

California Children's Services

Certification Statement	County/City: El Dorado	Fiscal Year: 2023-24
<p>I certify that the CCS Program will comply with all applicable provisions of Health and Safety Code, Division 106, Part 2, Chapter 3, Article 5, (commencing with Section 123800) and Chapters 7 and 8 of the Welfare and Institutions Code (commencing with Sections 14000-14200), and any applicable rules or regulations promulgated by DHCS pursuant to this article and these Chapters. I further certify that this CCS Program will comply with the Children's Medical Services (CMS) Plan and Fiscal Guidelines Manual, including but not limited to, Section 9 Federal Financial Participation. I further certify that this CCS Program will comply with all federal laws and regulations governing and regulating recipients of funds granted to states for medical assistance pursuant to Title XIX of the Social Security Act (42 U.S.C. Section 1396 et seq.) and recipients of funds allotted to states for the Maternal and Child Health Services Block Grant pursuant to Title V of the Social Security Act (42 U.S.C. Section 701 et seq.). I further agree that this CCS Program may be subject to all sanctions or other remedies applicable if this CCS Program violates any of the above laws, regulations and policies with which it has certified it will comply.</p>		
Michael Ungeheuer, MN RN PHN	<small>Michael Ungeheuer MN RN PHN</small>	Jan 3, 2024

CCS/County Authorized Representative	Signature	Date
<i>Wendy Thomas</i>	<i>Wendy Thomas</i>	<i>4/23/24</i>
Local Governing Body Chairperson Name,	Signature	Date

Agency Information Sheet

Fiscal Year: 2023-24

County/City: County of El Dorado

Official Agency

Name: <u>Matthew Minson, MD</u>	Address: <u>931 Spring St.</u>
Health Officer _____	<u>Placerville, CA 95667</u>

CMS Director (if applicable)

Name: _____	Address: _____
Phone: _____	_____
Fax: _____	E-Mail: _____

CCS Administrator

Name: <u>Michael Ungeheuer, MN, RN, PHN</u>	Address: <u>941 Spring Street</u>
Phone: <u>530.621.6219</u>	<u>Placerville, CA 95667</u>
Fax: <u>530.642.0892</u>	E-Mail: <u>michael.ungeheuer@edcgov.us</u>

CHDP Director

Name: <u>Michael Ungeheuer, MN, RN, PHN</u>	Address: <u>941 Spring Street</u>
Phone: <u>530.621.6219</u>	<u>Placerville, CA 95667</u>
Fax: <u>530.642.0892</u>	E-Mail: <u>michael.ungeheuer</u>

CHDP Deputy Director

Name: <u>Maureen Virgil, MAS, RN, PHN</u>	Address: <u>941 Spring Street</u>
Phone: <u>530.621.6217</u>	<u>Placerville, CA, 95667</u>
Fax: _____	E-Mail: <u>maureen.virgil@edcgov.us</u>

Clerk of the Board of Supervisors or City Council

Name: <u>Kim Dawson</u>	Address: <u>330 Fair Lane</u>
Phone: <u>530.621.5390</u>	<u>Placerville, CA, 95667</u>
Fax: _____	E-Mail: <u>kim.dawson@edcgov.us</u>

Director of Social Services Agency

Name: <u>Olivia Byron-Cooper</u>	_____
Phone: <u>530.621.6320</u>	_____
Fax: <u>530.663.8499</u>	E-Mail: <u>olivia.byron-cooper@edcgov.us</u>

Chief Probation Officer

Name: <u>Brian Richart</u>	_____
Phone: <u>530.621.5625</u>	_____
Fax: _____	E-Mail: <u>brian.richart@edcgov.us</u>

Incumbent List - California Children's Services

For FY 2023-24, complete the table below for all personnel listed in the CCS budgets. Use **the same** job titles for both the budget and the incumbent list. Total percent for an individual incumbent should **not be over 100 percent**.

Specify whether job duty statements or civil service classification statements have been revised or changed in the last fiscal year. Only submit job duty statements and civil service classification statements that are new or have been revised. This includes (1) changes in job duties or activities, (2) changes in percentage of time spent for each activity, and (3) changes in percentage of time spent for enhanced and non-enhanced job duties or activities.

