ 10,998
00793	Canyon Acres Children's Services	$ 0	$ 0	$ 0	$ 0	$ 47,315	$ 0	$ 47,315	$ 87,259	$ 47,315
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
	GRAND TOTAL	$ 0	$ 0	$ 0	$ 0	$ 4,257,299	$ 383,080	$ 4,640,379	$ 311,540	$ 4,640,379

(To Sch. 1)

SCHEDULE 4

COUNTY OF TULARE
COMMUNITY MENTAL HEALTH SERVICES
COMPUTATION OF EPSDT STATE SHARE PER AUDIT
FISCAL YEAR ENDED JUNE 30, 2003

		As Settled	Audit Adjustments	As Audited
(1)	SD/MC Actuals (MH 1979, Lns. 16, 16A, 17, 17A, 18) (including contractors)	14,964,433	(159,276)	14,805,157
(2)	Total SD/MC Claims	17,608,879	0	17,608,879
(3)	Percent % (Line 1/Line 2)	84.98%	-0.90%	84.08%
(4)	EPSDT Claims	11,518,844	0	11,518,844
(5)	Actual Cost Settled EPSDT SD/MC (Line 3 X Line 4)	9,788,714	(103,924)	9,684,790
(6)	Cost Settled Baseline for EPSDT	3,341,508	0	3,341,508
(7)	Net Cost Settlement Amount (Line 5 - Line 6)	6,447,206	(103,924)	6,343,282
(8)	48.56% of Net Cost Settlement Amount (Line 7 x 48.56%)	3,130,763	(50,466)	3,080,298
(8a)	FY 2001-02 EPSDT settlement	3,370,729	(145,553)	3,225,176
(8b)	Annual Local Growth (L. 8 - 8a)	0	0	0
(9)	County Match 10% of Local Growth (8b x 10%)	0	0	0
(10)	Net cost settlement amount (L. 8 - 9)	3,130,763	(50,465)	3,080,298
(9)	SGF Distribution (Settled and Audited)	3,130,763	0	3,130,763
(10)	SGF Due (State)	0	(50,465)	(50,465)
				(To Sch. 1)

Source:

(1) Total CFRS SD/MC actuals after final Settlement (Col. 1) and Audit (Col. 3) for Net Direct Outpatient Services (includes Mode 05 - SF's 20-94, Mode 10, and Mode 15)

(2) Total SD/MC paid claims (total non-hospital, including PHF's) by County Submitting Claims

(4) SD/MC paid claims for children under 21 years of age (full scope, non-hospital, including PHF's) including new aid codes by County of Beneficiary

(6) Cost Settled Baseline for EPSDT for FY2002-2003, includes increase for FFS/MC provider rate increase.

(7) Settlement amount prior to 10% match calculation (8)-(9)

(11) SGF gross distribution (See DMH letter dated October 23, 2002 sent to Local Mental Health Directors) Includes adjustment for additional SGF and ASO non participants

(13) Amount owed back to the state cannot be more than was advanced or settled.

AUDIT ADJUSTMENTS

Provider	Provider Number	No. of Adj.	Fiscal Period Ended
COUNTY OF TULARE	00054	51	June 30, 2003

Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS		As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.					
				ADJUSTMENTS TO REPORTED SD/MC UNITS - COUNTY				
1	MH 1966A	8	Total	MEDI-CAL UNITS - 07/01/02 to 09/30/02		881,427	(38,798)	842,629 *
2	MH 1966A	8A	Total	MEDI-CAL UNITS - 10/01/02 to 06/30/03		2,559,966	(76,975)	2,482,991 *
3	MH 1966A	9	Total	MEDICARE/MEDI-CAL UNITS - 07/01/02 to 09/30/02		27,519	14,183	41,702 *
4	MH 1966A	9A	Total	MEDICARE/MEDI-CAL UNITS - 10/01/02 to 06/30/03		111,553	36,824	148,377 *
5	MH 1966A	10	Total	ENHANCED - CHILDREN - 07/01/02 to 09/30/02		0	30	30 *
6	MH 1966A	10A	Total	ENHANCED - CHILDREN - 10/01/02 to 06/30/03		0	2,566	2,566 *
7	MH 1901B	11	Total	HEALTHY FAMILIES UNITS - 07/01/02 to 09/30/02		2,425	(400)	2,025 *
8	MH 1901B	11A	Total	HEALTHY FAMILIES UNITS - 10/01/02 to 6/30/03		14,218	(955)	13,263 *
Info				TOTAL		3,597,108	(63,525)	3,533,583
				To adjust the as settled (MH 1966A) SD/MC units of service/time for the county operated facilities to agree with the State DMH Approved Claims Report dated October 30,2007. Above adjustments include Phase II.				
9	MH 1966A	8	Total	MEDI-CAL UNITS - 07/01/02 to 09/30/02	**	842,629	77,999	920,628 *
10	MH 1966A	8A	Total	MEDI-CAL UNITS - 10/01/02 to 06/30/03	**	2,482,991	205,557	2,688,548 *
11	MH 1966A	9	Total	MEDICARE/MEDI-CAL UNITS - 07/01/02 to 09/30/02	**	41,702	(10,900)	30,802 *
12	MH 1966A	9A	Total	MEDICARE/MEDI-CAL UNITS - 10/01/02 to 06/30/03	**	148,377	(28,055)	120,322 *
13	MH 1966A	10	Total	ENHANCED - CHILDREN - 07/01/02 to 09/30/02	**	30	(30)	0 *
14	MH 1966A	10A	Total	ENHANCED - CHILDREN - 10/01/02 to 06/30/03	**	2,566	(2,566)	0 *
15	MH 1901B	11	Total	HEALTHY FAMILIES UNITS - 07/01/02 to 09/30/02	**	2,025	400	2,425 *
16	MH 1901B	11A	Total	HEALTHY FAMILIES UNITS - 10/01/02 to 6/30/03	**	13,263	955	14,218 *
Info				TOTAL		3,533,583	243,360	3,776,943
				To adjust the SD/MC units of service/time per the State DMH Approved Claims Report to the county's records. Above adjustments include Phase II.				

* Balance carried forward to subsequent adjustment.
** Balance brought forward from prior adjustment.

AUDIT ADJUSTMENTS

Provider	Provider Number	No. of Adj.	Fiscal Period Ended
COUNTY OF TULARE	00054	51	June 30, 2003

Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS		As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.					
				ADJUSTMENTS TO REPORTED SD/MC UNITS - COUNTY				
17	MH 1966A	8	Total	MEDI-CAL UNITS - 07/01/02 to 09/30/02	**	920,628	(77,999)	842,629 *
18	MH 1966A	8A	Total	MEDI-CAL UNITS - 10/01/02 to 06/30/03	**	2,688,548	(205,557)	2,482,991 *
19	MH 1966A	9	Total	MEDICARE/MEDI-CAL UNITS - 07/01/02 to 09/30/02	**	30,802	10,900	41,702 *
20	MH 1966A	9A	Total	MEDICARE/MEDI-CAL UNITS - 10/01/02 to 06/30/03	**	120,322	28,055	148,377 *
Info	MH 1966A	10	Total	ENHANCED - CHILDREN - 07/01/02 to 09/30/02	**	0	0	0 *
Info	MH 1966A	10A	Total	ENHANCED - CHILDREN - 10/01/02 to 06/30/03	**	0	0	0 *
21	MH 1901B	11	Total	HEALTHY FAMILIES UNITS - 07/01/02 to 09/30/02	**	2,425	(400)	2,025 *
22	MH 1901B	11A	Total	HEALTHY FAMILIES UNITS - 10/01/02 to 6/30/03	**	14,218	(955)	13,263 *
Info				TOTAL		3,776,943	(245,956)	3,530,987
				To adjust SD/MC units to incorporate the controls of the lower of the County records or the State DMH Approved Claims Report. Above adjustments include Phase II.				
23	MH 1966A	8	Total	MEDI-CAL UNITS - 07/01/02 to 09/30/02	**	842,629	(11,682)	830,947
24	MH 1966A	8A	Total	MEDI-CAL UNITS - 10/01/02 to 06/30/03	**	2,482,991	(17,149)	2,465,842
25	MH 1966A	9	Total	MEDICARE/MEDI-CAL UNITS - 07/01/02 to 09/30/02	**	41,702	(3,493)	38,419
26	MH 1966A	9A	Total	MEDICARE/MEDI-CAL UNITS - 10/01/02 to 06/30/03	**	148,377	(11,713)	139,608
Info	MH 1966A	10	Total	ENHANCED - CHILDREN - 07/01/02 to 09/30/02	**	0	0	0
Info	MH 1966A	10A	Total	ENHANCED - CHILDREN - 10/01/02 to 06/30/03	**	0	0	0
Info	MH 1901B	11	Total	HEALTHY FAMILIES UNITS - 07/01/02 to 09/30/02	**	2,025	0	2,025
Info	MH 1901B	11A	Total	HEALTHY FAMILIES UNITS - 10/01/02 to 6/30/03	**	13,263	0	13,263
Info				TOTAL		3,530,987	(44,037)	3,490,104
				To remove disallowed units based on County records.				

* Balance carried forward to subsequent adjustment.
** Balance brought forward from prior adjustment.

AUDIT ADJUSTMENTS

Provider	Provider Number	No. of Adj.	Fiscal Period Ended
COUNTY OF TULARE	00054	51	June 30, 2003

Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS		As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.					
				ADJUSTMENTS TO REPORTED SD/MC UNITS - CONTRACT PROVIDERS				
27	MH 1966A	8	Total	MEDI-CAL UNITS - 07/01/02 to 09/30/02		840,370	(9,640)	830,730 *
28	MH 1966A	8A	Total	MEDI-CAL UNITS - 10/01/02 to 06/30/03		2,850,595	10,813	2,861,408 *
info	MH 1966A	9	Total	MEDICARE/MEDI-CAL UNITS - 07/01/02 to 09/30/02		0	0	0 *
info	MH 1966A	9A	Total	MEDICARE/MEDI-CAL UNITS - 10/01/02 to 06/30/03		0	0	0 *
29	MH 1966A	10	Total	ENHANCED - CHILDREN - 07/01/02 to 09/30/02		0	2,524	2,524 *
30	MH 1966A	10A	Total	ENHANCED - CHILDREN - 10/01/02 to 06/30/03		0	21,968	21,968 *
31	MH 1966A	11	Total	HEALTHY FAMILIES UNITS - 07/01/02 to 09/30/02		52,929	(1,263)	51,666 *
32	MH 1966A	11A	Total	HEALTHY FAMILIES UNITS - 10/01/02 to 06/30/03		216,878	(6,636)	210,242 *
Info			Info	TOTAL UNITS		3,960,772	17,766	3,978,538
				To adjust the as settled (MH 1966A) SD/MC units of service/time for the County's contract providers to agree with the State DMH Approved Claims Report dated October 30,2007. Above adjustments include Phase II.				
33	MH 1966A	8	Total	MEDI-CAL UNITS - 07/01/02 to 09/30/02	**	830,730	13,404	844,134 *
34	MH 1966A	8A	Total	MEDI-CAL UNITS - 10/01/02 to 06/30/03	**	2,861,408	31,298	2,892,706 *
info	MH 1966A	9	Total	MEDICARE/MEDI-CAL UNITS - 07/01/02 to 09/30/02	**	0	0	0 *
info	MH 1966A	9A	Total	MEDICARE/MEDI-CAL UNITS - 10/01/02 to 06/30/03	**	0	0	0 *
35	MH 1966A	10	Total	ENHANCED - CHILDREN - 07/01/02 to 09/30/02	**	2,524	(2,524)	0 *
36	MH 1966A	10A	Total	ENHANCED - CHILDREN - 10/01/02 to 06/30/03	**	21,968	(21,968)	0 *
37	MH 1966A	11	Total	HEALTHY FAMILIES UNITS - 07/01/02 to 09/30/02	**	51,666	1,263	52,929 *
38	MH 1966A	11A	Total	HEALTHY FAMILIES UNITS - 10/01/02 to 06/30/03	**	210,242	6,837	217,079 *
info			Info	TOTAL UNITS		3,978,538	28,310	4,006,848
				To adjust the SD/MC units of service/time per the State DMH Approved Claims Report to the County's Records.				

* Balance carried forward to subsequent adjustment.
** Balance brought forward from prior adjustment.

AUDIT ADJUSTMENTS

Provider	Provider Number	No. of Adj.	Fiscal Period Ended
COUNTY OF TULARE	00054	51	June 30, 2003

Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS		As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.					
				ADJUSTMENTS TO REPORTED SD/MC UNITS - CONTRACT PROVIDERS				
39	MH 1966A	8	Total	MEDI-CAL UNITS - 07/01/02 to 09/30/02	**	844,134	(13,447)	830,687 *
40	MH 1966A	8A	Total	MEDI-CAL UNITS - 10/01/02 to 06/30/03	**	2,892,706	(31,794)	2,860,912 *
info	MH 1966A	9	Total	MEDICARE/MEDI-CAL UNITS - 07/01/02 to 09/30/02	**	0	0	0 *
info	MH 1966A	9A	Total	MEDICARE/MEDI-CAL UNITS - 10/01/02 to 06/30/03	**	0	0	0 *
info	MH 1966A	10	Total	ENHANCED - CHILDREN - 07/01/02 to 09/30/02	**	0	0	0 *
info	MH 1966A	10A	Total	ENHANCED - CHILDREN - 10/01/02 to 06/30/03	**	0	0	0 *
41	MH 1966A	11	Total	HEALTHY FAMILIES UNITS - 07/01/02 to 09/30/02	**	52,929	(1,263)	51,666 *
42	MH 1966A	11A	Total	HEALTHY FAMILIES UNITS - 10/01/02 to 06/30/03	**	217,079	(6,837)	210,242 *
info			Info	TOTAL UNITS		4,006,848	(53,341)	3,953,507
				To adjust SD/MC units to incorporate the controls of the lower of the County records or the State DMH Approved Claims Report.				
43	MH 1966A	8	Total	MEDI-CAL UNITS - 07/01/02 to 09/30/02	**	830,687	(392)	830,295
44	MH 1966A	8A	Total	MEDI-CAL UNITS - 10/01/02 to 06/30/03	**	2,860,912	(33)	2,860,879
info	MH 1966A	9	Total	MEDICARE/MEDI-CAL UNITS - 07/01/02 to 09/30/02	**	0	0	0
info	MH 1966A	9A	Total	MEDICARE/MEDI-CAL UNITS - 10/01/02 to 06/30/03	**	0	0	0
info	MH 1966A	10	Total	ENHANCED - CHILDREN - 07/01/02 to 09/30/02	**	0	0	0
info	MH 1966A	10A	Total	ENHANCED - CHILDREN - 10/01/02 to 06/30/03	**	0	0	0
info	MH 1966A	11	Total	HEALTHY FAMILIES UNITS - 07/01/02 to 09/30/02	**	51,666	0	51,666
info	MH 1966A	11A	Total	HEALTHY FAMILIES UNITS - 10/01/02 to 06/30/03	**	210,242	0	210,242
info			Info	TOTAL UNITS		3,953,507	(425)	3,953,082
				Seneca Center and Day Treatment for Children (provider # 00115) and Tulare Youth Service Bureau (provider # 00418)Medi-Cal units of service will be limited to their Total units, annd slso to remove Medi-Cal units which were not reported for Turning Point of Central Calfornia Inc. (provider # 00406) and CanyonAcres Children's Services (providr # 00793) in their settled cost reports.				

