TEHAMA COUNTY AUDITOR'S OFFICE GRANT FUNDING INFORMATION

(Attach full copy of application and/or Notice of Award)

AUDITOR I	JSE ONLY
Rec'd By:	

DEPARTMENT Health Services Agency	#6200/2009		IUMBER 8491	BUDGE 401			
TITLE OF GRANT		Children's N	Medical Servic	es (CMS) Plan	& Fiscal Guide	lines	
GRANTOR AGENCY		(California De	partment of H	ealthcare Ser	vices	
GRANT OBJECTIVES		Case	managemen	t and program	coordination	for CCS	
GRANT I.D. NO.					Federal Catalog # (if applicable):		
GRANT PERIOD From: 7/1	/2025	To: 6/30/2	2026		Applicable C	Code and/or	
DATE APPLICATION APPRO	VVED B	VBOARD	١٠		Legislative F	Reference:	
DATE APPLICATION APPRO	JVED D	I DUAKD	<u>'</u>				
DATE BOARD ACCEPTED F	UNDS (OR APPRO	VED CONT	RACT:			
IS GRANT RENEWABLE?	Yes	No	Annually	Indefinite	Specific N	No. of Years	
(Check all applicable)	X		X				
GRANT FUNDING	F	iscal Year:	2025-2026				
FEDERAL			\$138,987.00				
STATE		\$	106,577.00				
OTHER	79						
1. TOTAL GRANT FUNDS			\$245,564.00				
COUNTY FUNDING							
HARD MATCH (dollars)			\$25,345.00				
SOFT MATCH (In-kind)							
2. TOTAL COUNTY MATCH	I	\$25,345.00					
USE OF FUNDS					Y	149	
PERSONNEL (attach detail)		\$	208,114.00				
SERVICES/SUPPLIES			\$10,322.00				
EQUIPMENT			Ф СО 472 00				
OTHER CHARGES			\$52,473.00				
TOTAL FUNDS (must also = 1+2	above)		\$270,909.00				
IF HARD MATCH REQUIRED, IDENTIFY FUNDING SOURCE	:						
IS MATCH FUNDING APPROP	RIATED	WITHIN E	XISTING BU	DGET?	Yes:	N/A	No:
METHOD OF PAYMENT OF G	RANT F	UNDS:	Reimburse:	X	Advance:		
ANTICIPATED DATE(S) OF RE	ECEIPT (OF GRANT	FUNDS:				
EXPENDITURE DEADLINE:		6/30/2026					
IS INTEREST EARNING ON	GRANT	Γ FUNDS F	REQUIRED I	BY LAW?	Yes:		No: X
WILL THERE BE IMPACTS TO HOUSING, STAFF OR OTHER		HER	Yes: X		No:		
COUNTY SUPPORT SERVICES? (If yes, please explain. Use attachment if needed.) This is an ongoing program that requires staffing and office space.							
This is	an ongo	ing progran	n that require	es statting and	office space.		
- Jan mo Mor	the	₹			A-1.	7-25	
Joyma Rottle Evecutive Direct	we e)			DATE		35 (Rev 8-21-07)

Plan and Budget Required Documents Checklist

FY 2025-2026

County/City:		/City:	Tehama	Fiscal Year: 2025-2026
	Document		Document	Page Number
1.	Chec	cklist		1
2.	Ager	ncy Inf	formation Sheet	2
3.	Certi	ificatio	on Statement CCS	3
4.	Ager	ncy De	escription	-
	A.	Brief	Narrative	4
	B.	Orgai	nizational Charts for CCS	Retain locally
	C.	ccs	Staffing Standards Profile	Retain locally
	D.	Incun	nbent Lists for CCS	5
	E.	propo	Service Classification Statements – Include if newly established osed, or revised	N/A
	F.	Duty	Statements – Include if newly established , proposed, or revised	6-13
5.	Mem	orand	a of Understanding and Interagency Agreements List	
	A.	MOU	/IAA List	14
	B.	New,	Renewed, or Revised MOU or IAA	N/A
6.	Bud	gets		
	A.	ccs	Administrative Budget	-
		1.	Budget Summary	15
		2.	Budget Worksheet	16-17
		3.	Budget Justification Narrative	18-19
		2.	Inventory/Disposition of DHCS Funded Equipment Form (DHCS1204)	N/A
		3.	Property Survey Report Form (STD 152)	N/A
	B.	ccs	Monitoring and Oversight Budget	N/A
		1. B	Budget Agency Information and Summary	N/A
		2. B	Budget Worksheet	N/A
		3. E	Budget Justification Narrative	N/A

