Fiscal Year 2015 BUDGETS FOR HEALTH & HUMAN SERVICES

A Practical Guide to Division-Level FY2015 Budgets under Buncombe County Department of Health & Human Services

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INTRODUCTION Health & Human Services

Buncombe County Health & Human Services (HHS) strives to deliver accountable government that is positioned for success and focused on results. We work in partnership with the community to:

- ensure safety and stability
- promote and support health and well-being
- strengthen independence
- for all Buncombe County residents. This FY2015 Budget Guide presents the HHS divisional budgets we've developed to achieve these results.

HHS is an integrated department providing Economic Services, Public Health, and Social Work services. Coming from a legacy of prior organization structure, HHS financial accounting is structured under two budgets:

- DSS Budget, comprised of Economic Services and Social Work Services
- Public Health Budget

County budget dollars supporting Behavioral Health services are also included in this guide.

In FY 2015, HHS will manage the expenditure of close to \$457 million (including public assistance dollars) invested in core essential services for our residents. With revenues coming from multiple funding streams, County dollars cover just over 8% of these costs. HHS works continuously to maximize this investment by lowering expenses and saving taxpayer dollars, while still meeting core community needs.

Both as taxpayers and consumers, all residents of Buncombe County have a stake in operations at HHS. Whether or not you walk through our doors, HHS is providing services important to all of us, such as:

- providing protection for neglected or abused children and adults
- inspecting restaurants to ensure food safety and sanitation protocols
- ensuring a sanitary water supply in approving well and septic system permits
- addressing citizens' food security needs through Food Assistance and WIC, which brings almost \$60 million dollars per year into our local economy
- immunizing children and adults against communicable diseases
- paying rental assistance to a landlord that keeps a fragile family intact
- assisting with work support strategies to foster self-sufficiency

The way our County allocates resources through HHS has a real impact on you.

We hope this Guide will provide a clear picture of what your taxes help fund, and give you a sense of the value these services add to our community.

HHS EXPENDITURES BUDGETING

When reviewing the HHS budget, keep in mind that the majority of services and programs we offer are required by federal and state law. In many cases, however, the County is required either to provide matching County dollars or to fund the service with 100% County resources.

During budget development, we carefully review expected funding levels for HHS services to assure our resources will meet programmatic requirements and forecasted demand. HHS actively partners with other providers to build community capacity and assure that services are simultaneously effective and cost-efficient.

Mandated spending has its strongest impact in Economic Services and Social Work Services, accounting for 99% of the FY2015 DSS expenditure budget. HHS also budgets for certain optional services, including those which help enhance or are essential to the federally and state mandated programs.

Mandate Levels for DSS Budgeted Services

Mandated Services

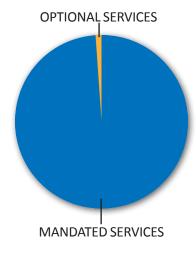
- Public Assistance programs
- Child Protective Services
- Adult Protective Services

Optional Services essential to Mandated:

- Some Foster Care services
- In-home aid services for elderly and disabled adults

Optional Services:

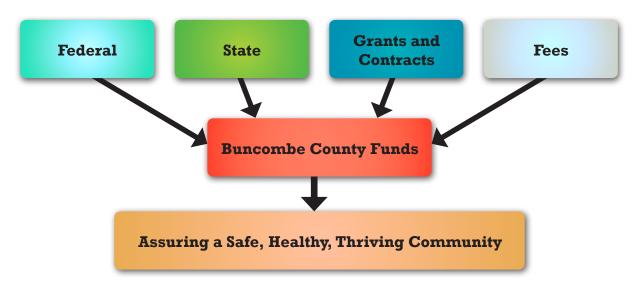
- Adult Day Care
- Family preservation
- Emergency Assistance services
- At-Risk services for children and adults
- Grant projects
- General Assistance
- Community contracts
- Veterans Services



For a list of those partnerships accounted as Community Contracts expenditures in the FY2015 HHS Budget, please see **page 49**. Understand, also, that there are additional partnerships incorporated within the DSS and Public Health divisional budgets, in the line item for contracted services.

HHS REVENUES BUDGETING

Revenue streams for Economic Services, Public Health services, and Social Services include: (1) federal funds; (2) state funds; (3) funding from grants and partnership revenue contracts; and (4) client and insurance payments for fee-based services (primarily in Clinical and Environmental Health services). Our Buncombe County government then appropriates funds to finance the remaining need for effective implementation of mandated and core programs. HHS budget development focuses heavy attention on the County's financial contribution.