* Balance carried forward to subsequent adjustment.
** Balance brought forward from prior adjustment.

AUDIT ADJUSTMENTS

Provider	Provider Number	No. of Adj.	Fiscal Period Ended
COUNTY OF TULARE	00054	51	June 30, 2003

Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
				ADJUSTMENTS TO REPORTED SD/MC SETTLEMENT			
45	MH 1979	2	D	CONTRACT PROVIDER MEDI-CAL DIRECT SERVICE GROSS REIMB	9,630,770	(83,829)	9,546,941
				To adjust reported Contract Provider Direct Medi-Cal Gross Reimbursement as a result of adjustments to the contract providers SD/MC units of service/time.			
46	MH 1979	21	J	TOTAL SD/MC REIMBURSEMENT (FFP) - COUNTY	$4,402,124	($44,882)	$4,357,242 *
47	MH 1979	27	J	TOTAL HEALTHY FAMILIES REIMBURSEMENT - COUNTY	$64,286	(2,533)	$61,753
Info				TOTAL REIMBURSEMENT - COUNTY	4,466,410	(47,415)	4,418,995
48	Sch. 3b	Total	24	TOTAL SD/MC REIMBURSEMENT - CONTRACT PROVIDERS	$4,292,876	($35,577)	$4,257,299
49	Sch. 3b	Total	25	TOTAL HEALTHY FAMILIES REIMBURSEMENT - CONTRACT PROVIDERS	$402,566	($19,486)	383,080
				TOTAL REIMBURSEMENT - CONTRACT PROVIDERS	3,968,622	(55,063)	4,640,379
				To adjust Total SD/MC Reimbursement (FFP) due to the adjustments to reported costs and units.			
50	Sch. 4	8	3	TOTAL EPSDT SGF	$ 3,130,763	$ (50,466)	$ 3,080,298
				To adjust the final EPSDT settlement as a result of adjustments to audited Medi-Cal cost.			
51	Sch. 2a	55	3	TOTAL SD/MC REIMBURSEMENT (FFP) - COUNTY	** $ 4,357,242	$ (291)	$ 4,356,951
				To incorporate the Quality Assurance Review results (report dated June 7, 2004			

* Balance carried forward to subsequent adjustment.
** Balance brought forward from prior adjustment.

TULARE COUNTY
COMMUNITY MENTAL HEALTH SERVICES
MANAGEMENT COMMENTS AND RECOMMENDATIONS
FOR FISCAL PERIOD ENDED JUNE 30, 2003

FINDING 1: ADMINISTRATIVE COST ALLOCATION

Our examination disclosed that the County used the unduplicated client count method to allocate administrative costs among Medi-Cal, Healthy Families and Non-Medi-Cal. We did not conduct a review of this methodology during this desk audit and therefore do not make any judgments regarding the use of this method as it pertains to the fiscal period of audit. However, in future audits, we will evaluate the county's rationale and reasonableness of the process used by the county to determine administrative cost allocation percentages to the various components.

AUDIT AUTHORITY

- Center for the Medicare and Medicaid (CMS) Pub. 15-1, Section 2300

RECOMMENDATION

We recommend that the County should continue to examine the method used in the allocation of administrative cost to ensure it is consistent and in accordance with the Department of Mental Health Cost Report.

AUDITEE'S RESPONSE

The County will look forward to working with State DMH Audit Section on future audits which review the County's unduplicated client count used for distributing administrative costs to Medi-Cal services vs. non-Medi-Cal services. The County is allowed several different allocation methodologies pursuant to the DMH cost report instructions. Tulare County has the highest Medi-Cal population in the State and the unduplicated client count methodology allows for the most accurate administrative reimbursement allowed by the DMH.

FINDING 2: NEGATIVE DISALLOWANCE UNITS

Our examination and analysis of County prepared worksheet disclosed negative unit numbers for Disallowances. We were not able to verify the cause of these "disallowances" because this was a desk audit. In a future audit, we will suggest the inclusion of footnotes for the purpose of providing explanation.

Audit Authority

- 42 Code of Federal Regulation (CFR) 413.24;
- Center for Medicare and Medicaid Services (CMS) Pub. 15-1, Section 2300.

RECOMMENDATION

We recommend that the County should include, in a footnote, explanation of the cause of the negative unit numbers for the benefit of users and external auditors.

AUDITEE'S RESPONSE

The County will review the negative units and include footnotes in future cost reports.

FINDING 3: ENHANCED MEDI-CAL UNITS

Our examination disclosed information showing the County did not identify the Enhanced Medi-Cal units on the cost report. The Cost Report Instruction requires that Enhanced Medi-Cal units be separately identified.

AUDIT AUTHORITY

- 42 Code of Federal Regulation (CFR) 413.24;
- Center for Medicare and Medicaid Services (CMS) Pub. 15-1,Section 2300;

RECOMMENDATION

We recommend the County should endeavor to identify the billed SD/Medi-Cal Enhanced units using aid codes or some other variables as service identifier. We are obligated by regulations to disallow units that lack adequate supporting documentation.

AUDITEE'S RESPONSE

The County currently does not have a method of identifying the aid codes that are used to distinguish Enhanced units. The County will be working with DMH and DHS on identifying these clients and will review the findings with DMH at a later date.

CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY

DEPARTMENT OF MENTAL HEALTH

CALCULATION OF PROGRAM COSTS
MH 1960 (10/04)

Fiscal Year 2002-2003

County: Tulare
County Code: 54

	Legal Entity: COUNTY OF TULARE	A	B	C
	Legal Entity Number: 00054	Salaries and Benefits	Other	Total Costs
1	Mental Health Expenditures	11,821,293	29,282,669	41,103,962
2	Encumbrances		116,079	116,079
3	Less: Payments to Contract Providers (County Only)		(15,050,699)	(15,050,699)
4	Other Adjustments (Provide Detail)			
5	Total Costs Before Medi-Cal Adjustments	11,821,293	14,348,049	26,169,342
6	Medi-Cal Adjustments from MH 1961			(5,906,958)
7	Managed Care Consolidation (County Only)			
8	Allowable Costs for Allocation			20,262,384
	Administrative Costs (County Only)			
9	SD/MC Administration			1,606,213
10	Healthy Families Administration			68,600
11	Non-SD/MC Administration			679,726
12	Total Administrative Costs			2,354,539
	Utilization Review Costs (County Only)			
13	Skilled Professional Medical Personnel			230,882
14	Other SD/MC Utilization Review			25,650
15	Non-SD/MC Utilization Review			107,170
16	Total Utilization Review Costs			363,702
17	Research and Evaluation (County Only)			
18	Mode Costs (Direct Service and MAA)			17,544,143
19	Total Costs - Lines 9 through 18			20,262,384

CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY

DEPARTMENT OF MENTAL HEALTH

MEDI-CAL ADJUSTMENTS TO COSTS
MH 1961 (10/04)

Fiscal Year 2002-2003

County: Tulare
County Code: 54

	Legal Entity: COUNTY OF TULARE	A	B	C
	Legal Entity Number: 00054	Salaries and Benefits	Other	Total Adjustments
1	Operating Transfers Out		(5,588,969)	(5,588,969)
2	Depreciation expense FY94-95 - FY02-03		39,118	39,118
3	Cal Works costs billed by Human Svcs Br		1,447,711	1,447,711
4	Assessment and Referral Team - Alcohol & Drugs		229,680	229,680
5	Turning Point of Central CA, Inc. settlement adjustment		(20,716)	(20,716)
6	Department of Rehabilitation grant		(64,108)	(64,108)
7	Admin. Services Orgn. (ASO) EPSDT W/hold gross up		14,034	14,034
8	State Hospital and Managed Care offsets		(1,632,917)	(1,632,917)
9	Worker Compensation refunds		(5,269)	(5,269)
10	Outlawed/stale dated warrants		(532)	(532)
11	Alameda County Behavioral Health Care Services		(137,683)	(137,683)
12	Merced, County of		(5,376)	(5,376)
13	Stanislaus Behavioral Health Center		(113,800)	(113,800)
14	Tuolumne General Hospital		(19,274)	(19,274)
15	Prior Accounts Payable Accrual Adjustments		(48,855)	(48,855)
16	Rounding		(2)	(2)
17				
18				
19				
20	**Total Adjustments**		(5,906,958)	(5,906,958)

CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY **DEPARTMENT OF MENTAL HEALTH**

ALLOCATION OF COSTS TO MODES OF SERVICE **Fiscal Year 2002-2003**

MH 1964 (10/04)

County: Tulare
County Code: 54

	Legal Entity: COUNTY OF TULARE	A
	Legal Entity Number: 00054	Total Costs
1	Mode Costs (Direct Service and MAA) from MH 1960	17,544,143
	Modes	
2	Hospital Inpatient Services (Mode 05-SFC 10-19)	
3	Other 24 Hour Services (Mode 05-All Other SFC)	670,176
4	Day Services (Mode 10)	317,267
5	Outpatient Services (Mode 15 Program 1 + Program 2)	15,080,618
6	Outreach Services (Mode 45)	
7	Medi-Cal Administrative Activities (Mode 55)	
8	Support Services (Mode 60)	1,476,082
9	Total - Lines 2 through 8	17,544,143

CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY

DEPARTMENT OF MENTAL HEALTH

ALLOCATION OF COSTS TO SERVICE FUNCTIONS - MODE TOTAL

DETAIL COST REPORT

Fiscal Year 2002-2003

MH 1966A (10/04)

County: Tulare
County Code: 54

CR

			A	B	C	D	E	F	G
	Legal Entity: COUNTY OF TULARE								
	Legal Entity Number: 00054								
	Mode: 05 - Other 24 Hour Services (All Other SFC)		Mode Total	Service Function	Service Function	Service Function	Service Function	Service Function	Service Function
				40					
1	Allocation Percentage		100.00%	100.00%					
2	Total Units			3,274					
3	Gross Cost		670,176	670,176					
4	Cost per Unit			204.70					
5	SMA per Unit			267.20					
6	Published Charge per Unit								
7	Negotiated Rate / Cost per Unit								
8	Medi-Cal Units	07/01/02 - 09/30/02							
8A		10/01/02 - 06/30/03							
9	Medicare/Medi-Cal Crossover Units	07/01/02 - 09/30/02							
9A		10/01/02 - 06/30/03							
10	Enhanced SD/MC (Children) Units	07/01/02 - 09/30/02							
10A		10/01/02 - 06/30/03							
10B	Enhanced SD/MC (Refugees) Units	07/01/02 - 06/30/03							
11	Healthy Families (SED) Units	07/01/02 - 09/30/02							
11A		10/01/02 - 06/30/03							
12	Non-Medi-Cal Units			3,274					
13	Medi-Cal Costs	07/01/02 - 09/30/02							
13A		10/01/02 - 06/30/03							
14	Medi-Cal SMA Upper Limits	07/01/02 - 09/30/02							
14A		10/01/02 - 06/30/03							
15	Medi-Cal Published Charges	07/01/02 - 09/30/02							
15A		10/01/02 - 06/30/03							
16	Medi-Cal Negotiated Rates	07/01/02 - 09/30/02							
16A		10/01/02 - 06/30/03							
17	Medicare/Medi-Cal Crossover Costs	07/01/02 - 09/30/02							
17A		10/01/02 - 06/30/03							
18	Medicare/Medi-Cal Crossover SMA Upper Limits	07/01/02 - 09/30/02							
18A		10/01/02 - 06/30/03							
19	Medicare/Medi-Cal Crossover Published Charges	07/01/02 - 09/30/02							
19A		10/01/02 - 06/30/03							
20	Medicare/Medi-Cal Crossover Negotiated Rates	07/01/02 - 09/30/02							
20A		10/01/02 - 06/30/03							
21	Enhanced SD/MC Costs	07/01/02 - 09/30/02							
21A		10/01/02 - 06/30/03							
22	Enhanced SD/MC SMA Upper Limits	07/01/02 - 09/30/02							
22A		10/01/02 - 06/30/03							
23	Enhanced SD/MC Published Charges	07/01/02 - 09/30/02							
23A		10/01/02 - 06/30/03							
24	Enhanced SD/MC Negotiated Rates	07/01/02 - 09/30/02							
24A		10/01/02 - 06/30/03							
25	Enhanced SD/MC (Refugees) Costs	07/01/02 - 06/30/03							
26	Enhanced SD/MC (Refugees) SMA Upper Limits	07/01/02 - 06/30/03							
27	Enhanced SD/MC (Refugees) Published Charges	07/01/02 - 06/30/03							
28	Enhanced SD/MC (Refugees) Negotiated Rates	07/01/02 - 06/30/03							
29	Healthy Families Costs	07/01/02 - 09/30/02							
29A		10/01/02 - 06/30/03							
30	Healthy Families SMA Upper Limits	07/01/02 - 09/30/02							
30A		10/01/02 - 06/30/03							
31	Healthy Families Published Charges	07/01/02 - 09/30/02							
31A		10/01/02 - 06/30/03							
32	Healthy Families Negotiated Rates	07/01/02 - 09/30/02							
32A		10/01/02 - 06/30/03							
33	Non-Medi-Cal Costs		670,176	670,176					

CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY

DEPARTMENT OF MENTAL HEALTH

ALLOCATION OF COSTS TO SERVICE FUNCTIONS - MODE TOTAL

DETAIL COST REPORT

Fiscal Year 2002-2003

MH 1966A (10/04)

County: Tulare
County Code: 54
Legal Entity: COUNTY OF TULARE
Legal Entity Number: 00054
Mode: 10 - Day Services

