

Certification Statement - Child Health and Disability Prevention (CHDP) Program

County/City: El Dorado	Fiscal Year: 2014-2015
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I certify that the CHDP Program will comply with all applicable provisions of Health and Safety Code, Division 106, Part 2, Chapter 3, Article 6 (commencing with Section 124025), Welfare and Institutions Code, Division 9, Part 3, Chapters 7 and 8 (commencing with Section 14000 and 14200), Welfare and Institutions Code Section 16970, and any applicable rules or regulations promulgated by DHCS pursuant to that Article, those Chapters, and that section. I further certify that this CHDP Program will comply with the Children's Medical Services Plan and Fiscal Guidelines Manual, including but not limited to, Section 9, Federal Financial Participation. I further certify that this CHDP 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.). I further agree that this CHDP Program may be subject to all sanctions or other remedies applicable if this CHDP Program violates any of the above laws, regulations and policies with which it has certified it will comply.

<i>Chuck Pugh</i>	12-8-14
Signature of CHDP Director	Date Signed

<i>Chuck Pugh</i>	12-8-14
Signature of Health Officer	Date Signed

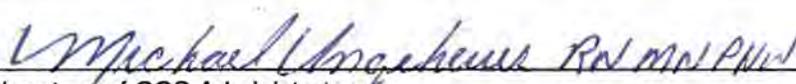
<i>Michael Ungarman, RN, MN, PHN</i>	12/8/14
Signature of CHDP Deputy Director	Date Signed

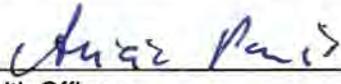
I certify that this plan has been approved by the local governing body.	
Signature of Local Governing Body Chairperson	Date

Certification Statement - California Children's Services (CCS)

County/City: El Dorado County	Fiscal Year: 2014-2015
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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.

 Signature of CCS Administrator	12/8/14 Date Signed
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 Signature of Health Officer	12-8-14 Date Signed
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Signature and Title of Other – Optional	Date Signed
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I certify that this plan has been approved by the local governing body.	
Signature of Local Governing Body Chairperson	Date

Plan and Budget Required Documents Checklist

MODIFIED FY 2014-2015

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County/City: EL DORADO

Fiscal Year:

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2.	County/City Other Expenses Justification Form	Yes, if applicable
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3.	Property Survey Report Form (STD 152)	If applicable

Agency Information Sheet

County/City:	EL DORADO	Fiscal Year:	2014-2015
Official Agency			
Name:	Health & Human Services Agency	Address:	3057 Briw Rd Placerville CA 95667
Health Officer:	Alicia Paris-Pombo		931 Spring St Placerville CA 95667
CMS Director (if applicable)			
Name:	Michael Ungeheuer RN MN PHN	Address:	941 Spring St Placerville CA 95667
Phone:	530 621 6129		
Fax:	530 642 0892	E-Mail:	michael.ungeheuer@edcgov.us
CCS Administrator			
Name:	Michael Ungeheuer RN MN PHN	Address:	941 Spring St Placerville CA 95667
Phone:	530 621 6129		
Fax:	530 642 0892	E-Mail:	michael.ungeheuer@edcgov.us
CHDP Director			
Name:	Alicia Paris-Pombo MSc, MD	Address:	931 Spring St Placerville CA 95667
Phone:	530 621 6277		
Fax:	530 642 0892	E-Mail:	alicia.paris@edcgov.us
CHDP Deputy Director			
Name:	Michael Ungeheuer RN MN PHN	Address:	941 Spring St Placerville CA 95667
Phone:	530 621 6129		
Fax:	530 642 0892	E-Mail:	michael.ungeheuer@edcgov.us
Clerk of the Board of Supervisors or City Council			
Name:	James Mitrison	Address:	330 Fairlane Placerville CA 95667
Phone:	530-621-5592		
Fax:	530-622-3645	E-Mail:	james.mtrison@edcgov.us
Director of Social Services Agency			
Name:	Donald Ashton MPA	Address:	3057 Briw Rd Placerville CA 95667
Phone:	530 642 5515		
Fax:	530-295-2792	E-Mail:	Donald.ashton@edcgov.us
Chief Probation Officer			
Name:	Brian Richardt	Address:	3974 Durock Rd Suite 205 Shingle Springs CA 95682
Phone:	530 621 5958		
Fax:	530 621 2330	E-Mail:	Brian.richardt@edcgov.us

EL DORADO COUNTY HEALTH AND HUMAN SERVICES AGENCY
PUBLIC HEALTH DIVISION

ORGANIZATION DESCRIPTION

The El Dorado County Health and Human Services Agency is a governmental organization responsible for providing a comprehensive offering of public services that protect and assist the County population in the areas of health and wellness. The Public Health Nursing Section administers numerous pediatric and adult high risk and prevention programs integrating the principles of core public health function. The Public Health Nursing Section has developed a service continuum incorporating CHDP, CCS, HCPCFC and MCAH for the purpose of care continuity within the local pediatric population. Inherent in this design is the use of case management conferencing, co-location of public health nursing staff in provider, education and public assistance agencies as well as strong ongoing provider relations development and expert health care worker training. These structures and activities ensure the highest level of coordinated continuous intervention for the benefit of children, families and the community at large.