County/City: **Fiscal Year 2025-2026** Tehama Official Agency Name: Tehama Co Health Services Address: P.O. Box 400 Agency Health Officer Timothy Peters, MD Red Bluff, CA 96080 **CMS** Director (if applicable) Name: Address: Jayme Bottke P.O. Box 400 Phone: 530-527-8491 x3175 Red Bluff, CA 96080 530-527-0703 E-Mail: Fax: Jayme.bottke@tchsa.net **CCS Administrator** Name: Kelly Burton P.O. Box 400 Address: Red Bluff, CA 96080 Phone: 530-527-6824 Fax: 530-527-0362 E-Mail: Kelly.burton@tchsa.net Clerk of the Board of Supervisors or City Council Name: P.O. Box 250 Sean Houghtby Address: 530-527-3287 Red Bluff, CA 96080 Phone: Fax: 530-527-1745 E-Mail: recorder@tehama.gov

State of California - Health and Human Services Agency

Tehama

County/City:

Department of Health Services - Children's Medical Services

2025-2026

Fiscal Year:

Certification Statement - California Children's Services (CCS)

I certify that the CCS Program will comply with all applicable Part 2, Chapter 3, Article 5, (commencing with Section 123 Institutions Code (commencing with Sections 14000-1420 by DHCS pursuant to this article and these Chapters. I fur Children's Medical Services (CMS) Plan and Fiscal Guide Federal Financial Participation. I further certify that this Coregulations governing and regulating recipients of funds gradients of the Social Security Act (42 U.S.C. Section 1396 et Maternal and Child Health Services Block Grant pursuant 701 et seq.). I further agree that this CCS Program may be if this CCS Program violates any of the above laws, regular comply.	3800) and Chapters 7 and 8 of the Welfare and 0), and any applicable rules or regulations promulgated rther certify that this CCS Program will comply with the lines Manual, including but not limited to, Section 9 CS Program will comply with all federal laws and ranted to states for medical assistance pursuant to Title seq.) and recipients of funds allotted to states for the to Title V of the Social Security Act (42 U.S.C. Section se subject to all sanctions or other remedies applicable
Kelle Butto	8/19/25
Signature of CCS Administrator Kelly Burton, Supervising PHN	Date Signed
, conjugation of the conjugation	
Comply D. Peters	August 18,2025
Signature of Director or Health Officer Timothy Peters, MD	Date Signed
Jame Skottle	9-22-25
Signature and Title of Other – Jayme Bottke, Executive Director	Date Signed
John Bottle, Exceptive Breets.	
I certify that this plan has been approved by the local gove	erning body.
Signature of Local Governing Body Chairperson Matt Hansen, Tehama County Board of Supervisors	Date Signed

Agency Description

Children's Medical Services Plan FY 2025-2026

The Tehama County Health Services Agency consists of five divisions: Fiscal and Support Services; Substance Use Recovery Services; Behavioral Health Services; Medical Clinic Services; and Public Health Services which includes the Women, Infant, Children's (WIC) Nutritional Program.

The California Children's Services (CCS) Program is within the same location at the Public Health Division. The Health Care Program for Children in Foster Care (HCPCFC), Health Care Program for Children in Foster Care Psychotropic Medications Monitoring and Oversight (HFPCFC PMM&O), HCPCFC Caseload Relief, and HCPCFC Administration is located at the Department of Social Services in the Child Welfare Services Unit.

Jayme Bottke, serves as the Agency Executive Director. The Director of Public Health is Minnie Sagar, MPH. Kelly Burton, Supervising Public Health Nurse, provides day-to-day supervision of the Children Medical Services (CMS) program of CCS and serves as CCS Administrator. Kelly Burton, Supervising Public Health Nurse, provides day-to-day supervision of the Children Medical Services (CMS) programs of HCPCFC, HCPCFC PMM&O, HCPCFC Caseload Relief and acts as the HCPCFC Administrator. Timothy Peters, MD, the County Health Officer provides medical supervision of the CCS and HCPCFC Programs. The organizational chart (retained locally) contains more detailed information.

The local CCS, HCPCFC, and WIC programs strive to coordinate services and cross-refer clients in an efficient manner. CMS program staff meet monthly to discuss programmatic issues and to coordinate services. Release of Information (ROI) is utilized to coordinate services and referrals with Substance Use Recovery Services; Behavioral Health Services; Medical Clinic Services. All of the CMS program staff coordinates efforts to maintain provider relations, non-duplication of services, outreach and case finding, and networking with community agencies.

As directed by California Department Healthcare Services beginning FY 2022-23, program budgets are separate of one another and must be signed and submitted individually.

