CALIFORNIA DEPARTMENT OF
Mental Health

Division of Program Compliance – Audits Branch
11401 S. Bloomfield Avenue, Unit 203, 2nd Floor
Norwalk, CA 90650
(562) 406-3929, FAX (562) 406-3951

July 30, 2009

Meloney Roy, LCSW, Director
Ventura County Behavioral Health Department
1911 Williams Drive, Suite 200
Oxnard, CA 93036

Dear Ms. Roy:

AUDIT REPORT – VENTURA COUNTY BEHAVIORAL HEALTH DEPARTMENT

We have conducted a desk examination of the Short-Doyle/Medi-Cal Cost Reporting and Data Collection (CR/DC) report of Ventura County Behavioral Health Department for the fiscal period July 1, 2004 to June 30, 2005. Our examination was made in accordance with Section 14170 of the Welfare and Institutions Code and was limited to the review of SD/MC units of service/time, Administrative costs and Crossover revenues and contract maximums.

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

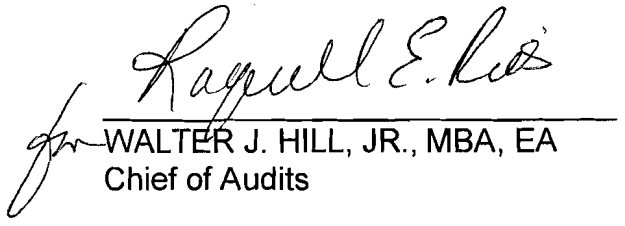
The effect of this revised allowable program costs is as follows:

NET PROGRAM COSTS

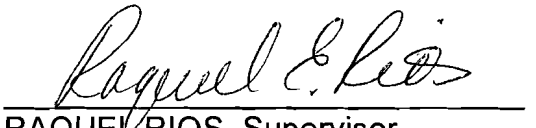
	Settled	Allowed	Adjustment
Federal Share of Short-Doyle/Medi-Cal	$ 12,132,495	$ 10,543,402	$ (1,589,093)
Federal Share of Healthy Families/Medi-Cal	$ 0	$ 0	$ 0
State General Funds EPSDT Due State	$ 1,918,228	$ 1,692,034	$ (226,194)

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 Care Services within sixty (60) calendar days following the date of receipt of this report. Your notice of disagreement should be directed to John Melton, Acting Chief, Administrative Appeals, Office of Legal Services, Department of Health Care 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,



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



RAQUEL RIOS, Supervisor
Audits - Southern Region

Enclosures

Certified Mail

SCHEDULE 1

County of Ventura
COMMUNITY MENTAL HEALTH SERVICES
SUMMARY OF NET REIMBURSABLE MEDI-CAL PROGRAM COSTS
FISCAL YEAR ENDED JUNE 30, 2005

		As Settled	Audit Adjustments	As Audited
NET REIMBURSABLE MEDI-CAL PROGRAM COSTS				
COUNTY PROVIDERS				
MEDI-CAL - FFP	(Sch. 2a)	$ 9,163,926	$ (1,449,089)	$ 7,714,837
HEALTHY FAMILIES - FFP	(Sch. 2a)	0	0	0
TOTAL FFP - COUNTY PROVIDERS		$ 9,163,926	$ (1,449,088)	$ 7,714,838
CONTRACT PROVIDERS				
MEDI-CAL - FFP	(Sch. 3b)	$ 2,968,569	$ (140,005)	$ 2,828,564
HEALTHY FAMILIES - FFP	(Sch. 3b)	0	0	0
TOTAL FFP - COTRACT PROVIDERS		$ 2,968,569	$ (140,005)	$ 2,828,564
TOTAL FFP - COUNTY PLUS CONTRACT PROVIDERS				
MEDI-CAL - FFP		$ 12,132,495	$ (1,589,094)	$ 10,543,401
HEALTHY FAMILIES - FFP		0	0	0
TOTAL FFP - COUNTY PLUS CONTRACT PROVIDERS		$ 12,132,495	$ (1,589,093)	$ 10,543,402
SUMMARY OF STATE GENERAL FUNDS				
EPSDT - SGF	(Sch 4)	1,918,228	(226,194)	$ 1,692,034

SCHEDULE 2

County of Ventura
COMMUNITY MENTAL HEALTH SERVICES
SUMMARY OF MEDI-CAL PROGRAM COSTS BY MODE OF SERVICE
FISCAL YEAR ENDED JUNE 30, 2005

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)	$ 4,672,614	$ (846,753)	$ 3,825,861
2. Outpatient SD/MC and Crossover	(MH 1968, Ln 11, 11A)	11,913,559	(1,243,397)	10,670,162
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)	0	0	0
9. Total		$ 16,586,173	$ (2,090,150)	$ 14,496,023
Less: Patient & Other Payor Revenues				
10. Inpatient SD/MC and Crossover	(MH 1968, Ln 28, 28A)	$ 1,022,226	$ 528,456	$ 1,550,682
11. Outpatient SD/MC and Crossover	(MH 1968, Ln 28, 28A)	123,684	0	123,684
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		$ 1,145,910	$ 528,456	$ 1,674,366
Medi-Cal Net Reimbursement for Direct Services				
19. Inpatient SD/MC (Incl Children Enhanced)	(Ln 1,3 - Ln 10,12)	$ 3,650,388	$ (1,375,209)	$ 2,275,179
20. Outpatient SD/MC (Incl Children Enhanced)	(Ln 2,4 - Ln 11,13)	11,789,875	(1,243,397)	10,546,478
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)	0	0	0
25. Total		$ 15,440,263	$ (2,618,606)	$ 12,821,657
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 Ventura
COMMUNITY MENTAL HEALTH SERVICES
SUMMARY OF MEDI-CAL PROGRAM COSTS BY MODE OF SERVICE
FISCAL YEAR ENDED JUNE 30, 2005

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)	$ 3,669,977	$ (313,522)	$ 3,356,455
38. Medi-Cal Administration	(MH 1979, Ln 5)	$ 2,072,568	$ (279,571)	$ 1,792,997
39. Medi-Cal Reimbursement	(Lower of Ln 37, Ln 38)	$ 2,072,568	$ (279,571)	$ 1,792,997
Healthy Families Administrative Reimbursement				
40. Healthy Families Administrative Reimbursement Limit	(MH1979, Ln 8)	$ 0	$ 0	$ 0
41. Healthy Families Administration	(MH1979, Ln 9)	$ 0	$ 0	$ 0
42. Healthy Families Administrative Reimbursement	(Lower of Ln 40, Ln 41)	$ 0	$ 0	$ 0
Utilization Review Reimbursement				
43. Skilled Professional	(MH1979, Ln 14, Col. D)	$ 388,353	$ 0	$ 388,353
44. Other Medi-Cal U.R.	(MH1979, Ln 15, Col. D)	$ 232,491	$ 0	$ 232,491
Net SD/MC Reimbursement - FFP				
45. Direct Services	(MH1979, Ln 16,16A)	$ 7,720,131	$ (1,309,302)	$ 6,410,829
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)	1,036,284	(139,786)	896,499
50. U.R. Skilled Professional	(MH1979, Ln 14)	291,265	0	291,265
51. U.R. Other	(MH1979, Ln 15)	116,246	0	116,246
52. Negotiated Rate-Payback	(MH1979, Ln 20)	0	0	0
53. Subtotal- FFP		$ 9,163,926	$ (1,449,088)	$ 7,714,837
54. Contract Limitation Adjustment	(MH 1979, Ln 22)	$ 0	$ 0	$ 0
55. Quality Assurance Review Results	(Adj #)	0	0	0
56. Total SD/MC Reimbursement - FFP		$ 9,163,926	$ (1,449,088)	$ 7,714,837
Net Healthy Families Reimbursement - FFP				
57. Healthy Families Net Reimbursement	(MH1979, Ln 24,24A)	$ 0	$ 0	$ 0
58. Negotiated Rate Exceed Costs	(MH1979, Ln 26)	0	0	0
59. Administrative Reimbursement	(MH1979, Ln 10)	0	0	0
60. Total Healthy Families Reimbursement - FFP		$ 0	$ 0	$ 0
61. Total - FFP (Ln 56 + Ln 60)		$ 9,163,926	$ (1,449,088)	$ 7,714,837

(To Sch. 1)

County of Ventura
SUMMARY OF CONTRACT PROVIDERS' MEDI-CAL COST
FISCAL PERIOD ENDED JUNE 30, 2005

Legal Entity Number	Legal Entity	(1) Medi-Cal and Crossover Gross Reimb.	(2) Enhanced - Children Gross Reimb.	(3) Enhanced - Refugees Gross Reimb.	(4) Total Gross Cost (Excl. HFP)	(5) Healthy Families Gross Reimb.	(6) Medi-Cal and Crossover Gross Reimb.	(7) Enhanced - Children Gross Reimb.	(8) Enhanced - Refugees Gross Reimb.	(9) Total Gross Cost (Excl. HFP)	(10) Healthy Families Gross Reimb.
		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)
00108	Telecare Corporation	$ 0	$ 0	$ 0	$ 0	$ 0	$ 2,120,991	$ 0	$ 0	$ 2,120,991	$ 0
00125	Phoenix Programs, Inc	$ 0	$ 0	$ 0	$ 0	$ 0	$ 100,496	$ 0	$ 0	$ 100,496	$ 0
00226	Turning Point Foundation	$ 0	$ 0	$ 0	$ 0	$ 0	$ 582,775	$ 0	$ 0	$ 582,775	$ 0
00275	Casa Pacifica	$ 0	$ 0	$ 0	$ 0	$ 0	$ 2,153,532	$ 0	$ 0	$ 2,153,532	$ 0
00386	Milhous Children's Services	$ 0	$ 0	$ 0	$ 0	$ 0	$ 320,510	$ 0	$ 0	$ 320,510	$ 0
00409	Anne Sippi Clinic	$ 0	$ 0	$ 0	$ 0	$ 0	$ 452,567	$ 0	$ 0	$ 452,567	$ 0
00566	Sylmar Health & Rehab Center	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
00683	Work Training Program	$ 0	$ 0	$ 0	$ 0	$ 0	$ 109,126	$ 0	$ 0	$ 109,126	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
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		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
		$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 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	$ 0	$ 5,839,997	$ 0	$ 0	$ 5,839,997	$ 0