Federal & State Funding

With Public Assistance comprising 86.8% of total DSS expenditures for FY2015, federal and state allocations fund the majority of the complete DSS budget:

- **Federal** funding makes up about 66% of the DSS revenue budget.
- The **State**, operating within federal guidelines, covers an additional 26% of the total cost of DSS program services.
- Setting aside Public Assistance dollars, Federal funds cover 39% and State dollars 1% of remaining DSS expenditures.

Federal and state revenue streams fund a smaller proportion of the Public Health budget versus the Economic and Social Work Services (DSS) budget.

- **Federal funding** is expected to provide 20% of the revenue needed to support public health services for Buncombe County residents.
- **State funding** is budgeted at 6% of total revenues for Public Health.

Contracts and Grants

Grants and revenue-generating contracts are budgeted to provide \$559,232 in revenue to Public Health in FY2015 and \$60,000 to DSS. Partnerships with local governments and other community organizations help provide or enhance services, generate revenue to offset expenses, and assist partners in achieving their own organizational objectives where they align with County goals.

As part of a continuing effort to bolster efficiency, HHS pursues grants and other endeavors with local private sector non-profit organizations. While not a direct source of funding, these collaborations help a) reduce the county's share of service delivery expenditures; b) generate revenue to offset expenses; and c) provide or enhance mandated services.

Service Fees

As outlined in the Department of Public Health Billing Guide for FY2015, we charge fees for a number of the Public Health services offered to the public. Service fee revenues are budgeted to cover 10% of Public Health expenditures in FY2015. The Health revenue budget includes \$323,984 in expected Medicaid revenue, plus \$436,861 from third-party insurance including Medicare, Health Choice, and private insurance companies. Residents of Buncombe County are anticipated to personally pay \$649,735 for services provided by the Public Health division, ranging from personal medical care services such as immunizations to the inspection of septic tank and well installations.

The DSS budget includes a small amount of fee revenue, but this make up less than 1% of the expenditures budget even after excluding Public Assistance dollars.

BUDGET ADOPTION PROCESS

Preparation

August – Participatory strategic planning begins

October – Capital Request submitted to County; teams determine funding priorities and develop budgets

December/January – HSST consolidates budget requests, resolves any questions

Estimates

January – State issues budget estimates to counties for their use in budgeting.

HHS Senior Leadership Team reviews and approves consolidated division budgets.

Submission

Late January – Preliminary budget submitted to County Finance Department.

March – HHS Board approves HHS budget request

Recommendation

April – County Finance submits its finalized General Fund Budget recommendation to County Manager.

Message

May – County Manager delivers budget message to the Board of County Commissioners.

Hearing

June – Buncombe County Board of Commissioners holds Public Hearing on budget.

Adoption

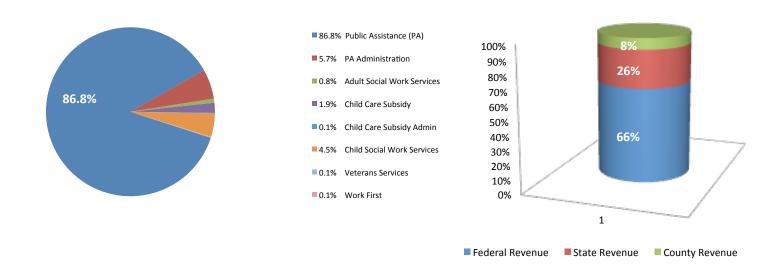
Target by June 30th – Budget adopted by County Board of Commissioners.

FY2015 budget was passed on 7/8/2014.

DSS BUDGET

FY2015

	TOTAL EXPENDITURE	FEDERAL REVENUE	STATE REVENUE	COUNTY REVENUE
Public Assistance (PA)	382,929,503	264,662,311	113,588,762	4,678,430
PA Administration	25,139,548	12,420,092	0	12,719,456
Adult Social Work Services	3,470,422	1,099,145	202,222	2,169,054
Child Care Subsidy	8,549,885	6,085,041	2,464,844	0
Child Care Subsidy Admin	405,616	313,026	0	92,590
Child Social Work Services	19,847,456	5,454,170	537,762	13,855,524
Veterans Services	305,390		1,497	303,893
Work First	504,267	0	0	504,267
Other Revenue	(4,163,277)			(4,163,277)
Grand Total	436,988,810	290,033,785	116,795,087	30,159,937



Services Budgeted Under DSS

The DSS budget covers two of the three HHS divisions: Economic Services and Social Work Services. Functioning under these divisions are a number of programs designed to effectively address the community's various needs and challenges.

