DHCS 1822 A (02/19)

Annual Mental Health Services Act (MHSA) Revenue and Expenditure Report

Fiscal Year: 2022-2023 Information Worksheet

1	Date:	5/8/2024
2	ARER Fiscal Year (20YY-YY):	2022-2023
3	County:	Inyo
4	County Code:	14
5	Address:	1360 North Main Street, Suite 124
6	City:	Bishop
7	Zip:	93514
8	County Population: Over 200,000? (Yes or No)	No
9	Name of Preparer:	Joey Petetrson
10	Title of Preparer:	Administrative Analyst III
11	Preparer Contact Email:	joey.peterson@inyocounty.us
12	Preparer Contact Telephone:	760-878-0246

DHCS 1822 B (02/19)
Annual Mental Health Services Act (MHSA) Revenue and Expenditure Report

Fiscal Year: 2022-2023

Component Summary Worksheet

County:	Inyo	Date:	5/8/2024

		Α	В	С	D	E	F
SECTION 1 :	: Interest	CSS	PEI	INN	WET	CFTN	TOTAL
1	Component Interest Earned	\$7,359.05	\$1,839.76	\$484.15			\$9,682.96
2	Joint Powers Authority Interest Earned						\$0.00

		Α	В	С
SECTION 2	: Prudent Reserve	CSS	PEI	TOTAL
3	Local Prudent Reserve Beginning Balance			\$416,717.69
4	Transfer from Local Prudent Reserve			\$0.00
5	CSS Funds Transferred to Local Prudent Reserve	\$0.00		\$0.00
6	Local Prudent Reserve Adjustments			\$0.00
7	Local Prudent Reserve Ending Balance			\$416,717.69

		Α	В	С	D	E	F
SECTION 3: CSS Transfers to PEI, WET, CFTN, or Prudent Reserve		CSS	PEI	WET	CFTN	PR	TOTAL
8	Transfers	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

		Α	В	С	D	E	F
SECTION 4: Program Expenditures and Sources of Funding		CSS	PEI	INN	WET	CFTN	TOTAL
9	MHSA Funds	\$1,291,601.83	\$443,708.00	\$0.00	\$3,960.00	\$85,636.17	\$1,824,906.00
10	Medi-Cal FFP	\$1,292,035.69	\$0.00	\$0.00	\$0.00	\$0.00	\$1,292,035.69
11	1991 Realignment	\$645,495.00	\$0.00	\$0.00	\$0.00	\$0.00	\$645,495.00
12	Behavioral Health Subaccount	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
13	Other	\$41,040.00	\$0.00	\$0.00	\$0.00	\$0.00	\$41,040.00
14	TOTAL	\$3,270,172.52	\$443,708.00	\$0.00	\$3,960.00	\$85,636.17	\$3,803,476.69

		A
SECTION 5:	Miscellaneous MHSA Costs and Expenditures	TOTAL
15	Total Annual Planning Costs	\$0.00
16	Total Evaluation Costs	\$0.00
17	Total Administration	\$141,190.52
18	Total WET RP	
19	Total PEI SW	\$0.00
20	Total MHSA HP	
21	Total Mental Health Services For Veterans	\$412.92

Department of Health Care Services

DHCS 1822 C (02/19)
Annual Mental Health Services Act (MHSA) Revenue and Expenditure Report
Fiscal Year: 2022-2023
Community Services and Supports (CSS) Summary Worksheet

County: Inyo Date: 5/8/2024

SECTION ONE

		A	В	C	D	E	F
		Total MHSA Funds (Including Interest)	Medi-Cal FFP	1991 Realignment	Behavioral Health Subaccount	Other	Grand Total
1	CSS Annual Planning Costs						\$0.00
2	CSS Evaluation Costs						\$0.00
3	CSS Administration Costs	\$70,595.26					\$70,595.26
4	CSS Funds Transferred to JPA						\$0.00
5	CSS Expenditures Incurred by JPA						\$0.00
6	CSS Funds Transferred to CalHFA						\$0.00
7	CSS Funds Transferred to PEI						\$0.00
8	CSS Funds Transferred to WET						\$0.00
9	CSS Funds Transferred to CFTN						\$0.00
10	CSS Funds Transferred to PR						\$0.00
11	CSS Program Expenditures	\$1,221,006,57	\$1,292,035,69	\$645,495.00	\$0.00	\$41,040,00	\$3,199,577,26
12	Total CSS Expenditures (Excluding Funds Transferred to JPA)	\$1,291,601.83	\$1,292,035.69	\$645,495.00	\$0.00	\$41,040.00	\$3,270,172.52
13	Total CSS Expenditures (Excluding Funds Transferred to JPA, PEI, WET, CFTN and PR)	\$1,291,601,83	\$1,292,035,69	\$645,495,00	\$0.00	\$41,040.00	\$3,270,172,52