Focus Areas of FY 2014-2015

- Develop and maintain systems of collaborative care with emphasis on expansion of preventive health services, early screening and diagnosis, treatment access and comprehensive case management
- Enhanced education and intervention in the area of immunization, chronic disease self-care, improved birthing outcomes, effective parenting lead poisoning detection and access to care and treatment
- Facilitate and support system of care expansion related to Federally Qualified Health and Rural Health Clinic Centers including integration of California managed care design and resources associated with the Affordable Care Act to enhance availability and diversity of care

Incumbent List - California Children's Services

For FY 2014-15, 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. 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

Job Title	Incumbent Name	FTE % on CCS Admin Budget	Have Job Duties Changed? (Yes or No)	Has Civil Service Classification Changed? (Yes or No)
Administrator	Michael Ungeheuer RN MN PHN	10	N	N
Supervising Health Education Coordinator	Josefina Solano	05	N	N
PHN II	Dee Taylor RN PHN	100	N	N
PHN I	Sabina Keller RN PHN	75	N	N
Medical Office Assistant	Michelle McCann	100	N	N
Medical Office Assistant	Maria Martinez	100	N	N
Medical Office Assistant	Adriana Salas Rodreguez	50	N	N
Office Assistant II	Vacant	25	N	N

Incumbent List - Child Health and Disability Prevention Program

For FY 2014-2015, complete the table below for all personnel listed in the CHDP 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. 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: 2014- 2015				
Job Title	Incumbent Name	FTE % on CHDP No County/ City Match Budget	FTE % on CHDP County/City Match Budget	FTE % in Other Programs (Specify)	Have Job Duties Changed? (Yes or No)	Has Civil Service Classification Changed? (Yes or No)
PHN II	Vacant	50	0	50 CD	N	N
Sr. Office Assistant	Kay Johnson	80	0	20 FC	N	N
Medical Office Assistant	Adriana Salas-Rodriguez	0	50	50 CCS	N	N
Supervising Health Education Coordinator	Josefina Solano	50	45	5 CCS	N	N
PHN Dir/ CHDP Deputy Dir	Michael Ungeheuer RN MN	10	0	90	N	N

Human Resources

Home > Government > Human Resources

Job Descriptions

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Class Title: SUPERVISING PUBLIC HEALTH NURSE

Bargaining Unit: Local 1 Supervisory

Class Code: 8118

Salary: \$33.64 - \$40.89 Hourly
\$5,830.93 - \$7,087.60 Monthly
\$69,971.20 - \$85,051.20 Annually

[Print Job Information](#)

[Email me when jobs like this become available](#)

Definition & Distinguishing Characteristics

DEFINITION

Under direction, plans, supervises, reviews and evaluates the work of assigned professional and other support staff; performs complex public health nursing duties and/or has responsibility for a specialized health care program.

DISTINGUISHING CHARACTERISTICS

This is the first supervisory level in the public health nursing series, responsible for supervising and training of staff in addition to providing public health nursing services for the more complex client cases. Incumbents may also have independent responsibility for a major specialized public health program. This class is distinguished from the Public Health Services Manager in that the latter has primary supervisory responsibility for a public health nursing facility and assigned specialized projects and programs.

Examples of Duties (Illustrative Only):

- Plans, organizes, supervises and reviews the work of assigned professional and support staff.
- Selects staff and provides for the orientation, training and evaluation of staff; recommends discipline and other personnel decisions.
- Provides technical consultation and guidance to staff members on difficult client cases.
- Provides leadership and quality review for specialized health programs, such as Child Health and Disease Prevention; monitors health assessment completeness and validates medical problems found; monitors frequency and nature of services provided.
- Conducts fiscal planning and budget or grant preparation including strategic planning for budget or grant implementation.
- Evaluates the health needs of individuals and special population groups from a wide variety of cultural and economic backgrounds and recent immigrant populations and those choosing alternate lifestyles.
- Identifies the symptoms of physical, mental or emotional problems and refers individuals and families to appropriate financial, medical or other support services; performs follow-up on such referrals.
- Coordinates services provided those of private, public and community voluntary health and social service agencies; serves as liaison to

- community groups, assisting them in identifying health needs, and providing public health education.
- May serve as primary staff in communicable disease clinics or assists in other clinics; may give immunizations and conduct immunization clinics.
- Monitors and evaluates programs, projects and special services; prepares a variety of periodic and special reports for appropriate management review.
- Represents the County and the department in meetings with Community councils and groups, other agencies and the public.
- Attendance and punctuality that is observant of scheduled hours on a regular basis.
- Performs other duties as assigned.

Education & Experience Requirements (typing "See Resume" in application will not be accepted):

Where college degrees and/or college course credits are required, degrees and college units must be obtained from an accredited college or university. Courses from non-accredited institutions will not be evaluated for this requirement.

Equivalent to graduation from a four year college or university accredited by the National League for Nursing **AND** two years of public health nursing experience.

NOTE: The above qualifications are typically accepted ways of obtaining the required knowledge and skills.

Other Requirements:

Must possess a valid driver's license. Must possess a valid license to practice as a Registered Nurse in the State of California, and a valid California State Public Health Nursing Certificate.

Knowledge:

- Principles and practices of employee supervision, including selection, training, work evaluation and discipline.
- Principles and practices of public health nursing, education and teaching.
- Applicable laws and regulations, including the California Nurse Practice Act rules and regulations, state and local health codes.
- Demographic, biostatistical and data collection methods utilized in evaluating public health needs and problems, Pathophysiology of the major causes of illness and handicapping conditions.
- Principles, practices and methods of control and prevention of communicable and chronic disease.
- Maternal, child and adolescent health principles and practices.
- Methods of prevention of accidents and abuse and neglect of children, spouses and the elderly.
- County, state, welfare and social service agencies services and facilities.
- Financial support resources and the costs of health care services.