County/City: El Dorado			Fiscal Year: 2023-24	
Job Title	Incumbent Name	FTE % on CCS Admin Budget	Have Job Duties Changed? (Yes or No)	Has Civil Service Classification Changed? (Yes or No)
PHN Supervisor	Sabina Keller	20%	NO	NO
Public Health Nurse II	Carolyn Vaughn	80%	NO	NO
Public Health Nurse II	Ramah Kerruish	80%	NO	NO
Care Management Counselor	Erin Guzik	40%	NO	NO
Medical Office Assistant	Maria Martinez	100%	NO	NO
Medical Office Assistant	Karin Wade	100%	NO	NO

CCS CASELOAD	Actual Caseload	Percent of Total CCS Caseload
STRAIGHT CCS - Total Cases of Open (Active) Straight CCS Children	58	7.89%
OTLJCP - Total Cases of Open (Active) OTLJCP Children	111	16.29%
MEDI-CAL - Total Cases of Open (Active) Medi-Cal (non-OTLJCP) Children	557	76.72%
TOTAL CCS CASELOAD	726	100%

CCS Administrative Budget Worksheet

Fiscal Year: 2023-24

County: El Dorado



Column	Straight CCS			Optional Targeted Low Income Children's Program (OTLJCP)				Medi-Cal (Non-OTLJCP)					
	1	2	3	4A	4	5A	5	6A	6	7A	7	8A	8
Category/Line Item	% FTE	Annual Salary	Total Budget (1 x 2 or 4 + 5 ee)	Caseload %	Straight CCS County/State (50/50)	Caseload %	Optional Targeted Low Income Children's Program (OTLJCP) Co/State/Fed (17.5/17.5/65.6)	Caseload %	Medi-Cal State/Federal	Enhanced % FTE	Enhanced Medi-Cal State/Federal (26/75)	Non-Enhanced % FTE	Non-Enhanced Medi-Cal State/Federal (50/50)
I. Personnel Expense													
Program Administration													
Batina Keller, PHN Supervisor	2.00%	115,918	2,318	7.89%	185	15.29%	354	76.72%	1,778			100.00%	1,778
2. Employee Name, Position	0.00%	0	0	7.89%	0	15.29%	0	76.72%	0			100.00%	0
3. Employee Name, Position	0.00%	0	0	7.89%	0	15.29%	0	76.72%	0			100.00%	0
4. Employee Name, Position	0.00%	0	0	7.89%	0	15.29%	0	76.72%	0			100.00%	0
5. Employee Name, Position	0.00%	0	0	7.89%	0	15.29%	0	76.72%	0			100.00%	0
Subtotal		115,918	2,318		185		354		1,778				1,778
Medical Case Management													
Carolyn Vaughn, PHN II	60.00%	104,603	63,982	7.89%	6,985	15.29%	12,794	76.72%	64,202	65.00%	54,572	15.00%	8,530
Ramiah Koruah, PHN II	80.00%	94,869	75,895	7.89%	6,063	15.29%	11,604	76.72%	58,228	86.00%	49,494	15.00%	8,734
Batina Keller, PHN Supervisor	10.00%	115,918	11,592	7.89%	925	15.29%	1,772	76.72%	8,884	90.00%	8,005	10.00%	889
4. Employee Name, Position	0.00%	0	0	7.89%	0	15.29%	0	76.72%	0	0.00%	0	100.00%	0
5. Employee Name, Position	0.00%	0	0	7.89%	0	15.29%	0	76.72%	0	0.00%	0	100.00%	0
6. Employee Name, Position	0.00%	0	0	7.89%	0	15.29%	0	76.72%	0	0.00%	0	100.00%	0
7. Employee Name, Position	0.00%	0	0	7.89%	0	15.29%	0	76.72%	0	0.00%	0	100.00%	0
8. Employee Name, Position	0.00%	0	0	7.89%	0	15.29%	0	76.72%	0	0.00%	0	100.00%	0
Subtotal		315,390	171,169		13,574		26,170		131,324		112,071		19,253
Other Health Care Professionals													