Incumbent List - California Children's Services

For FY 2024-2025, 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:	County/City: Tehama				
Job Title	Incumbent Name	FTE % on CCS Admin Budget	Have Job Duties Changed? (Yes or No)	Has Civil Service Classification Changed? (Yes or No)	
SPHN, CCS Administrator	Kelly Burton	20%	No	No	
Business Operations Supervisor	Marilyn Kunz	10%	Yes	No	
PHN III	Amy Condie	2%	Yes	No	
PHN II	Sharon Atkinson	50%	No	No	
OA III	Rene Morrow	95%	No	No	

Tehama County Health Services Agency Public Health Nursing Division Duty Statement Fiscal Year 2025-2026

Business Operations Supervisor @ 10% FTE California Children's Services (CCS) Program

Activities based on Federal Financial Participation (FFP) function codes and activities.

Under the direct supervision of the Director of Public Health, the Office Assistant Supervisor performs the following duties:

NON-SPMP ACTIVITIES 50%

Function 201 - Outreach

This function is to be used by all staff when performing activities that inform Medi-Cal eligible or potentially eligible individuals, as well as other clients, about health services covered by Medi-Cal and how to access the health programs. Activities include a combination of oral and written informing methods that describe the range of services available through the Medi-Cal program and the benefits of preventive of remedial health care offered by the Medi-Cal program.

- Inform individuals, agencies, potential providers, and community groups about the CCS program using written and oral methods.
- Coordinate and participate in screening programs to facilitate identification of at-risk patient populations that are eligible for program services.
- Order, maintain, and distribute CCS/CMS program materials to families, community agencies, and health care providers.
- Inform and assist applicant/client and family in accessing other Medicaid program services, as related to the client's medical condition, such as Medi-Cal and EPSDT Supplemental Services.
- Identify barriers and assist the applicant/client, whose primary language is other than English, to secure medical services related to the client's medical condition.

Function 204 -Non-SPMP Intra/Interagency Coordination, Collaboration, and Administration.

This function is to be used by non-SPMP staff when performing activities that are related to program planning functions, including collaborative and intra/interagency coordination activities.

• Participate in coordination activities to develop the program in relation to other agencies such as Regional Centers, Medi-Cal field offices, local education agencies, public health agencies (including maternal, child, and adolescent health services), Medi-Cal Managed Care Programs, hospitals, and special care centers.

Function 205 - Program Specific Administration

This function is to be used by non-SPMP staff when performing activities that are related to program planning functions, including collaborative and intra/interagency coordination activities.

- Participate in multi-year planning to develop goals, objectives, activities, and evaluation tools in order to measure outcomes.
- Review CCS data and analyze and utilize in program-related needs assessments, program planning, and evaluation.
- Assist with developing, monitoring, and revising yearly budgets to implement program plan within program appropriations in accordance with CSM Plan and fiscal Guidelines.
- Recruit, orient, supervise, and evaluate Office Assistant personnel responsible for implementing the CCS program according to the Staffing Standards.
- Assure that CCS funded personnel perform only allowable functions, audit trail is maintained for all expenditures, and staff complete time studies a minimum of one month a quarter and retain on file.
- Develop and review program standards, regulations, policies, and procedures.
- Develop, maintain, and analyze management information system.
- Formulate and apply program administrative policies.
- Evaluate fiscal procedures related to the program.
- Prepare program-related reports, documents, and correspondence.
- Develop and distribute program specific information including procedure manuals and brochures.

Function 207 - Non-SPMP Training

This function to be used by all staff when training related to non-SPMP allowable administrative activities and to the medical care of clients.

- Participate in program-required and/or county, regional, and statewide workshop, meetings, and educational sessions relating to the scope of program benefits and changes in program management.
- Provide training and technical assistant to other agencies/programs that interface with the medical care needs of the applicant/client.
- Participate in training/education programs to improve the skill level of the individual staff member in meeting and serving the medical needs of the applicant/client.

Function 10 - Non-Program Specific General Administration

This function is to be used by all staff when performing non-program specific administrative activities that relate to multiple functions or to no specific, identifiable functions due to the general nature of the activities. It is also to be used to record any break time as well as time that may become overtime or earned compensatory or certified time off.

• Review departmental and unit procedures not related to program administration.

- Formulate and apply administrative policies.
- Evaluate fiscal procedures.
- Develop budgets and monitor use of program funds.
- Prepare reports, documents, and correspondence.
- Attend non-program related staff meetings.
- Direct recruitment, selection, and hiring process not program specific.
- Provide and attend non-program specific in-service orientation and other staff development activities.
- Provide general supervision of staff, including supervision of intern students.