			A	B	C	D	E	F	G
				CR	CR	CR			
			Mode Total	Service Function	Service Function	Service Function	Service Function	Service Function	Service Function
				81	85	95			
1	Allocation Percentage		100.00%	4.28%	44.53%	51.19%			
2	Total Units			105	1,092	483			
3	Gross Cost		317,267	13,585	141,284	162,398			
4	Cost per Unit			129.38	129.38	336.23			
5	SMA per Unit			126.46	177.60	115.14			
6	Published Charge per Unit			145.43	204.24	132.41			
7	Negotiated Rate / Cost per Unit								
8	Medi-Cal Units	07/01/02 - 09/30/02		105	180	315			
8A		10/01/02 - 06/30/03			910	155			
9	Medicare/Medi-Cal Crossover Units	07/01/02 - 09/30/02							
9A		10/01/02 - 06/30/03							
10	Enhanced SD/MC (Children) Units	07/01/02 - 09/30/02							
10A		10/01/02 - 06/30/03							
10B	Enhanced SD/MC (Refugees) Units	07/01/02 - 06/30/03							
11	Healthy Families (SED) Units	07/01/02 - 09/30/02							
11A		10/01/02 - 06/30/03							
12	Non-Medi-Cal Units				2	13			
13	Medi-Cal Costs	07/01/02 - 09/30/02	142,785	13,585	23,289	105,912			
13A		10/01/02 - 06/30/03	169,852		117,737	52,115			
14	Medi-Cal SMA Upper Limits	07/01/02 - 09/30/02	81,515	13,278	31,968	36,269			
14A		10/01/02 - 06/30/03	179,463		161,616	17,847			
15	Medi-Cal Published Charges	07/01/02 - 09/30/02	93,743	15,270	36,763	41,709			
15A		10/01/02 - 06/30/03	206,382		185,858	20,524			
16	Medi-Cal Negotiated Rates	07/01/02 - 09/30/02							
16A		10/01/02 - 06/30/03							
17	Medicare/Medi-Cal Crossover Costs	07/01/02 - 09/30/02							
17A		10/01/02 - 06/30/03							
18	Medicare/Medi-Cal Crossover SMA Upper Limits	07/01/02 - 09/30/02							
18A		10/01/02 - 06/30/03							
19	Medicare/Medi-Cal Crossover Published Charges	07/01/02 - 09/30/02							
19A		10/01/02 - 06/30/03							
20	Medicare/Medi-Cal Crossover Negotiated Rates	07/01/02 - 09/30/02							
20A		10/01/02 - 06/30/03							
21	Enhanced SD/MC Costs	07/01/02 - 09/30/02							
21A		10/01/02 - 06/30/03							
22	Enhanced SD/MC SMA Upper Limits	07/01/02 - 09/30/02							
22A		10/01/02 - 06/30/03							
23	Enhanced SD/MC Published Charges	07/01/02 - 09/30/02							
23A		10/01/02 - 06/30/03							
24	Enhanced SD/MC Negotiated Rates	07/01/02 - 09/30/02							
24A		10/01/02 - 06/30/03							
25	Enhanced SD/MC (Refugees) Costs	07/01/02 - 06/30/03							
26	Enhanced SD/MC (Refugees) SMA Upper Limits	07/01/02 - 06/30/03							
27	Enhanced SD/MC (Refugees) Published Charges	07/01/02 - 06/30/03							
28	Enhanced SD/MC (Refugees) Negotiated Rates	07/01/02 - 06/30/03							
29	Healthy Families Costs	07/01/02 - 09/30/02							
29A		10/01/02 - 06/30/03							
30	Healthy Families SMA Upper Limits	07/01/02 - 09/30/02							
30A		10/01/02 - 06/30/03							
31	Healthy Families Published Charges	07/01/02 - 09/30/02							
31A		10/01/02 - 06/30/03							
32	Healthy Families Negotiated Rates	07/01/02 - 09/30/02							
32A		10/01/02 - 06/30/03							
33	Non-Medi-Cal Costs		4,630	(0)	259	4,371			

ALLOCATION OF COSTS TO SERVICE FUNCTIONS - MODE TOTAL
MH 1966A (10/04)

DETAIL COST REPORT

County: Tulare
County Code: 54
Legal Entity: COUNTY OF TULARE
Legal Entity Number: 00054
Mode: 15 - Outpatient (Program 1)

			A	CR B	CR C	CR D	CR E	CR F	CR G
			Mode Total	Service Function	Service Function	Service Function	Service Function	Service Function	Service Function
				02	03	06	10	11	12
1	Allocation Percentage		100.00%	6.12%	10.12%	0.45%	53.00%	0.41%	5.50%
2	Total Units			1,632,543	594,121	12,830	3,138,372	187,206	284,717
3	Gross Cost		14,387,600	881,154	1,455,688	64,439	7,624,925	58,841	792,026
4	Cost per Unit			0.54	2.45	5.02	2.43	0.31	2.78
5	SMA per Unit			1.77	1.77	1.77	2.28	2.28	2.28
6	Published Charge per Unit			2.04	2.04	2.04	2.62	2.62	2.62
7	Negotiated Rate / Cost per Unit								
8	Medi-Cal Units	07/01/02 - 09/30/02		296,253			261,251		
8A		10/01/02 - 06/30/03		905,030			921,277		
9	Medicare/Medi-Cal Crossover Units	07/01/02 - 09/30/02					7,100		
9A		10/01/02 - 06/30/03					40,840		
10	Enhanced SD/MC (Children) Units	07/01/02 - 09/30/02							
10A		10/01/02 - 06/30/03							
10B	Enhanced SD/MC (Refugees) Units	07/01/02 - 06/30/03							
11	Healthy Families (SED) Units	07/01/02 - 09/30/02		585			1,170		
11A		10/01/02 - 06/30/03		2,110			9,699		
12	Non-Medi-Cal Units			428,565	594,121	12,830	1,897,035	187,206	284,717
13	Medi-Cal Costs	07/01/02 - 09/30/02	1,253,821	159,901			634,730		
13A		10/01/02 - 06/30/03	4,008,909	488,484			2,238,316		
14	Medi-Cal SMA Upper Limits	07/01/02 - 09/30/02	1,765,135	524,368			595,652		
14A		10/01/02 - 06/30/03	5,552,352	1,601,903			2,100,512		
15	Medi-Cal Published Charges	07/01/02 - 09/30/02	2,030,069	604,356			684,478		
15A		10/01/02 - 06/30/03	6,385,559	1,846,261			2,413,746		
16	Medi-Cal Negotiated Rates	07/01/02 - 09/30/02							
16A		10/01/02 - 06/30/03							
17	Medicare/Medi-Cal Crossover Costs	07/01/02 - 09/30/02	98,397				17,250		
17A		10/01/02 - 06/30/03	355,789				99,224		
18	Medicare/Medi-Cal Crossover SMA Upper Limits	07/01/02 - 09/30/02	148,667				16,188		
18A		10/01/02 - 06/30/03	510,721				93,115		
19	Medicare/Medi-Cal Crossover Published Charges	07/01/02 - 09/30/02	170,812				18,602		
19A		10/01/02 - 06/30/03	586,804				107,001		
20	Medicare/Medi-Cal Crossover Negotiated Rates	07/01/02 - 09/30/02							
20A		10/01/02 - 06/30/03							
21	Enhanced SD/MC Costs	07/01/02 - 09/30/02							
21A		10/01/02 - 06/30/03							
22	Enhanced SD/MC SMA Upper Limits	07/01/02 - 09/30/02							
22A		10/01/02 - 06/30/03							
23	Enhanced SD/MC Published Charges	07/01/02 - 09/30/02							
23A		10/01/02 - 06/30/03							
24	Enhanced SD/MC Negotiated Rates	07/01/02 - 09/30/02							
24A		10/01/02 - 06/30/03							
25	Enhanced SD/MC (Refugees) Costs	07/01/02 - 06/30/03							
26	Enhanced SD/MC (Refugees) SMA Upper Limits	07/01/02 - 06/30/03							
27	Enhanced SD/MC (Refugees) Published Charges	07/01/02 - 06/30/03							
28	Enhanced SD/MC (Refugees) Negotiated Rates	07/01/02 - 06/30/03							
29	Healthy Families Costs	07/01/02 - 09/30/02	3,858	316			2,843		
29A		10/01/02 - 06/30/03	28,825	1,139			23,564		
30	Healthy Families SMA Upper Limits	07/01/02 - 09/30/02	4,845	1,035			2,668		
30A		10/01/02 - 06/30/03	31,900	3,735			22,114		
31	Healthy Families Published Charges	07/01/02 - 09/30/02	5,571	1,193			3,065		
31A		10/01/02 - 06/30/03	36,669	4,304			25,411		
32	Healthy Families Negotiated Rates	07/01/02 - 09/30/02							
32A		10/01/02 - 06/30/03							
33	Non-Medi-Cal Costs		8,638,001	231,315	1,455,688	64,439	4,608,998	58,841	792,026

ALLOCATION OF COSTS TO SERVICE FUNCTIONS - MODE TOTAL
MH 1966A (10/04)

DETAIL COST REPORT

County: Tulare
County Code: 54
Legal Entity: COUNTY OF TULARE
Legal Entity Number: 00054
Mode: 15 - Outpatient (Program 1)

			CR	CR	CR	CR	CR		
			H	I	J	K	L	M	N
			Service Function	Service Function	Service Function	Service Function	Service Function	Service Function	Service Function
			60	61	66	70	76		
1	Allocation Percentage		16.64%	1.17%	0.01%	6.31%	0.27%		
2	Total Units		923,888	45,318	210	163,776	7,725		
3	Gross Cost		2,393,773	168,548	1,055	908,351	38,799		
4	Cost per Unit		2.59	3.72	5.02	5.55	5.02		
5	SMA per Unit		4.23	4.23	4.23	3.41	3.41		
6	Published Charge per Unit		4.86	4.86	4.86	3.92	3.92		
7	Negotiated Rate / Cost per Unit								
8	Medi-Cal Units	07/01/02 - 09/30/02	137,578			18,522			
8A		10/01/02 - 06/30/03	402,603			43,087			
9	Medicare/Medi-Cal Crossover Units	07/01/02 - 09/30/02	31,319						
9A		10/01/02 - 06/30/03	98,545			223			
10	Enhanced SD/MC (Children) Units	07/01/02 - 09/30/02							
10A		10/01/02 - 06/30/03							
10B	Enhanced SD/MC (Refugees) Units	07/01/02 - 06/30/03							
11	Healthy Families (SED) Units	07/01/02 - 09/30/02	270						
11A		10/01/02 - 06/30/03	1,334			120			
12	Non-Medi-Cal Units		252,239	45,318	210	101,824	7,725		
13	Medi-Cal Costs	07/01/02 - 09/30/02	356,462			102,729			
13A		10/01/02 - 06/30/03	1,043,135			238,973			
14	Medi-Cal SMA Upper Limits	07/01/02 - 09/30/02	581,955			63,160			
14A		10/01/02 - 06/30/03	1,703,011			146,927			
15	Medi-Cal Published Charges	07/01/02 - 09/30/02	668,629			72,606			
15A		10/01/02 - 06/30/03	1,956,651			168,901			
16	Medi-Cal Negotiated Rates	07/01/02 - 09/30/02							
16A		10/01/02 - 06/30/03							
17	Medicare/Medi-Cal Crossover Costs	07/01/02 - 09/30/02	81,147						
17A		10/01/02 - 06/30/03	255,328			1,237			
18	Medicare/Medi-Cal Crossover SMA Upper Limits	07/01/02 - 09/30/02	132,479						
18A		10/01/02 - 06/30/03	416,845			760			
19	Medicare/Medi-Cal Crossover Published Charges	07/01/02 - 09/30/02	152,210						
19A		10/01/02 - 06/30/03	478,929			874			
20	Medicare/Medi-Cal Crossover Negotiated Rates	07/01/02 - 09/30/02							
20A		10/01/02 - 06/30/03							
21	Enhanced SD/MC Costs	07/01/02 - 09/30/02							
21A		10/01/02 - 06/30/03							
22	Enhanced SD/MC SMA Upper Limits	07/01/02 - 09/30/02							
22A		10/01/02 - 06/30/03							
23	Enhanced SD/MC Published Charges	07/01/02 - 09/30/02							
23A		10/01/02 - 06/30/03							
24	Enhanced SD/MC Negotiated Rates	07/01/02 - 09/30/02							
24A		10/01/02 - 06/30/03							
25	Enhanced SD/MC (Refugees) Costs	07/01/02 - 06/30/03							
26	Enhanced SD/MC (Refugees) SMA Upper Limits	07/01/02 - 06/30/03							
27	Enhanced SD/MC (Refugees) Published Charges	07/01/02 - 06/30/03							
28	Enhanced SD/MC (Refugees) Negotiated Rates	07/01/02 - 06/30/03							
29	Healthy Families Costs	07/01/02 - 09/30/02	700						
29A		10/01/02 - 06/30/03	3,456			666			
30	Healthy Families SMA Upper Limits	07/01/02 - 09/30/02	1,142						
30A		10/01/02 - 06/30/03	5,643			409			
31	Healthy Families Published Charges	07/01/02 - 09/30/02	1,312						
31A		10/01/02 - 06/30/03	6,483			470			
32	Healthy Families Negotiated Rates	07/01/02 - 09/30/02							
32A		10/01/02 - 06/30/03							
33	Non-Medi-Cal Costs		653,546	168,548	1,055	564,747	38,799		

CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY

DEPARTMENT OF MENTAL HEALTH

ALLOCATION OF COSTS TO SERVICE FUNCTIONS - MODE TOTAL

DETAIL COST REPORT

Fiscal Year 2002-2003

MH 1966A (10/04)