SECT										
1	A	В	C	D	E	F	G	н		
	County Code	Program Name	Prior Program Name	Program Type	Total MHSA Funds (Including Interest)	Medi-Cal FFP	1991 Realignment	Behavioral Health Subaccount	Other	Grand Total
14		System Transformation		FSP	\$312,406.57	\$1,292,035,69	\$845,495,00	\$0.00	\$41,040,00	
15 16	14 14	General System Development (80%)		Non-FSP	\$499.730.00					\$499.730.00
16	14	Outreach & Engagement (20%)		Non-FSP	\$408.870.00					\$408.870.00
17										\$0.00 \$0.00
18 19										\$0.00
20										\$0.00
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22										\$0.00
22 23 24										\$0.00 \$0.00
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25 26 27										\$0.00
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STATE OF CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY Department of Health Care Services

CHCS 1932 000799 Min Services Act (MHSA) Revenue and Expenditure Report Fiscal Ver. 2022-2023 Personation and Expenditure Report Prevention and Expenditure Report Prevention and Expenditure Report Prevention and Expenditure Report Re

Date: 5/8/2024

		A	В	C	D	E	F
		Total MHSA Funds (Including Interest)	Medi-Cal FFP	1991 Realignment	Behavioral Health Subaccount	Other	Grand Total
- 1	PEI Annual Planning Costs						\$0.00
2	PEI Evaluation Costs						\$0.00
3	PEI Administration Costs	\$70.595.26					\$70.595.26
4	PEI Funds Expended by CalMHSA for PEI Statewide						\$0.00
	PEI Funds Transferred to JPA						\$0.00
6	PEI Expenditures Incurred by JPA						\$0.00
7	PEI Program Expenditures	\$373.112.74	\$0.00	\$0.00	\$0.00	\$0.00	\$373.112.74
8	Total PEI Expenditures (Excluding Transfers and PEI Statewide)	\$443,708.00	\$0.00	\$0.00	\$0.00	\$0.00	\$443,708.00

		A	В
		Percent Expended for Clients Age 25 and Under, All PEI	Percent Expended for Clients Age 25 and Under, JPA
9	MHSA PEI Fund Expenditures in Program to Clients Age 25 and Under (calculated from weighted program values) divided by Total MHSA PEI Expenditures		

SECTION THREE

	A	В	C	D	E	F	G	Н	-	J	K	L	М	N	0
							Subtotal	Percent of PEI Expended on Clients Age 25 & Under (Standalone and Program Activities in Combined							
						Program Activity	Subtotal	Clients Age 25 & Under	Percent of PEI Expended on	Total MHSA Funds			Behavioral Health		
	County Code	Program Name	Prior Program Name	Combined/Standalone Program	Program Type	Name (in	Percentage for	(Standalone and Program	Clients Age 25 & Under	Total MHSA Funds	Medi-Cal FFP	1991 Realignment	Behavioral Health	Other	Grand Total
		· -				Program Activity Name (in Combined Program)	Percentage for Combined Program	Activities in Combined	Clients Age 25 & Under (Combined Summary and Standalone)	(Including Interest)			Subaccount		
						Program)	Program	Program)	Standalone)						
10	14	PEI Programs-Prevention		Standalone	Access and Linkage		100%	0%	0.0%	\$33,563,06					\$33,563,06
- 11	14	Families Intensive Response Strengthening Team (FIRST)		Standalone											
	14	Team (FIRST)	PEI-Proamas-Early Intervention	Standalone	Early Intervention		100%	100%	100.0%	\$125.043.92					\$125.043.92
12	14	North Star Counseling (school based)	PEI-Proamas-Early Intervention	Standalone	Early Intervention		100%	100%	100.0%	\$23.061.17					\$23.061.17
13	14	Parent-Child Interaction Therapy (PCIT) Community Collaboration	PEI-Progmas-Early Intervention	Standalone	Early Intervention		100%	100%	100.0%	\$0.00					\$0.00
- 10	14	Access and Linkages	PEI-PTOGITMO-EMIN ITEMPRETRICH	Standalone	Access and Linkage		100%	25%	25.0%	\$191.444.59					50.00
10	14	Access and Linkabes		Standarding	ACCESS AND LEWADE		100%	23%	25.0%	\$191,444.59					\$191,444,59
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Page 4 of 10