Skills:

- Planning, assigning, supervising, reviewing and evaluating the work of others.
- Training others and providing technical support.
- Managing a complex caseload and establishing priorities for case management, treatment and referrals.

- Applying the principles of epidemiology to a wide range of social and health problems.
- Performing nursing assessments and selected diagnostic tests and giving prescribed treatments.
- Identifying community health needs through analysis of cultural differences, demographic and biostatistical data and information.
- Identifying the impact of cultural differences on community health care practices.
- Exercising sound independent judgment within established guidelines.
- Preparing clear, complete and accurate documentation, reports, and other written correspondence.
- Establishing and maintaining effective working relationships with clients, public and private social and health agencies, physicians and the public.

Supervising Public Health Nurse
Civil Service Job Classification: as above

5% FTE PV

CMS/CHDP/ HCPCFC

Essential Duties

Under general direction of the Public Health Nursing Director, supervises program personnel assigned, sets program activity priorities, monitors SPMP practice and initiates activities in support of effective operation of the Child Health Disability Prevention Health Care Program for Children in Foster Care (HCPCFC).

Specific Tasks: 50%

- 50% Orient, supervise and evaluate assigned program personnel person
- 10% Prepares reports, documents and correspondence
- 10% Monitors program budget, personnel time allocation and authorizes expenditures as appropriate
- 20% Participates in the planning/development of program goals, objectives activities and performance outcomes specific to the HCPCFC at risk population
- 10% Use data systems CWS/CMS to facilitate, monitor and evaluate program effectiveness

Essential Duties Enhanced

Specific Tasks: 50%

- 30% Provides technical consultation and assistance to assigned SPMP personnel, referral network providers, Human Services case workers and community partners specific to HCPCFC services
- 40% Monitors, evaluates and assures consistency and best practice implementation of activities and processes as outlined in the Health and Human Services Intra/Inter Agency Agreement
- 30% Conducts joint case reviews for formative and summative evaluation to insure consistency in best practice, outcome measures and program application

CHDP Program Referral Data

County/City: EL DORADO	FY 11-12		FY 12-13		FY 13-14	
Basic Informing and CHDP Referrals						
1. Total number of CalWORKs/Medi-Cal cases informed and determined eligible by Department of Social Services	6,619	13,168	5,998	11,926	4,341	8,450
2. Total number of cases and recipients in "1" requesting CHDP services	Cases	Recipients	Cases	Recipients	Cases	Recipients
a. Number of CalWORKs cases/recipients	470	835	548	974	401	706
b. Number of Foster Care cases/recipients	70	70	83	83	126	126
c. Number of Medi-Cal only cases/recipients	372	671	436	759	329	552
3. Total number of EPSDT eligible recipients and unborn, referred by Department of Social Services' workers who requested the following:						
a. Medical and/or dental services	1,576		1,816		1,384	

b. Medical and/or dental services with scheduling and/or transportation	116	166	88
c. Information only (optional)			
4. Number of persons who were contacted by telephone, home visit, face-to-face, office visit, or written response to outreach letter	51	166	41
Results of Assistance			
5. Number of recipients actually provided scheduling and/or transportation assistance by program staff	19	108	56
6. Number of recipients in "5" who actually received medical and/or dental services	19	59	58

Memoranda of Understanding/Interagency Agreement List

List all current Memoranda of Understanding (MOU) and/or Interagency Agreements (IAA) in California Children's Services, Child Health and Disability Prevention Program, and Health Care Program for Children in Foster Care. Specify whether the MOU or IAA has changed. Submit only those MOU and IAA that are new, have been renewed, or have been revised. For audit purposes, counties and cities should maintain current MOU and IAA on file.

County/City: EL DORADO

Fiscal Year: 2014-1015

Title or Name of MOU/IAA	Is this a MOU or an IAA?	Effective Dates From/To	Date Last Reviewed by County/ City	Name of Person Responsible for this MOU/IAA?	Did this MOU/IAA Change? (Yes or No)
County Office of Education	IAA	perpetual	2013	Michael Ungeheuer	No
CHDP/HPCFC DHS	IAA	perpetual	2012	Michael Ungeheuer	No
Delta Dental	MOU	2010	2010	State	No
Access Dental	MOU	7/13/2010	2010	State	No
Anthem BC/BS	MOU	Pending	2014	Michael Ungeheuer	New
Blue Shield	MOU	Ongoing	2007	State	No
Health Net	MOU	Ongoing	2007	State	No
Vision Service Plan	MOU	Ongoing	2007	State	No

Title or Name of MOU/IAA	Is this a MOU or an IAA?	Effective Dates From/To	Date Last Reviewed by County/ City	Name of Person Responsible for this MOU/IAA?	Did this MOU/IAA Change? (Yes or No)
Kaiser	MOU	Ongoing	2007	State	No
Premier Access	MOU	Ongoing	2007	State	No
Safeguard Vision	MOU	Ongoing	2007	State	No
California Health and Wellness Centene	MOU	2013 perpetual	2013	Michael Ungeheuer	No

CHDP Administrative Budget Summary
No County/City Match
Fiscal Year 2014-2015
County/City Name: El Dorado

Column	1	2	3	4	5
Category/Line Item	Total Budget (2 + 3)	Total CHDP Budget	Total Medi-Cal Budget (4 + 5)	Enhanced State/Federal (25/75)	Nonenhanced State/Federal (50/50)
I. Total Personnel Expenses	\$ 180,723	\$ 795	\$ 179,928	\$ 58,161	\$ 121,767
II. Total Operating Expenses	\$12,507	\$0	\$12,507	\$1,490	\$11,018
III. Total Capital Expenses	\$0	\$0	\$0		\$0
IV. Total Indirect Expenses	\$45,181	\$0	\$45,181		\$45,181
V. Total Other Expenses	\$0	\$0	\$0		\$0
Budget Grand Total	\$ 238,411	795	\$ 237,616	\$ 59,650	\$ 177,966