Function 212 - Paid Time Off

• This function is to be used by all staff to record usage of paid leave, holiday, vacation, sick leave, etc.

Tehama County Health Services Agency Public Health Nursing Division Duty Statement Fiscal Year 2025-2026

Public Health Nurse III @ 2% FTE California Children's Services (CCS) Program

Activities based on Federal Financial Participation (FFP) function codes and activities.

Under the direct supervision of the Supervising PHN/CCS Administrator, the PHN III performs the following duties:

SPMP ACTIVITIES Use skilled professional medical expertise to:

Function 202 - SPMP Administrative Medical Case Management

This function is to be used only by SPMP when participating in medical reviews: assessing the necessity for, and types of, medical care associated with medical case management and case coordination activities required by individual Medi-Cal beneficiaries.

- Determine the medical rationale to ensure timely and appropriate medical follow-up.
- Collect and interpret information regarding the applicant/client's medical status and his/her needs for medical services; identify resources and referrals needed to support a patient's care in the home of his/her medical condition.
- Review literature and research articles to determine eligibility and/or benefits relating to a client's specific medical condition.
- Provide information on specialized medical program services available to medically high-risk children and their families.

Function 203 - SPMP Intra/Interagency Coordination, Collaboration, and Administration.

This function is to be used only by SPMP when performing collaborative activities that involve planning and resource development with other agencies, which will improve the cost effectiveness of the health care delivery system and improve availability of medical services

- Collaborate with groups of physicians, health department staff (e.g., public health nurses), CHDP, WIC, school nurses, hospital, and managed care professional staff to improve the availability and use of medical services.
- Provide CCS program consultation and technical assistance to the medical provider network, and other health care service providers.

Function 206 - SPMP Training

This function is to be used only when training is provided for or by SPMP and only when the training activities directly relate to the SPMP's performance of specifically allowable SPMP administrative activities.

- Develop, conduct and/or participate in training health care professionals on the program medical eligibility requirements and medical services, including but not limited to, physicians, registered nurses, medical social workers, physical therapists, occupational therapists, and dietitians, including Medi-Cal managed care plan providers.
- Develop, conduct, and/or participate in county, regional and state-conducted medical training sessions/meetings and include those Managed Care providers under contract with Medi-Cal.
- Attend professional education programs relevant to the role of the medical professional and/or to medical administration of the program(s).

Function 208 - SPMP Program Planning and Policy Development

This function is to be used only for SPMP and only when performing program planning and policy development activities. The SPMP's tasks must officially involve program planning and policy development, and those tasks must be identified in the employee's position description/duty statement.

- Develop medical procedures and protocols for the delivery and coordination of CCS services.
- Inform individual providers of medical responsibilities necessary to achieve and maintain CCS panel status.
- Develop educational resources regarding CCS services and benefits for use by patients/families, providers, and community agencies.
- Develop and review medically related regulations, policies and procedures, and other health care services standards.
- Interpret CCS program standards and policy letters to physicians and other health care professionals.

Function 209 - SPMP Quality Management

This function is to be used only by SPMP and only when performing quality management activities such as monitoring the authorization for medical services (utilization review) process, ongoing program assessment and evaluation, and the development of standards and protocols.

• Conduct medical data analysis to determine adequacy and effectiveness of current standards/practice, identify gaps in services, problems with utilization of resources, need for services/benefits not currently available, etc.

- Perform county, regional and state program reviews; evaluate performance, attainment of goals/objectives, measure outcomes, etc.
- Develop and utilize criteria to assess services of the MTU.

NON-SPMP ACTIVITIES

Function 201 – Outreach

This function is to be used by all staff when performing activities that inform Medi-Cal eligible or potentially eligible individuals, as well as other clients, about health services covered by Medi-Cal and how to access the health programs. Activities include a combination of oral and written informing methods that describe the range of services available through the Medi-Cal program and the benefits of preventive of remedial health care offered by the Medi-Cal program.

- Inform individuals, agencies, potential providers, and community groups about the CCS program using written and oral methods.
- Coordinate and participate in screening programs to facilitate identification of at-risk patient populations that are eligible for program services.
- Order, maintain, and distribute CCS/CMS program materials to families, community agencies, and health care providers.
- Inform and assist applicant/client and family in accessing other Medicaid program services, as related to the client's medical condition, such as Medi-Cal and EPSDT Supplemental Services.
- Identify barriers and assist the applicant/client, whose primary language is other than English, to secure medical services related to the client's medical condition.

Function 204 -Non-SPMP Intra/Interagency Coordination, Collaboration, and Administration.

This function is to be used by non-SPMP staff when performing activities that are related to program planning functions, including collaborative and intra/interagency coordination activities.