STATE OF CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY

DHCS 1822 E (02/19)
Annual Mental Health Services Act (MHSA) Revenue and Expenditure Report Fiscal Year: 2022-2023 Innovation (INN) Summary Worksheet

County: Inyo Date: 5/8/2024

SECTION ONE

		A	В	C	D	E	F
		Total MHSA Fund (Including Interest)	Medi-Cal FFP	1991 Realignment	Behavioral Health Subaccount	Other	Grand Total
- 1	INN Annual Planning Costs						\$0.00
2	INN Indirect Administration						\$0.00
3	INN Funds Transferred to JPA						\$0.00
4	INN Expenditures Incurred by JPA						\$0.00
5	INN Project Administration	\$0.00	\$0.00	\$0.00			
6	INN Project Evaluation	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
7	INN Project Direct	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
8	INN Project Subtotal	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	Total Innovation Expenditures (Excluding Transfers to JPA)						

SECTI	ON TWO													
		A	В	c	D	E	F	G	н			К		M
#		County Code	Project Name	Prior Project Name	Project MHSOAC Approval Date	Project Start Date	MHSOAC-Authorized MHSA INN Project Budget	Amended MHSOAC- Authorized MHSA INN Project Budget	Project Expenditure Type	Total MHSA Funds (Including Interest)	Medi-Cal FFP	1991 Realignment	Behavioral Health Subaccount	Other
10 10	A B								Project Administration					
10	C								Project Evaluation Project Direct					
10	D								Project Subtotal	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
11	A													
11	B C													
11	Ď									\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
12	A													
12	B C													
12 12	Ď									\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
13	A													
13	B C													
13	Ď									\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
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	B C													
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15	A									80.00	30.00	****	50.00	
15	В													
15 15	D									\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
16	A									\$0.00	\$0.00	20.00	30.00	80.00
16	В													
16 16	D									\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
17	Α									\$0.00	\$0.00	\$0.00	\$0.00	90.00
17	В													
17	C D									\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
18	Α									\$0.00	\$0.00	\$0.00	\$0.00	90.00
18	В													
18	C D									\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
19										\$0.00	\$0.00	\$0.00	\$0.00	90.00
19	A B													
19	C													
19 20	D A									\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
20	В													
20	C													
	D									\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
21	A B													
21	C													
21	D									\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	A B													
22	C													
22	D									\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
23 23	A.													
23	C													
23	D									\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
24	A B													
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24 24 24	D									\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
25	A.													
25 25	C													
25 25	Ď									\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
26	A													
26 26	B C													
26	D									\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
27	A													
	B C													
27 27	D									\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
28	A													
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	D									\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
29	Α													
29 29	B									l				
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30	Α											,,,,,,	70.00	
30	В													
30 30	C D									\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
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31	В													
31 31	C D									\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
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DHCS 1822 F (02/19)

Annual Mental Health Services Act (MHSA) Revenue and Expenditure Report

Fiscal Year: 2022-2023

Workforce Education and Training (WET) Summary Worksheet

County: Inyo Date: 5/8/2024

SECTION ONE

		A	В	С	D	E	F
		Total MHSA Funds (Including Interest)	Medi-Cal FFP	1991 Realignment	Behavioral Health Subaccount	Other	Grand Total
1	WET Annual Planning Costs						\$0.00
2	WET Evaluation Costs						\$0.00
3	WET Administration Costs						\$0.00
4	WET Funds Transferred to JPA						\$0.00
5	WET Expenditures Incurred by JPA						\$0.00
6	WET Program Expenditures	\$3,960.00	\$0.00	\$0.00	\$0.00	\$0.00	\$3,960.00
7	Total WET Expenditures (Excluding Transfers to JPA)	\$3,960.00	\$0.00	\$0.00	\$0.00	\$0.00	\$3,960.00

	Α	В	С	D	Е	F	G	Н
#	County Code	Funding Category	Total MHSA Funds (Including Interest)	Medi-Cal FFP	1991 Realignment	Behavioral Health Subaccount	Other	Grand Total
8		Workforce Staffing						\$0.00
9	14	Training/Technical Assistance	\$3,960.00					\$3,960.00
10		Mental Health Career Pathways						\$0.00
11		Residency/Internship						\$0.00
12		Financial Incentive						\$0.00