Column	1	2	3	4	5
Source of Funds	Total Funds	Total CHDP Budget	Total Medi-Cal Budget	Enhanced State/Federal	Nonenhanced State/Federal
State General Funds	\$876	795			
Medi-Cal Funds:			\$237,616		
State Funds	\$104,214		\$103,895	\$14,913	\$88,983
Federal Funds (Title XIX)	\$155,721		\$133,721	\$44,738	\$88,983

Michael Ungeheuer RN MN PHN	11/26/2014	530 621 6129	michael.ungeheuer@edcgov.us
Prepared By (Signature)	Date Prepared	Phone Number	Email Address
<i>Michael Ungeheuer RN MN PHN</i>	<i>11/26/2014</i>	<i>95</i>	<i>ABOVE</i>
CHDP Deputy Director (Signature)	Date	Phone Number	Email Address

CHDP Administrative Budget Worksheet
No County/City Match State and State/Federal County: Eldorado
Fiscal Year: 14-15

Column	1A	1B	1	2A	2	3A	3	4A	4	5A	5
Category/Line Item	% or FTE	Annual Salary	Total Budget (1A x 1B or 2 + 3)	CHDP % or FTE	Total CHDP Budget	Total Medi-Cal %	Total Medi-Cal Budget (4 + 5)	% or FTE	Enhanced State/Federal (25/75)	% or FTE	Nonenhanced State/Federal (50/50)
Personnel Expenses											
Deputy Director Michael Ungeheuer	10%	\$116,041	\$ 11,604	0.00%	\$0	100.00%	\$11,604	25%	\$2,901	75%	\$8,703
Supervising HEC Josefina Solano	50%	\$78,680	\$ 39,340	0.00%	\$0	100.00%	\$39,340	0%	\$0	100%	\$39,340
Vacant PHN II	50%	\$67,101	\$ 33,551	1.50%	\$503	98.50%	\$33,047	80%	\$26,438	20%	\$6,609
Senior OA Kay Johnson	80%	\$37,359	\$ 29,887	0.00%	\$0	100.00%	\$29,887	25%	\$7,472	75%	\$22,415
	1.9		\$ -	0%	\$0		\$0		\$0		\$0
Total Salaries and Wages			\$ 114,382		\$503		\$113,879		\$36,811		\$77,068
Less Salary Savings			\$0		\$0		\$0		\$0		\$0
Net Salaries and Wages			\$ 114,382		\$503		\$113,879		\$36,811		\$77,068
Staff Benefits (Specify %)	58.00%		\$66,341		\$292		\$66,050		\$21,350		\$44,699
I. Total Personnel Expenses			\$ 180,723		\$ 795		\$ 179,928		\$ 58,161		\$ 121,767
II. Operating Expenses											
Travel			\$2,228		\$0		\$2,228	50%	\$1,114	50%	\$1,114
Training			\$751		\$0		\$751	50%	\$376	50%	\$376
Office Duplicating			\$7,739		\$0		\$7,739			100%	\$7,739
Insurance			\$1,163		\$0		\$1,163			100%	\$1,163
Bldg Maintenance			\$626		\$0		\$626			100%	\$626
										100%	\$0
II. Total Operating Expenses			\$12,507		\$0		\$12,507		\$1,490		\$11,018
III. Capital Expenses											
II. Total Capital Expenses											
IV. Indirect Expenses											
1. Internal (Specify %)	5.00%		\$9,036				\$9,036				\$9,036
2. External (Specify %) A-87	20.00%		\$36,145				\$36,145				\$36,145
IV. Total Indirect Expenses			\$45,181		\$0		\$45,181				\$45,181
V. Other Expenses											
V. Total Other Expenses											
Budget Grand Total			238,411		795		237,616		59,650		177,966

Michael Ungeheuer RN MN PHN	11/7/2014	530 621 6129	michael.ungeheuer@edcgov.us
Prepared By (Signature)	Date Prepared	Phone Number	Email Address
<i>Michael Ungeheuer RN MN PHN</i>	11/26/2014		AS ABOVE
CHDP Deputy Director (Signature)	Date	Phone Number	Email Address

BUDGET JUSTIFICATION NARRATIVE
 CHDP ADMINISTRATION STATE/FEDERAL
 EL DORADO COUNTY
 FISCAL YEAR 14-15

PERSONNEL COST

Total salaries	\$114,382
Total Benefits	\$66,341
Total Personnel Expenses	\$180,723

PHN Director/deputy Director	No change
Supervising Hlth Education Cood	Maintain total CHDP FTE at 95% with a 7% increase and 45% shift to the County/City match budget
Vacant Public Health Nurse II	Increase by 10% to maintain total 50% FTE
Medical Office Assistance (.80)	No change

OPERATING EXPENSES

Travel	\$2,228	Includes per diem, private vehicle mileage, commercial auto rental, air travel, etc. Mileage reimbursement @\$.56 per mile with annual adjustment
Training	\$751	Registration/tuition fees for SPMP and support staff for continuing education program specific
Office Supplies and Services	\$7,739	Maintenance of ongoing operation cost related to stationary, postage, subscriptions, office equip, minor equip, software license, mail service, central duplication, Update computer X1
Insurance	\$1,163	Facility and personnel liability insurance
Bldg Maintenance	\$626	Maintenance of facility: security, repair, grounds
Total operating Costs	\$12,507	

