



Fund Purpose

This special revenue fund reports the financial operations of the Mental Health Center (MHC) inpatient hospital for accounting purposes and State/Federal reporting including federal/state Medicare Cost Report requirements. This fund provides for all services related to admissions to the hospital for psychiatric emergency and other psychiatric hospitalizations and related support services.

The Hospital Inpatient Program of the Mental Health Center provides 24-hour care to court-involved and voluntary mentally ill individuals for which a range of services are included such as diagnosis; medication monitoring and stabilization; individual, couple, and group counseling; and development of aftercare services.

Financial Summary	2008 Actual (a)	2009 Adopted Budget	2009 Estimate (a)(b)	2010 Budget (c)	Change From 2009 Adopted Budget	
					\$	%
Revenues						
General Government	\$0	\$0	\$0	\$0	\$0	N/A
Fine/Licenses	\$0	\$0	\$0	\$0	\$0	N/A
Charges for Services	\$2,241,442	\$2,333,639	\$2,333,789	\$2,353,839	\$20,200	0.9%
Interdepartmental	\$0	\$0	\$0	\$0	\$0	N/A
Other Revenue (a)	\$74,436	\$0	\$133,016	\$0	\$0	N/A
Appr. Fund Balance (b)	\$0	\$0	\$2,730	\$35,000	\$35,000	N/A
County Tax Levy (c)	\$3,194,709	\$3,234,918	\$3,234,918	\$3,217,113	(\$17,805)	-0.6%
Total Revenue Sources	\$5,510,587	\$5,568,557	\$5,704,453	\$5,605,952	\$37,395	0.7%
Expenditures						
Personnel Costs	\$3,724,828	\$3,834,985	\$3,873,659	\$3,854,720	\$19,735	0.5%
Operating Expenses (b)	\$967,316	\$1,061,737	\$971,487	\$1,019,856	(\$41,881)	-3.9%
Interdept. Charges (c)	\$581,438	\$671,835	\$670,718	\$696,376	\$24,541	3.7%
Fixed Assets	\$0	\$0	\$0	\$35,000	\$35,000	N/A
Total Expenditures	\$5,273,582	\$5,568,557	\$5,515,864	\$5,605,952	\$37,395	0.7%
Rev. Over (Under) Exp.	\$237,005	-	\$188,589	-	-	N/A

Position Summary (FTE)

Regular Positions	43.25	43.15	43.15	42.45	(0.70)
Extra Help	2.72	3.55	3.55	3.64	0.09
Overtime	0.52	0.52	0.52	0.47	(0.05)
Total	46.49	47.22	47.22	46.56	(0.66)

- (a) The 2008 actual and 2009 estimate for Other Revenue consists mostly of a Medicare cost reimbursement settlement, which is not budgeted, due to the unpredictable nature of these prior year settlements.
- (b) The 2009 estimate for appropriated Mental Health Center Fund Balance exceeds the 2009 Adopted Budget due to 2008 purchase orders and additional spending authority carried over into 2009.
- (c) Tax Levy of \$47,859 was shifted from the End User Technology Fund (EUTF) to the Mental Health Center Fund, for expenditure increases above 3%, to cover the phasing in of the full cost of computer ownership based on the new charging method, which better reflects technology resources being used by departments, as recommended by Internal Audit. The full amount of the Tax Levy shift was not needed in the Mental Health Center Fund due to lower operating expenditures more in line with actual/estimated spending levels. Therefore, the Health and Human Services Administration shifted this Tax Levy to cover EUTF expenditure needs in the Human Services Fund.

Major Departmental Strategic Outcomes and Objectives for 2010

County-Wide Key Strategic Outcome: A county that assists at-risk citizens

Objective 1: To provide effective care and services that allow individuals to return to community based settings as soon as possible. (Mental Health Center Fund)

Key Outcome Indicator: The re-admission rate is a measure of the effectiveness of inpatient treatment and subsequent community aftercare. The goal of the Mental Health Center is not to exceed 10% for readmission within 30 days of discharge.

Performance Measure:	2008 Actual	2009 Target	2009 Estimate	2010 Target
30 Day Readmission Rate	9.2%	10%	9.3%	9.9%



Program Highlights

Charges for Services, which consist mostly of client fee (including insurance and Medicare/Medicaid reimbursements) revenues, increase by \$20,200 to \$2,353,839, based on current-year revenue trends. In addition, a new technology is expected to be implemented that will allow the Department of Health and Human Services-Fiscal/Administrative Support Division to interface directly with the Department of Administration-Collections Division, to ensure more timely referrals of unpaid past due accounts.