Erin Outh, Care Management Counselor	40.00%	80,906	24,384	7.89%	1,949	15.29%	3,730	76.72%	18,716	50.00%	9,358	50.00%	9,358
2. Employee Name, Position	0.00%	0	0	7.89%	0	15.29%	0	76.72%	0	0.00%	0	100.00%	0
3. Employee Name, Position	0.00%	0	0	7.89%	0	15.29%	0	76.72%	0	0.00%	0	100.00%	0
Subtotal		80,906	24,384		1,949		3,730		18,716		9,358		9,358
Auxiliary Support													
Mara Martinez, Medical Office Assistant	25.00%	49,421	12,355	7.89%	987	15.29%	1,889	76.72%	9,479			100.00%	9,479
Karin Wade, Medical Office Assistant	30.00%	47,341	14,202	7.89%	1,135	15.29%	2,171	76.72%	10,896			100.00%	10,896
3. Employee Name, Position	0.00%	0	0	7.89%	0	15.29%	0	76.72%	0			100.00%	0
4. Employee Name, Position	0.00%	0	0	7.89%	0	15.29%	0	76.72%	0			100.00%	0
5. Employee Name, Position	0.00%	0	0	7.89%	0	15.29%	0	76.72%	0			100.00%	0
Subtotal		96,762	26,557		2,122		4,060		20,375				20,375
Clerical and Claims Support													
Mara Martinez, Medical Office Assistant	75.00%	89,421	37,086	7.89%	2,961	15.29%	5,667	76.72%	28,438	80.00%	22,750	25.00%	5,098
Karin Wade, Medical Office Assistant	70.00%	47,341	33,139	7.89%	2,647	15.29%	5,067	76.72%	25,428	80.00%	20,340	25.00%	5,085
3. Employee Name, Position	0.00%	0	0	7.89%	0	15.29%	0	76.72%	0	0.00%	0	100.00%	0
4. Employee Name, Position	0.00%	0	0	7.89%	0	15.29%	0	76.72%	0	0.00%	0	100.00%	0
5. Employee Name, Position	0.00%	0	0	7.89%	0	15.29%	0	76.72%	0	0.00%	0	100.00%	0
Subtotal		96,762	70,205		5,608		10,734		53,863		43,090		10,773
Total Salaries and Wages			294,643	7.89%	23,539	15.29%	45,919	76.72%	226,056	72.78%	164,519	27.22%	61,537
Staff Benefits (Specify %)	40.00%		117,857	7.89%	9,416	15.29%	18,019	76.72%	90,422		65,907		24,615
I. Total Personnel Expense			412,500	7.89%	32,955	15.29%	63,938	76.72%	316,478		230,326		86,152
II. Operating Expense													
1. Travel			1,000	7.89%	80	15.29%	153	76.72%	767	72.78%	558	27.22%	209
2. Training			1,000	7.89%	80	15.29%	153	76.72%	767	72.78%	558	27.22%	209
3. Communication			500	7.89%	40	15.29%	75	76.72%	384			100.00%	384
4. Insurance			5,492	7.89%	439	15.29%	840	76.72%	4,214			100.00%	4,214
5. Office and Duplicating			1,000	7.89%	80	15.29%	153	76.72%	767			100.00%	767
6.				7.89%	0	15.29%	0	76.72%	0			100.00%	0
7.				7.89%	0	15.29%	0	76.72%	0			100.00%	0
II. Total Operating Expense			8,992		719		1,375		6,889		1,116		5,763
III. Capital Expense													
1.				7.89%	0	15.29%	0	76.72%	0				0
2.				7.89%	0	15.29%	0	76.72%	0				0
3.				7.89%	0	15.29%	0	76.72%	0				0
III. Total Capital Expense			0		0		0		0				0

CCS CASELOAD	Actual Caseload	Percent of Total CCS Caseload
STRAIGHT CCS - Total Cases of Open (Active) Straight CCS Children	58	7.98%
OTLJCF - Total Cases of Open (Active) OTLJCF Children	111	15.29%
MEDI-CAL - Total Cases of Open (Active) Medi-Cal (Exp-OTLJCF) Children	557	76.72%
TOTAL CCS CASELOAD	726	100%