 Participate in coordination activities to develop the program in relation to other agencies such as Regional Centers, Medi-Cal field offices, local education agencies, public health agencies (including maternal, child, and adolescent health services), Medi-Cal Managed Care Programs, hospitals, and special care centers.

Function 205 - Program Specific Administration

This function is to be used by non-SPMP staff when performing activities that are related to program planning functions, including collaborative and intra/interagency coordination activities.

- Participate in multi-year planning to develop goals, objectives, activities, and evaluation tools in order to measure outcomes.
- Review CCS data, and analyze and utilize in program-related needs assessments, program planning, and evaluation.

- Develop, monitor, and revise yearly budgets to implement program plan within program appropriations in accordance with CSM Plan and fiscal Guidelines.
- Orient personnel responsible for implementing the CCS program according to the Staffing Standards.
- Develop and review program standards, regulations, policies, procedures, and health-related educational materials.
- Develop, maintain, and analyze management information system.
- Review literature and research articles to apply up-to-date knowledge in delivery of health care services.
- Analyze and/or review program-related legislation.
- Formulate and apply program administrative policies.
- Evaluate fiscal procedures related to the program.
- Prepare program-related reports, documents, and correspondence.
- Develop and distribute program specific information including procedure manuals and brochures.

Function 207 - Non-SPMP Training

This function to be used by all staff when training related to non-SPMP allowable administrative activities and to the medical care of clients.

- Participate in program-required and/or county, regional, and statewide workshop, meetings, and educational sessions relating to the scope of program benefits and changes in program management.
- Provide training and technical assistant to other agencies/programs that interface with the medical care needs of the applicant/client.
- Participate in training/education programs to improve the skill level of the individual staff member in meeting and serving the medical needs of the applicant/client.

Function 10 - Non-Program Specific General Administration

This function is to be used by all staff when performing non-program specific administrative activities that relate to multiple functions or to no specific, identifiable functions due to the general nature of the activities. It is also to be used to record any break time as well as time that may become overtime or earned compensatory or certified time off.

- Review departmental and unit procedures not related to program administration.
- Formulate and apply administrative policies.
- Prepare reports, documents, and correspondence.
- Analyze and/or review legislation.
- Review literature and research articles.
- Attend non-program related staff meetings.
- Provide and attend non-program specific in-service orientation and other staff development activities.

Function 212 - Paid Time Off

• This function is to be used by all staff to record usage of paid leave, holiday, vacation, sick leave, etc.

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:	County/City:			Fiscal Year: 2025-2026		
Title or Name of MOU/IAA	Title or Name of MOU/IAA Is this a MOU or an IAA? Effective Dates (From / To) County/City		Name of Person Responsible for This MOU/IAA?	Did This MOU/IAA Change? (Yes or No)		
CCS/Partnership Health Plan	MOU	10/01/2025-09/30/2028		Jayme Bottke, TCHSA Executive Director	Yes	
CCS/Blue Cross	MOU	3/20/99 - ongoing		Jayme Bottke, TCHSA Executive Director	No	
CCS/VSP	MOU	1999 – ongoing		Jayme Bottke, TCHSA Executive Director	No	
CCS/SRO/Health Net	MOU	7/03/03 – ongoing		Jayme Bottke, TCHSA Executive Director	No	
CCS/Delta Dental	MOU	12/21/98 – ongoing		Jayme Bottke, TCHSA Executive Director	No	
CCS/Premier Access	MOU	12/28/98 – ongoing		Jayme Bottke, TCHSA Executive Director	No	
CCS/EyeMed Vision Care	MOU	1/10/96 – ongoing		Jayme Bottke, TCHSA Executive Director	No	
CCS/Blue Shield of CA	MOU	07/2000 – ongoing		Jayme Bottke, TCHSA Executive Director	No	

State of California – Health and Human Services Agency Revised 3/6/24

Revised 3/0/24		
CCS CASELOAD	Actual Caseload	Percent of Total CCS Caseload
STRAIGHT CCS - Total Cases of Open (Active) Straight CCS Children	78	15.12%
OTLICP - Total Cases of Open (Active) OTLICP Children	53	10.27%
MEDI-CAL - Total Cases of Open (Active) Medi-Cal (non-OTLICP) Children	385	74.61%
TOTAL CCS CASELOAD	516	100%



