



HEALTH AND HUMAN SERVICES AGENCY BEHAVIORAL HEALTH & RECOVERY SERVICES



POLICY AND PROCEDURE

Service Area: Mendocino County Behavioral Health and Recovery Services

Subject: MHSA Fiscal Documentation and Reporting

Subject Matter Expert:

Juanita Dreiling

Juanita Dreiling, Administrative Services Manager

BHRS Director:

Jenine Miller

Jenine Miller, BHRS Director

Previous or Referenced
Policy No.: N/A

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Reviewed:

Revised:

POLICY:

Mendocino County Health and Human Services Agency (HHS) Behavioral Health and Recovery Services (BHRS) shall ensure that Fiscal Year Annual MHSA Reports of Expenditure and Revenue (ARER) are submitted to Department of Health Care Services (DHCS) by December 31st following the close of the fiscal year. Mendocino County shall also post a copy of the ARER to the County's website within 30 days of submitting the ARER report to DHCS, but no later than January 30th.

PROCEDURE:

I. MHSA Annual Revenue and Expenditure Report (ARER): The Mendocino County MHSA oversight team will submit the Fiscal Year Annual Report of Expenditures and Revenue to the DHCS by December 31st following the close of the fiscal Year.

- A. As part of the MHSA ARER BHRS shall report the following:
 1. Administration Expenditures: Actual total expenditures incurred and the revenues received for MHSA administration during the reporting fiscal year.
 2. System Wide Costs: The Report shall system wide one time costs that cannot be assigned to a specific program.
 3. Program Expenditures: BHRS shall report the actual total expenditures incurred by service or funding categories and revenues received during the reporting fiscal year.

4. One Time Expenditures: BHRS shall report the amount approved and the actual total expenditures incurred during the reporting fiscal year for each one time expenditure.
5. Received Funds: The County shall report all MHSA funds received from DHCS and interest income earned during the reporting fiscal year.
6. For Prevention and Early Intervention Funds the following will be documented:
 - A. The total funding source dollar amounts expended during the reporting period on each Program funded with Prevention and Early Intervention funds by the following funding sources:
 - a) Prevention and Early Intervention funds
 - b) Medi-Cal Federal Financial Participation
 - c) 1991 Realignment
 - d) Behavioral Health Subaccount
 - e) Any other funding
 - B. The amount of funding expended for Prevention and Early Intervention Component Administration by the following funding sources:
 - a) Prevention and Early Intervention funds
 - b) Medi-Cal Federal Financial Participation
 - c) 1991 Realignment
 - d) Behavioral Health Subaccount
 - e) Any other funding
 - C. The amount of funding expended for Evaluation of the Prevention and Early Intervention Component by the following funding sources:
 - a) Prevention and Early Intervention funds
 - b) Medi-Cal Federal Financial Participation
 - c) 1991 Realignment
 - d) Behavioral Health Subaccount
 - e) Any other funding
 - D. The amount of Prevention and Early Intervention funds voluntarily assigned by the County to California Mental Health Services Authority or any other organization in which counties are acting jointly.

II. ARER posted to County Website: Within 30 days following the submission of the ARER, but no later than January 30th, the County shall post a copy of the ARER to the County Website.

III. Consistency between MHSA Documents: The ARER must categorize programs consistently with the Three Year Program and Expenditure Plan or Annual Update (Plan) narrative and budget.

- A. Community Services and Supports categories must designate whether a program is a Full Service Partnership or Non Full Service Partnership.
- B. Community Services and Supports Programs must designate whether they are a Full Service Partnership, General Service Delivery, or Outreach and Engagement program.

C. Changes in program classification or expenditures between Plan and ARER must be explained and justified in the Annual Summary/Evaluation document.

REFERENCES:

CCR, title 9, §3510(b) and 3510.010(b)