SCHEDULE 3a

County of Ventura
SUMMARY OF CONTRACT PROVIDERS' MEDI-CAL COST
FISCAL PERIOD ENDED JUNE 30, 2005

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)
00108	Telecare Corporation	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 2,120,991	$ 0	$ 0
00125	Phoenix Programs, Inc	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 100,496	$ 0	$ 0
00226	Turning Point Foundation	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 582,775	$ 0	$ 0
00275	Casa Pacifica	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 2,153,532	$ 0	$ 0
00386	Milhous Children's Services	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 320,510	$ 0	$ 0
00409	Anne Sippi Clinic	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 452,567	$ 0	$ 0
00566	Sylmar Health & Rehab Center	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
00683	Work Training Program	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 109,126	$ 0	$ 0
0		0 $ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0		0 $ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0		0 $ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0		0 $ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0		0 $ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0		0 $ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0		0 $ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0		0 $ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0		0 $ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0		0 $ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0		0 $ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0		0 $ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0		0 $ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0		0 $ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0		0 $ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0		0 $ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0		0 $ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0		0 $ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0		0 $ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0		0 $ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0		0 $ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0		0 $ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 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	$ 0	$ 0	$ 5,839,997	$ 0	$ 0

County of Ventura
SUMMARY OF CONTRACT PROVIDERS' MEDI-CAL COST
FISCAL PERIOD ENDED JUNE 30, 2005

Legal Entity Number	Legal Entity	(20) Neg. Rates Exceed Costs (Excl. HFP)	(21) Neg. Rates Exceed Costs Healthy Families	(22) Neg. Rates Exceed Costs (Excl. HFP)	(23) Neg. Rates Exceed Costs Healthy Families	(24) Total SD/MC Reimbursement (FFP)	(25) Healthy Families Reimbursement (FFP)	(26) Total Reimbursement (FFP)	(27) FFP Contract Maximum	(28) Lower of FFP or Contract Maximum
		INPATIENT		OUTPATIENT						
		(MH 1968, Ln 38 to 39)	(MH 1968, Ln 40, 40A)	(MH 1968, Ln 38 to 39)	(MH 1968, Ln 40, 40A)	(MH 1979, Line 21)	(MH 1979, Ln. 27)	(Col. 24 + 25)		
00108	Telecare Corporation	$ 0	$ 0	$ 0	$ 0	$ 1,060,495	$ 0	$ 1,060,495	$ 969,060	$ 969,060
00125	Phoenix Programs, Inc	$ 0	$ 0	$ 0	$ 0	$ 50,248	$ 0	$ 50,248	$ 340,000	$ 50,248
00226	Turning Point Foundation	$ 0	$ 0	$ 0	$ 0	$ 291,388	$ 0	$ 291,388	$ 334,807	$ 291,388
00275	Casa Pacifica	$ 0	$ 0	$ 0	$ 0	$ 1,076,766	$ 0	$ 1,076,766	$ 1,152,030	$ 1,076,766
00386	Milhous Children's Services	$ 0	$ 0	$ 0	$ 0	$ 160,255	$ 0	$ 160,255	$ 232,500	$ 160,255
00409	Anne Sippi Clinic	$ 0	$ 0	$ 0	$ 0	$ 226,284	$ 0	$ 226,284	$ 318,779	$ 226,284
00566	Sylmar Health & Rehab Cer	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
00683	Work Training Program	$ 0	$ 0	$ 0	$ 0	$ 54,563	$ 0	$ 54,563	$ 147,569	$ 54,563
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
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0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
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0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
0	0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 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	$ 2,919,999	$ 0	$ 2,919,999	$ 3,494,745	$ 2,828,564

SCHEDULE 4

County of Ventura
COMMUNITY MENTAL HEALTH SERVICES
COMPUTATION OF EPSDT STATE SHARE PER AUDIT
FISCAL YEAR ENDED JUNE 30, 2005

	As Settled	Audit Adjustments	As Audited
(1) SD/MC Actuals (MH 1979, Lns. 16, 16A, 17, 17A, 18) (including contractors)	$ 17,727,011	$ (1,340,536)	$ 16,386,475
(2) Total SD/MC Claims	20,992,022	(604,222)	20,387,800
(3) Percent % (Line 1/Line 2)	0.8445	(0.0408)	0.8037
(4) EPSDT Claims	9,642,203	(604,222)	9,037,981
(5) Actual Cost Settled EPSDT SD/MC (Line 3 X Line 4)	8,142,840	(879,015)	7,263,825
(6) Cost Settled Baseline for EPSDT	3,834,900	0	3,834,900
(7) Net Cost Settlement Amount (Line 5 - Line 6)	4,307,940	(879,015)	3,428,925
(8) 50% of Cost Settlement Amount (Line 7 x 50%)	2,153,970	(439,507)	1,714,463
(8a) FY 2001-02 EPSDT Settlement (48.64% of net cost (8))	1,490,175	0	1,490,175
(8b) Annual Local Growth (L. 8 - 8a)	663,795	(439,507)	224,288
(9) County Match 10% of Local Growth (8b x 10%)	66,380	(43,951)	22,429
(10) Net Cost Settlement Amount (L. 8 - 9)	2,087,591	(395,556)	1,692,034
(11) SGF Distribution (Settled and Audited)	2,087,591	(169,363)	1,918,228
(12) SGF Due State	$ 0	$ (226,194)	$ (226,194)
			(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 (includes contract providers, excludes Healthy Families)

(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 FY 2004-2005, includes increase for FFS/MC provider rate increase

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

(11) SGF distribution (See DMH letter dated August 30, 2004 sent to Local Mental Health Directors)

Note: This amount may include payments not yet made but scheduled to be released as soon as funding becomes available. It may also include payments made in error in FY 06, which will be reversed in FY 06 and rescheduled for payment when funding becomes available.

(12) Amount owed back to the state cannot be more than was paid.

AUDIT ADJUSTMENTS

Provider	Provider Number	No. of Adj.	Fiscal Period Ended
Ventura	00056	25	June 30, 2005

Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
				ADJUSTMENTS TO REPORTED COSTS			
1	MH 1960	9	C	SD/MC ADMINISTRATION	$ 2,072,568	$ (279,571)	$ 1,792,997
	MH 1960	10	C	HEALTHY FAMILIES ADMINISTRATION	$ 0	$ 0	$ 0
	MH 1960	11	C	NON-SD/MC ADMINISTRATION	$ 2,225,747	$ 279,571	$ 2,505,318
	MH 1960	12	C	TOTAL ADMINISTRATIVE COSTS	$ 4,298,315	$ 0	$ 4,298,315
				To adjust reported administrative costs to SD/MC, Healthy Families and Non-SD/MC based on audited Medi-Cal gross costs.			

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

AUDIT ADJUSTMENTS

Provider	Provider Number	No. of Adj.	Fiscal Period Ended
Ventura	00056	25	June 30, 2005

Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
				ADJUSTMENTS TO REPORTED UNITS - COUNTY PROVIDERS			
2	MH 1966A	8	TOTAL	MEDI-CAL UNITS 07/01/04-09/30/04 - COUNTY PROVIDERS	1,121,695	30,635	1,152,330 *
	MH 1966A	8A	TOTAL	MEDI-CAL UNITS 10/01/04-06/30/05 - COUNTY PROVIDERS	3,304,469	31,766	3,336,235 *
				TOTAL	4,426,164	62,401	4,488,565 *
				To adjust reported Medi-Cal units to include Medicare/Medi-Cal Crossover units per the settled cost report. The auditor submitted detail workpapers to the County.			
3	MH 1966A	8	TOTAL	MEDI-CAL UNITS 07/01/04-09/30/04 - COUNTY PROVIDERS **	1,152,330	61,121	1,213,451 *
	MH 1966A	8A	TOTAL	MEDI-CAL UNITS 10/01/04-06/30/05 - COUNTY PROVIDERS **	3,336,235	355,057	3,691,292 *
				TOTAL **	4,488,565	416,178	4,904,743 *
				To adjust total Medi-Cal units to agree with total Medi-Cal units per State Department of Mental Health (SDMH) Summary of Approved Claims Report dated April 29, 2009. The auditor submitted detail workpapers to the County.			
4	MH 1966A	8	TOTAL	MEDI-CAL UNITS 07/01/04-09/30/04 - COUNTY PROVIDERS **	1,213,451	(56,390)	1,157,061 *
	MH 1966A	8A	TOTAL	MEDI-CAL UNITS 10/01/04-06/30/05 - COUNTY PROVIDERS **	3,691,292	(193,259)	3,498,033 *
				TOTAL **	4,904,743	(249,649)	4,655,094 *
				To adjust State DMH Summary of Approved Claims Report dated April 29, 2009 to include negative adjustments. The auditor submitted detail workpapers to the County.			
				- State DMH Medi-Cal Oversight EPSDT Audit (236,501)			
				- State DMH Medi-Cal Oversight Chart Review (28)			
				- State DMH Disallowed Claims Report (38)			
				- County's Back Out Units (13,082)			
				(249,649)			

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

AUDIT ADJUSTMENTS

Provider	Provider Number	No. of Adj.	Fiscal Period Ended
Ventura	00056	25	June 30, 2005

Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS		As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.					
				ADJUSTMENTS TO REPORTED UNITS - COUNTY PROVIDERS				
5	MH 1966A	8	TOTAL	MEDI-CAL UNITS 07/01/04-09/30/04 - COUNTY PROVIDERS	**	1,157,061	(58,691)	1,098,370 *
	MH 1966A	8A	TOTAL	MEDI-CAL UNITS 10/01/04-06/30/05 - COUNTY PROVIDERS	**	3,498,033	(171,923)	3,326,110 *
				TOTAL	**	4,655,094	(230,614)	4,424,480 *
				To adjust State DMH Summary of Approved Claims Report dated April 29, 2009 (after incorporating the negative adjustments) to agree with County's records prior to adjustment number 4.				
6	MH 1966A	8	TOTAL	MEDI-CAL UNITS 07/01/04-09/30/04 - COUNTY PROVIDERS	**	1,098,370	(56,390)	1,041,980
	MH 1966A	8A	TOTAL	MEDI-CAL UNITS 10/01/04-06/30/05 - COUNTY PROVIDERS	**	3,326,110	(193,259)	3,132,851
				TOTAL	**	4,424,480	(249,649)	4,174,831
				To adjust County's records to include negative adjustments. The auditor submitted detail workpapers to the County.				
				- State DMH Medi-Cal Oversight EPSDT Audit	(236,501)			
				- State DMH Medi-Cal Oversight Chart Review	(28)			
				- State DMH Disallowed Claims Report	(38)			
				- County's Back Out Units	(13,082)			
					(249,649)			