The following section will review the programs listed below, which are under these two divisions.





Economic Services			
Child Care Subsidy	Food Assistance		
Child Support Enforcement	Medicaid		
Emergency Assistance	Special Assistance		
Energy Assistance	Work First		

Social Work Services
Adult Services
Aging Services
Child & Family Services
Veteran Services



Services Budgeted Under DSS

Public Assistance

Public Assistance (PA) accounts for a significant portion of the services and programs that BCDSS offers. Medicaid and Food and Nutrition Services are by far the most prominent components of PA, but within its scope, which spans economic and social work services, there are other programs involving adoption and foster care; temporary assistance; aid to the blind; Medicaid transportation; and child care subsidy.

What is particularly notable is that administrative costs for PA remain below 6% of total budgetary expenditures.

Program Integrity

BCDSS' Program Integrity unit is devoted to making sure that only those eligible for services receive them. Program Integrity staff investigate suspected fraud and overpayment within the Economic Services programs. If a claim is established, the investigators work to recover benefit dollars and, if necessary, coordinate with the judicial system.

Claims are broken down into three main categories:

"Intentional Program Violation": Traditional fraud in which a client lies about his or her circumstances (Prosecutable by law and disqualification).

"Inadvertent Household Error": A client may receive incorrect benefits due to unintentionally reporting wrong information or misunderstanding what information he or she must report.

"Agency Error": This is a seldom occurrence, but policy may require that an overpayment be collected even if it is the fault of the agency.

In FY2014, the BCDSS Program Integrity unit investigated 596 referrals, established 129 new claims, and collected \$230,378.

Economic Services

Economic Services comprises a number of programs to help low-income families attain sustainable employment, quality healthcare coverage, food and energy assistance, and other means of financial support in order to become self-sufficient.

NC FAST & ePASS

At the beginning of FY2013, Buncombe County became the first county in North Carolina to go fully live with the State's new automated eligibility system called NC FAST (North Carolina Families Accessing Services through Technology).

For the first year, Food and Nutrition Services was the only program using the web-based system, but FY2014 saw the addition of the Medicaid and Work First programs. Medicaid and Work First cases will be completely converted into NC FAST during the first half of FY2015. Eventually, all Economic Services and Social Work Services programs may be managed through NC FAST.

While the State fully funds the new system, the transition to NC FAST has created the need for additional regular and temporary staff. As of the end of FY2014, NC FAST functionality has resulted in a doubling of the amount of time needed to perform eligibility determinations. Additional BCDSS funds have been budgeted for other training and transitional needs associated with the ongoing changes in FY2015. The eventual benefits of using a web based system to manage multiple programs should include efficiency for both the client and the worker.

Connected to the NC FAST system is a client portal called ePASS (epass.nc.gov). Currently, Food and Nutrition Services and Medicaid applications can be filled out and submitted electronically using this website. The development of a streamlined application allows clients to fill out one application and have their eligibility determined for multiple services. Enhancements and expansions of this portal will continue during FY2015.



Child Care Subsidy

Child care subsidies help eligible low income families pay for child care, allowing parents or caretakers to work or attend school.

FY2014	Service Dollars Expended
Federal/State Block Grants	\$7,654,055
Smart Start Funds	\$1,057,167
All Funding Sources	\$8,711,222

Both the Federal and State Government fund

the program. Federal funds come from the Child Care Development Block Grant, Temporary Assistance for Needy Families, and the Social Services Block Grant. State funds come from an annual appropriation and an additional Smart Start allocation.

Buncombe County HHS partners with Southwestern

Buncombe County was able to serve approximately 1,750 children a month in FY2014. The average monthly payment to a child care center per child in FY2014 was \$409.

Child Development to administer the Child Care Subsidy program.

Child Support Enforcement

Child support enforcement involves locating absent parents, assisting in the establishment of paternity, and obtaining court-ordered child support payments.

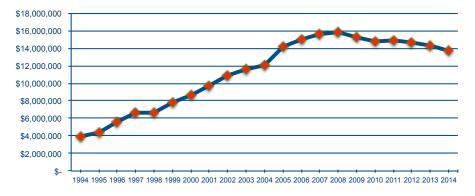
Since FY2002, the privately contracted group Policy Studies, Inc. (PSI), now a division of Maximus, has provided child support enforcement services for Buncombe County.

Achieved a paternity establishment rate of over 106.51% in FY2014 (the state average was 99%) – the paternity establishment rate is based on how many children were tested in the reporting period, and how many paternities were established in that same reporting period.