CCS Administrative Budget Summary

Fiscal Year:	2025-26	
County:	Tehama	

×	Col 1 = Col 2+3+4	Straight CCS	itraight CCS OTLICP Medi-Cal (non-C	Medi-Cal (non-OTLICP) (Column 4 = Columns 5 + 6)		
Column	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)	Modi-Cal State/Federal	Enhanced Medi-Cal State/Federal (25/75)	Non-Enhanced Medi- Cal State/Federal (50/50)
I. Total Personnel Expense	208,114	31,459	21,376	155.280	79,167	76,113
II. Total Operating Expense	10,767	1,628	1,107	8.034	169	7,865
III. Total Capital Expense	0	0	0	0		0
IV. Total Indirect Expense	52,028	7,865	5,344	38,819		38,819
V. Total Other Expense	0	0	0	0		0
Budget Grand Total	270,909	40,952	27,827	202,133	79,336	122,797

	Col 1 = Col 2+3+4	Straight CCS	OTLICP	Medi-Cal (non-OTLICP) (Column 4 = Columns 5 + 6		
Column	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	20,475	20,475				
County	20,475	20,475				
OTLICP		-				
State	4,870		4,870			
County	4,870		4,870			
Federal (Title XXI)	18,087		18,087			
Medi-Cal						
State	81,232			81.232	19,834	61,398
Federal (Title XIX)	120,900			120.900	59,502	61,398

Ke Oo But	Kelly Burton, SPHN	kelly.burton@tchsa.net
Prepared By (Signature)	Prepared By (Printed Name)	Email Address
Koo But	Kelly Burton, SPHN	kelly.burton@tchsa.net
CCS Administrator (Signature)	CCS Administrator (Printed Name)	Email Address

Revised 3/6/24		
CCS CASELOAD	Actual Caseload	Percent of Total CCS Caseload
STRAIGHT CCS - Total Cases of Open (Active) Straight CCS Children	78	15.12%
OTLICP - Total Cases of Open (Active) OTLICP Children	53	10.27%
MEDI-CAL - Total Cases of Open (Active) Medi-Cal (non-OTLICP) Children	385	74.61%
TOTAL CCS CASELOAD	516	100%

CCS Administrative Budget Worksheet

Fiscal Year:	2025-26	_
County:	Tehama	



					aight CCS Optional Targeted Low Income Children's Program (OTLICP) Medi-Cal (Non-OTLICP)								
Column	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 (OTLICP) Co/State/Fed (17.5/17.5/65)	Caseload %	Medi-Cal State/Federal	Enhanced % FTE	Enhanced Medi-Cal State/Federal (25/75)	Non- Enhanced % FTE	Non-Enhanced Medi-Cal State/Federal (50/50)
ersonnel Expense	8												
Program Administration			1 1 1/ 1/										
Kelly Burton, SPHN	2.00%	112,403	2,248	15.12%	340	10.27%	231	74.61%	1,677		1	100.00%	1,677
2. Marilyn Kunz, BOS	10.00%	59,486	5,949	15.12%	899	10.27%	611	74.61%	4,439			100.00%	4,439
3. Employee Name, Position	0.00%	0	0	15.12%	0	10.27%	0	74,61%	0		N- V- I-	100,00%	
4. Employee Name, Position	0.00%	0	0	15.12%	0	10.27%	0	74,61%	0			100,00%	
5. Employee Name, Position	0.00%	0	0	15.12%	0	10.27%	0	V-	0			100.00%	
Subtotal		171,889	8,197		1,239		842		6,116				6,116
Medical Case Management							1000			THE WORLD			
Sharon Atkinson, PHN II	48.00%	90,154	43,274	15.12%	6,541	10.27%	4,445	74.61%	32,288	95.00%	30,674	5.00%	1,614
2. Kelly Burton, SPHN	18.00%	112,403	20,233	15.12%	3,058	10.27%	2,078	74.61%	15,096	95.00%	14,341	5.00%	755
3. Arny Condie, Public Health Nurse III	2.00%	111,488	2,230	15.12%	337	10.27%	229	74.61%	1,664	95.00%	1,581	5.00%	8:
Employee Name, Position	0.00%	0	0	15.12%	0	10.27%	0	74.61%	0	0.00%	0	100.00%	
5. Employee Name, Position	0.00%	0	0	15.12%	0	10.27%	0	74.61%	0	0.00%	0	100.00%	
6. Employee Name, Position	0.00%	0	0	15.12%	0	10.27%	0	74.61%	0	0.00%	0	100,00%	
7. Employee Name, Position	0.00%	0	0	15.12%	0	10.27%	0	74.61%	0	0.00%	0	100.00%	
8. Employee Name, Position	0.00%	0	0	15.12%	0	10.27%	0	74.61%	0	0.00%	0	100.00%	(
Subtotal	The service of the	314,045	65,737		9,936		6,752		49,048		46,596		2,452
Other Health Care Professionals				107 (01)									
1. Employee Name, Position	0.00%	0	0	15.12%	0	10.27%	0	74.61%	0	0.00%	0	100.00%	
2. Employee Name, Position	0.00%	0	0	15.12%	0	10.27%	0	74.61%	0	0.00%	0	100.00%	
3. Employee Name, Position	0.00%	0	0	15.12%	0	10.27%	0	74.61%	0	0.00%	0	100.00%	
Subtotal		0	0		0	7-11-1	0		0		0		
Ancillary Support		1 13/9						1736					1-07
Rene Morrow, OA III	38.00%	55,180	20,968	15.12%	3,170	10.27%	2,154	74.61%	15,645			100.00%	15,645
2. Employee Name, Position	0.00%	0	0	15.12%	0	10.27%	0	74.61%	0	11/4		100.00%	
3. Employee Name, Position	0.00%	0	0	15.12%	0	10.27%	0	74.61%	0			100,00%	
Employee Name, Position	0.00%	0	0	15.12%	0	10.27%	0	74.61%	0			100.00%	
5. Employee Name, Position	0.00%	0	0	15.12%	0	10.27%	0	74.61%	0	- 1		100.00%	
Subtotal		55,180	20,968		3,170	7 10 1	2,154		15,645				15,645
Clerical and Claims Support													
Rene Morrow, OA III	50.00%	55,180	27,590	15.12%	4,171	10.27%	2,834	74.61%	20,586	0.00%	0	100.00%	20,586
2. Employee Name, Position	0.00%	0	0	15.12%	0	10.27%	0	74.61%	0	0.00%	. 0	100.00%	
3. Employee Name, Position	0.00%	0	0	15.12%	0	10.27%	0	74.61%	0	0.00%	0	100.00%	
4. Employee Name, Position	0.00%	0	0	15.12%	0	10.27%	0	74.61%	0	0.00%	0	100.00%	
5. Employee Name, Position	0.00%	0	0	15,12%	0	10.27%	0	74.61%	0	0.00%	0	100.00%	
Subtotal		55.180	27,590		4,171		2.834		20.586	1	0	* - *	20,586