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

AUDIT ADJUSTMENTS

Provider	Provider Number	No. of Adj.	Fiscal Period Ended
Ventura	00056	25	June 30, 2005

Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
				ADJUSTMENTS TO REPORTED UNITS - COUNTY PROVIDERS			
7	MH 1966A	8	TOTAL	MEDI-CAL UNITS 07/01/04-09/30/04 - COUNTY PROVIDERS	1,157,061	(144,400)	1,012,661
	MH 1966A	8A	TOTAL	MEDI-CAL UNITS 10/01/04-06/30/05 - COUNTY PROVIDERS	3,498,033	(471,425)	3,026,608
				TOTAL	4,655,094	(615,825)	4,039,269
				To adjust the County's records to incorporate the control of the lower of State DMH approved units (after incorporating negative adjustments) or County's records (after incorporating negative adjustments) by service function code.			
				* Balance carried forward to subsequent adjustment. ** Balance brought forward from prior adjustment.			

AUDIT ADJUSTMENTS

Provider	Provider Number	No. of Adj.	Fiscal Period Ended
Ventura	00056	25	June 30, 2005

Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
				ADJUSTMENTS TO REPORTED UNITS - CONTRACT PROVIDERS			
8	MH 1966A	8	TOTAL	MEDI-CAL UNITS 07/01/04-09/30/04 - CONTRACT PROVIDERS	518,121	(27,768)	490,353 *
	MH 1966A	8A	TOTAL	MEDI-CAL UNITS 10/01/04-06/30/05 - CONTRACT PROVIDERS	1,808,823	15,023	1,823,846 *
				TOTAL	2,326,944	(12,745)	2,314,199 *
				To adjust total Medi-Cal units to agree with total Medi-Cal units per State DMH Summary of Approved Claims Report dated April 29, 2009. The auditor submitted detail workpapers to the County.			
9	MH 1966A	8	TOTAL	MEDI-CAL UNITS 07/01/04-09/30/04 - CONTRACT PROVIDERS **	490,353	(1,354)	488,999
	MH 1966A	8A	TOTAL	MEDI-CAL UNITS 10/01/04-06/30/05 - CONTRACT PROVIDERS **	1,823,846	(22,750)	1,801,096
				TOTAL **	2,314,199	(24,104)	2,290,095
				To adjust State DMH Summary of Approved Claims Report dated April 29, 2009 to include negative adjustments. The auditor submitted detail workpapers to the County.			
				- State DMH Medi-Cal Oversight EPSDT Audit (53)			
				- State DMH Medi-Cal Oversight Chart Review -			
				- State DMH Disallowed Claims Report -			
				- County's Back Out Units (24,051)			
				(24,104)			

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

AUDIT ADJUSTMENTS

Provider	Provider Number	No. of Adj.	Fiscal Period Ended
Ventura	#REF!	0	June 30, 2005

Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS		As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.					
				ADJUSTMENTS TO REPORTED UNITS - CONTRACT PROVIDERS				
10	MH 1966A	8	TOTAL	MEDI-CAL UNITS 07/01/04-09/30/04 - CONTRACT PROVIDERS	**	488,999	1,354	490,353 *
	MH 1966A	8A	TOTAL	MEDI-CAL UNITS 10/01/04-06/30/05 - CONTRACT PROVIDERS	**	1,801,096	29,725	1,830,821 *
				TOTAL	**	2,290,095	31,079	2,321,174 *
				To adjust State DMH Summary of Approved Claims Report dated April 29, 2009 (after incorporating negative adjustments) to agree with County's records prior to adjustment number 10.				
11	MH 1966A	8	TOTAL	MEDI-CAL UNITS 07/01/04-09/30/04 - CONTRACT PROVIDERS	**	490,353	(1,354)	488,999
	MH 1966A	8A	TOTAL	MEDI-CAL UNITS 10/01/04-06/30/05 - CONTRACT PROVIDERS	**	1,830,821	(22,750)	1,808,071
				TOTAL	**	2,321,174	(24,104)	2,297,070
				To adjust County's records to include negative adjustments. The auditor submitted detail workpaper to the County.				
				- State DMH Medi-Cal Oversight EPSDT Audit	(53)			
				- State DMH Medi-Cal Oversight Chart Review	-			
				- State DMH Disallowed Claims Report	-			
				- County's Back Out Units	(24,051)			
					(24,104)			

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

AUDIT ADJUSTMENTS

Provider	Provider Number	No. of Adj.	Fiscal Period Ended
Ventura	00056	25	June 30, 2005

Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
				ADJUSTMENTS TO REPORTED UNITS - CONTRACT PROVIDERS			
12	MH 1966A	8	TOTAL	MEDI-CAL UNITS 07/01/04-09/30/04 - CONTRACT PROVIDERS	488,999	0	488,999
	MH 1966A	8A	TOTAL	MEDI-CAL UNITS 10/01/04-06/30/05 - CONTRACT PROVIDERS	1,808,071	(16,060)	1,792,011
				TOTAL	2,297,070	(16,060)	2,281,010
				To adjust the County's records to incorporate the control of the lower of State DMH approved units (after incorporating the negative adjustments) or County's records (after incorporating adjustment number 12) by service function code.			
				* Balance carried forward to subsequent adjustment. ** Balance brought forward from prior adjustment.			

AUDIT ADJUSTMENTS

Provider	Provider Number	No. of Adj.	Fiscal Period Ended
Ventura	00056	25	June 30, 2005

Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
				ADJUSTMENTS TO REPORTED REVENUES - COUNTY PROVIDERS			
13	MH 1968	28	E	SD/MC + CROSSOVER REVENUES - INPATIENT - 07/01/04-09/30/04	$ 185,007	$ 172,756	$ 357,763 *
	MH 1968	28A	E	SD/MC + CROSSOVER REVENUES - INPATIENT - 10/01/04-06/30/05	837,219	42,589	879,808 *
	MH 1968	28	K	SD/MC + CROSSOVER REVENUES - OUTPATIENT - 07/01/04-09/30/04	33,858	0	33,858
	MH 1968	28A	K	SD/MC + CROSSOVER REVENUES - OUTPATIENT - 10/01/04-06/30/05	89,826	0	89,826
				TOTAL	$ 1,145,910	$ 215,345	$ 1,361,255
				To adjust reported SD/MC and Crossover revenues to agree with County's Report E 108 Payments from Other Sources for Medi-Cal Clients.			
14	MH 1968	28	E	SD/MC + CROSSOVER REVENUES - INPATIENT - 07/01/04-09/30/04 **	$ 357,763	$ 111,067	$ 468,830
	MH 1968	28A	E	SD/MC + CROSSOVER REVENUES - INPATIENT - 10/01/04-06/30/05 **	879,808	202,044	1,081,852
				TOTAL	$ 1,237,571	$ 387,782	$ 1,550,682
				To adjust SD/MC and Crossover revenues to reflect the Revised Final Medicare Settlement dated September 19, 2007.			

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

AUDIT ADJUSTMENTS

Provider	Provider Number	No. of Adj.	Fiscal Period Ended
Ventura	00012	25	June 30, 2005

Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
				ADJUSTMENTS TO REPORTED SD/MC SETTLEMENT COUNTY PROVIDERS			
15	MH 1979	23	J	ADJUSTED TOTAL SD/MC REIMBURSEMENT (FFP)	$ 9,163,926	$ (1,449,089)	$ 7,714,837
				To adjust the Total SD/MC Reimbursement (FFP) for county providers due to adjustments to costs, revenues, and units of service.			
				ADJUSTMENTS TO REPORTED SD/MC SETTLEMENT CONTRACT PROVIDERS			
16	MH 1979	23	J	ADJUSTED TOTAL SD/MC REIMBURSEMENT (FFP)	$ 2,968,569	$ (140,005)	$ 2,828,564
				To adjust the Total SD/MC Reimbursement (FFP) for contract providers due to adjustments made to units of service.			
				LE # 00108 Telecare Corporation	$ 1,074,044	$ (104,984)	$ 969,060
				LE # 00125 Phoenix Programs	51,961	(1,713)	50,248
				LE # 00226 Turning Point	295,098	(3,710)	291,388
				LE # 00275 Casa Pacifica	1,101,489	(24,723)	1,076,766
				LE # 00386 Milhous Children's Services	160,255	0	160,255
				LE # 00409 Anne Sippi Clinic	226,284	0	226,284
				LE # 00683 Work Training	59,438	(4,875)	54,563
				Total	$ 2,968,569	$ (140,005)	$ 2,828,564

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

AUDIT ADJUSTMENTS

Provider	Provider Number	No. of Adj.	Fiscal Period Ended
Ventura	00056	25	June 30, 2005

Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
				ADJUSTMENTS TO AS SETTLED EPSDT STATE GENERAL FUNDS			
17	SCH 4	1	3	SD/MC ACTUALS	$ 17,727,011	$ (1,340,536)	$ 16,386,475
				To adjust SD/MC actuals as a result of adjustments to total computable Medical Costs as reflected in the MH 1979 forms for both the County Program and its contract providers. The amounts utilized for this purpose was SD/MC and Enhanced for Outpatient services only.			
18	SCH 4	2	3	TOTAL SD/MC CLAIMS	$ 20,992,022	$ (781,249)	$ 20,210,773 *
	SCH 4	4	3	EPSDT CLAIMS	9,642,203	(781,249)	8,860,954 *
				To adjust total SD/MC claims and EPSDT claims to include the results of the Department's audit of the EPSDT Program conducted by the State Department of Mental Health as reflected in the report dated March 3, 2008. The Report covered the period from July 1, 2004 through June 30, 2005. This represents the original recoupment.			
19	SCH 4	2	3	TOTAL SD/MC CLAIMS **	$ 20,210,773	781,249	$ 20,992,022
	SCH 4	4	3	EPSDT CLAIMS **	8,860,954	781,249	9,642,203
				To adjust total SD/MC claims and EPSDT claims to reverse the original recoupment included in adjustment 19 above. The revised findings affecting "Total SD/MC Claims and EPSDT Claims" will be taken in adjustment 20 below.			
20	SCH 4	2	3	TOTAL SD/MC CLAIMS **	$ 20,992,022	(604,222)	20,387,800
	SCH 4	4	3	EPSDT CLAIMS **	9,642,203	(604,222)	9,037,981
				To adjust total SD/MC claims and EPSDT claims to include the results of the Department's revised audit of the EPSDT Program conducted by the State Department of Mental Health Medi-Cal Oversight Branch as reflected in the report dated March 3, 2008. The Report covered the period from July 1, 2004 throught June 30, 2005. This represents the revised recoupment.			