CAPITAL EXPENSES

Total Capital Expenses	\$0
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INDIRECT EXPENSES

Internal @ 5%	\$9,036	Cost allocation plan applied to net wages
External	\$36,145	In accordance to the A-87 plan on file applied by total program FTE
Total Indirect Expenses	\$45,181	

OTHER EXPENSES

Total Other Expenses \$0

BUDGET GRAND TOTAL \$238,411

**CHDP Administrative Budget
Summary
County/City Match
Fiscal Year: 2014-2015
County/City Name: El Dorado**

Column	1	2	3
Category/Line Item	Total Budget (2 + 3)	Enhanced County/City/Federal (25/75)	Nonenhanced County/City/Federal (50/50)
I. Total Personnel Expenses	\$88,463	\$8,130	\$80,332
II. Total Operating Expenses	\$6,104	\$574	\$5,530
III. Total Capital Expenses	\$0		\$0
IV. Total Indirect Expenses	\$22,116		\$22,116
V. Total Other Expenses	\$0		\$0
Budget Grand Total	\$116,682	\$8,704	\$107,978

Column	1	2	3
Source of Funds	Total Funds	Enhanced County/Federal (25/75)	Nonenhanced County/Federal (50/50)
County Funds	\$56,165	\$2,176	\$53,989
Federal Funds (Title XIX)	\$60,517	\$6,528	\$53,989

Michael Ungeheuer RN MN PHN	11/25/2014	530 621 6129	michael.ungeheuer@edcgov.us
Prepared By (Signature)	Date prepared	Phone Number	Email Address

<i>Michael Ungeheuer RN MN PHN</i>	11/26/14	605 ABOVE	
CHDP Deputy Director (Signature)	Date	Phone Number	Email Address

CHDP Administrative Budget Worksheet

County/City Match

Fiscal Year: 2014-2015

County/City Name: El Dorado

Column	1A	1B	1	2A	2	3A	3
Category/Line Item	% or FTE	Annual Salary	Total Budget (1A x 1B or 2 + 3)	% or FTE	Enhanced County/City/Federal (25/75)	% or FTE	Nonenhanced County/City/Federal (50/50)
I. Personnel Expenses							
Supervising HEC Josefina Solano	45%	\$78,680	\$35,406	0%	\$0	100%	\$35,406
Medical OA Adriana Salas-Rodriguez	50%	\$41,166	\$20,583	25%	\$5,146	75%	\$15,437
Total Salaries and Wages							
			\$55,989		\$5,146		\$50,843
Less Salary Savings							
			\$0		\$0		\$0
Net Salaries and Wages							
			\$55,989		\$5,146		\$50,843
Staff Benefits (Specify %)	58.00%		\$32,474		\$2,985		\$29,489
I. Total Personnel Expenses			\$88,463		\$8,130		\$80,332
II. Operating Expenses							
1. Travel			\$820	50%	\$410	50%	\$410
2. Training			\$328	50%	\$164	50%	\$164
Office/Duplicating			\$3,683			100%	\$3,683
Insurance			\$508			100%	\$508
Equipment			\$492			100%	\$492
Building Maintenance			\$273			100%	\$273
II. Total Operating Expenses			\$6,104		\$574		\$5,530
III. Capital Expenses							
			\$0				\$0
			\$0				\$0
			\$0				\$0
			\$0				\$0
			\$0				\$0
II. Total Capital Expenses			\$0		\$0		\$0
IV. Indirect Expenses							
1. Internal (Specify %)	0.00%		\$0				\$0
2. External (Specify %) A-87	25.00%		\$22,116				\$22,116
IV. Total Indirect Expenses			\$22,116				\$22,116
V. Other Expenses							
			\$0				\$0
			\$0				\$0
			\$0				\$0
			\$0				\$0
			\$0				\$0
V. Total Other Expenses			\$0				\$0
Budget Grand Total			\$116,682		\$8,704		\$107,978

Michael Ungheuer RN MN PHN

Prepared By (Signature)

11/25/14

Date Prepared

530 621 6129

Phone Number

michael.ungeheuer@edcgov.us

Email Address

Michael Ungheuer RN MN PHN

CHPD Deputy Director (Signature)

11/24/14

Date

AS ABOVE

Phone Number

Email Address

BUDGET JUSTIFICATION NARRATIVE
 CHDP ADMINISTRATION COUNTY MATCH
 EL DORADO COUNTY
 FISCAL YEAR 14-15

PERSONNEL COST

Total salaries	\$55,989
Total Benefits	\$32,474
Total Personnel Expenses	\$88,463

Supervising Hlth Education Cood	Decreased by 8% to align with funding availability and maintain 95% total FTE
Medical Office Assistance	No change

OPERATING EXPENSES

Travel	\$820	Includes per diem, private vehicle mileage, commercial auto rental, air travel, etc. Mileage reimbursement @\$0.56 per mile with annual adjustment
Training	\$328	
Office Supplies and Services	\$3,683	Maintenance of ongoing operation cost related to stationary, postage, subscriptions, office equip, minor equip, software license, mail service, central duplication
Insurance	\$508	Facility and professional liability insurance
Equipment	\$492	Maintenance and cost of replacement computers
Building Maintenance	\$273	Maintenance of facility: security, repair, grounds
Total operating Costs	\$6,104	

CAPITAL EXPENSES

Total Capital Expenses	\$0
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INDIRECT EXPENSES

Internal @ 25%	\$22,116	Cost allocation plan applied to net wages
External	\$0	In accordance to the A-87 plan on file applied by total program FTE
Total Indirect Expenses	\$22,116	