County: Tulare
County Code: 54

				MHS	ASO	TBS	MHS	ASO	
Legal Entity: COUNTY OF TULARE			A	B	C	D	E	F	G
Legal Entity Number: 00054			Mode Total	Service Function	Service Function	Service Function	Service Function	Service Function	Service Function
Mode: 15 - Outpatient (Program 2)				14	35	58	64	65	
1	Allocation Percentage		100.00%	3.38%	3.46%	62.96%	29.55%	0.65%	
2	Total Units			2,120	19,635	280,038	18,515	2,865	
3	Gross Cost		693,018	23,452	23,946	436,315	204,814	4,491	
4	Cost per Unit			11.06	1.22	1.56	11.06	1.57	
5	SMA per Unit			2.28	2.28	2.28	4.23	4.23	
6	Published Charge per Unit								
7	Negotiated Rate / Cost per Unit								
8	Medi-Cal Units	07/01/02 - 09/30/02		30	5,670	108,213	2,380	450	
8A		10/01/02 - 06/30/03		1,590	13,725	164,595	12,255	615	
9	Medicare/Medi-Cal Crossover Units	07/01/02 - 09/30/02							
9A		10/01/02 - 06/30/03							
10	Enhanced SD/MC Units	07/01/02 - 09/30/02							
10A		10/01/02 - 06/30/03							
10B	Enhanced SD/MC (Refugees) Units	07/01/02 - 06/30/03							
11	Healthy Families (SED) Units	07/01/02 - 09/30/02							
11A		10/01/02 - 06/30/03							
12	Non-Medi-Cal Units			500	240	7,230	3,880	1,800	
13	Medi-Cal Costs	07/01/02 - 09/30/02	202,882	332	6,915	168,602	26,328	705	
13A		10/01/02 - 06/30/03	427,305	17,589	16,738	256,448	135,566	964	
14	Medi-Cal SMA Upper Limits	07/01/02 - 09/30/02	271,693	68	12,928	246,726	10,067	1,904	
14A		10/01/02 - 06/30/03	464,635	3,625	31,293	375,277	51,839	2,601	
15	Medi-Cal Published Charges	07/01/02 - 09/30/02							
15A		10/01/02 - 06/30/03							
16	Medi-Cal Negotiated Rates	07/01/02 - 09/30/02							
16A		10/01/02 - 06/30/03							
17	Medicare/Medi-Cal Crossover Costs	07/01/02 - 09/30/02							
17A		10/01/02 - 06/30/03							
18	Medicare/Medi-Cal Crossover SMA Upper Limits	07/01/02 - 09/30/02							
18A		10/01/02 - 06/30/03							
19	Medicare/Medi-Cal Crossover Published Charges	07/01/02 - 09/30/02							
19A		10/01/02 - 06/30/03							
20	Medicare/Medi-Cal Crossover Negotiated Rates	07/01/02 - 09/30/02							
20A		10/01/02 - 06/30/03							
21	Enhanced SD/MC Costs	07/01/02 - 09/30/02							
21A		10/01/02 - 06/30/03							
22	Enhanced SD/MC SMA Upper Limits	07/01/02 - 09/30/02							
22A		10/01/02 - 06/30/03							
23	Enhanced SD/MC Published Charges	07/01/02 - 09/30/02							
23A		10/01/02 - 06/30/03							
24	Enhanced SD/MC Negotiated Rates	07/01/02 - 09/30/02							
24A		10/01/02 - 06/30/03							
25	Enhanced SD/MC (Refugees) Costs	07/01/02 - 06/30/03							
26	Enhanced SD/MC (Refugees) SMA Upper Limits	07/01/02 - 06/30/03							
27	Enhanced SD/MC (Refugees) Published Charges	07/01/02 - 06/30/03							
28	Enhanced SD/MC (Refugees) Negotiated Rates	07/01/02 - 06/30/03							
29	Healthy Families Costs	07/01/02 - 09/30/02							
29A		10/01/02 - 06/30/03							
30	Healthy Families SMA Upper Limits	07/01/02 - 09/30/02							
30A		10/01/02 - 06/30/03							
31	Healthy Families Published Charges	07/01/02 - 09/30/02							
31A		10/01/02 - 06/30/03							
32	Healthy Families Negotiated Rates	07/01/02 - 09/30/02							
32A		10/01/02 - 06/30/03							
33	Non-Medi-Cal Costs		62,831	5,531	293	11,265	42,921	2,822	

CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY

DEPARTMENT OF MENTAL HEALTH

Fiscal Year 2002-2003

ALLOCATION OF COSTS TO SERVICE FUNCTIONS - MODE TOTAL

DETAIL COST REPORT

MH 1966A (10/04)

County: Tulare
County Code: 54

			CR	CR	CR			
	Legal Entity: COUNTY OF TULARE	A	B	C	D	E	F	G
	Legal Entity Number: 00054		Service	Service	Service	Service	Service	Service
	Mode: 60 - Support	Mode Total	Function	Function	Function	Function	Function	Function
			20	30	40			
1	Allocation Percentage	100.00%	3.95%	0.21%	95.84%			
2	Total Units		92,993	10,830	51,096			
3	Gross Cost	1,476,082	58,314	3,103	1,414,665			
4	Cost per Unit		0.63	0.29	27.69			
5	Non-Medi-Cal Units (Same as Line 2)		92,993	10,830	51,096			
6	Non-Medi-Cal Costs (Same as Line 3)	1,476,082	58,314	3,103	1,414,665			

CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY

DETA... ...ST REPORT

DEPARTMENT OF MENTAL HE

DETERMINATION OF SD/MC DIRECT SERVICE AND MAA REIMBURSEMENT
MH 1968 (10/04)

Fiscal Year 2002-2003

County: Tulare
County Code: 54
Legal Entity: COUNTY OF TULARE
Legal Entity Number: 00054

			REIMBURSEMENT TYPE				PC	Costs				Costs	
			A	B	C	D	E	F	G	H	I	J	K
				Mode 55		Total MAA	Total Inpatient Mode 05-Hospital	Mode 05-All Other	Mode 10	Mode 15 Program (1)	Total Outpatient Exclude Program (2)	Mode 15 Program (2)	Total Outpatient (Col I + Col J)
			S.F.'s 01-09	S.F.'s 11-19, 31-39	S.F.'s 21-29								
1	Medi-Cal Costs	07/01/02 - 09/30/02							142,785	1,253,821	1,396,606	202,882	1,599,488
1A		10/01/02 - 06/30/03							169,852	4,008,909	4,178,761	427,305	4,606,066
2	Medi-Cal SMA	07/01/02 - 09/30/02							81,515	1,765,135	1,846,650	271,693	2,118,343
2A		10/01/02 - 06/30/03							179,463	5,552,352	5,731,815	464,635	6,196,450
3	Medi-Cal P. C	07/01/02 - 09/30/02							93,743	2,030,069	2,123,812		2,123,812
3A		10/01/02 - 06/30/03							206,382	6,385,559	6,591,941		6,591,941
4	Medi-Cal N. R	07/01/02 - 09/30/02											
4A		10/01/02 - 06/30/03											
5	Medi-Cal Gross Reimbursement	07/01/02 - 09/30/02							142,785	1,253,821	1,396,606	202,882	1,599,488
5A		10/01/02 - 06/30/03							169,852	4,008,909	4,178,761	427,305	4,606,066
6	Medicare/Medi-Cal Crossover Cost	07/01/02 - 09/30/02								98,397	98,397		98,397
6A		10/01/02 - 06/30/03								355,789	355,789		355,789
7	Medicare/Medi-Cal Crossover SMA	07/01/02 - 09/30/02								148,667	148,667		148,667
7A		10/01/02 - 06/30/03								510,721	510,721		510,721
8	Medicare/Medi-Cal Crossover P. C	07/01/02 - 09/30/02								170,812	170,812		170,812
8A		10/01/02 - 06/30/03								586,804	586,804		586,804
9	Medicare/Medi-Cal Crossover N. R	07/01/02 - 09/30/02											
9A		10/01/02 - 06/30/03											
10	Medicare/Medi-Cal Crossover Gross Reim.	07/01/02 - 09/30/02								98,397	98,397		98,397
10A		10/01/02 - 06/30/03								355,789	355,789		355,789
11	Total SD/MC + Crossover Gross Reim.	07/01/02 - 09/30/02							142,785	1,352,218	1,495,003	202,882	1,697,885
11A		10/01/02 - 06/30/03							169,852	4,364,697	4,534,549	427,305	4,961,855
12	Enhanced SD/MC (Children) Cost	07/01/02 - 09/30/02											
12A		10/01/02 - 06/30/03											
13	Enhanced SD/MC (Children) SMA	07/01/02 - 09/30/02											
13A		10/01/02 - 06/30/03											
14	Enhanced SD/MC (Children) P. C.	07/01/02 - 09/30/02											
14A		10/01/02 - 06/30/03											
15	Enhanced SD/MC (Children) N. R.	07/01/02 - 09/30/02											
15A		10/01/02 - 06/30/03											
16	Enhanced SD/MC (Children) Gross Reim.	07/01/02 - 09/30/02											
16A		10/01/02 - 06/30/03											
17	Enhanced SD/MC (Refugees) Cost	07/01/02 - 06/30/03											
18	Enhanced SD/MC (Refugees) SMA	07/01/02 - 06/30/03											
19	Enhanced SD/MC (Refugees) P. C.	07/01/02 - 06/30/03											
20	Enhanced SD/MC (Refugees) N. R.	07/01/02 - 06/30/03											
21	Total Medi-Cal Gross Reimbursement	07/01/02 - 09/30/02							142,785	1,352,218	1,495,003	202,882	1,697,885
21A	(Excludes Refugees)	10/01/02 - 06/30/03							169,852	4,364,697	4,534,549	427,305	4,961,855
22	Enhanced SD/MC (Refugees) Gross Reim	07/01/02 - 06/30/03											
23	Healthy Families Cost	07/01/02 - 09/30/02								3,858	3,858		3,858
23A		10/01/02 - 06/30/03								28,825	28,825		28,825
24	Healthy Families SMA	07/01/02 - 09/30/02								4,845	4,845		4,845
24A		10/01/02 - 06/30/03								31,900	31,900		31,900
25	Healthy Families P. C.	07/01/02 - 09/30/02								5,571	5,571		5,571
25A		10/01/02 - 06/30/03								36,669	36,669		36,669
26	Healthy Families N. R.	07/01/02 - 09/30/02											
26A		10/01/02 - 06/30/03											
27	Healthy Families Gross Reim.	07/01/02 - 09/30/02								3,858	3,858		3,858
27A		10/01/02 - 06/30/03								28,825	28,825		28,825
	Less: Patient and Other Payor Revenues												
28	SD/MC + Crossover Revenues	07/01/02 - 09/30/02								24,834	24,834		24,834
28A		10/01/02 - 06/30/03								79,263	79,263		79,263
29	Enhanced SD/MC (Children) Revenues												
30	Enhanced SD/MC (Refugees) Revenues												
31	Healthy Families Revenues												
32	Total Expenditures from MAA (Mode 55)												
33	Medi-Cal Eligibility Factor (Average)												
34	Revenue - MAA												
35	Net Due - SD/MC for Direct Services	07/01/02 - 09/30/02							142,785	1,327,384	1,470,169	202,882	1,673,051
35A		10/01/02 - 06/30/03							169,852	4,285,434	4,455,286	427,305	4,882,592
36	Net Due - Enhanced SD/MC (Refugees)												
37	Net Due - Healthy Families	07/01/02 - 09/30/02								3,858	3,858		3,858
37A		10/01/02 - 06/30/03								28,825	28,825		28,825
	Amount Negotiated Rates Exceed Costs												
38	SD/MC (Includes Children)	07/01/02 - 09/30/02											
38A		10/01/02 - 06/30/03											
39	Enhanced SD/MC (Refugees)												
40	Healthy Families	07/01/02 - 09/30/02											
40A		10/01/02 - 06/30/03											

CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY

DEPARTMENT OF MENTAL HEALTH

DETAIL COST REPORT

SD/MC PRELIMINARY DESK SETTLEMENT
MH 1979 (10/04)

Fiscal Year 2002-2003

County: Tulare
County Code: 54

			A	B	C	D	E	F	G	H	I	J
								FFP % Source: MH1978 E8	FFP % Source: MH1978 F8			
	Legal Entity: COUNTY OF TULARE											
	Legal Entity Number: 00054		Total MAA	Total Inpatient	Total Outpatient	Total	50% FFP	51.40% FFP	51.37% FFP	[1]Variable % FFP	75% FFP	Total FFP
	SD/MC Administrative Reimbursement (County Only)											
1	County SD/MC Direct Service Gross Reimbursement				6,659,740	6,659,740						
2	Contract Provider Medi-Cal Direct Service Gross Reimbursement			1,293,234	8,253,707	9,546,941						
3	Total Medi-Cal Direct Service Gross Reimbursement					16,206,681						
4	Medi-Cal Administrative Reimbursement Limit					2,431,002						
5	Medi-Cal Administration					1,606,213						
6	Medi-Cal Administrative Reimbursement					1,606,213	803,107					803,107
	Healthy Families Administrative Reimbursement (County Only)											
7	County Healthy Families Direct Service Gross Reimbursement				620,249	620,249						
8	Healthy Families Administrative Reimbursement Limit					62,025						
9	Healthy Families Administration					68,600						
10	Healthy Families Administrative Reimbursement					62,025				40,471		40,471
	SD/MC Net Reimbursement for MAA											
11	Medi-Cal Admin. Activities Svc Functions 01 - 09											
12	Medi-Cal Admin. Activities Svc Functions 11 - 19, 31 - 39											
13	Medi-Cal Admin. Activities Svc Functions 21 - 29 (County Only)											
14	Utilization Review-Skilled Prof. Med. Personnel (County Only)					230,882					173,162	173,162
15	Other SD/MC Utilization Review (County Only)					25,650	12,825					12,825
16	SD/MC Net Reimbursement for Direct Services	07/01/02 - 09/30/02			1,673,051	1,673,051		859,948				859,948
16A		10/01/02 - 06/30/03			4,882,592	4,882,592			2,508,201			2,508,201
17	Enhanced SD/MC Net Reimb. (Children)	07/01/02 - 09/30/02										
17A		10/01/02 - 06/30/03										
18	Enhanced SD/MC Net Reimb. (Refugees)											
19	Total SD/MC Reimbursement Before Excess FFP											4,357,242
20	Amount Negotiated Rates Exceed Costs - SD/MC & Enh. SD/MC											
21	Total SD/MC Reimbursement (FFP)											4,357,242
22	Contract Limitation Adjustment											
23	Adjusted Total SD/MC Reimbursement (FFP)											4,357,242
24	Healthy Families Net Reimbursement	07/01/02 - 09/30/02			3,858	3,858				2,545		2,545
24A		10/01/02 - 06/30/03			28,825	28,825				18,736		18,736
25	Total Healthy Families Reimbursement Before Excess FFP											61,753
26	Amount Negotiated Rates Exceed Costs - Healthy Families											
27	Total Healthy Families Reimbursement											61,753

CALIFORNIA DEPARTMENT OF
Mental Health

Audits – Northern Region
1600 9th Street, Sacramento, CA 95814
(916) 455-1554, FAX (916) 445-1588

July 22, 2008

Cheryl L. Duerksen, Ph.D.
Director of Mental Health
Tulare County Health and Human Services Agency
5957 South Mooney Boulevard
Visalia, CA 93277

Dear Dr. Duerksen:

TULARE COUNTY HEALTH AND HUMAN SERVICES AGENCY
APPEAL SETTLEMENT
FISCAL PERIOD ENDED JUNE 30, 2003

In accordance with California Welfare and Institutions Code Section 14171, the audit report for Tulare County Mental Health for the fiscal period ended June 30, 2003, has been revised to incorporate the agreement reached pursuant to Audit Appeal MH8-0603-732-PW.

In our opinion, the amount shown in the accompanying Summary of Federal Share of Federal Short-Doyle/Medi-Cal Program Costs per Appeal (Schedule 1) represents the net amount allowable according to the above-mentioned statute.

The effect of this revised allowable program cost is as follows:

	Net Program Costs		
	As Audited	As Appealed	Adjustment
Federal Share of Short-Doyle/Medi-Cal	$ 8,614,250	$ 8,652,249	$ 37,999
Federal Share of Healthy Families/Medi-Cal	$ 444,833	$ 444,833	$ 0
State General Funds EPSDT Due State	$ 3,080,298	$ 3,098,840	$ 18,542

Should you have any questions, please do not hesitate to contact us at the above number.