CCS CASELOAD	Actual Caseload	Percent of Total CCS Caseload	
STRAIGHT CCS - Total Gases of Open (Active) Straight CCS Children	78	15.12%	
OTLICP - Total Cases of Open (Active) OTLICP Children	53	10.27%	
MEDI-CAL - Total Cases of Open (Active) Medi-Cal (non-OTLICP) Children	385	74.61%	
TOTAL CCS CASELOAD	516	100%	

CCS Administrative Budget Worksheet

Fiscal Year:	2025-26	_
County:	Tehama	



					Stra	ight CCS		argeted Low Income s Program (OTLICP)			Medi-Cal	(Non-OTLICP)		
Column		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 (OTLICP) Co/State/Fed (17.5/17.5/65)	Caseload %	Medi-Cal State/Federal	Enhanced % FTE	Enhanced Medi-Cal State/Federal (25/75)	Non- Enhanced % FTE	Non-Enhanced Medi-Cal State/Federal (50/50)
Total Salaries and Wages				122,492	15.12%	18,516	10.27%	12,582	74.61%	91,395	50.98%	46,596	49.02%	44,799
Staff Benefits (Specify %)	69.90%			85,622	15.12%	12,943	10.27%	8,794	74.61%	63,885		32,571		31,314
I. Total Personnel Expense		100	WHO:	208,114	15.12%	31,459	10.27%	21,376	74.61%	155,280		79,167		76,113
II. Operating Expense														
1. Travel			2-211	245	15.12%	37	10.27%	25	74.61%	183	50.98%	93	49.02%	90
2. Training			100000	200	15.12%	30	10.27%	21	74.61%	149	50,98%	76	49.02%	73
3. Communications				849	15.12%	128	10.27%	87	74.61%	633			100.00%	633
4. Facilities				2,663	15.12%	403	10.27%	274	74.61%	1,987			100.00%	1,987
5. Office				4,630	15.12%	700	10.27%	476	74.61%	3,455			100.00%	3,455
6. Professional			1501	2,180	15.12%	330	10.27%	224	74.61%	1,627			100.00%	1,627
7. Spec Dept					15.12%	0	10.27%	0	74.61%	0			100.00%	0
II. Total Operating Expense		15/8/34		10,767		1,628		1,107	LL Y	8,034		169		7,865
III. Capital Expense													Trade A	
1.					15.12%	0	10.27%	0	74.61%	0				0
2.					15,12%	0	10.27%	0	74.61%	0				0
3.			I DECE		15.12%	0	10.27%	0	74.61%	0				0
III. Total Capital Expense				0	1000	0		0		0	A THE		THE RESIDENCE	0
IV. Indirect Expense													TO STATE	
Indirect Cost Rate	25.00%			52,028	15.12%	7,865	10.27%	5,344	74.61%	38,819		Q	100.00%	38,819
			ec III i	0	15.12%	0	10.27%	0	74.61%	0			100.00%	0
IV. Total Indirect Expense		U. III		52,028		7,865	1000	5,344		38,819				38,819
V. Other Expense			H 1 1 1 1								100	in the vari		
Maintenance & Transportation		Day Market	III WILL	0	15.12%	0	10.27%	0	74.61%	0			100.00%	0
2.		0 1 W T	7000		15.12%	0	10,27%	0	74.61%	0			100.00%	0
3.		Ye N			15.12%	0	10.27%	0	74.61%	0			100,00%	0
4.					15.12%	0	10.27%	0	74.61%	0			100.00%	0
5.					15.12%	0	10.27%	0	74.61%	0			100.00%	0
V. Total Other Expense				0	- 2/1	0		0		0				0
Budget Grand Total				270,909		40,952		27,827		202,133		79,336		122,797