OTHER EXPENSES

Total Other Expenses

\$0

BUDGET GRAND TOTAL

\$116,682

Foster Care Administrative Budget Summary
State/Title XIX Federal Funds
Fiscal Year: 2013-2014
County/City Name: El Dorado

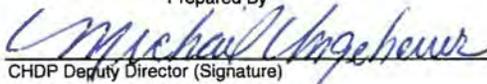
Column	1	2	3
Category/Line Item	Total Budget (2 + 3)	Enhanced State/Federal (25/75)	Nonenhanced State/Federal (50/50)
I. Total Personnel Expense	\$124,557	\$102,922	\$21,634
II. Total Operating Expense	\$1,407	\$1,126	\$281
III. Total Capital Expense			
IV. Total Indirect Expense	\$6,046		\$6,046
V. Total Other Expense			
Budget Grand Total	\$132,010	\$104,048	\$27,962

Column	1	2	3
Source of Funds	Total Funds	Enhanced State/Federal (25/75)	Nonenhanced State/Federal (50/50)
State Funds	\$39,993	\$26,012	\$13,981
Federal Funds (Title XIX)	\$92,017	\$78,036	\$13,981
Budget Grand Total			

<u>Michael Ungeheuer RN MN PHN</u>	<u>11/21/2014</u>	<u>530 621 6129</u>	<u>michael.ungeheuer.edcgov.us</u>
Prepared By (Signature)	Date Prepared	Phone Number	Email Address
<u><i>Michael Ungeheuer RN MN PHN</i></u>	<u>11/24/14</u>	<u>AS ABOVE</u>	
CHDP Deputy Director (Signature)	Date	Phone Number	Email Address

**HCPCFC Administrative Budget Worksheet
State/Title XIX Match
Fiscal Year 2014-2015
County: El Dorado**

Column	1A	1B	1	2A	2	3A	3
Category/Line Item	% or FTE	Annual Salary	Total Budget (1A x 1B or 2 + 3)	% or FTE	Enhanced State/Federal (25/75)	% or FTE	Nonenhanced State/Federal (50/50)
I. Personnel Expenses							
Amber Burget PHN I	100%	\$67,093	\$67,093	85%	\$57,029	15%	\$10,064
Kay Johnson	20%	\$37,359	\$7,472	80%	\$5,977	20%	\$1,494
Heather Orchard Supervising PHN	5%	\$85,372	\$4,269	50%	\$2,134	50%	\$2,134
4.			\$0		\$0		\$0
5.			\$0		\$0		\$0
6.			\$0		\$0		\$0
7.			\$0		\$0		\$0
8.			\$0		\$0		\$0
9.			\$0		\$0		\$0
10.					\$0		\$0
Total Salaries and Wages			\$78,833		\$65,141		\$13,693
Less Salary Savings							
Net Salaries and Wages			\$78,833		\$65,141		\$13,693
Staff Benefits (Specify %)	58.00%		\$45,723		\$37,782		\$7,942
I. Total Personnel Expenses			\$124,557		\$102,922		\$21,634
II. Operating Expenses							
1. Travel			\$900	80%	\$720	20%	\$180
2. Training			\$507	80%	\$406	20%	\$101
II. Total Operating Expenses			\$1,407		\$1,126		\$281
III. Capital Expenses							
1.							
2.							
III. Total Capital Expenses							
IV. Indirect Expenses							
1. Internal (Specify %)	10.00%		\$6,046				\$6,046
2. External							
IV. Total Indirect Expenses			\$6,046				\$6,046
V. Other Expenses							
1.							
2.							
V. Total Other Expenses							
Budget Grand Total			\$132,010		\$104,048		\$27,962

Michael Ungeheuer RN MN PHN	11/17/2014	530 621 6129	michael.ungeheuer@edcgov.us
Prepared By	Date prepared	Phone Number	Email Address
	11/17/2014	As above	As above
CHDP Deputy Director (Signature)	Date	Phone Number	Email Address

BUDGET JUSTIFICATION NARRATIVE
 HCPCFC
 EL DORADO COUNTY
 FISCAL YEAR 14-15

PERSONNEL COST

Total salaries \$78,833
 Total Benefits \$45,723

Total Personnel Expenses \$ 124,557

Public health Nurse II No change

Supervising PHN Added this FY for program oversight to reflect increased funding

Sr Office Assistant (.20) No change

OPERATING EXPENSES

Travel \$900 Includes per diem, private vehicle mileage,

Training \$507 Registration/tuition fees for SPMP for

Total operating Costs \$ 1,407

CAPITAL EXPENSES

Total Capital Expenses \$0

INDIRECT EXPENSES

Internal @ 10% \$6,046 Cost allocation plan applied to net wages

External \$0

Total Indirect Expenses \$ 6,046

OTHER EXPENSES

Total Other Expenses \$0

BUDGET GRAND TOTAL \$ 132,010

CCS CASELOAD	Actual Caseload	Percent of Total CCS Caseload
STRAIGHT CCS - Total Cases of Open (Active) Straight CCS Children	90	15.60%
HEALTHY FAMILIES - Total Cases of Open (Active) Healthy Families Children	0	0.00%
MEDI-CAL/OTLICP (TITLE XXI) - Total Cases of Open (Active) MC/TLICP Children	95	16.46%
MEDI-CAL (TITLE XIX) - Total Cases of Open (Active) Medi-Cal Children	392	67.94%
TOTAL CCS CASELOAD	577	100%