Sincerely,

CHUKWUEMEKA OKEMIRI, CPA
Audits Supervisor – Northern Region

WALTER J. HILL, JR., MBA, EA
Chief of Audits

Enclosures

CERTIFIED MAIL

SCHEDULE 1

COUNTY OF TULARE
COMMUNITY MENTAL HEALTH SERVICES
SUMMARY OF NET REIMBURSABLE MEDI-CAL PROGRAM COSTS
FISCAL YEAR ENDED JUNE 30, 2003

		As Audited	Adjustments	Per Appeal
NET REIMBURSABLE MEDI-CAL PROGRAM COSTS				
COUNTY - FFP				
MEDI-CAL - FFP		$ 4,356,951	$ 3,164	$ 4,360,115
HEALTHY FAMILIES - FFP	(Sch. 2a)	61,753	0	61,753
TOTAL FFP - COUNTY PROVIDER	(Sch. 2a)	$ 4,418,704	$ 3,164	$ 4,421,868
CONTRACT PROVIDERS - FFP	(Sch. 3b)			
MEDI-CAL - FFP		$ 4,257,299	$ 34,835	$ 4,292,134
HEALTHY FAMILIES - FFP		383,080	0	383,080
TOTAL FFP - CONTRACT PROVIDER	(Sch. 3b)	$ 4,640,379	$ 34,835	$ 4,675,214
TOTAL FFP - COUNTY PLUS CONTRACT PROVIDERS				
MEDI-CAL - FFP		$ 8,614,250	$ 37,999	$ 8,652,249
HEALTHY FAMILIES - FFP		444,833	0	444,833
TOTAL FFP - CONTRACT PROVIDER		$ 9,059,083	$ 37,999	$ 9,097,082
SUMMARY OF STATE GENERAL FUNDS				
EPSDT - SGF	(Sch. 4)	$ 3,080,298	$ 18,542	$ 3,098,840

SCHEDULE 2

COUNTY OF TULARE
COMMUNITY MENTAL HEALTH SERVICES
SUMMARY OF MEDI-CAL PROGRAM COSTS BY MODE OF SERVICE
FISCAL YEAR ENDED JUNE 30, 2003

COUNTY OPERATED FEDERAL

		As Audited	Adjustments	Per Appeal
Total Medi-Cal Gross Reimbursement				
1. Inpatient SD/MC and Crossover	(MH 1968, Ln 11, 11A)	$ 0	$ 0	$ 0
2. Outpatient SD/MC and Crossover	(MH 1968, Ln 11, 11A)	6,659,740	(0)	6,659,740
3. Enhanced SD/MC (Children) - I/P	(MH1968, Ln 16, 16A)	0	0	0
4. Enhanced SD/MC (Children) - O/P	(MH1968, Ln 16, 16A)	0	4,868	4,868
5. Enhanced SD/MC (Refugees) - I/P	(MH1968, Ln 22)	0	0	0
6. Enhanced SD/MC (Refugees) - O/P	(MH1968, Ln 22)	0	0	0
7. Healthy Families Gross Reimbursement-I/P	(MH1968, Ln 27, 27A)	0	0	0
8. Healthy Families Gross Reimbursement-O/P	(MH1968, Ln 27, 27A)	32,683	0	32,683
9. Total		$ 6,692,423	$ 4,868	$ 6,697,291
Less: Patient & Other Payor Revenues				
10. Inpatient SD/MC and Crossover	(MH 1968, Ln 28, 28A)	$ 0	$ 0	$ 0
11. Outpatient SD/MC and Crossover	(MH 1968, Ln 28, 28A)	104,097	0	104,097
12. Enhanced SD/MC (Children)-I/P	(MH 1968, Ln 29)	0	0	0
13. Enhanced SD/MC (Children)-O/P	(MH 1968, Ln 29)	0	0	0
14. Enhanced SD/MC (Refugees) - I/P	(MH1968, Ln 30)	0	0	0
15. Enhanced SD/MC (Refugees) - O/P	(MH1968, Ln 30)	0	0	0
16. Healthy Families Patient Revenue-I/P	(MH 1968, Ln 31)	0	0	0
17. ~~Healthy Families Patient Revenue-O/P~~	~~(MH 1968, Ln 31)~~	0	0	0
18. Total		$ 104,097	$ 0	$ 104,097
Medi-Cal Net Reimbursement for Direct Services				
19. Inpatient SD/MC (Incl Children Enhanced)	(Ln 1,3 - Ln 10,12)	$ 0	$ 0	$ 0
20. Outpatient SD/MC (Incl Children Enhanced)	(Ln 2,4 - Ln 11,13)	6,555,643	4,867	6,560,510
21. Enhanced SD/MC (Refugees)-I/P	(Ln 5 - Ln 14)	0	0	0
22. Enhanced SD/MC (Refugees)-O/P	(Ln 6 - Ln 15)	0	0	0
23. Healthy Families-I/P	(Ln 7 - Ln 16)	0	0	0
24. Healthy Families-O/P	(Ln 8 - Ln 17)	32,683	0	32,683
25. Total		$ 6,588,326	$ 4,868	$ 6,593,194
Medi-Cal MAA Reimbursement				
26. Service Functions 01-09	(MH1979, Ln 11, Col. A)	$ 0	$ 0	$ 0
27. Service Functions 11-19, 31-39	(MH1979, Ln 12, Col. A)	0	0	0
28. Service Functions 21-19	(MH1979, Ln 13, Col. A)	0	0	0
29. Total		$ 0	$ 0	$ 0

SCHEDULE 2a

COUNTY OF TULARE
COMMUNITY MENTAL HEALTH SERVICES
SUMMARY OF MEDI-CAL PROGRAM COSTS BY MODE OF SERVICE
FISCAL YEAR ENDED JUNE 30, 2003

COUNTY OPERATED FEDERAL

		As Audited	Adjustments	Per Appeal
Amount Negotiated Rates Exceed Cost				
30. Inpatient SD/MC (Incl Children Enhan)	(MH 1968, Ln 38, 38A)	$ 0	$ 0	$ 0
31. Outpatient SD/MC (Incl Children Enhan)	(MH 1968, Ln 38, 38A)	0	0	0
32. Enhanced SD/MC (Refugees)-I/P	(MH1968, Ln 39)	0	0	0
33. Enhanced SD/MC (Refugees)-O/P	(MH1968, Ln 39)	0	0	0
34. Healthy Families-I/P	(MH 1968, Ln 40, 40A)	0	0	0
35. Healthy Families-O/P	(MH 1968, Ln 40, 40A)	0	0	0
36. Total		$ 0	$ 0	$ 0
Medi-Cal Administrative Reimbursement				
37. Administrative Reimbursement Limit	(MH 1979, Ln 4)	$ 2,431,002	$ 8,756	$ 2,439,758
38. Medi-Cal Administration	(MH 1979, Ln 5)	$ 1,606,213	$ 0	$ 1,606,213
39. Medi-Cal Reimbursement	(Lower of Ln 37, Ln 38)	$ 1,606,213	$ 0	$ 1,606,213
Healthy Families Administrative Reimbursement				
40. Healthy Families Administrative Reimbursement Limit	(MH1979, Ln 8)	$ 62,025	$ (0)	$ 62,025
41. Healthy Families Administration	(MH1979, Ln 9)	$ 68,600	$ 0	$ 68,600
42. Healthy Families Administrative Reimbursement	(Lower of Ln 40, Ln 41)	$ 62,025	$ (0)	$ 62,025
Utilization Review Reimbursement				
43. Skilled Professional	(MH1979, Ln 14, Col. D)	$ 230,882	$ 0	$ 230,882
44. Other Medi-Cal U.R.	(MH1979, Ln 15, Col. D)	$ 25,650	$ 0	$ 25,650
Net SD/MC Reimbursement - FFP				
45. Direct Services	(MH1979, Ln 16,16A)	$ 3,368,149	$ (0)	$ 3,368,149
46. Enhanced (Children)	(MH1979, Ln 17,17A)	0	3,164	3,164
47. Enhanced (Refugees)	(MH1979, Ln 18)	0	0	0
48 MAA	(MH 1979, Ln 11, 12 & 13)	0	0	0
49. Administrative Reimbursement	(MH1979, Ln 6)	803,107	(1)	803,107
50. U.R. Skilled Professional	(MH1979, Ln 14)	173,162	(1)	173,162
51. U.R. Other	(MH1979, Ln 15)	12,825	0	12,825
52. Negotiated Rate-Payback	(MH1979, Ln 20)	0	0	0
53. Subtotal- FFP		$ 4,357,243	$ 3,163	$ 4,360,406
54. Contract Limitation Adjustment	(MH 1979, Ln 22)	$ 0	$ 0	$ 0
55. Quality Assurance Review Results	(Adj # 51)	291	0	291
56. Total SD/MC Reimbursement - FFP		$ 4,356,951	$ 3,163	$ 4,360,115
Net Healthy Families Reimbursement - FFP				
57. Healthy Families Net Reimbursement	(MH1979, Ln 24,24A)	$ 21,282	$ (0)	$ 21,282
58. Negotiated Rate Exceed Costs	(MH1979, Ln 26)	0	0	0
59. Administrative Reimbursement	(MH1979, Ln 10)	40,471	0	40,471
60. Total Healthy Families Reimbursement - FFP		$ 61,753	$ 0	$ 61,753
61. Total - FFP (Ln 56 + Ln 60)		$ 4,418,704	$ 3,163	$ 4,421,868
				(To Sch. 1)

COUNTY OF TULARE
SUMMARY OF CONTRACT PROVIDERS' MEDI-CAL COST
FISCAL PERIOD ENDED JUNE 30, 2003

Legal Entity Number	Legal Entity	(1) Regular M/Cal and EPSDT Gross Cost	(2) EPSDT Enhanced - Children Gross Cost	(3) Enhanced - Refugees Gross Cost	(4) Total Gross Cost (Excl. HFP)	(5) Healthy Families Gross Cost	(6) Regular M/Cal and EPSDT Gross Cost	(7) EPSDT Enhanced - Children Gross Cost	(8) Enhanced - Refugees Gross Cost	(9) Total Gross Cost (Excl. HFP)	(10) Healthy Families Gross Cost
		INPATIENT					OUTPATIENT				
		(MH 1968, Ln 5, 5A, 10,10A)	(MH 1968, Ln 16, 16A)	(MH 1968, Ln 22)	(Col. 1 to 3)	(MH 1968, Ln 27, 27A)	(MH 1968, Ln 5, 5A, 10,10A)	(MH 1968, Ln 16, 16A)	(MH 1968, Ln 22)	(Col. 6 to 8)	(MH 1968, Ln 27, 27A)
00115	Seeneca Center and Day Treatment	$ 0	$ 0	$ 0	$ 0	$ 0	$ 38,184	$	$ 0	$ 38,184	$ 0
00386	Milhouse Children's services Inc.	$ 0	$ 0	$ 0	$ 0	$ 0	$ 39,072	$ 0	$ 0	$ 39,072	$ 0
00406	Turning Point of Central	$ 0	$ 0	$ 0	$ 0	$ 0	$ 5,686,140	$ 43,821	$ 0	$ 5,729,961	$ 417,384
00418	Tulare Youth Services Bureau	$ 0	$ 0	$ 0	$ 0	$ 0	$ 2,315,525	$ 9,685	$ 0	$ 2,325,210	$ 170,182
00484	North Valley Schools Inc.	$ 0	$ 0	$ 0	$ 0	$ 0	$ 57,033	$ 0	$ 0	$ 57,033	$ 0
00512	River Oak Center for Children	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
00541	Chans Youth Center	$ 0	$ 0	$ 0	$ 0	$ 0	$ 14,518	$ 0	$ 0	$ 14,518	$ 0
00689	Alliance for Community Care	$ 0	$ 0	$ 0	$ 0	$ 0	$ 10,998	$ 0	$ 0	$ 10,998	$ 0
00793	Canyon Acres Children's Services	$ 0	$ 0	$ 0	$ 0	$ 0	$ 92,237	$ 0	$ 0	$ 92,237	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 8,253,707	$ 53,506	$ 0	$ 8,307,213	$ 587,566

COUNTY OF TULARE
SUMMARY OF CONTRACT PROVIDERS' MEDI-CAL COST
FISCAL PERIOD ENDED JUNE 30, 2003

Legal Entity Number	Legal Entity	(11) Total Revenue (Excl. HFP) INPATIENT (MH 1968, Ln 28 to 30)	(12) Healthy Families Revenue INPATIENT (MH 1968, Ln 31)	(13) Total Revenue (Excl. HFP) OUTPATIENT (MH 1968, Ln 28 to 30)	(14) Healthy Families Revenue OUTPATIENT (MH 1968, Ln 31)	(15) Total Net Cost (Excl. HFP) INPATIENT (Col 4-11)	(16) Net Cost Healthy Families INPATIENT (Col 5-12)	(17) Total Net Cost (Excl. HFP) OUTPATIENT (Col 9-13)	(18) Net Cost Healthy Families OUTPATIENT (Col 10-14)	(19) Total MAA FFP Reimbursement (MH 1979, Ln 11-13)
00115	Seeneca Center and Day Treatment	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 38,184	$ 0	$ 0
00386	Milhouse Children's services Inc.	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 39,072	$ 0	$ 0
00406	Turning Point of Central	$ 0	$ 0	$ 4,193	$ 0	$ 0	$ 0	$ 5,725,768	$ 417,384	$ 0
00418	Tulare Youth Services Bureau	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 2,325,210	$ 170,182	$ 0
00484	North Valley Schools Inc.	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 57,033	$ 0	$ 0
00512	River Oak Center for Children	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
00541	Charis Youth Center	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 14,518	$ 0	$ 0
00689	Alliance for Community Care	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 10,998	$ 0	$ 0
00793	Canyon Acres Children's Services	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 92,237	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
	GRAND TOTAL	$ 0	$ 0	$ 4,193	$ 0	$ 0	$ 0	$ 8,303,020	$ 587,566	$ 0