DHCS 1822 G (02/19)
Annual Mental Health Services Act (MHSA) Revenue and Expenditure Report

Fiscal Year: 2022-2023

Capital Facility Technological Needs (CFTN) Summary Worksheet

Date: County: Inyo 5/8/2024

SECTION ONE

		A	В	С	D	Е	F
		Total MHSA Funds (Including Interest)	Medi-Cal FFP	1991 Realignment	Behavioral Health Subaccount	Other	Grand Total
1	CFTN Annual Planning Costs						\$0.00
2	CFTN Evaluation Costs						\$0.00
3	CFTN Administration Costs						\$0.00
4	CFTN Funds Transferred to JPA						\$0.00
5	CFTN Expenditures Incurred by JPA						\$0.00
6	CFTN Project Expenditures	\$85,636.17	\$0.00	\$0.00	\$0.00	\$0.00	\$85,636.17
7	Total CFTN Expenditures (Excluding Transfers to JPA)	\$85,636.17	\$0.00	\$0.00	\$0.00	\$0.00	\$85,636.17

	Α	В	С	D	Е	F	G	Н	I	J
#	County Code	Project Name	Prior Project Name	Project Type	Total MHSA Funds (Including Interest)	Medi-Cal FFP	1991 Realignment	Behavioral Health Subaccount	Other	Grand Total
8	14	EHR System		Technological Need	\$85,636.17					\$85,636.17
9										\$0.00
10										\$0.00
11										\$0.00
12										\$0.00 \$0.00
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STATE OF CALIFORNIA

HEALTH AND	D HUMAN SERVICES AGENCY	

DHCS 1822 H (02/19)
Annual Mental Health Services Act (MHSA) Revenue and Expenditure Report Fiscal Year: 2022-2023

MHSA Adjustments Worksheet

ounty:	Inyo	Date	5/8/2024

SECTION ONE

	Α	В	С	D	E	F
#	County	Account	Adjustment Type	Adjustment to Fiscal Year	Amount	Reason
1						
2						
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Department of Health Care Services

SECTION TWO

			С	-	-
	Α.	В		D	E
#	County Code	Account	Adjustment to Fiscal Year	Amount	Reason
31		Prudent Reserve			
32		Prudent Reserve			
33		Prudent Reserve			
34		Prudent Reserve			
35		Prudent Reserve			
36		Prudent Reserve			
37		Prudent Reserve			
38		Prudent Reserve			
39		Prudent Reserve			
40		Prudent Reserve			
41		Prudent Reserve			
42		Prudent Reserve			
43		Prudent Reserve			
44		Prudent Reserve			
45		Prudent Reserve			
46		Prudent Reserve			
47		Prudent Reserve			
48		Prudent Reserve			
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60		Prudent Reserve			

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STATE OF CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY

Department of Health Care Services

DHCS 1822 I (02/19)

Annual Mental Health Services Act (MHSA) Revenue and Expenditure Report Fiscal Year: 2022-2023

FFP Revenue Adjustment Worksheet

County: Inyo

Date: 5/8/2024

SECTION ONE

	Α	В	С	D	E	F	G
#	County	Adjustment to FY	Cost Report Stage	Account	Beginning Balance	Adjustment Amount	Ending Balance
1			J				\$0.00
2							\$0.00
3							\$0.00
4							\$0.00
5							\$0.00
6							\$0.00
7							\$0.00
8							\$0.00
9							\$0.00
10							\$0.00
11							\$0.00
12							\$0.00
13							\$0.00
14							\$0.00
15							\$0.00
16							\$0.00
17							\$0.00
18							\$0.00
19							\$0.00
20							\$0.00
21							\$0.00
22							\$0.00
23							\$0.00
24							\$0.00
25							\$0.00
26							\$0.00
27							\$0.00
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30							\$0.00
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32							\$0.00
33							\$0.00
34							\$0.00
35							\$0.00
36							\$0.00
37							\$0.00
38							\$0.00
39							\$0.00
40							\$0.00

DHCS 1822 J (02/19)
Annual Mental Health Services Act (MHSA) Revenue and Expenditure Report

Fiscal Year: 2022-2023 **Comments Worksheet**

County: Inyo

5/8/2024 Date:

	А	В	С
#	Account	Fiscal Year	Comments
1			
2			
3			
4			
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