CCS Administrative Budget Worksheet

Fiscal Year: 2014-15
 County: EL DORADO

Column	Col 1 = Col 2+3+4+5	Straight CCS	Title XXI - HF	Title XXI Medi-Cal/OTLICP	Title XIX Medi-Cal (Column 5 = Columns 6 + 7)		
	1	2	3	4	5	6	7
Category/Line Item	Total Budget	Straight CCS County/State (50/50)	Healthy Families County/State/Fed (17.5/17.5/65)	Medi-Cal/Optional Targeted Low Income Children's Program (OTLICP) County/State/Fed (17.5/17.5/65)	Title XIX Medi-Cal State/Federal	Enhanced Title XIX Medi-Cal State/Federal (25/75)	Non-Enhanced Title XIX Medi-Cal State/Federal (50/50)
I. Total Personnel Expense	382,988	59,738	0	63,057	260,194	171,400	88,794
II. Total Operating Expense	23,959	3,736	0	3,944	16,278	2,685	13,593
III. Total Capital Expense	0	0	0	0	0		0
IV. Total Indirect Expense	95,747	14,934	0	15,764	65,048		65,048
V. Total Other Expense	5,000	780	0	823	3,397		3,397
Budget Grand Total	507,694	79,188	0	83,588	344,917	174,085	170,832

Column	Col 1 = Col 2+3+4+5	Straight CCS	Title XXI - HF	Title XXI Medi-Cal/OTLICP	Title XIX Medi-Cal (Column 5 = Columns 6 + 7)		
	1	2	3	4	5	6	7
Source of Funds	Total Budget	Straight CCS County/State (50/50)	Healthy Families County/State/Fed (17.5/17.5/65)	Medi-Cal/Optional Targeted Low Income Children's Program (OTLICP) County/State/Fed (17.5/17.5/65)	Title XIX Medi-Cal State/Federal	Enhanced Title XIX Medi-Cal State/Federal (25/75)	Non-Enhanced Title XIX Medi-Cal State/Federal (50/50)
Straight CCS							
State	39,594	39,594					
County	39,594	39,594					
Healthy Families							
State	0		0				
County	0		0				
Federal (Title XXI)	0		0				
Title XXI - Medi-Cal/OTLICP							
State	14,628			14,628			
County	14,628			14,628			
Federal (Title XXI)	54,332			54,332			
Title XIX - Medi-Cal							
State	128,937				128,937	43,521	85,416
Federal (Title XIX)	215,980				215,980	130,564	85,416

As Below
 Prepared By (Signature) Michael Ungeheuer RN MN PHN Prepared By (Printed Name) Michael Ungeheuer RN MN PHN Email Address michael.ungeheuer@edcgov.us

Michael Ungeheuer
 CCS Administrator (Signature) Michael Ungeheuer RN MN PHN CCS Administrator (Printed Name) As Above Email Address As Above

CCS CASELOAD	Actual Caseload	Percent of Total CCS Caseload
STRAIGHT CCS - Total Cases of Open (Active) Straight CCS Children	90	15.60%
HEALTHY FAMILIES - Total Cases of Open (Active) Healthy Families Children	0	0.00%
MEDI-CAL/OTLJCP (TITLE XXI) - Total Cases of Open (Active) MC/TJLCP Children	95	16.46%
MEDI-CAL (TITLE XIX) - Total Cases of Open (Active) Medi-Cal Children	392	67.94%
TOTAL CCS CASELOAD	577	100%