COUNTY OF TULARE
SUMMARY OF CONTRACT PROVIDERS' MEDI-CAL COST
FISCAL PERIOD ENDED JUNE 30, 2003

Legal Entity Number	Legal Entity	(20) Neg. Rates Exceed Costs (Excl. HFP) INPATIENT (MH 1968, Ln 38 to 39)	(21) Neg. Rates Exceed Costs Healthy Families INPATIENT (MH 1968, Ln 40, 40A)	(22) Neg. Rates Exceed Costs (Excl. HFP) OUTPATIENT (MH 1968, Ln 38 to 39)	(23) Neg. Rates Exceed Costs Healthy Families OUTPATIENT (MH 1968, Ln 40, 40A)	(24) Total SD/MC Reimbursement (FFP) (MH 1979, Line 21)	(25) Healthy Families Reimbursement (FFP) (MH 1979, Ln. 27)	(26) Total Reimbursement (FFP) (Col. 24 + 25)	(27) FFP Contract Maximum	(28) Lower of FFP or Contract Maximum
00115	Seeneca Center and Day Treatment	$ 0	$ 0	$ 0	$ 0	$ 19,623	$ 0	$ 19,623	$ 38,580	$ 19,623
00386	Milhouse Children's services Inc.	$ 0	$ 0	$ 0	$ 0	$ 20,559	$ 0	$ 20,559	$ 85,071	$ 20,559
00406	Turning Point of Central	$ 0	$ 0	$ 0	$ 0	$ 2,957,879	$ 272,167	$ 3,230,046	$ 0	$ 3,230,046
00418	Tulare Youth Services Bureau	$ 0	$ 0	$ 0	$ 0	$ 1,198,705	$ 110,913	$ 1,309,618	$ 0	$ 1,309,618
00484	North Valley Schools Inc.	$ 0	$ 0	$ 0	$ 0	$ 29,622	$ 0	$ 29,622	$ 38,580	$ 29,622
00512	River Oak Center for Children	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0		$ 0
00541	Chans Youth Center	$ 0	$ 0	$ 0	$ 0	$ 7,433	$ 0	$ 7,433	$ 23,470	$ 7,433
00689	Alliance for Community Care	$ 0	$ 0	$ 0	$ 0	$ 10,998	$ 0	$ 10,998	$ 38,580	$ 10,998
00793	Canyon Acres Children's Services	$ 0	$ 0	$ 0	$ 0	$ 47,315	$ 0	$ 47,315	$ 87,259	$ 47,315
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
GRAND TOTAL		$ 0	$ 0	$ 0	$ 0	$ 4,292,134	$ 383,080	$ 4,675,214	$ 311,540	$ 4,675,214

(To Sch. 1)

SCHEDULE 4

COUNTY OF TULARE
COMMUNITY MENTAL HEALTH SERVICES
COMPUTATION OF EPSDT STATE SHARE PER AUDIT
FISCAL YEAR ENDED JUNE 30, 2003

	As Audited	Adjustments	Per Appeal
(1) SD/MC Actuals (MH 1979, Lns. 16, 16A, 17, 17A, 18) (including contractors)	14,805,157	58,373	14,863,530
(2) Total SD/MC Claims	17,608,879	0	17,608,879
(3) Percent % (Line 1/Line 2)	84.08%	0.33%	84.41%
(4) EPSDT Claims	11,518,844	0	11,518,844
(5) Actual Cost Settled EPSDT SD/MC (Line 3 X Line 4)	9,684,790	38,185	9,722,975
(6) Cost Settled Baseline for EPSDT	3,341,508	0	3,341,508
(7) Net Cost Settlement Amount (Line 5 - Line 6)	6,343,282	38,185	6,381,467
(8) 48.56% of Net Cost Settlement Amount (Line 7 x 48.56%)	3,080,298	18,542	3,098,840
(8a) FY 2001-02 EPSDT settlement	3,225,176	0	3,225,176
(8b) Annual Local Growth (L. 8 - 8a)	0	0	0
(9) County Match 10% of Local Growth (8b x 10%)	0	0	0
(10) Net cost settlement amount (L. 8 - 9)	3,080,298	18,542	3,098,840
(11) SGF Distribution (Settled and Audited)	3,080,298	0	3,080,298
(13) SGF Due (State)	(0)	18,542	18,542
			(To Sch. 1)

Source:

(1) Total CFRS SD/MC actuals after final Settlement (Col. 1) and Audit (Col. 3) for Net Direct Outpatient Services (includes Mode 05 - SF's 20-94, Mode 10, and Mode 15)

(2) Total SD/MC paid claims (total non-hospital, including PHF's) by County Submitting Claims

(4) SD/MC paid claims for children under 21 years of age (full scope, non-hospital, including PHF's) including new aid codes by County of Beneficiary

(6) Cost Settled Baseline for EPSDT for FY2002-2003, includes increase for FFS/MC provider rate increase.

(7) Settlement amount prior to 10% match calculation (8)-(9)

(11) SGF gross distribution (See DMH letter dated October 23, 2002 sent to Local Mental Health Directors) Includes adjustment for additional SGF and ASO non participants

(13) Amount owed back to the state cannot be more than was advanced or settled.

AUDIT ADJUSTMENTS

Provider					Provider Number	No. of Adj.	Fiscal Period Ended	
COUNTY OF TULARE					00054	9	June 30, 2003	
Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS		As Audited	Increase (Decrease)	Per Appeal
Adj. No.	Form/ Sch.	Line	Col.					
				ADJUSTMENTS TO REPORTED SD/MC UNITS - COUNTY				
1	MH 1966A	10	Total	ENHANCED - CHILDREN - 07/01/02 to 09/30/02		0	30	30
2	MH 1966A	10A	Total	ENHANCED - CHILDREN - 10/01/02 to 06/30/03		0	2,566	2,566
Info						0	2,596	2,596
				To adjust Enhanced units as a result of agreements reached between the DMH and the County pursuant to appeal agreements based on additional supporting documentation submitted by the County.				
				ADJUSTMENTS TO REPORTED SD/MC UNITS - CONTRACT PROVIDERS				
3	MH 1966A	10	Total	ENHANCED - CHILDREN - 07/01/02 to 09/30/02		0	2,524	2,524
4	MH 1966A	10A	Total	ENHANCED - CHILDREN - 10/01/02 to 06/30/03		0	21,968	21,968
Info						0	24,492	24,492
				To adjust Enhanced units as a result of agreements reached between the DMH and the County pursuant to appeal agreements based on additional supporting documentation submitted by the County.				
				ADJUSTMENTS TO REPORTED SD/MC SETTLEMENT				
5	MH 1979	21	J	TOTAL SD/MC REIMBURSEMENT (FFP) - COUNTY		$4,357,242	$3,164	$4,360,406
6	MH 1979	27	J	TOTAL HEALTHY FAMILIES REIMBURSEMENT - COUNTY		$61,753	0	$61,753
Info				TOTAL REIMBURSEMENT - COUNTY		4,418,995	3,164	4,422,159
7	Sch. 3b	Total	24	TOTAL SD/MC REIMBURSEMENT - CONTRACT PROVIDERS		$4,257,299	$34,835	$4,292,134
8	Sch. 3b	Total	25	TOTAL HEALTHY FAMILIES REIMBURSEMENT - CONTRACT PROVIDERS		$383,080	$0	383,080
				TOTAL REIMBURSEMENT - CONTRACT PROVIDERS		3,968,622	34,835	4,675,214
				To adjust audited Total SD/MC Reimbursement (FFP) due to the adjustments to Medi-Cal and Enhanced units.				
9	Sch. 4	8	3	TOTAL EPSDT SGF		$ 3,080,298	$ 18,542	$ 3,098,840
				To adjust the final EPSDT settlement as a result of adjustments to audited Medi-Cal cost.				

CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY

DEPARTMENT OF MENTAL HEALTH

CALCULATION OF PROGRAM COSTS
MH 1960 (10/04)

Fiscal Year 2002-2003

County: Tulare
County Code: 54

	Legal Entity: COUNTY OF TULARE	A	B	C
	Legal Entity Number: 00054	Salaries and Benefits	Other	Total Costs
1	Mental Health Expenditures	11,821,293	29,282,669	41,103,962
2	Encumbrances		116,079	116,079
3	Less: Payments to Contract Providers (County Only)		(15,050,699)	(15,050,699)
4	Other Adjustments (Provide Detail)			
5	Total Costs Before Medi-Cal Adjustments	11,821,293	14,348,049	26,169,342
6	Medi-Cal Adjustments from MH 1961			(5,906,958)
7	Managed Care Consolidation (County Only)			
8	Allowable Costs for Allocation			20,262,384
	Administrative Costs (County Only)			
9	SD/MC Administration			1,606,213
10	Healthy Families Administration			68,600
11	Non-SD/MC Administration			679,726
12	Total Administrative Costs			2,354,539
	Utilization Review Costs (County Only)			
13	Skilled Professional Medical Personnel			230,882
14	Other SD/MC Utilization Review			25,650
15	Non-SD/MC Utilization Review			107,170
16	Total Utilization Review Costs			363,702
17	Research and Evaluation (County Only)			
18	Mode Costs (Direct Service and MAA)			17,544,143
19	Total Costs - Lines 9 through 18			20,262,384

CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY **DEPARTMENT OF MENTAL HEALTH**

MEDI-CAL ADJUSTMENTS TO COSTS
MH 1961 (10/04) **Fiscal Year 2002-2003**

County: Tulare
County Code: 54

	Legal Entity: COUNTY OF TULARE	A	B	C
	Legal Entity Number: 00054	Salaries and Benefits	Other	Total Adjustments
1	Operating Transfers Out		(5,588,969)	(5,588,969)
2	Depreciation expense FY94-95 - FY02-03		39,118	39,118
3	Cal Works costs billed by Human Svcs Br		1,447,711	1,447,711
4	Assessment and Referral Team - Alcohol & Drugs		229,680	229,680
5	Turning Point of Central CA, Inc. settlement adjustment		(20,716)	(20,716)
6	Department of Rehabilitation grant		(64,108)	(64,108)
7	Admin. Services Orgn. (ASO) EPSDT W/hold gross up		14,034	14,034
8	State Hospital and Managed Care offsets		(1,632,917)	(1,632,917)
9	Worker Compensation refunds		(5,269)	(5,269)
10	Outlawed/stale dated warrants		(532)	(532)
11	Alameda County Behavioral Health Care Services		(137,683)	(137,683)
12	Merced, County of		(5,376)	(5,376)
13	Stanislaus Behavioral Health Center		(113,800)	(113,800)
14	Tuolumne General Hospital		(19,274)	(19,274)
15	Prior Accounts Payable Accrual Adjustments		(48,855)	(48,855)
16	Rounding		(2)	(2)
17				
18				
19				
20	**Total Adjustments**		(5,906,958)	(5,906,958)

CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY **DEPARTMENT OF MENTAL HEALTH**

ALLOCATION OF COSTS TO MODES OF SERVICE **Fiscal Year 2002-2003**

MH 1964 (10/04)

County: Tulare
County Code: 54

	Legal Entity: COUNTY OF TULARE	A
	Legal Entity Number: 00054	Total Costs
1	Mode Costs (Direct Service and MAA) from MH 1960	17,544,143
	Modes	
2	Hospital Inpatient Services (Mode 05-SFC 10-19)	
3	Other 24 Hour Services (Mode 05-All Other SFC)	670,176
4	Day Services (Mode 10)	317,267
5	Outpatient Services (Mode 15 Program 1 + Program 2)	15,080,618
6	Outreach Services (Mode 45)	
7	Medi-Cal Administrative Activities (Mode 55)	
8	Support Services (Mode 60)	1,476,082
9	Total - Lines 2 through 8	17,544,143

CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY

DEPARTMENT OF MENTAL HEALTH

Fiscal Year 2002-2003

ALLOCATION OF COSTS TO SERVICE FUNCTIONS - MODE TOTAL
MH 1966A (10/04)

DETAIL COST REPORT

County: Tulare
County Code: 54

CR

	Legal Entity: COUNTY OF TULARE		A	B	C	D	E	F	G
	Legal Entity Number: 00054		Mode Total	Service Function	Service Function	Service Function	Service Function	Service Function	Service Function
	Mode: 05 - Other 24 Hour Services (All Other SFC)			40					
1	Allocation Percentage		100.00%	100.00%					
2	Total Units			3,274					
3	Gross Cost		670,176	670,176					
4	Cost per Unit			204.70					
5	SMA per Unit			267.20					
6	Published Charge per Unit								
7	Negotiated Rate / Cost per Unit								
8	Medi-Cal Units	07/01/02 - 09/30/02							
8A		10/01/02 - 06/30/03							
9	Medicare/Medi-Cal Crossover Units	07/01/02 - 09/30/02							
9A		10/01/02 - 06/30/03							
10	Enhanced SD/MC (Children) Units	07/01/02 - 09/30/02							
10A		10/01/02 - 06/30/03							
10B	Enhanced SD/MC (Refugees) Units	07/01/02 - 06/30/03							
11	Healthy Families (SED) Units	07/01/02 - 09/30/02							
11A		10/01/02 - 06/30/03							
12	Non-Medi-Cal Units			3,274					
13	Medi-Cal Costs	07/01/02 - 09/30/02							
13A		10/01/02 - 06/30/03							
14	Medi-Cal SMA Upper Limits	07/01/02 - 09/30/02							
14A		10/01/02 - 06/30/03							
15	Medi-Cal Published Charges	07/01/02 - 09/30/02							
15A		10/01/02 - 06/30/03							
16	Medi-Cal Negotiated Rates	07/01/02 - 09/30/02							
16A		10/01/02 - 06/30/03							
17	Medicare/Medi-Cal Crossover Costs	07/01/02 - 09/30/02							
17A		10/01/02 - 06/30/03							
18	Medicare/Medi-Cal Crossover SMA Upper Limits	07/01/02 - 09/30/02							
18A		10/01/02 - 06/30/03							
19	Medicare/Medi-Cal Crossover Published Charges	07/01/02 - 09/30/02							
19A		10/01/02 - 06/30/03							
20	Medicare/Medi-Cal Crossover Negotiated Rates	07/01/02 - 09/30/02							
20A		10/01/02 - 06/30/03							
21	Enhanced SD/MC Costs	07/01/02 - 09/30/02							
21A		10/01/02 - 06/30/03							
22	Enhanced SD/MC SMA Upper Limits	07/01/02 - 09/30/02							
22A		10/01/02 - 06/30/03							
23	Enhanced SD/MC Published Charges	07/01/02 - 09/30/02							
23A		10/01/02 - 06/30/03							
24	Enhanced SD/MC Negotiated Rates	07/01/02 - 09/30/02							
24A		10/01/02 - 06/30/03							
25	Enhanced SD/MC (Refugees) Costs	07/01/02 - 06/30/03							
26	Enhanced SD/MC (Refugees) SMA Upper Limits	07/01/02 - 06/30/03							
27	Enhanced SD/MC (Refugees) Published Charges	07/01/02 - 06/30/03							
28	Enhanced SD/MC (Refugees) Negotiated Rates	07/01/02 - 06/30/03							
29	Healthy Families Costs	07/01/02 - 09/30/02							
29A		10/01/02 - 06/30/03							
30	Healthy Families SMA Upper Limits	07/01/02 - 09/30/02							
30A		10/01/02 - 06/30/03							
31	Healthy Families Published Charges	07/01/02 - 09/30/02							
31A		10/01/02 - 06/30/03							
32	Healthy Families Negotiated Rates	07/01/02 - 09/30/02							
32A		10/01/02 - 06/30/03							
33	Non-Medi-Cal Costs		670,176	670,176					

CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY

DEPARTMENT OF MENTAL HEALTH

ALLOCATION OF COSTS TO SERVICE FUNCTIONS - MODE TOTAL

DETAIL COST REPORT

Fiscal Year 2002-2003

MH 1966A (10/04)

County: Tulare
County Code: 54

Legal Entity: COUNTY OF TULARE
Legal Entity Number: 00054
Mode: 10 - Day Services

			A	B	C	D	E	F	G
				CR	CR	CR			
			Mode Total	Service Function	Service Function	Service Function	Service Function	Service Function	Service Function
				81	85	95			
1	Allocation Percentage		100.00%	4.28%	44.53%	51.19%			
2	Total Units			105	1,092	483			
3	Gross Cost		317,267	13,585	141,284	162,398			
4	Cost per Unit			129.38	129.38	336.23			
5	SMA per Unit			126.46	177.60	115.14			
6	Published Charge per Unit			145.43	204.24	132.41			
7	Negotiated Rate / Cost per Unit								
8	Medi-Cal Units	07/01/02 - 09/30/02		105	180	315			
8A		10/01/02 - 06/30/03			910	155			
9	Medicare/Medi-Cal Crossover Units	07/01/02 - 09/30/02							
9A		10/01/02 - 06/30/03							
10	Enhanced SD/MC (Children) Units	07/01/02 - 09/30/02							
10A		10/01/02 - 06/30/03							
10B	Enhanced SD/MC (Refugees) Units	07/01/02 - 06/30/03							
11	Healthy Families (SED) Units	07/01/02 - 09/30/02							
11A		10/01/02 - 06/30/03							
12	Non-Medi-Cal Units				2	13			
13	Medi-Cal Costs	07/01/02 - 09/30/02	142,785	13,585	23,289	105,912			
13A		10/01/02 - 06/30/03	169,852		117,737	52,115			
14	Medi-Cal SMA Upper Limits	07/01/02 - 09/30/02	81,515	13,278	31,968	36,269			
14A		10/01/02 - 06/30/03	179,463		161,616	17,847			
15	Medi-Cal Published Charges	07/01/02 - 09/30/02	93,743	15,270	36,763	41,709			
15A		10/01/02 - 06/30/03	206,382		185,858	20,524			
16	Medi-Cal Negotiated Rates	07/01/02 - 09/30/02							
16A		10/01/02 - 06/30/03							
17	Medicare/Medi-Cal Crossover Costs	07/01/02 - 09/30/02							
17A		10/01/02 - 06/30/03							
18	Medicare/Medi-Cal Crossover SMA Upper Limits	07/01/02 - 09/30/02							
18A		10/01/02 - 06/30/03							
19	Medicare/Medi-Cal Crossover Published Charges	07/01/02 - 09/30/02							
19A		10/01/02 - 06/30/03							
20	Medicare/Medi-Cal Crossover Negotiated Rates	07/01/02 - 09/30/02							
20A		10/01/02 - 06/30/03							
21	Enhanced SD/MC Costs	07/01/02 - 09/30/02							
21A		10/01/02 - 06/30/03							
22	Enhanced SD/MC SMA Upper Limits	07/01/02 - 09/30/02							
22A		10/01/02 - 06/30/03							
23	Enhanced SD/MC Published Charges	07/01/02 - 09/30/02							
23A		10/01/02 - 06/30/03							
24	Enhanced SD/MC Negotiated Rates	07/01/02 - 09/30/02							
24A		10/01/02 - 06/30/03							
25	Enhanced SD/MC (Refugees) Costs	07/01/02 - 06/30/03							
26	Enhanced SD/MC (Refugees) SMA Upper Limits	07/01/02 - 06/30/03							
27	Enhanced SD/MC (Refugees) Published Charges	07/01/02 - 06/30/03							
28	Enhanced SD/MC (Refugees) Negotiated Rates	07/01/02 - 06/30/03							
29	Healthy Families Costs	07/01/02 - 09/30/02							
29A		10/01/02 - 06/30/03							
30	Healthy Families SMA Upper Limits	07/01/02 - 09/30/02							
30A		10/01/02 - 06/30/03							
31	Healthy Families Published Charges	07/01/02 - 09/30/02							
31A		10/01/02 - 06/30/03							
32	Healthy Families Negotiated Rates	07/01/02 - 09/30/02							
32A		10/01/02 - 06/30/03							
33	Non-Medi-Cal Costs		4,630	(0)	259	4,371			

CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY

DEPARTMENT OF MENTAL HEALTH

Fiscal Year 2002-2003

ALLOCATION OF COSTS TO SERVICE FUNCTIONS - MODE TOTAL

DETAIL COST REPORT

MH 1966A (10/04)

County: Tulare
County Code: 54
Legal Entity: COUNTY OF TULARE
Legal Entity Number: 00054
Mode: 15 - Outpatient (Program 1)

			A	B	C	D	E	F	G
				CR	CR	CR	CR	CR	CR
			Mode Total	Service Function	Service Function	Service Function	Service Function	Service Function	Service Function
				02	03	06	10	11	12
1	Allocation Percentage		100.00%	6.12%	10.12%	0.45%	53.00%	0.41%	5.50%
2	Total Units			1,632,543	594,121	12,830	3,138,372	187,206	284,717
3	Gross Cost		14,387,600	881,154	1,455,688	64,439	7,624,925	58,841	792,026
4	Cost per Unit			0.54	2.45	5.02	2.43	0.31	2.78
5	SMA per Unit			1.77	1.77	1.77	2.28	2.28	2.28
6	Published Charge per Unit			2.04	2.04	2.04	2.62	2.62	2.62
7	Negotiated Rate / Cost per Unit								
8	Medi-Cal Units	07/01/02 - 09/30/02		296,253			261,251		
8A		10/01/02 - 06/30/03		905,030			921,277		
9	Medicare/Medi-Cal Crossover Units	07/01/02 - 09/30/02					7,100		
9A		10/01/02 - 06/30/03					40,840		
10	Enhanced SD/MC (Children) Units	07/01/02 - 09/30/02		30					
10A		10/01/02 - 06/30/03		880			1,596		
10B	Enhanced SD/MC (Refugees) Units	07/01/02 - 06/30/03							
11	Healthy Families (SED) Units	07/01/02 - 09/30/02		585			1,170		
11A		10/01/02 - 06/30/03		2,110			9,699		
12	Non-Medi-Cal Units			427,655	594,121	12,830	1,895,439	187,206	284,717
13	Medi-Cal Costs	07/01/02 - 09/30/02	1,253,821	159,901			634,730		
13A		10/01/02 - 06/30/03	4,008,909	488,484			2,238,316		
14	Medi-Cal SMA Upper Limits	07/01/02 - 09/30/02	1,765,135	524,368			595,652		
14A		10/01/02 - 06/30/03	5,552,352	1,601,903			2,100,512		
15	Medi-Cal Published Charges	07/01/02 - 09/30/02	2,030,069	604,356			684,478		
15A		10/01/02 - 06/30/03	6,385,559	1,846,261			2,413,746		
16	Medi-Cal Negotiated Rates	07/01/02 - 09/30/02							
16A		10/01/02 - 06/30/03							
17	Medicare/Medi-Cal Crossover Costs	07/01/02 - 09/30/02	98,397				17,250		
17A		10/01/02 - 06/30/03	355,789				99,224		
18	Medicare/Medi-Cal Crossover SMA Upper Limits	07/01/02 - 09/30/02	148,667				16,188		
18A		10/01/02 - 06/30/03	510,721				93,115		
19	Medicare/Medi-Cal Crossover Published Charges	07/01/02 - 09/30/02	170,812				18,602		
19A		10/01/02 - 06/30/03	586,804				107,001		
20	Medicare/Medi-Cal Crossover Negotiated Rates	07/01/02 - 09/30/02							
20A		10/01/02 - 06/30/03							
21	Enhanced SD/MC Costs	07/01/02 - 09/30/02	16	16					
21A		10/01/02 - 06/30/03	4,852	475			3,878		
22	Enhanced SD/MC SMA Upper Limits	07/01/02 - 09/30/02	53	53					
22A		10/01/02 - 06/30/03	5,503	1,558			3,639		
23	Enhanced SD/MC Published Charges	07/01/02 - 09/30/02	61	61					
23A		10/01/02 - 06/30/03	6,330	1,795			4,182		
24	Enhanced SD/MC Negotiated Rates	07/01/02 - 09/30/02							
24A		10/01/02 - 06/30/03							
25	Enhanced SD/MC (Refugees) Costs	07/01/02 - 06/30/03							
26	Enhanced SD/MC (Refugees) SMA Upper Limits	07/01/02 - 06/30/03							
27	Enhanced SD/MC (Refugees) Published Charges	07/01/02 - 06/30/03							
28	Enhanced SD/MC (Refugees) Negotiated Rates	07/01/02 - 06/30/03							
29	Healthy Families Costs	07/01/02 - 09/30/02	3,858	316			2,843		
29A		10/01/02 - 06/30/03	28,825	1,139			23,564		
30	Healthy Families SMA Upper Limits	07/01/02 - 09/30/02	4,845	1,035			2,668		
30A		10/01/02 - 06/30/03	31,900	3,735			22,114		
31	Healthy Families Published Charges	07/01/02 - 09/30/02	5,571	1,193			3,065		
31A		10/01/02 - 06/30/03	36,669	4,304			25,411		
32	Healthy Families Negotiated Rates	07/01/02 - 09/30/02							
32A		10/01/02 - 06/30/03							
33	Non-Medi-Cal Costs		8,633,134	230,824	1,455,688	64,439	4,605,120	58,841	792,026

ALLOCATION OF COSTS TO SERVICE FUNCTIONS - MODE TOTAL

DETAIL COST REPORT

MH 1966A (10/04)

County: Tulare
County Code: 54

			CR	CR	CR	CR	CR		
Legal Entity: COUNTY OF TULARE			H	I	J	K	L	M	N
Legal Entity Number: 00054			Service Function	Service Function	Service Function	Service Function	Service Function	Service Function	Service Function
Mode: 15 - Outpatient (Program 1)			60	61	66	70	76		
1	Allocation Percentage		16.64%	1.17%	0.01%	6.31%	0.27%		
2	Total Units		923,888	45,318	210	163,776	7,725		
3	Gross Cost		2,393,773	168,548	1,055	908,351	38,799		
4	Cost per Unit		2.59	3.72	5.02	5.55	5.02		
5	SMA per Unit		4.23	4.23	4.23	3.41	3.41		
6	Published Charge per Unit		4.86	4.86	4.86	3.92	3.92		
7	Negotiated Rate / Cost per Unit								
8	Medi-Cal Units	07/01/02 - 09/30/02	137,578			18,522			
8A		10/01/02 - 06/30/03	402,603			43,087			
9	Medicare/Medi-Cal Crossover Units	07/01/02 - 09/30/02	31,319						
9A		10/01/02 - 06/30/03	98,545			223			
10	Enhanced SD/MC (Children) Units	07/01/02 - 09/30/02							
10A		10/01/02 - 06/30/03				90			
10B	Enhanced SD/MC (Refugees) Units	07/01/02 - 06/30/03							
11	Healthy Families (SED) Units	07/01/02 - 09/30/02	270						
11A		10/01/02 - 06/30/03	1,334			120			
12	Non-Medi-Cal Units		252,239	45,318	210	101,734	7,725		
13	Medi-Cal Costs	07/01/02 - 09/30/02	356,462			102,729			
13A		10/01/02 - 06/30/03	1,043,135			238,973			
14	Medi-Cal SMA Upper Limits	07/01/02 - 09/30/02	581,955			63,160			
14A		10/01/02 - 06/30/03	1,703,011			146,927			
15	Medi-Cal Published Charges	07/01/02 - 09/30/02	668,629			72,606			
15A		10/01/02 - 06/30/03	1,956,651			168,901			
16	Medi-Cal Negotiated Rates	07/01/02 - 09/30/02							
16A		10/01/02 - 06/30/03							
17	Medicare/Medi-Cal Crossover Costs	07/01/02 - 09/30/02	81,147						
17A		10/01/02 - 06/30/03	255,328			1,237			
18	Medicare/Medi-Cal Crossover SMA Upper Limits	07/01/02 - 09/30/02	132,479						
18A		10/01/02 - 06/30/03	416,845			760			
19	Medicare/Medi-Cal Crossover Published Charges	07/01/02 - 09/30/02	152,210						
19A		10/01/02 - 06/30/03	478,929			874			
20	Medicare/Medi-Cal Crossover Negotiated Rates	07/01/02 - 09/30/02							
20A		10/01/02 - 06/30/03							
21	Enhanced SD/MC Costs	07/01/02 - 09/30/02							
21A		10/01/02 - 06/30/03				499			
22	Enhanced SD/MC SMA Upper Limits	07/01/02 - 09/30/02							
22A		10/01/02 - 06/30/03				307			
23	Enhanced SD/MC Published Charges	07/01/02 - 09/30/02							
23A		10/01/02 - 06/30/03				353			
24	Enhanced SD/MC Negotiated Rates	07/01/02 - 09/30/02							
24A		10/01/02 - 06/30/03							
25	Enhanced SD/MC (Refugees) Costs	07/01/02 - 06/30/03							
26	Enhanced SD/MC (Refugees) SMA Upper Limits	07/01/02 - 06/30/03							
27	Enhanced SD/MC (Refugees) Published Charges	07/01/02 - 06/30/03							
28	Enhanced SD/MC (Refugees) Negotiated Rates	07/01/02 - 06/30/03							
29	Healthy Families Costs	07/01/02 - 09/30/02	700						
29A		10/01/02 - 06/30/03	3,456			666			
30	Healthy Families SMA Upper Limits	07/01/02 - 09/30/02	1,142						
30A		10/01/02 - 06/30/03	5,643			409			
31	Healthy Families Published Charges	07/01/02 - 09/30/02	1,312						
31A		10/01/02 - 06/30/03	6,483			470			
32	Healthy Families Negotiated Rates	07/01/02 - 09/30/02							
32A		10/01/02 - 06/30/03							
33	Non-Medi-Cal Costs		653,546	168,548	1,055	564,247	38,799		

CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY

DEPARTMENT OF MENTAL HEALTH

Fiscal Year 2002-2003

ALLOCATION OF COSTS TO SERVICE FUNCTIONS - MODE TOTAL
MH 1966A (10/04)

DETAIL COST REPORT

County: Tulare
County Code: 54
Legal Entity: COUNTY OF TULARE
Legal Entity Number: 00054
Mode: 15 - Outpatient (Program 2)