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

AUDIT ADJUSTMENTS

Provider	Provider Number	No. of Adj.	Fiscal Period Ended
Ventura	00056	25	June 30, 2005

Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
				ADJUSTMENTS TO AS SETTLED EPSDT STATE GENERAL FUNDS			
21	SCH 4	10	3	NET COST SETTLEMENT AMOUNT	$ 2,087,591	$ (395,557)	$ 1,692,034
				To adjust net cost settlement amount as a result of adjustments to SD/MC actuals (Total Computable Medical), total SD/MC claims and EPSDT claims.			
22	SCH 4	11	3	STATE GENERAL FUND DISTRIBUTION	$ 2,087,591	$ (218,984)	$ 1,868,607 *
				To adjust State General Fund Distribution to include the results of the Department's audit of the EPSDT Program conducted by the State DMH Medi-Cal Oversight Branch reflected in the report dated March 3, 2008. The Report covered the period from July 1, 2004 through June 30, 2005. This represents the SGF original recoupment.			
23	SCH 4	11	3	STATE GENERAL FUND DISTRIBUTION **	$ 1,868,607	$ 218,984	$ 2,087,591 *
				To adjust State General Fund Distribution to reverse the original SGF recoupment included in adjustment 22 above. The revised findings affecting "State General Fund Distribution" will be taken in adjustment 24 below.			
24	SCH 4	11	3	STATE GENERAL FUND DISTRIBUTION **	$ 2,087,591	$ (169,363)	$ 1,918,228
				To adjust State General Fund Distribution to include the results of the Department's revised audit of the EPSDT Program conducted by the State DMH Medi-Cal Oversight Branch as reflected in the report dated March 3, 2008. The Report covered the period from July 1, 2004 through June 30, 2005. This represents the revised SGF recoupment.			

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

AUDIT ADJUSTMENTS

Provider	Provider Number	No. of Adj.	Fiscal Period Ended
Ventura	00056	25	June 30, 2005

Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
				ADJUSTMENTS TO AS SETTLED EPSDT STATE GENERAL FUNDS			
25	SCH 4	11	3	STATE GENERAL FUNDS DUE STATE	$ -	$ (226,194)	$ (226,194)
				To adjust State General Funds due State as a result of adjustments to Cost Settlement Amount and State General Fund Distribution as follows:			
				Audited Net Cost Settlement Amount Adj 21 $ 1,692,034			
				Audited State General Fund Distribution Adj 24 1,918,228			
				Net State General Funds Due To State $ 226,194			
				* Balance carried forward to subsequent adjustment.			
				** Balance brought forward from prior adjustment.			

DETAIL COST REPORT

CALCULATION OF PROGRAM COSTS

MH 1960 (Rev. 7/05)

County: Ventura
County Code: 56

	Legal Entity: County of Ventura	A	B	C
	Legal Entity Number: 00056	Salaries and Benefits	Other	Total Costs
1	Mental Health Expenditures	25,669,130	31,233,228	56,902,358
2	Encumbrances			
3	Less: Payments to Contract Providers (County Only)		(10,076,288)	(10,076,288)
4	Other Adjustments from MH 1962	(1,000,890)	(1,967,611)	(2,968,501)
5	Total Costs Before Medi-Cal Adjustments	24,668,240	19,189,329	43,857,569
6	Medi-Cal Adjustments from MH 1961		267,514	267,514
7	Managed Care Consolidation (County Only)			
8	Allowable Costs for Allocation			44,125,083
	Administrative Costs (County Only)			
9	SD/MC Administration			1,792,997
10	Healthy Families Administration			
11	Non-SD/MC Administration			2,505,318
12	Total Administrative Costs			4,298,315
	Utilization Review Costs (County Only)			
13	Skilled Professional Medical Personnel			388,353
14	Other SD/MC Utilization Review			232,491
15	Non-SD/MC Utilization Review			297,920
16	Total Utilization Review Costs			918,764
17	Research and Evaluation (County Only)			
18	Mode Costs (Direct Service and MAA)			38,908,004
19	Total Costs - Lines 9 through 18			44,125,083

DETAIL COST REPORT

MEDI-CAL ADJUSTMENTS TO COSTS

MH 1961 (Rev. 7/05)

County: Ventura
County Code: 56

Legal Entity: County of Ventura		A	B	C
Legal Entity Number: 00056		Salaries and Benefits	Other	Total Adjustments
1	DEPRECIATION - MHL		25,627	25,627
2	DEPRECIATION - IPU		241,887	241,887
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20	**Total Adjustments**		267,514	267,514

DETAIL COST REPORT

OTHER ADJUSTMENTS

MH 1962 (Rev. 7/05)

County: Ventura
County Code: 56

	Legal Entity: County of Ventura	A	B	C
	Legal Entity Number: 00056	Salaries and Benefits	Other	Total Adjustments
1	HOSPITAL ADMINISTRATION	(58,722)		(58,722)
2	HOSPITAL MANDATED COMPLIANCE	(2,553)		(2,553)
3	AB 3632 - CASE MGMT		(13,303)	(13,303)
4	SB 90 - CHILD OUT OF STATE PLACEMENT	(4,798)	(11,032)	(15,830)
5	SB 90 - CHILD OUT OF STATE PLACEMENT - PROVIDER		(323,255)	(323,255)
6	MIOCR/MART	(33,326)		(33,326)
7	PROP 63 - PLANNING	(53,479)	(39,160)	(92,639)
8	FASD - PLANNING	(6,155)	(61,029)	(67,184)
9	STATE HOSPITAL		(271,859)	(271,859)
10	CONREP	(367,673)	(134,286)	(501,959)
11	PUBLIC HEALTH - CHPD	(65,142)	(1,844)	(66,986)
12	VOC REHAB	(205,355)	(96,721)	(302,076)
13	VOC REHAB - CASE SVCS	(85,835)	(15,966)	(101,801)
14	MANAGED CARE I/P		(971,603)	(971,603)
15	JUV. JUS. - SAMHSA GRANT	(63,613)	(2,949)	(66,562)
16	OTHER		(3,121)	(3,121)
17	NON-REIMBURSABLE COSTS	(314)	(3,400)	(3,714)
18	MANDATED COMPLIANCE	(53,925)	(18,083)	(72,008)
19				
20	**Total Adjustments**	(1,000,890)	(1,967,611)	(2,968,501)

DETAIL COST REPORT

PAYMENTS TO CONTRACT PROVIDERS

MH 1963 (Rev. 7/05)

FISCAL YEAR 2004 - 2005

County: Ventura
County Code: 56

A	B	C	D
Item	Legal Entity Name	Legal Entity Number	Amount Paid
1	Baker		1,200
2	Brown's Board & Care		17,460
3	Cottonwood Residential		8,915
4	Cudals Care		1,196
5	The Elms Residential		87,906
6	Hickory House		25,704
7	La Siesta		76,883
8	Lemonwood		8,567
9	Lincoln House		13,953
10	Lizzie's		10,200
11	Rocendia		4,200
12	Sandra Jarmon's Board & Care		29,834
13	Sunrise		91,636
14	ARS - Housing - Staff		18
15	Mission		7,422
16	Telecare - Garfield	00108	53,533
17	Casa Colina		38,811
18	Olivia Isabel Manor		3,758
19	Vista Knoll		75,911
20	Landmark MC		10,276
21	Milhouse Children's Services, Inc		412,608
22	Pacific Clinics		36,923
23	Canyon Acres		27,474
24	Devereaux Santa Barbara		28,881
25	Victor Treatment		154,154
26	Telecare - AB 2034	00108	593,256

DETAIL COST REPORT

PAYMENTS TO CONTRACT PROVIDERS

MH 1963 (Rev. 7/05)

FISCAL YEAR 2004 - 2005

County: Ventura
County Code: 56

A	B	C	D
Item	Legal Entity Name	Legal Entity Number	Amount Paid
27	Sylmar Health & Rehabilitation Center	00566	1,802,813
28	Turning Point Foundation	00226	644,306
29	Phoenix Program (Hillmont House Contract)		287,039
30	Phoenix Program (Hillmont House Contract)		57,816
31	Casa Pacifica	00275	2,555,900
32	Casa Pacifica - Wraparound Center	00275	169,647
33	Telecare - las Posadas/La Casa	00108	1,854,382
34	Anne Sippi Clinic	00409	424,099
35	United Parents	01144	153,528
36	Work Training Program		306,079
37			
38			
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49			
50			
	Total Payments to Contract Providers		10,076,288

DETAIL COST REPORT

ALLOCATION OF COSTS TO MODES OF SERVICE

MH 1964 (Rev. 7/05)

FISCAL YEAR 2004 - 2005

County: Ventura
County Code: 56

	Legal Entity: County of Ventura	A
	Legal Entity Number: 00056	Total Costs
1	Mode Costs (Direct Service and MAA) from MH 1960	38,908,004
	Modes	
2	Hospital Inpatient Services (Mode 05-SFC 10-19)	13,104,076
3	Other 24 Hour Services (Mode 05-All Other SFC)	
4	Day Services (Mode 10)	
5	Outpatient Services (Mode 15 Program 1 + Program 2)	24,130,845
6	Outreach Services (Mode 45)	1,161,995
7	Medi-Cal Administrative Activities (Mode 55)	
8	Support Services (Mode 60)	511,088
9	Total - Lines 2 through 8	38,908,004