CCS Administrative Budget Worksheet

Fiscal Year: 2023-24
County: El Dorado



Column				Straight CCS		Optional Targeted Low Income Children's Program (OTLJCF)		Medi-Cal (Non-OTLJCF)						
	1	2	3	4A	4	5A	5	6A	6	7A	7	8A	8	
Category/Line Item	% FTE	Annual Salary	Total Budget (1 x 2 or 4 + 5 + 6)	Caseload %	Straight CCS County/State (50/50)	Caseload %	Optional Targeted Low Income Children's Program (OTLJCF) Co/State/Fed (17,517,566)	Caseload %	Medi-Cal State/Federal	Enhanced % FTE	Enhanced Medi-Cal State/Federal (2676)	Non-Enhanced % FTE	Non-Enhanced Medi-Cal State/Federal (5060)	
IV. Indirect Expense														
1. Indirect Cost Rate	25.00%		103,125	7.99%	8,239	15.29%	15,787	76.72%	79,119				100.00%	79,119
			0	7.99%	0	15.29%	0	76.72%	0				100.00%	0
IV. Total Indirect Expense			103,125		8,239		15,787		79,119					79,119
V. Other Expense														
1. Maintenance & Transportation			3,612	7.99%	289	15.29%	552	76.72%	2,771				100.00%	2,771
2.				7.99%	0	15.29%	0	76.72%	0				100.00%	0
3.				7.99%	0	15.29%	0	76.72%	0				100.00%	0
4.				7.99%	0	15.29%	0	76.72%	0				100.00%	0
5.				7.99%	0	15.29%	0	76.72%	0				100.00%	0
V. Total Other Expense			3,612		289		552		2,771					2,771
Budget Grand Total			578,229		42,200		80,782		405,267		231,442			173,825

Maureen Virgil, MAS, BSN, RN, PHA Maureen Virgil, MAS, BSN, RN, PHA 0/30/2023 530.621.6217
 Prepared By (Signature) Prepared By (Printed Name) Date Prepared Phone Number

Michael Ungeheuer, MA, RN, PHA Michael Ungeheuer, MA, RN, PHA Jan 3, 2024
 CCS Administrator (Signature) CCS Administrator (Printed Name) Date Signed Phone Number

CCS CASELOAD	Actual Caseload	Percent of Total CCS Caseload
STRAIGHT CCS - Total Cases of Open (Active) Straight CCS Children	58	7.99%
OTLICP - Total Cases of Open (Active) OTLICP Children	111	15.29%
MEDI-CAL - Total Cases of Open (Active) Medi-Cal (non-OTLICP) Children	557	76.72%
TOTAL CCS CASELOAD	726	100%

CCS Administrative Budget Summary

Fiscal Year: 2023-24

County: EI Dorado

Column	Col 1 = Col 2+3+4	Straight CCS	OTLICP	Medi-Cal (non-OTLICP) (Column 4 = Columns 5 + 6)		
	1	2	3	4	5	6
Category/Line Item	Total Budget	Straight CCS County/State (50/50)	Optional Targeted Low Income Children's Program (OTLICP) County/State/Fed (17.5/17.5/65)	Medi-Cal State/Federal	Enhanced Medi-Cal State/Federal (25/75)	Non-Enhanced Medi-Cal State/Federal (50/50)
I. Total Personnel Expense	412,500	32,955	63,068	316,473	230,326	86,152
II. Total Operating Expense	8,992	719	1,375	6,899	1,116	5,783
III. Total Capital Expense	0	0	0	0		0
IV. Total Indirect Expense	103,125	8,239	15,767	79,119		79,119
V. Total Other Expense	3,612	289	552	2,771		2,771
Budget Grand Total	528,229	42,202	80,762	405,267	231,442	173,825

Column	Col 1 = Col 2+3+4	Straight CCS	OTLICP	Medi-Cal (non-OTLICP) (Column 4 = Columns 5 + 6)		
	1	2	3	4	5	6
Source of Funds	Total Budget	Straight CCS County/State (50/50)	Optional Targeted Low Income Children's Program (OTLICP) County/State/Fed (17.5/17.5/65)	Medi-Cal State/Federal	Enhanced Medi-Cal State/Federal (25/75)	Non-Enhanced Medi-Cal State/Federal (50/50)
Straight CCS						
State	21,101	21,101				
County	21,101	21,101				
OTLICP						
State	14,133		14,133			
County	14,133		14,133			
Federal (Title XXI)	52,496		52,496			
Medi-Cal						
State	144,774			144,774	57,861	86,913
Federal (Title XIX)	260,493			260,493	173,581	86,912

Maureen Virgil, MAS, BSN, RN, PHN

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Prepared By (Signature)

Prepared By (Printed Name)

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CCS Administrator (Signature)

CCS Administrator (Printed Name)

Email Address