CCS Administrative Budget Worksheet

Fiscal Year: 2014-15

County: EL DORADO

Column	Straight CCS		Title XXI - Healthy Families		Title XXI - Medi-Cal/Optional Targeted Low Income Children Program (OTLJCP)		Title XIX - Medi-Cal								
	1	2	3	4A	4	5A	5	6A	6	7A	7	8A	8	9A	9
Category/Line Item	% FTE	Annual Salary	Total Budget (1 x 2 or 4 + 5 + 6 + 7)	Caseload %	Straight CCS County/State (50/50)	Caseload %	Healthy Families County/State/Fed (17.5/17.5/65)	Caseload %	Medi-Cal/Optional Targeted Low Income Children's Program (OTLJCP) Co/State/Fed (17.5/17.5/65)	Caseload %	Title XIX Medi-Cal State/Federal	Enhanced % FTE	Enhanced Title XIX Medi-Cal State/Federal (25/75)	Non-Enhanced % FTE	Non-Enhanced Title XIX Medi-Cal State/Federal (50/50)
I Personnel Expense															
Program Administration															
Michael Ungeheuer RN MN PHN Administrator	5.00%	116,041	5,802	15.60%	905	0.00%	0	16.46%	955	67.94%	3,942			100.00%	3,942
Josefina Solano Supervising Health Education Coordinator	5.00%	78,880	3,934	15.60%	614	0.00%	0	16.46%	648	67.94%	2,673			100.00%	2,673
3. Employee Name, Position	0.00%	0	0	15.60%	0	0.00%	0	16.46%	0	67.94%	0			100.00%	0
4. Employee Name, Position	0.00%	0	0	15.60%	0	0.00%	0	16.46%	0	67.94%	0			100.00%	0
5. Employee Name, Position	0.00%	0	0	15.60%	0	0.00%	0	16.46%	0	67.94%	0			100.00%	0
Subtotal		194,721	9,736		1,519		0		1,603		6,615				6,615
Medical Case Management															
Michael Ungeheuer RN MN PHN Administrator	5.00%	116,041	5,802	15.60%	905	0.00%	0	16.46%	955	67.94%	3,942	50.00%	1,971	50.00%	1,971
Dee Taylor PHN II	100.00%	79,826	79,826	15.60%	12,451	0.00%	0	16.46%	13,143	67.94%	54,232	80.00%	43,386	20.00%	10,846
Sabina Keller PHN I	75.00%	70,421	52,816	15.60%	8,238	0.00%	0	16.46%	8,696	67.94%	35,882	80.00%	28,706	20.00%	7,176
4. Employee Name, Position	0.00%	0	0	15.60%	0	0.00%	0	16.46%	0	67.94%	0	0.00%	0	100.00%	0
5. Employee Name, Position	0.00%	0	0	15.60%	0	0.00%	0	16.46%	0	67.94%	0	0.00%	0	100.00%	0
6. Employee Name, Position	0.00%	0	0	15.60%	0	0.00%	0	16.46%	0	67.94%	0	0.00%	0	100.00%	0
7. Employee Name, Position	0.00%	0	0	15.60%	0	0.00%	0	16.46%	0	67.94%	0	0.00%	0	100.00%	0
8. Employee Name, Position	0.00%	0	0	15.60%	0	0.00%	0	16.46%	0	67.94%	0	0.00%	0	100.00%	0
Subtotal		266,288	138,444		21,594		0		22,794		94,056		74,063		19,983
Other Health Care Professionals															
1. Employee Name, Position	0.00%	0	0	15.60%	0	0.00%	0	16.46%	0	67.94%	0	0.00%	0	100.00%	0
2. Employee Name, Position	0.00%	0	0	15.60%	0	0.00%	0	16.46%	0	67.94%	0	0.00%	0	100.00%	0
3. Employee Name, Position	0.00%	0	0	15.60%	0	0.00%	0	16.46%	0	67.94%	0	0.00%	0	100.00%	0
Subtotal		0	0		0		0		0		0		0		0
Ancillary Support															
Michelle McCann-Hardie Medical Office Assistant	20.00%	40,160	8,032	15.60%	1,253	0.00%	0	16.46%	1,322	67.94%	5,457			100.00%	5,457
Maria Martinez Medical Office Assistant	20.00%	39,439	7,888	15.60%	1,230	0.00%	0	16.46%	1,299	67.94%	5,359			100.00%	5,359
Adriana Salas-Rodriguez Medical Office Assistant	25.00%	41,166	10,292	15.60%	1,605	0.00%	0	16.46%	1,695	67.94%	6,992			100.00%	6,992
Vacant Office Assistant	25.00%	27,846	6,962	15.60%	1,066	0.00%	0	16.46%	1,146	67.94%	4,730			100.00%	4,730
5. Employee Name, Position	0.00%	0	0	15.60%	0	0.00%	0	16.46%	0	67.94%	0			100.00%	0
Subtotal		148,611	33,174		5,174		0		5,462		22,538				22,538
Clerical and Claims Support															
Michelle McCann-Hardie Medical Office Assistant	80.00%	40,160	32,128	15.60%	5,011	0.00%	0	16.46%	5,290	67.94%	21,827	80.00%	17,462	20.00%	4,365
Maria Martinez Medical Office Assistant	80.00%	39,439	31,551	15.60%	4,921	0.00%	0	16.46%	5,195	67.94%	21,435	80.00%	17,148	20.00%	4,287
Adriana Salas-Rodriguez Medical Office Assistant	25.00%	41,166	10,292	15.60%	1,605	0.00%	0	16.46%	1,695	67.94%	6,992	80.00%	5,594	20.00%	1,398
5. Employee Name, Position	0.00%	0	0	15.60%	0	0.00%	0	16.46%	0	67.94%	0	10.00%	0	90.00%	0
Subtotal		120,765	73,971		11,537		0		12,180		50,254		40,204		10,050

BUDGET JUSTIFICATION NARRATIVE
 CCS ADMINISTRATION
 EL DORADO COUNTY
 FISCAL YEAR 14-15

PERSONNEL COST

Total salaries	\$255,325
Total Benefits	\$127,663

Total Personnel Expenses **382,988**

PHN Director/Administrator	No change
Supervising Hlth Education Cood	No change
Public Health Nurse II (1.75)	No change
Office Assistant II	Reduced to .25 FTE to reflect insufficient allocation
Medical Office Assistance (2.5)	No change

OPERATING EXPENSES

Travel	\$4,400	Includes per diem, private vehicle mileage, commercial auto rental, air travel, etc. Mileage reimbursement @\$0.56 per mile with annual adjustment
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Training	\$1,600	Registration/tuition fees for SPMP and support staff for continuing education program specific
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Office Supplies and Services	\$12,445	Maintenance of ongoing operation cost related to stationary, postage, subscriptions, office equip, minor equip, software license, mail service, central duplication, security system, computer update X1
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Communication	\$765	Reduction as network support is now considered part of County internal/external cost applied plan. Phone line and
---------------	-------	---

Insurance	\$2,792	Facility and professional liability insurance
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Building Maintenance	\$1,957	Maintenance of facility: security, repair, grounds
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Total operating Costs **\$ 23,959**

CAPITAL EXPENSES

Total Capital Expenses **\$0**

INDIRECT EXPENSES

Internal @ 3%	\$11,490	Cost allocation plan applied to net wages
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External @ 22%	\$84,257	In accordance to the A-87 plan on file applied by total program FTE
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Total Indirect Expenses **\$ 95,747**

OTHER EXPENSES

Maintenance and transportation \$5,000

Reimbursements and payments to families for travel, lodging and meals incurred while obtaining CCS authorized services allowing for special circumstances and other contingencies. No change

Total Other Expenses \$5,000

BUDGET GRAND TOTAL 507,694