Crosscheck OK

DETAIL COST REPORT

ALLOCATION OF COSTS TO SERVICE FUNCTIONS - MODE TOTAL

MH 1966 (Rev. 7/05)

FISCAL YEAR 2004 - 2005

County: Ventura
County Code: 56
Legal Entity: County of Ventura
Legal Entity Number: 00056
Mode: 05 - Hospital Inpatient Services (SFC 10-19)

			A	B	C	D	E	F	G
				CR	CR				
			Mode Total	Service Function	Service Function	Service Function	Service Function	Service Function	Service Function
				13	19				
1	Allocation Percentage		100.00%	80.17%	19.83%				
2	Total Units			10,025	2,479				
3	Gross Cost		13,104,076	10,506,107	2,597,969				
4	Cost per Unit			1,047.99	1,047.99				
5	SMA per Unit			913.58	236.82				
6	Published Charge per Unit			913.58	236.82				
7	Negotiated Rate / Cost per Unit								
8	Medi-Cal Units	07/01/04 - 09/30/04		754	420				
8A		10/01/04 - 06/30/05		2,238	616				
9	Medicare/Medi-Cal Crossover Units	07/01/04 - 09/30/04		387					
9A		10/01/04 - 06/30/05		416					
10	Enhanced SD/MC (Children) Units	07/01/04 - 09/30/04							
10A		10/01/04 - 06/30/05							
10B	Enhanced SD/MC (Refugees) Units	07/01/04 - 06/30/05							
11	Healthy Families (SED) Units	07/01/04 - 09/30/04							
11A		10/01/04 - 06/30/05							
12	Non-Medi-Cal Units			6,230	1,443				
13	Medi-Cal Costs	07/01/04 - 09/30/04	936,724	790,185	146,539	*			
13A		10/01/04 - 06/30/05	2,557,689	2,345,403	212,286	*			
14	Medi-Cal SMA Upper Limits	07/01/04 - 09/30/04	835,379	688,839	146,539	*			
14A		10/01/04 - 06/30/05	2,256,878	2,044,592	212,286	*			
15	Medi-Cal Published Charges	07/01/04 - 09/30/04	835,378	688,839	146,539	*			
15A		10/01/04 - 06/30/05	2,256,878	2,044,592	212,286	*			
16	Medi-Cal Negotiated Rates	07/01/04 - 09/30/04				*			
16A		10/01/04 - 06/30/05							
17	Medicare/Medi-Cal Crossover Costs	07/01/04 - 09/30/04	405,572	405,572					
17A		10/01/04 - 06/30/05	435,964	435,964					
18	Medicare/Medi-Cal Crossover SMA Upper Limits	07/01/04 - 09/30/04	353,555	353,555					
18A		10/01/04 - 06/30/05	380,049	380,049					
19	Medicare/Medi-Cal Crossover Published Charges	07/01/04 - 09/30/04	353,555	353,555					
19A		10/01/04 - 06/30/05	380,049	380,049					
20	Medicare/Medi-Cal Crossover Negotiated Rates	07/01/04 - 09/30/04							
20A		10/01/04 - 06/30/05							
21	Enhanced SD/MC (Children) Costs	07/01/04 - 09/30/04							
21A		10/01/04 - 06/30/05							
22	Enhanced SD/MC (Children) SMA Upper Limits	07/01/04 - 09/30/04							
22A		10/01/04 - 06/30/05							
23	Enhanced SD/MC (Children) Published Charges	07/01/04 - 09/30/04							
23A		10/01/04 - 06/30/05							
24	Enhanced SD/MC (Children) Negotiated Rates	07/01/04 - 09/30/04							
24A		10/01/04 - 06/30/05							
25	Enhanced SD/MC (Refugees) Costs	07/01/04 - 06/30/05							
26	Enhanced SD/MC (Refugees) SMA Upper Limits	07/01/04 - 06/30/05							
27	Enhanced SD/MC (Refugees) Published Charges	07/01/04 - 06/30/05							
28	Enhanced SD/MC (Refugees) Negotiated Rates	07/01/04 - 06/30/05							
29	Healthy Families Costs	07/01/04 - 09/30/04							
29A		10/01/04 - 06/30/05							
30	Healthy Families SMA Upper Limits	07/01/04 - 09/30/04							
30A		10/01/04 - 06/30/05							
31	Healthy Families Published Charges	07/01/04 - 09/30/04							
31A		10/01/04 - 06/30/05							
32	Healthy Families Negotiated Rates	07/01/04 - 09/30/04							
32A		10/01/04 - 06/30/05							
33	Non-Medi-Cal Costs		8,768,126	6,528,982	2,239,144				

* SFC 19 limited to SMA & Physician and Ancillary costs. CCR, Title 22, Section 51511 (a) (2)

DETAIL COST REPORT

ALLOCATION OF COSTS TO SERVICE FUNCTIONS - MODE TOTAL

MH 1966 (Rev. 7/05)

FISCAL YEAR 2004 - 2005

County: Ventura
County Code: 56

Legal Entity: County of Ventura			A	B	C	D	E	F	G
Legal Entity Number: 00056				Service	Service	Service	Service	Service	Service
Mode: 10 - Day Services			Mode Total	Function	Function	Function	Function	Function	Function
1	Allocation Percentage								
2	Total Units								
3	Gross Cost								
4	Cost per Unit								
5	SMA per Unit								
6	Published Charge per Unit								
7	Negotiated Rate / Cost per Unit								
8	Medi-Cal Units	07/01/04 - 09/30/04							
8A		10/01/04 - 06/30/05							
9	Medicare/Medi-Cal Crossover Units	07/01/04 - 09/30/04							
9A		10/01/04 - 06/30/05							
10	Enhanced SD/MC (Children) Units	07/01/04 - 09/30/04							
10A		10/01/04 - 06/30/05							
10B	Enhanced SD/MC (Refugees) Units	07/01/04 - 06/30/05							
11	Healthy Families (SED) Units	07/01/04 - 09/30/04							
11A		10/01/04 - 06/30/05							
12	Non-Medi-Cal Units								
13	Medi-Cal Costs	07/01/04 - 09/30/04							
13A		10/01/04 - 06/30/05							
14	Medi-Cal SMA Upper Limits	07/01/04 - 09/30/04							
14A		10/01/04 - 06/30/05							
15	Medi-Cal Published Charges	07/01/04 - 09/30/04							
15A		10/01/04 - 06/30/05							
16	Medi-Cal Negotiated Rates	07/01/04 - 09/30/04							
16A		10/01/04 - 06/30/05							
17	Medicare/Medi-Cal Crossover Costs	07/01/04 - 09/30/04							
17A		10/01/04 - 06/30/05							
18	Medicare/Medi-Cal Crossover SMA Upper Limits	07/01/04 - 09/30/04							
18A		10/01/04 - 06/30/05							
19	Medicare/Medi-Cal Crossover Published Charges	07/01/04 - 09/30/04							
19A		10/01/04 - 06/30/05							
20	Medicare/Medi-Cal Crossover Negotiated Rates	07/01/04 - 09/30/04							
20A		10/01/04 - 06/30/05							
21	Enhanced SD/MC Costs	07/01/04 - 09/30/04							
21A		10/01/04 - 06/30/05							
22	Enhanced SD/MC SMA Upper Limits	07/01/04 - 09/30/04							
22A		10/01/04 - 06/30/05							
23	Enhanced SD/MC Published Charges	07/01/04 - 09/30/04							
23A		10/01/04 - 06/30/05							
24	Enhanced SD/MC Negotiated Rates	07/01/04 - 09/30/04							
24A		10/01/04 - 06/30/05							
25	Enhanced SD/MC (Refugees) Costs	07/01/04 - 06/30/05							
26	Enhanced SD/MC (Refugees) SMA Upper Limits	07/01/04 - 06/30/05							
27	Enhanced SD/MC (Refugees) Published Charges	07/01/04 - 06/30/05							
28	Enhanced SD/MC (Refugees) Negotiated Rates	07/01/04 - 06/30/05							
29	Healthy Families Costs	07/01/04 - 09/30/04							
29A		10/01/04 - 06/30/05							
30	Healthy Families SMA Upper Limits	07/01/04 - 09/30/04							
30A		10/01/04 - 06/30/05							
31	Healthy Families Published Charges	07/01/04 - 09/30/04							
31A		10/01/04 - 06/30/05							
32	Healthy Families Negotiated Rates	07/01/04 - 09/30/04							
32A		10/01/04 - 06/30/05							
33	Non-Medi-Cal Costs								

DETAIL COST REPORT

ALLOCATION OF COSTS TO SERVICE FUNCTIONS - MODE TOTAL

MH 1966 (Rev. 7/05)

