



**Health & Human Services
Agency
COUNTY OF TULARE
AGENDA ITEM**

BOARD OF SUPERVISORS

ALLEN ISHIDA
District One
CONNIE CONWAY
District Two
PHILLIP A. COX
District Three
J. STEVEN WORTHLEY
District Four
MIKE ENNIS
District Five

AGENDA DATE: June 26, 2007

REVISED

Public Hearing Required	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
Scheduled Public Hearing w/Clerk	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
Published Notice Required	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
Advertised Published Notice	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
Meet & Confer Required	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Electronic file(s) has been sent	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
Budget Transfer (Aud 308) attached	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Personnel Resolution attached	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Resolution, Ordinance or Agreements are attached and signature line for Chairman is marked with tab(s)/flag(s) Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>						
CONTACT PERSON: Kyla Surratt PHONE: (559) 737- 4660						

SUBJECT: Public Hearing for consideration of a resolution to adopt fee adjustments for Department of Mental Health, Health and Human Services Agency (HHSa), Fiscal Year 2007/2008.

REQUEST(S):
That the Board of Supervisors:

1. Conduct the public hearing considering the proposed increase in fee adjustments for Department of Mental Health, Health and Human Services Agency (HHSa) to offset costs of conserved clients residing in an Institution for Mental Disease (IMD).
2. Approve the permanent adjustment/increase in fees.
3. Adopt the fees recommended and authorize the Department of Mental Health to implement the increase in fees beginning July 1, 2007.

SUMMARY:
Annually, the Health & Human Services Agency reviews its fees based on the increased costs of providing services. At this time, Health & Human Services Agency has identified the need to adjust fees for conserved clients residing in Institutions for Mental Disease (IMD) to help offset the cost of their care. The current monthly rate as provided by AB 360 for a client residing in an IMD with 60+ beds in the Central Valley is \$4,300 per month. This rate will increase to \$4,568 per

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month beginning July 1, 2007. The current monthly fee to offset costs for clients conserved in an IMD that are receiving Supplemental Security Income (SSI) is \$669 per month. For clients receiving Social Security/Supplemental Security Income (SSA/SSI) the rate is \$688 per month. These fees have been in place since 2003. In order to offset costs for clients receiving SSI, it is recommended that the SSI rate be adjusted to \$753 per month. It is recommended that the SSA/SSI rate be adjusted to \$773 per month. The public notice for the fees was posted in the Visalia Times Delta, June 16, 2007. The second posting appeared in the Visalia Times Delta on June 21, 2007. If approved, the adjustment to fees will take effect on July 1, 2007.

FISCAL IMPACT/FINANCING:

The revenue from the proposed fee adjustments will be included in the revenue projections for the Fiscal Year 2007/2008 proposed budget. No Net County Cost.

LINKAGE TO THE COUNTY OF TULARE STRATEGIC BUSINESS PLAN:

The County's five year strategic plan includes the Quality of Life Initiative to promote public health and welfare by encouraging innovative provision of quality supportive services for at-risk adults, youth and children in state and federally mandated programs. This agreement increases the ability to fulfill that obligation.

ALTERNATIVES:

1. Maintain the current fee rates for Department of Mental Health.
2. Increase the rates by a different amount, either higher or lower than recommended.

INVOLVEMENT OF OTHER DEPARTMENTS OR AGENCIES:

1. This notice has been approved as to form by County Counsel and no changes have been made since this approval.
2. Public Guardian's Office.

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ADMINISTRATIVE SIGN-OFF:

A handwritten signature in black ink, appearing to read "Cheryl L. Duerksen", written over a horizontal line.

Cheryl L. Duerksen Ph.D. – Director of Mental Health

Cc: Auditor/Controller
County Counsel
County Administrative Office (2)

Fee Schedule

**BEFORE THE BOARD OF SUPERVISORS
COUNTY OF TULARE, STATE OF CALIFORNIA**

IN THE MATTER OF:)
Public Hearing for consideration of a) **RESOLUTION NO.** _____
resolution to adopt fee adjustments) **AGREEMENT NO.** _____
for Department of Mental Health, Health)
and Human Services Agency (HHSA),)
Fiscal Year 2007/2008.)

UPON MOTION OF SUPERVISOR _____, SECONDED BY
SUPERVISOR _____, THE FOLLOWING WAS ADOPTED BY THE
BOARD OF SUPERVISORS, AT AN OFFICIAL MEETING HELD _____
_____, BY THE FOLLOWING VOTE:

AYES:
NOES:
ABSTAIN:
ABSENT:

ATTEST: C. BRIAN HADDIX
COUNTY ADMINISTRATIVE OFFICER
CLERK, BOARD OF SUPERVISORS

BY: _____
Deputy Clerk

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1. Conducted the public hearing considering the proposed increase in fee adjustments for Department of Mental Health, Health and Human Services Agency (HHSA) to offset costs of conserved clients residing in an Institution for Mental Disease (IMD).
2. Approved the permanent adjustment/increase in fees.
3. Adopted the fees recommended and authorized the Department of Mental Health to implement the increase in fees beginning July 1, 2007.