Kell Dull	Kelly Burton, SPHN	3119105	530-527-6824	
Prepared By (Signature)	Prepared By (Printed Name)	Date Prepared	Phone Number	
LeliBuil	Kelly Burton, SPHN	8/19/25	530-527-6824	
CCS Administrator (Signature)	CCS Administrator (Printed Name)	Date Signed	Phone Number	

Oliolas

Tehama County CCS Program Budget Narrative Fiscal Year 2025-2026

I. PERSONNEL EXPENSES		JUSTIFICATION
Total Salaries:	\$122,492	
Total Benefits:	\$85,622	Benefits are based on actual cost projections.
Total Personnel Expenses:	\$208,114	
Supervising PHN Burton 20% FTE	\$22,481	The Supervising PHN acts as the CCS Administrator. She provides direct staff supervision and overall program direction.
Business Operations Supervisor Kunz 10%	\$5,949	The Business Operations Supervisor provides direct staff supervision for Office Assistant Staff.
PHN III Condie 2%	\$2.230	The PHN III assists with Program Policies and Procedures and Quality Assurance reporting.
PHN II Atkinson 48% FTE	\$43,274	The PHN II is responsible for the medical case management activities.
Office Assistant III Morrow 88% FTE	\$48,558	The OA III provides clerical, financial eligibility and claim support, and bilingual services for the program.

II. OPERATING EXPENSES		
Travel	\$245	Includes travel for statewide/regional trainings and
		meetings and local travel to providers, schools, county
		offices and home visits.
Training	\$200	Includes registration and CEU fees for trainings.
Communications	\$849	Costs for long distance and cellular charges and a
		percentage of charges for local use, based on total FTE's
		in program.
Facilities	\$2,663	Costs for necessary repair and maintenance of the
		building. Based on actual costs and total FTEs. Includes
		refuse disposal, janitorial, towels, tissues, soap and is
		based on actual costs and FTE's. Rent charges for the
		Fiscal/Data Administrative Building and the Corning
		office site. Based on actual costs and total FTE's. Charges
		for electricity and natural gas: based on actual costs and
		total FTE's.
Office	\$4,630	Includes secretarial and office supplies, printing,
		stationary, envelopes, and Xerox charges. Spreads based
		on program FTEs. Includes charges for fax machine,
		postage meter and postage and is budgeted based on actual
		usage from the previous FY.
Professional	\$2,180	Costs for Microsoft license, software and computer
	ĺ	support and annual maintenance costs. Costs are based on

		total FTEs. Also includes costs associated with
		fingerprints and the physical examination required for
		County employment of new staff. The amount is based on
		anticipated program costs. Does not include any
		insurance costs associated with Public Health clinics.
		Charges are based on actual costs and total FTEs.
Special Departmental	\$0	
Total Operating Expenses:	\$10,767	
III. CAPITAL EXPENSES		
Total Capital Expenses:	\$0	No capital expenses are requested.

IV. INDIRECT EXPENSES		
A. Internal @ 25 %	\$52,028	Costs charged by the Tehama County Health Services Agency for indirect administrative costs. Estimated cost based on program salaries and actual costs from the previous FY.
B. External @ 0%	\$0	Costs charged by the auditor including equipment use, professional county services such as personnel, auditor, treasurer, and county clerk. Estimated cost based on program salaries and actual costs from the previous FY.
Total Indirect Expenses:	\$52,028	

V. OTHER EXPENSES		
Total Other Expenses:	\$0	
BUDGET GRAND TOTAL	\$270,909	