FISCAL YEAR 2004 - 2005

County: Ventura
County Code: 56

			CR						
Legal Entity: County of Ventura			H	I	J	K	L	M	N
Legal Entity Number: 00056			Service Function	Service Function	Service Function	Service Function	Service Function	Service Function	Service Function
Mode: 15 - Outpatient Services (Program 1)									
			70						
1	Allocation Percentage		7.22%						
2	Total Units		409,997						
3	Gross Cost		1,666,274						
4	Cost per Unit		4.06						
5	SMA per Unit		3.63						
6	Published Charge per Unit		4.33						
7	Negotiated Rate / Cost per Unit								
8	Medi-Cal Units	07/01/04 - 09/30/04	48,482						
8A		10/01/04 - 06/30/05	110,561						
9	Medicare/Medi-Cal Crossover Units	07/01/04 - 09/30/04	40						
9A		10/01/04 - 06/30/05	579						
10	Enhanced SD/MC (Children) Units	07/01/04 - 09/30/04							
10A		10/01/04 - 06/30/05							
10B	Enhanced SD/MC (Refugees) Units	07/01/04 - 06/30/05							
11	Healthy Families (SED) Units	07/01/04 - 09/30/04							
11A		10/01/04 - 06/30/05							
12	Non-Medi-Cal Units		250,335						
13	Medi-Cal Costs	07/01/04 - 09/30/04	197,036						
13A		10/01/04 - 06/30/05	449,332						
14	Medi-Cal SMA Upper Limits	07/01/04 - 09/30/04	175,990						
14A		10/01/04 - 06/30/05	401,336						
15	Medi-Cal Published Charges	07/01/04 - 09/30/04	209,927						
15A		10/01/04 - 06/30/05	478,729						
16	Medi-Cal Negotiated Rates	07/01/04 - 09/30/04							
16A		10/01/04 - 06/30/05							
17	Medicare/Medi-Cal Crossover Costs	07/01/04 - 09/30/04	163						
17A		10/01/04 - 06/30/05	2,353						
18	Medicare/Medi-Cal Crossover SMA Upper Limits	07/01/04 - 09/30/04	145						
18A		10/01/04 - 06/30/05	2,102						
19	Medicare/Medi-Cal Crossover Published Charges	07/01/04 - 09/30/04	173						
19A		10/01/04 - 06/30/05	2,507						
20	Medicare/Medi-Cal Crossover Negotiated Rates	07/01/04 - 09/30/04							
20A		10/01/04 - 06/30/05							
21	Enhanced SD/MC Costs	07/01/04 - 09/30/04							
21A		10/01/04 - 06/30/05							
22	Enhanced SD/MC SMA Upper Limits	07/01/04 - 09/30/04							
22A		10/01/04 - 06/30/05							
23	Enhanced SD/MC Published Charges	07/01/04 - 09/30/04							
23A		10/01/04 - 06/30/05							
24	Enhanced SD/MC Negotiated Rates	07/01/04 - 09/30/04							
24A		10/01/04 - 06/30/05							
25	Enhanced SD/MC (Refugees) Costs	07/01/04 - 06/30/05							
26	Enhanced SD/MC (Refugees) SMA Upper Limits	07/01/04 - 06/30/05							
27	Enhanced SD/MC (Refugees) Published Charges	07/01/04 - 06/30/05							
28	Enhanced SD/MC (Refugees) Negotiated Rates	07/01/04 - 06/30/05							
29	Healthy Families Costs	07/01/04 - 09/30/04							
29A		10/01/04 - 06/30/05							
30	Healthy Families SMA Upper Limits	07/01/04 - 09/30/04							
30A		10/01/04 - 06/30/05							
31	Healthy Families Published Charges	07/01/04 - 09/30/04							
31A		10/01/04 - 06/30/05							
32	Healthy Families Negotiated Rates	07/01/04 - 09/30/04							
32A		10/01/04 - 06/30/05							
33	Non-Medi-Cal Costs		1,017,390						

DETAIL COST REPORT

ALLOCATION OF COSTS TO SERVICE FUNCTIONS - MODE TOTAL

MH 1966 (Rev. 7/05)

FISCAL YEAR 2004 - 2005

County: Ventura
County Code: 56
Legal Entity: County of Ventura
Legal Entity Number: 00056
Mode: 15 - Outpatient Services (Program 2)

			A	B	C	D	E	F	G
				MHS	MHS	MHS	MHS	MHS	MHS
			Mode Total	Service Function	Service Function	Service Function	Service Function	Service Function	Service Function
				10	30	40	50	60	10
1	Allocation Percentage		100.00%	1.07%	8.55%	32.87%	0.07%	0.01%	0.02%
2	Total Units			12,180	59,100	271,830	445	15	120
3	Gross Cost		1,037,253	11,075	88,711	340,951	765	55	180
4	Cost per Unit			0.91	1.50	1.25	1.72	3.67	1.50
5	SMA per Unit			2.44	2.44	2.44	2.44	4.51	2.44
6	Published Charge per Unit								
7	Negotiated Rate / Cost per Unit								
8	Medi-Cal Units	07/01/04 - 09/30/04							
8A		10/01/04 - 06/30/05							
9	Medicare/Medi-Cal Crossover Units	07/01/04 - 09/30/04							
9A		10/01/04 - 06/30/05							
10	Enhanced SD/MC Units	07/01/04 - 09/30/04							
10A		10/01/04 - 06/30/05							
10B	Enhanced SD/MC (Refugees) Units	07/01/04 - 06/30/05							
11	Healthy Families (SED) Units	07/01/04 - 09/30/04							
11A		10/01/04 - 06/30/05							
12	Non-Medi-Cal Units			12,180	59,100	271,830	445	15	120
13	Medi-Cal Costs	07/01/04 - 09/30/04							
13A		10/01/04 - 06/30/05							
14	Medi-Cal SMA Upper Limits	07/01/04 - 09/30/04							
14A		10/01/04 - 06/30/05							
15	Medi-Cal Published Charges	07/01/04 - 09/30/04							
15A		10/01/04 - 06/30/05							
16	Medi-Cal Negotiated Rates	07/01/04 - 09/30/04							
16A		10/01/04 - 06/30/05							
17	Medicare/Medi-Cal Crossover Costs	07/01/04 - 09/30/04							
17A		10/01/04 - 06/30/05							
18	Medicare/Medi-Cal Crossover SMA Upper Limits	07/01/04 - 09/30/04							
18A		10/01/04 - 06/30/05							
19	Medicare/Medi-Cal Crossover Published Charges	07/01/04 - 09/30/04							
19A		10/01/04 - 06/30/05							
20	Medicare/Medi-Cal Crossover Negotiated Rates	07/01/04 - 09/30/04							
20A		10/01/04 - 06/30/05							
21	Enhanced SD/MC Costs	07/01/04 - 09/30/04							
21A		10/01/04 - 06/30/05							
22	Enhanced SD/MC SMA Upper Limits	07/01/04 - 09/30/04							
22A		10/01/04 - 06/30/05							
23	Enhanced SD/MC Published Charges	07/01/04 - 09/30/04							
23A		10/01/04 - 06/30/05							
24	Enhanced SD/MC Negotiated Rates	07/01/04 - 09/30/04							
24A		10/01/04 - 06/30/05							
25	Enhanced SD/MC (Refugees) Costs	07/01/04 - 06/30/05							
26	Enhanced SD/MC (Refugees) SMA Upper Limits	07/01/04 - 06/30/05							
27	Enhanced SD/MC (Refugees) Published Charges	07/01/04 - 06/30/05							
28	Enhanced SD/MC (Refugees) Negotiated Rates	07/01/04 - 06/30/05							
29	Healthy Families Costs	07/01/04 - 09/30/04							
29A		10/01/04 - 06/30/05							
30	Healthy Families SMA Upper Limits	07/01/04 - 09/30/04							
30A		10/01/04 - 06/30/05							
31	Healthy Families Published Charges	07/01/04 - 09/30/04							
31A		10/01/04 - 06/30/05							
32	Healthy Families Negotiated Rates	07/01/04 - 09/30/04							
32A		10/01/04 - 06/30/05							
33	Non-Medi-Cal Costs		1,037,253	11,075	88,711	340,951	765	55	180

DETAIL COST REPORT

ALLOCATION OF COSTS TO SERVICE FUNCTIONS - MODE TOTAL

MH 1966 (Rev. 7/05)

FISCAL YEAR 2004 - 2005

County: Ventura
County Code: 56
Legal Entity: County of Ventura
Legal Entity Number: 00056
Mode: 15 - Outpatient Services (Program 2)

			MHS	MHS	MHS	MHS	MHS	MHS	MHS
			H	I	J	K	L	M	N
			Service Function	Service Function	Service Function	Service Function	Service Function	Service Function	Service Function
			30	40	60	10	30	40	40
1	Allocation Percentage		3.04%	1.52%	25.18%	0.13%	2.95%	10.08%	0.12%
2	Total Units		18,900	9,625	84,090	1,320	21,480	72,435	1,760
3	Gross Cost		31,500	15,750	261,232	1,400	30,552	104,591	1,280
4	Cost per Unit		1.67	1.64	3.11	1.06	1.42	1.44	0.73
5	SMA per Unit		2.44	2.44	4.51	2.44	2.44	2.44	2.44
6	Published Charge per Unit								
7	Negotiated Rate / Cost per Unit								
8	Medi-Cal Units	07/01/04 - 09/30/04							
8A		10/01/04 - 06/30/05							
9	Medicare/Medi-Cal Crossover Units	07/01/04 - 09/30/04							
9A		10/01/04 - 06/30/05							
10	Enhanced SD/MC Units	07/01/04 - 09/30/04							
10A		10/01/04 - 06/30/05							
10B	Enhanced SD/MC (Refugees) Units	07/01/04 - 06/30/05							
11	Healthy Families (SED) Units	07/01/04 - 09/30/04							
11A		10/01/04 - 06/30/05							
12	Non-Medi-Cal Units		18,900	9,625	84,090	1,320	21,480	72,435	1,760
13	Medi-Cal Costs	07/01/04 - 09/30/04							
13A		10/01/04 - 06/30/05							
14	Medi-Cal SMA Upper Limits	07/01/04 - 09/30/04							
14A		10/01/04 - 06/30/05							
15	Medi-Cal Published Charges	07/01/04 - 09/30/04							
15A		10/01/04 - 06/30/05							
16	Medi-Cal Negotiated Rates	07/01/04 - 09/30/04							
16A		10/01/04 - 06/30/05							
17	Medicare/Medi-Cal Crossover Costs	07/01/04 - 09/30/04							
17A		10/01/04 - 06/30/05							
18	Medicare/Medi-Cal Crossover SMA Upper Limits	07/01/04 - 09/30/04							
18A		10/01/04 - 06/30/05							
19	Medicare/Medi-Cal Crossover Published Charges	07/01/04 - 09/30/04							
19A		10/01/04 - 06/30/05							
20	Medicare/Medi-Cal Crossover Negotiated Rates	07/01/04 - 09/30/04							
20A		10/01/04 - 06/30/05							
21	Enhanced SD/MC Costs	07/01/04 - 09/30/04							
21A		10/01/04 - 06/30/05							
22	Enhanced SD/MC SMA Upper Limits	07/01/04 - 09/30/04							
22A		10/01/04 - 06/30/05							
23	Enhanced SD/MC Published Charges	07/01/04 - 09/30/04							
23A		10/01/04 - 06/30/05							
24	Enhanced SD/MC Negotiated Rates	07/01/04 - 09/30/04							
24A		10/01/04 - 06/30/05							
25	Enhanced SD/MC (Refugees) Costs	07/01/04 - 06/30/05							
26	Enhanced SD/MC (Refugees) SMA Upper Limits	07/01/04 - 06/30/05							
27	Enhanced SD/MC (Refugees) Published Charges	07/01/04 - 06/30/05							
28	Enhanced SD/MC (Refugees) Negotiated Rates	07/01/04 - 06/30/05							
29	Healthy Families Costs	07/01/04 - 09/30/04							
29A		10/01/04 - 06/30/05							
30	Healthy Families SMA Upper Limits	07/01/04 - 09/30/04							
30A		10/01/04 - 06/30/05							
31	Healthy Families Published Charges	07/01/04 - 09/30/04							
31A		10/01/04 - 06/30/05							
32	Healthy Families Negotiated Rates	07/01/04 - 09/30/04							
32A		10/01/04 - 06/30/05							
33	Non-Medi-Cal Costs		31,500	15,750	261,232	1,400	30,552	104,591	1,280