Mental Health Center Fund Balance appropriations of \$35,000 are budgeted for one-time fixed asset building upgrades, including \$20,000 to construct a confidential interview room within the residential unit to ensure federal Health Insurance Portability and Accountability Act (HIPPA) compliance. Fixed asset upgrades also include \$15,000 for a modification to the main entrance corridor, needed to incorporate the occupational therapy service area within the locked portion of the hospital, as required by state inspectors. This modification will ensure compliance with Medicare/Medicaid requirements regarding hospital facility code and patient safety regulations.

Personnel costs increase by \$19,735 or 0.5% to \$3,854,720 for 46.56 FTE's. Personnel costs include the cost to continue staff and an increase in the Clinical Director's staff time allocated to the Mental Health Center (MHC) by 0.70 FTE (1,460 hours) to 0.80 FTE (1,660 hours), estimated to increase personnel costs in the MHC by \$180,779. This increase in the Clinical Director's allocation is intended to shift higher level management resources from the Mental Health Outpatient Clinic (in the Human Services Fund) to the Mental Health Center Inpatient Hospital to address the more challenging workload at this facility. This reallocation of staffing resources corresponds to a shift of 0.90 FTE (1,870 hours) of a full-time psychiatrist position previously allocated to the MHC out to the Mental Health Outpatient Clinic, where the remaining 0.10 FTE of this position is allocated. This shift is estimated to reduce personnel costs in the MHC by \$202,402 from 2009 Budget. In addition, this budget unfunds a part-time 0.50 FTE (1,040 hours) psychiatric technician position, budgeted at \$24,000 in 2009, with most of this position's workload being absorbed by the remaining 16.00 FTE psychiatric technicians budgeted in this facility. Temporary Extra Help is budgeted to increase by \$9,214 or 0.09 FTE (190 hours) to \$186,524 or 3.64 FTE's to provide additional nursing coverage at this facility. This is partially offset by a decrease in overtime by \$5,000 or 0.05 FTE (100 hours) to \$40,119 or 0.47 FTE (980 hours).

Operating expenditures are budgeted to decrease by \$41,881 to \$1,019,856, which includes a reduction in medication and prescription drug expenditures by \$27,109 to \$300,000, mostly due to negotiating a lower costs for injectible medications, improving the MHC's inventory process and pharmacies performing more exhaustive searches for patient benefits to charge. In addition, food service costs are budgeted to decrease by \$14,000 to \$66,000, and laboratory supplies are budgeted to decrease by \$10,000 to \$24,000, both reflecting fewer days of care at the facility and to be more in line with the 2008 actual and 2009 estimated spending level. Decreases in operating expenditures are partially offset by an increase in contracted doctor services by \$17,169 to \$399,300, mostly due to anticipated increase in doctor coverage needs at this 24-hour facility.

Interdepartmental Charges are budgeted to increase by \$24,541 to \$696,376, mostly due to an increase in End User Technology Fund (EUTF) computer charges by \$51,301. Tax Levy of \$47,859 was allocated to be shifted from EUTF to the MHC, for a net cost increase of \$3,442 to cover the phasing in of full-cost allocations from the new charging methodology, to better reflect technology resources being used by departments, as recommended by Internal Audit. However, due to spending reductions, the HHS Administration determined that this Tax Levy shift is not needed in the Mental Health Center Fund, and is therefore shifted to the Human Services Fund to cover EUTF expenditure needs. This increase is partially offset by a decrease in Public Works charges for housekeeping services by \$16,210 to \$226,352 and lower facility maintenance service costs by \$7,834 to \$79,502.

Fixed asset expenditures of \$35,000 are budgeted for one-time building upgrades funded with MHC fund balance, as discussed above.

Activity	2008 Actual	2009 Budget	2009 Estimate	2010 Target	Budget Change
Days of Care	6,238	7,400	7,000	7,000	(400)
Admissions	1,092	1,140	1,150	1,150	10
Discharges	1,094	1,140	1,150	1,150	10
Average Length of Stay (Days)	5.9	6.6	6.2	6.2	(0.4)