

## PRUDENT RESERVE ASSESSMENT

Per recent changes in state law, Alpine County Behavioral Health Services (ACBHS) is now obligated to maintain its MHSa Prudent Reserve funding levels at no more than 33% of the average CSS allocations received in the preceding five (5) years.

ACBHS is required to reassess this Prudent Reserve maximum level every five (5) years. During each assessment, if Prudent Reserve funding levels are found to exceed the current maximum level, ACBHS is required to transfer the excess Prudent Reserve funding from the Prudent Reserve to CSS.

ACBHS conducted a Prudent Reserve Assessment on October 7, 2019, which indicated that Prudent Reserve funding exceeded the maximum level; and a transfer of over \$222,000 was required. However, at the request of the California Department of Health Care Services, a corrected assessment was conducted on May 12, 2020 with updated balances. As a result, in FY 2019/20, ACBHS is now required to transfer a total of **\$237,768** from Prudent Reserve to CSS.

The corrected Prudent Reserve assessment calculations are included below. The original signed certification of the MHSa Prudent Reserve Assessment (DHCS form 1819) is included on the next page, and is considered to be valid for the correction.

<b>Alpine County Behavioral Health</b>	
<b>Prudent Reserve Assessment</b>	
	<i>Conducted 5/12/2020</i>
Total MHSa Allocations by FY (BH IN 19-037, Encl. 1)	
FY 13/14	\$ 1,111,598
FY 14/15	\$ 1,548,718
FY 15/16	\$ 1,421,616
FY 16/17	\$ 1,488,718
FY 17/18	\$ 1,499,513
Total 5-Year Allocation	\$ 7,070,163
Average CSS Allocation (Total / 5*.76)	
	\$ 1,074,665
<b>Maximum Prudent Reserve Amount (33% of Average)</b>	<b>\$ 354,639</b>
Prudent Reserve Amount*	
	\$ 592,407
<b>Amount in Excess (Transfer to CSS in 19/20)</b>	<b>\$ (237,768)</b>
<i>*Per FY 18/19 RER PR Balance dated 05/12/20</i>	

## MENTAL HEALTH SERVICES ACT PRUDENT RESERVE ASSESSMENT/REASSESSMENT

County/City: Alpine

Fiscal Year: FY 18/19

**Local Mental Health Director**

Name: Gail St. James

Telephone: (530) 694-1816

Email: gstjames@alpinecountyca.gov

I hereby certify<sup>1</sup> under penalty of perjury, under the laws of the State of California, that the Prudent Reserve assessment/reassessment is accurate to the best of my knowledge and was completed in accordance with California Code of Regulations, Title 9, section 3420.20 (b).

Gail St. James

Local Mental Health Director (PRINT NAME)



Signature

10/4/19

Date

---

<sup>1</sup>Welfare and Institutions Code section 5892 (b)(2)