DETAIL COST REPORT

ALLOCATION OF COSTS TO SERVICE FUNCTIONS - MODE TOTAL

MH 1966 (Rev. 7/05)

FISCAL YEAR 2004 - 2005

County: Ventura
County Code: 56
Legal Entity: County of Ventura
Legal Entity Number: 00056
Mode: 15 - Outpatient Services (Program 2)

			MHS	MHS	MHS	MHS	MHS		
			O	P	Q	R	S	T	U
			Service Function	Service Function	Service Function	Service Function	Service Function	Service Function	Service Function
			50	10	30	40	50		
1	Allocation Percentage		0.02%	0.65%	2.83%	10.83%	0.06%		
2	Total Units		200	7,320	19,620	90,090	425		
3	Gross Cost		200	6,700	29,340	112,376	595		
4	Cost per Unit		1.00	0.92	1.50	1.25	1.40		
5	SMA per Unit		2.44	2.44	2.44	2.44	2.44		
6	Published Charge per Unit								
7	Negotiated Rate / Cost per Unit								
8	Medi-Cal Units	07/01/04 - 09/30/04							
8A		10/01/04 - 06/30/05							
9	Medicare/Medi-Cal Crossover Units	07/01/04 - 09/30/04							
9A		10/01/04 - 06/30/05							
10	Enhanced SD/MC Units	07/01/04 - 09/30/04							
10A		10/01/04 - 06/30/05							
10B	Enhanced SD/MC (Refugees) Units	07/01/04 - 06/30/05							
11	Healthy Families (SED) Units	07/01/04 - 09/30/04							
11A		10/01/04 - 06/30/05							
12	Non-Medi-Cal Units		200	7,320	19,620	90,090	425		
13	Medi-Cal Costs	07/01/04 - 09/30/04							
13A		10/01/04 - 06/30/05							
14	Medi-Cal SMA Upper Limits	07/01/04 - 09/30/04							
14A		10/01/04 - 06/30/05							
15	Medi-Cal Published Charges	07/01/04 - 09/30/04							
15A		10/01/04 - 06/30/05							
16	Medi-Cal Negotiated Rates	07/01/04 - 09/30/04							
16A		10/01/04 - 06/30/05							
17	Medicare/Medi-Cal Crossover Costs	07/01/04 - 09/30/04							
17A		10/01/04 - 06/30/05							
18	Medicare/Medi-Cal Crossover SMA Upper Limits	07/01/04 - 09/30/04							
18A		10/01/04 - 06/30/05							
19	Medicare/Medi-Cal Crossover Published Charges	07/01/04 - 09/30/04							
19A		10/01/04 - 06/30/05							
20	Medicare/Medi-Cal Crossover Negotiated Rates	07/01/04 - 09/30/04							
20A		10/01/04 - 06/30/05							
21	Enhanced SD/MC Costs	07/01/04 - 09/30/04							
21A		10/01/04 - 06/30/05							
22	Enhanced SD/MC SMA Upper Limits	07/01/04 - 09/30/04							
22A		10/01/04 - 06/30/05							
23	Enhanced SD/MC Published Charges	07/01/04 - 09/30/04							
23A		10/01/04 - 06/30/05							
24	Enhanced SD/MC Negotiated Rates	07/01/04 - 09/30/04							
24A		10/01/04 - 06/30/05							
25	Enhanced SD/MC (Refugees) Costs	07/01/04 - 06/30/05							
26	Enhanced SD/MC (Refugees) SMA Upper Limits	07/01/04 - 06/30/05							
27	Enhanced SD/MC (Refugees) Published Charges	07/01/04 - 06/30/05							
28	Enhanced SD/MC (Refugees) Negotiated Rates	07/01/04 - 06/30/05							
29	Healthy Families Costs	07/01/04 - 09/30/04							
29A		10/01/04 - 06/30/05							
30	Healthy Families SMA Upper Limits	07/01/04 - 09/30/04							
30A		10/01/04 - 06/30/05							
31	Healthy Families Published Charges	07/01/04 - 09/30/04							
31A		10/01/04 - 06/30/05							
32	Healthy Families Negotiated Rates	07/01/04 - 09/30/04							
32A		10/01/04 - 06/30/05							
33	Non-Medi-Cal Costs		200	6,700	29,340	112,376	595		

DETAIL COST REPORT

ALLOCATION OF COSTS TO SERVICE FUNCTIONS - MODE TOTAL

MH 1966 (Rev. 7/05)

FISCAL YEAR 2004 - 2005

County: Ventura
County Code: 56

CR

	Legal Entity: County of Ventura	A	B	C	D	E	F	G
	Legal Entity Number: 00056		Service	Service	Service	Service	Service	Service
	Mode: 45 - Outreach Services	Mode Total	Function	Function	Function	Function	Function	Function
			20					
1	Allocation Percentage	100.00%	100.00%					
2	Total Units		17,987					
3	Gross Cost	1,161,995	1,161,995					
4	Cost per Unit		64.60					
5	Non-Medi-Cal Units		17,987					
6	Non-Medi-Cal Costs	1,161,995	1,161,995					

DETAIL COST REPORT

ALLOCATION OF COSTS TO SERVICE FUNCTIONS - MODE TOTAL

MH 1966 (Rev. 7/05)

FISCAL YEAR 2004 - 2005

County: Ventura
County Code: 56

Legal Entity: County of Ventura Legal Entity Number: 00056 Mode: 55 - Medi-Cal Administrative Activities		A Mode Total	B Service Function	C Service Function	D Service Function	E Service Function	F Service Function	G Service Function
1	Allocation Percentage							
2	Total Units							
3	Total Expenditures							
4	Cost per Unit							
5	Non-Medi-Cal Costs							

DETAIL COST REPORT

ALLOCATION OF COSTS TO SERVICE FUNCTIONS - MODE TOTAL

MH 1966 (Rev. 7/05)

FISCAL YEAR 2004 - 2005

County: Ventura
County Code: 56

	Legal Entity: County of Ventura	A	B	C	D	E	F	G
	Legal Entity Number: 00056		CR	CR	CR			
	Mode: 60 - Support Services	Mode Total	Service Function	Service Function	Service Function	Service Function	Service Function	Service Function
			20	30	40			
1	Allocation Percentage	100.00%	6.78%	36.40%	56.82%			
2	Total Units		2,328	12,495	11,916			
3	Gross Cost	511,088	34,662	186,038	290,388			
4	Cost per Unit		14.89	14.89	24.37			
5	Non-Medi-Cal Units (Same as Line 2)		2,328	12,495	11,916			
6	Non-Medi-Cal Costs (Same as Line 3)	511,088	34,662	186,038	290,388			

DETAIL COST REPORT

DETERMINATION OF SD/MC DIRECT SERVICES AND MAA REIMBURSEMENT

MH 1968 (Rev. 7/05) — FISCAL YEAR 2004 - 2005

County: Ventura
County Code: 56
Legal Entity: County of Ventura
Legal Entity Number: 00056