			A	B	C	D	E	F	G
				MHS	ASO	TBS	MHS	ASO	
			Mode Total	Service Function	Service Function	Service Function	Service Function	Service Function	Service Function
				14	35	58	64	65	
1	Allocation Percentage		100.00%	3.38%	3.46%	62.96%	29.55%	0.65%	
2	Total Units			2,120	19,635	280,038	18,515	2,865	
3	Gross Cost		693,018	23,452	23,946	436,315	204,814	4,491	
4	Cost per Unit			11.06	1.22	1.56	11.06	1.57	
5	SMA per Unit			2.28	2.28	2.28	4.23	4.23	
6	Published Charge per Unit								
7	Negotiated Rate / Cost per Unit								
8	Medi-Cal Units	07/01/02 - 09/30/02		30	5,670	108,213	2,380	450	
8A		10/01/02 - 06/30/03		1,590	13,725	164,595	12,255	615	
9	Medicare/Medi-Cal Crossover Units	07/01/02 - 09/30/02							
9A		10/01/02 - 06/30/03							
10	Enhanced SD/MC Units	07/01/02 - 09/30/02							
10A		10/01/02 - 06/30/03							
10B	Enhanced SD/MC (Refugees) Units	07/01/02 - 06/30/03							
11	Healthy Families (SED) Units	07/01/02 - 09/30/02							
11A		10/01/02 - 06/30/03							
12	Non-Medi-Cal Units			500	240	7,230	3,880	1,800	
13	Medi-Cal Costs	07/01/02 - 09/30/02	202,882	332	6,915	168,602	26,328	705	
13A		10/01/02 - 06/30/03	427,305	17,589	16,738	256,448	135,566	964	
14	Medi-Cal SMA Upper Limits	07/01/02 - 09/30/02	271,693	68	12,928	246,726	10,067	1,904	
14A		10/01/02 - 06/30/03	464,635	3,625	31,293	375,277	51,839	2,601	
15	Medi-Cal Published Charges	07/01/02 - 09/30/02							
15A		10/01/02 - 06/30/03							
16	Medi-Cal Negotiated Rates	07/01/02 - 09/30/02							
16A		10/01/02 - 06/30/03							
17	Medicare/Medi-Cal Crossover Costs	07/01/02 - 09/30/02							
17A		10/01/02 - 06/30/03							
18	Medicare/Medi-Cal Crossover SMA Upper Limits	07/01/02 - 09/30/02							
18A		10/01/02 - 06/30/03							
19	Medicare/Medi-Cal Crossover Published Charges	07/01/02 - 09/30/02							
19A		10/01/02 - 06/30/03							
20	Medicare/Medi-Cal Crossover Negotiated Rates	07/01/02 - 09/30/02							
20A		10/01/02 - 06/30/03							
21	Enhanced SD/MC Costs	07/01/02 - 09/30/02							
21A		10/01/02 - 06/30/03							
22	Enhanced SD/MC SMA Upper Limits	07/01/02 - 09/30/02							
22A		10/01/02 - 06/30/03							
23	Enhanced SD/MC Published Charges	07/01/02 - 09/30/02							
23A		10/01/02 - 06/30/03							
24	Enhanced SD/MC Negotiated Rates	07/01/02 - 09/30/02							
24A		10/01/02 - 06/30/03							
25	Enhanced SD/MC (Refugees) Costs	07/01/02 - 06/30/03							
26	Enhanced SD/MC (Refugees) SMA Upper Limits	07/01/02 - 06/30/03							
27	Enhanced SD/MC (Refugees) Published Charges	07/01/02 - 06/30/03							
28	Enhanced SD/MC (Refugees) Negotiated Rates	07/01/02 - 06/30/03							
29	Healthy Families Costs	07/01/02 - 09/30/02							
29A		10/01/02 - 06/30/03							
30	Healthy Families SMA Upper Limits	07/01/02 - 09/30/02							
30A		10/01/02 - 06/30/03							
31	Healthy Families Published Charges	07/01/02 - 09/30/02							
31A		10/01/02 - 06/30/03							
32	Healthy Families Negotiated Rates	07/01/02 - 09/30/02							
32A		10/01/02 - 06/30/03							
33	Non-Medi-Cal Costs		62,831	5,531	293	11,265	42,921	2,822	

CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY

DEPARTMENT OF MENTAL HEALTH

ALLOCATION OF COSTS TO SERVICE FUNCTIONS - MODE TOTAL

DETAIL COST REPORT

Fiscal Year 2002-2003

MH 1966A (10/04)

County: Tulare
County Code: 54
Legal Entity: COUNTY OF TULARE
Legal Entity Number: 00054
Mode: 60 - Support

		A	B	C	D	E	F	G
			CR	CR	CR			
		Mode Total	Service Function	Service Function	Service Function	Service Function	Service Function	Service Function
			20	30	40			
1	Allocation Percentage	100.00%	3.95%	0.21%	95.84%			
2	Total Units		92,993	10,830	51,096			
3	Gross Cost	1,476,082	58,314	3,103	1,414,665			
4	Cost per Unit		0.63	0.29	27.69			
5	Non-Medi-Cal Units (Same as Line 2)		92,993	10,830	51,096			
6	Non-Medi-Cal Costs (Same as Line 3)	1,476,082	58,314	3,103	1,414,665			

CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY

DETAIL COST REPORT

DEPARTMENT OF MENTAL H

DETERMINATION OF SD/MC DIRECT SERVICE AND MAA REIMBURSEMENT
MH 1968 (10/04)

Fiscal Year 2002-2003

County: Tulare
County Code: 54
Legal Entity: COUNTY OF TULARE
Legal Entity Number: 00054

			REIMBURSEMENT TYPE				PC	Costs				Costs	
			A	B	C	D	E	F	G	H	I	J	K
			Mode 55			Total MAA	Total Inpatient Mode 05-Hospital	Mode 05-All Other	Mode 10	Mode 15 Program (1)	Total Outpatient Exclude Program (2)	Mode 15 Program (2)	Total Outpatient (Col I + Col J)
			S. F.'s 01-09	S. F.'s 11-19, 31-39	S. F.'s 21-29								
1	Medi-Cal Costs	07/01/02 - 09/30/02							142,785	1,253,821	1,396,606	202,882	1,599,488
1A		10/01/02 - 06/30/03							169,852	4,008,909	4,178,761	427,305	4,606,066
2	Medi-Cal SMA	07/01/02 - 09/30/02							81,515	1,765,135	1,846,650	271,693	2,118,343
2A		10/01/02 - 06/30/03							179,463	5,552,352	5,731,815	464,635	6,196,450
3	Medi-Cal P. C.	07/01/02 - 09/30/02							93,743	2,030,069	2,123,812		2,123,812
3A		10/01/02 - 06/30/03							206,382	6,385,559	6,591,941		6,591,941
4	Medi-Cal N. R.	07/01/02 - 09/30/02											
4A		10/01/02 - 06/30/03											
5	Medi-Cal Gross Reimbursement	07/01/02 - 09/30/02							142,785	1,253,821	1,396,606	202,882	1,599,488
5A		10/01/02 - 06/30/03							169,852	4,008,909	4,178,761	427,305	4,606,066
6	Medicare/Medi-Cal Crossover Cost	07/01/02 - 09/30/02								98,397	98,397		98,397
6A		10/01/02 - 06/30/03								355,789	355,789		355,789
7	Medicare/Medi-Cal Crossover SMA	07/01/02 - 09/30/02								148,667	148,667		148,667
7A		10/01/02 - 06/30/03								510,721	510,721		510,721
8	Medicare/Medi-Cal Crossover P. C.	07/01/02 - 09/30/02								170,812	170,812		170,812
8A		10/01/02 - 06/30/03								586,804	586,804		586,804
9	Medicare/Medi-Cal Crossover N. R.	07/01/02 - 09/30/02											
9A		10/01/02 - 06/30/03											
10	Medicare/Medi-Cal Crossover Gross Reim	07/01/02 - 09/30/02								98,397	98,397		98,397
10A		10/01/02 - 06/30/03								355,789	355,789		355,789
11	Total SD/MC + Crossover Gross Reim.	07/01/02 - 09/30/02							142,785	1,352,218	1,495,003	202,882	1,697,885
11A		10/01/02 - 06/30/03							169,852	4,364,697	4,534,549	427,305	4,961,855
12	Enhanced SD/MC (Children) Cost	07/01/02 - 09/30/02								16	16		16
12A		10/01/02 - 06/30/03								4,852	4,852		4,852
13	Enhanced SD/MC (Children) SMA	07/01/02 - 09/30/02								53	53		53
13A		10/01/02 - 06/30/03								5,503	5,503		5,503
14	Enhanced SD/MC (Children) P. C.	07/01/02 - 09/30/02								61	61		61
14A		10/01/02 - 06/30/03								6,330	6,330		6,330
15	Enhanced SD/MC (Children) N. R.	07/01/02 - 09/30/02											
15A		10/01/02 - 06/30/03											
16	Enhanced SD/MC (Children) Gross Reim.	07/01/02 - 09/30/02								16	16		16
16A		10/01/02 - 06/30/03								4,852	4,852		4,852
17	Enhanced SD/MC (Refugees) Cost	07/01/02 - 06/30/03											
18	Enhanced SD/MC (Refugees) SMA	07/01/02 - 06/30/03											
19	Enhanced SD/MC (Refugees) P. C.	07/01/02 - 06/30/03											
20	Enhanced SD/MC (Refugees) N. R.	07/01/02 - 06/30/03											
21	Total Medi-Cal Gross Reimbursement	07/01/02 - 09/30/02							142,785	1,352,234	1,495,019	202,882	1,697,901
21A	(Excludes Refugees)	10/01/02 - 06/30/03							169,852	4,369,549	4,539,401	427,305	4,966,706
22	Enhanced SD/MC (Refugees) Gross Reim.	07/01/02 - 06/30/03											
23	Healthy Families Cost	07/01/02 - 09/30/02								3,858	3,858		3,858
23A		10/01/02 - 06/30/03								28,825	28,825		28,825
24	Healthy Families SMA	07/01/02 - 09/30/02								4,845	4,845		4,845
24A		10/01/02 - 06/30/03								31,900	31,900		31,900
25	Healthy Families P. C.	07/01/02 - 09/30/02								5,571	5,571		5,571
25A		10/01/02 - 06/30/03								36,669	36,669		36,669
26	Healthy Families N. R.	07/01/02 - 09/30/02											
26A		10/01/02 - 06/30/03											
27	Healthy Families Gross Reim.	07/01/02 - 09/30/02								3,858	3,858		3,858
27A		10/01/02 - 06/30/03								28,825	28,825		28,825
	Less Patient and Other Payor Revenues												
28	SD/MC + Crossover Revenues	07/01/02 - 09/30/02								24,834	24,834		24,834
28A		10/01/02 - 06/30/03								79,263	79,263		79,263
29	Enhanced SD/MC (Children) Revenues												
30	Enhanced SD/MC (Refugees) Revenues												
31	Healthy Families Revenues												
32	Total Expenditures from MAA (Mode 55)												
33	Medi-Cal Eligibility Factor (Average)												
34	Revenue - MAA												
35	Net Due - SD/MC for Direct Services	07/01/02 - 09/30/02							142,785	1,327,400	1,470,185	202,882	1,673,067
35A		10/01/02 - 06/30/03							169,852	4,290,286	4,460,138	427,305	4,887,443
36	Net Due - Enhanced SD/MC (Refugees)												
37	Net Due - Healthy Families	07/01/02 - 09/30/02								3,858	3,858		3,858
37A		10/01/02 - 06/30/03								28,825	28,825		28,825
	Amount Negotiated Rates Exceed Costs												
38	SD/MC (Includes Children)	07/01/02 - 09/30/02											
38A		10/01/02 - 06/30/03											
39	Enhanced SD/MC (Refugees)												
40	Healthy Families	07/01/02 - 09/30/02											
40A		10/01/02 - 06/30/03											

CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY

DEPARTMENT OF MENTAL HEALTH

DETAIL COST REPORT

SD/MC PRELIMINARY DESK SETTLEMENT
MH 1979 (10/04)

Fiscal Year 2002-2003

County: Tulare
County Code: 54

	Legal Entity: COUNTY OF TULARE		A	B	C	D	E	F	G	H	I	J
								FFP % Source: MH1978 E8	FFP % Source: MH1978 F8			
	Legal Entity Number: 00054		Total MAA	Total Inpatient	Total Outpatient	Total	50% FFP	51.40% FFP	51.37% FFP	Variable % FFP	75% FFP	Total FFP
	SD/MC Administrative Reimbursement (County Only)											
1	County SD/MC Direct Service Gross Reimbursement				6,664,607	6,664,607						
2	Contract Provider Medi-Cal Direct Service Gross Reimbursement			1,293,234	8,307,213	9,600,447						
3	Total Medi-Cal Direct Service Gross Reimbursement					16,265,054						
4	Medi-Cal Administrative Reimbursement Limit					2,439,758						
5	Medi-Cal Administration					1,606,213						
6	Medi-Cal Administrative Reimbursement					1,606,213	803,107					803,107
	Healthy Families Administrative Reimbursement (County Only)											
7	County Healthy Families Direct Service Gross Reimbursement				620,249	620,249						
8	Healthy Families Administrative Reimbursement Limit					62,025						
9	Healthy Families Administration					68,600						
10	Healthy Families Administrative Reimbursement					62,025				40,471		40,471
	SD/MC Net Reimbursement for MAA											
11	Medi-Cal Admin. Activities Svc Functions 01 - 09											
12	Medi-Cal Admin. Activities Svc Functions 11 - 19, 31 - 39											
13	Medi-Cal Admin. Activities Svc Functions 21 - 29 (County Only)											
14	Utilization Review-Skilled Prof. Med. Personnel (County Only)					230,882					173,162	173,162
15	Other SD/MC Utilization Review (County Only)					25,650	12,825					12,825
16	SD/MC Net Reimbursement for Direct Services	07/01/02 - 09/30/02			1,673,051	1,673,051		859,948				859,948
16A		10/01/02 - 06/30/03			4,882,592	4,882,592			2,508,201			2,508,201
17	Enhanced SD/MC Net Reimb. (Children)	07/01/02 - 09/30/02			16	16				11		11
17A		10/01/02 - 06/30/03			4,852	4,852				3,154		3,154
18	Enhanced SD/MC Net Reimb. (Refugees)											
19	Total SD/MC Reimbursement Before Excess FFP											4,360,406
20	Amount Negotiated Rates Exceed Costs - SD/MC & Enh. SD/MC											
21	Total SD/MC Reimbursement (FFP)											4,360,406
22	Contract Limitation Adjustment											
23	Adjusted Total SD/MC Reimbursement (FFP)											4,360,406
24	Healthy Families Net Reimbursement	07/01/02 - 09/30/02			3,858	3,858				2,545		2,545
24A		10/01/02 - 06/30/03			28,825	28,825				18,736		18,736
25	Total Healthy Families Reimbursement Before Excess FFP											61,753
26	Amount Negotiated Rates Exceed Costs - Healthy Families											
27	Total Healthy Families Reimbursement											61,753