			REIMBURSEMENT TYPE				PC	SMA				Costs	
			A	B	C	D	E	F	G	H	I	J	K
			Mode 55			Total MAA	Total Inpatient				Total Outpatient		Total Outpatient
			S. F.'s 01-09	S. F.'s 11-19, 31-39	S. F.'s 21-29		Mode 05 Hospital Inpatient Services	Mode 05 Other 24 Hour Services	Mode 10 Day Services	Mode 15 Outpatient Services Program (1)	Exclude Program (2)	Mode 15 Outpatient Services Program (2)	(Col. I + Col. J)
1	Medi-Cal Costs	07/01/04 - 09/30/04					936,724			2,881,045	2,881,045		2,881,045
1A		10/01/04 - 06/30/05					2,557,689			8,762,578	8,762,578		8,762,578
2	Medi-Cal SMA	07/01/04 - 09/30/04					835,379			2,573,303	2,573,303		2,573,303
2A		10/01/04 - 06/30/05					2,256,878			7,826,595	7,826,595		7,826,595
3	Medi-Cal P. C.	07/01/04 - 09/30/04					835,378			3,059,410	3,059,410		3,059,410
3A		10/01/04 - 06/30/05					2,256,878			9,303,340	9,303,340		9,303,340
4	Medi-Cal N. R.	07/01/04 - 09/30/04											
4A		10/01/04 - 06/30/05											
5	Medi-Cal Gross Reimbursement	07/01/04 - 09/30/04					835,378			2,573,303	2,573,303		2,573,303
5A		10/01/04 - 06/30/05					2,256,878			7,826,595	7,826,595		7,826,595
6	Medicare/Medi-Cal Crossover Cost	07/01/04 - 09/30/04					405,572			146,825	146,825		146,825
6A		10/01/04 - 06/30/05					435,964			155,759	155,759		155,759
7	Medicare/Medi-Cal Crossover SMA	07/01/04 - 09/30/04					353,555			131,142	131,142		131,142
7A		10/01/04 - 06/30/05					380,049			139,122	139,122		139,122
8	Medicare/Medi-Cal Crossover P. C.	07/01/04 - 09/30/04					353,555			156,131	156,131		156,131
8A		10/01/04 - 06/30/05					380,049			165,633	165,633		165,633
9	Medicare/Medi-Cal Crossover N. R.	07/01/04 - 09/30/04											
9A		10/01/04 - 06/30/05											
10	Medicare/Medi-Cal Crossover Gross Reim.	07/01/04 - 09/30/04					353,555			131,142	131,142		131,142
10A		10/01/04 - 06/30/05					380,049			139,122	139,122		139,122
11	Total SD/MC + Crossover Gross Reim.	07/01/04 - 09/30/04					1,188,934			2,704,446	2,704,446		2,704,446
11A		10/01/04 - 06/30/05					2,636,927			7,965,717	7,965,717		7,965,717
12	Enhanced SD/MC (Children) Cost	07/01/04 - 09/30/04											
12A		10/01/04 - 06/30/05											
13	Enhanced SD/MC (Children) SMA	07/01/04 - 09/30/04											
13A		10/01/04 - 06/30/05											
14	Enhanced SD/MC (Children) P. C.	07/01/04 - 09/30/04											
14A		10/01/04 - 06/30/05											
15	Enhanced SD/MC (Children) N. R.	07/01/04 - 09/30/04											
15A		10/01/04 - 06/30/05											
16	Enhanced SD/MC (Children) Gross Reim.	07/01/04 - 09/30/04											
16A		10/01/04 - 06/30/05											
17	Enhanced SD/MC (Refugees) Cost	07/01/04 - 06/30/05											
18	Enhanced SD/MC (Refugees) SMA	07/01/04 - 06/30/05											
19	Enhanced SD/MC (Refugees) P. C.	07/01/04 - 06/30/05											
20	Enhanced SD/MC (Refugees) N. R.	07/01/04 - 06/30/05											
21	Total Medi-Cal Gross Reimbursement	07/01/04 - 09/30/04					1,188,934			2,704,446	2,704,446		2,704,446
21A	(Excludes Refugees)	10/01/04 - 06/30/05					2,636,927			7,965,717	7,965,717		7,965,717
22	Enhanced SD/MC (Refugees) Gross Reim.	07/01/04 - 06/30/05											
23	Healthy Families Cost	07/01/04 - 09/30/04											
23A		10/01/04 - 06/30/05											
24	Healthy Families SMA	07/01/04 - 09/30/04											
24A		10/01/04 - 06/30/05											
25	Healthy Families P. C.	07/01/04 - 09/30/04											
25A		10/01/04 - 06/30/05											
26	Healthy Families N. R.	07/01/04 - 09/30/04											
26A		10/01/04 - 06/30/05											
27	Healthy Families Gross Reim.	07/01/04 - 09/30/04											
27A		10/01/04 - 06/30/05											
	Less: Patient and Other Payor Revenue												
28	SD/MC + Crossover Revenue	07/01/04 - 09/30/04					468,830			33,858	33,858		33,858
28A		10/01/04 - 06/30/05					1,081,852			89,826	89,826		89,826
29	Enhanced SD/MC (Children) Revenue												
30	Enhanced SD/MC (Refugees) Revenue												
31	Healthy Families Revenue												
32	Total Expenditures from MAA (Mode 55)												
33	Medi-Cal Eligibility Factor (Average)												
34	Revenue - MAA												
35	Net Due - SD/MC for Direct Services	07/01/04 - 09/30/04					720,104			2,670,588	2,670,588		2,670,588
35A		10/01/04 - 06/30/05					1,555,075			7,875,891	7,875,891		7,875,891
36	Net Due - Enhanced SD/MC (Refugees)												
37	Net Due - Healthy Families	07/01/04 - 09/30/04											
37A		10/01/04 - 06/30/05											
	Amount Negotiated Rates Exceed Costs												
38	SD/MC (Includes Children)	07/01/04 - 09/30/04											
38A		10/01/04 - 06/30/05											
39	Enhanced SD/MC (Refugees)												
40	Healthy Families	07/01/04 - 09/30/04											
40A		10/01/04 - 06/30/05											

DETAIL COST REPORT

LOWER OF COSTS OR CHARGES EXEMPTION DETERMINATION (Optional)

MH 1969 (Rev. 7/05)

FISCAL YEAR 2004 - 2005

County: Ventura
County Code: 56

	Legal Entity: County of Ventura	A	B	C	D	E
	Legal Entity Number: 00056	Total Inpatient				Total Outpatient
		Mode 05 Hospital Inpatient	Mode 05 Other 24 Hour Services	Mode 10 Day Services	Mode 15 Outpatient Services	
1	Amount billed to Medi-Cal					
	Non-Medicare/Medi-Cal Actual Charges					
2	Non-Medicare/Medi-Cal Patient Revenue					
3	Non-Medicare/Medi-Cal Patient Insurance					
4	Subtotal					
5	Non-Medicare/Medi-Cal Published Charges					
6	Ratio of Actual to Published Charges	0.00%				0.00%
7	Medi-Cal Adjusted Customary Charges					
8	Medi-Cal Costs	4,335,950				11,946,208
9	60 Percent of Medi-Cal Costs	2,601,570				7,167,725

DMH use only

	Inpatient		Outpatient
Line 9 greater than line 7.		Exempt	
Line 7 greater than line 9.	X	Not Exempt	X

DETAIL COST REPORT

SD/MC PRELIMINARY DESK SETTLEMENT

MH 1979 (Rev. 7/05)

FISCAL YEAR 2004 - 2005

County: Ventura
County Code: 56

	Legal Entity: County of Ventura		A	B	C	D	E	F	G	H	I	J
	Legal Entity Number: 00056		Total MAA	Total Inpatient	Total Outpatient	Total	50.00% FFP	50.00% FFP	50.00% FFP	[1]Variable % FFP	75.00% FFP	Total FFP
	SD/MC Administrative Reimbursement (County Only)											
1	County SD/MC Direct Service Gross Reimbursement			3,825,861	10,670,162	14,496,023						
2	Contract Providers Medi-Cal Direct Service Gross Reimbursement			1,943,206	5,937,136	7,880,342						
3	Total Medi-Cal Direct Service Gross Reimbursement					22,376,365						
4	Medi-Cal Administrative Reimbursement Limit					3,356,455						
5	Medi-Cal Administration					1,792,997						
6	Medi-Cal Administrative Reimbursement					1,792,997	896,499					896,499
	Healthy Families Administrative Reimbursement (County Only)											
7	County Healthy Families Direct Service Gross Reimbursement											
7A	Contract Providers Healthy Families Direct Service Gross Reim.											
7B	Total Healthy Families Direct Service Gross Reimbursement											
8	Healthy Families Administrative Reimbursement Limit											
9	Healthy Families Administration											
10	Healthy Families Administrative Reimbursement											
	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)					388,353					291,265	291,265
15	Other SD/MC Utilization Review (County Only)					232,491	116,246					116,246
16	SD/MC Net Reimbursement for Direct Services	07/01/04 - 09/30/04		720,104	2,670,588	3,390,691		1,695,346				1,695,346
16A		10/01/04 - 06/30/05		1,555,075	7,875,891	9,430,966			4,715,483			4,715,483
17	Enhanced SD/MC Net Reimb. (Children)	07/01/04 - 09/30/04										
17A		10/01/04 - 06/30/05										
18	Enhanced SD/MC Net Reimb. (Refugees)											
19	Total SD/MC Reimbursement Before Excess FFP											7,714,837
20	Amount Negotiated Rates Exceed Costs - SD/MC & Enh. SD/MC											
21	Total SD/MC Reimbursement (FFP)											7,714,837
22	Contract Limitation Adjustment											
23	Adjusted Total SD/MC Reimbursement (FFP)											7,714,837
24	Healthy Families Net Reimbursement	07/01/04 - 09/30/04										
24A		10/01/04 - 06/30/05										
25	Total Healthy Families Reimbursement Before Excess FFP											
26	Amount Negotiated Rates Exceed Costs - Healthy Families											
27	Total Healthy Families Reimbursement											

DETAIL COST REPORT

CALCULATION OF SHORT-DOYLE/MEDI-CAL FOR FY 2004 - 2005 HOSPITAL ADMINISTRATIVE DAYS

MH 1991 (Rev. 7/05)

FISCAL YEAR 2004 - 2005

COUNTY NAME: Ventura

COUNTY CODE: 56

LEGAL ENTITY

NAME: **County of Ventura**

NUMBER: 00056

A	B	C	D	E	F	G	H	I
Settlement Group	PROVIDER NUMBER	SMA RATE	PERIOD OF SERVICE	ADMIN DAYS	SUBTOTAL AMOUNT	PHYSICIAN COSTS	ANCILLARY COSTS	TOTAL AMOUNT
SD/MC		$236.82	07/01/04 - 07/31/04	92	$ 21,787	$3,895	$5,665	$31,347
		$236.82	08/01/04 - 09/30/04	328	$ 77,677	$15,285	$22,230	$115,192
		$236.82	10/01/04 - 12/31/04	282	$ 66,783	$12,914	$18,782	$98,479
		$236.82	01/01/05 - 06/30/05	334	$ 79,098	$14,142	$20,567	$113,807
							Sub Total:	$ 358,826
Children EMC		$236.82	07/01/04 - 07/31/04					
		$236.82	08/01/04 - 09/30/04					
		$236.82	10/01/04 - 12/31/04					
		$236.82	01/01/05 - 06/30/05					
							Sub Total:	
Refugees EMC		$236.82	07/01/04 - 07/31/04					
		$236.82	08/01/04 - 09/30/04					
		$236.82	10/01/04 - 12/31/04					
		$236.82	01/01/05 - 06/30/05					
							Sub Total:	
Healthy Families		$236.82	07/01/04 - 07/31/04					
		$236.82	08/01/04 - 09/30/04					
		$236.82	10/01/04 - 12/31/04					
		$236.82	01/01/05 - 06/30/05					
							Sub Total:	
				GRAND TOTAL	$ 245,346	$ 46,236	$ 67,244	$ 358,826