Collected 69% of support owed on past due accounts in FY2014.

92% of cases were under court order for payment of support in FY2014, compared to 57% in FY1998 (the year Buncombe County privatized Child Support). The state average for FY2014 was 86%.

Child Support Collections 1994-2014



Emergency Assistance

Emergency Assistance is designed to assist a family or individual through a crisis in order to prevent a potentially larger, and more costly crisis from occurring. BCDSS partners with several community organizations to administer these programs.

In addition to the \$400,500 in shelter & utility assistance for families, the following programs provide assistance for emergency needs (FY2014 budget):

Crisis Intervention Program: \$1,500,000

• LIHEAP: \$1,304,756

Energy Neighbor: \$125,000
General Assistance: \$23,500
Family Preservation: \$50,000
Unclaimed Bodies: \$7,000

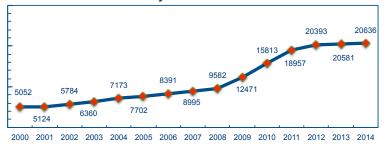
Food Assistance

Food and Nutrition Services (FNS), or more recently referred to as Supplemental Nutrition Assistance Program (SNAP), is perhaps the largest program in Economic Services that is directly affected by changes in the economy, such as plant closings or increases in food and fuel prices.

The number of FNS households has increased by 115% from FY2008 to FY2014 as a result of the 2008 recession. As of the end of FY2014, Buncombe had 20,636 families



Buncombe County FNS Households 2000-2014



receiving an average of \$228 in monthly benefits. With about 1.9 recipients per family, the average daily benefit per recipient is \$3.99.

Federal funding covers 100% of SNAP benefits, while the federal and county governments equally share administrative costs.

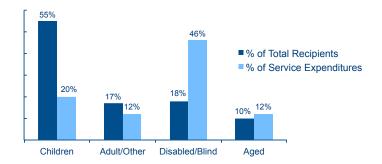
In FY2014, over \$55 million was funneled into our local economy through benefits.

Medicaid

Medicaid is a federal and state funded program designed to secure health insurance coverage for individuals and families. Affordable healthcare remains a principal issue for many of Buncombe County's 245,228 residents and Medicaid provides a health safety net for those who are eligible.

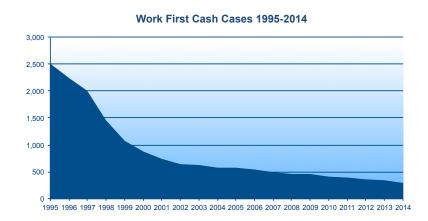
Good health is not merely a personal matter, but one that affects the broader community. Uninsured adults and children are less likely to receive needed treatment in a timely manner. Adults who are ill or caring for sick children face extended work loss, while uninsured children are more prone to absenteeism at school.

The expansion of eligibility guidelines for Medicaid and Health Choice (the State's health insurance program for children) has broadened coverage and therefore increased costs. Even so, these programs continue to provide benefits to the physical health of our citizens. In FY2013, as a regional medical center, Buncombe County medical providers received more than \$277 million in Medicaid



funding. These dollars helped to support medical care, jobs, and development that strengthened our local and state economy.

During FY2014, Medicaid billing was converted to a new system called NC TRACKS. Medicaid expenditure data through this new system remains unavailable to counties.



Work First

Work First aims to encourage eligible parents to achieve and sustain financial independence and self-sufficiency. Through Work First, parents can receive cash assistance, job training, transitional Medicaid coverage, child care subsidy, and food assistance. Recipients without stable employment must participate in the Work Fist Employment Services Program.

The county is required by the federal government to maintain the same level

of financial support for Work First programs as it did prior to federal welfare reform in 1996. Called

"Maintenance of Effort", this county's funding supports efforts toward achieving self-sufficiency.

BCDSS partners with AB Tech and Goodwill Industries to provide job coaching, training, retention, development, and readiness for Work First eligible recipients.

106 Work First participants found employment in FY2014.

The average wage of those finding employment through the Work First program was \$8.49 in FY2014.

Social Work Services

Adult Services

Adult Protective Services ensure the safety and well-being of our community's elderly, disabled and vulnerable adults. Article 6, Chapter 108A of the North Carolina General Statutes requires that county departments of social services perform certain activities for disabled adults who are alleged to be abused, neglected or exploited and in need of protective services.

In FY2015 we have budgeted for nine Adult Protective Services evaluators and three planning and mobilization social workers.

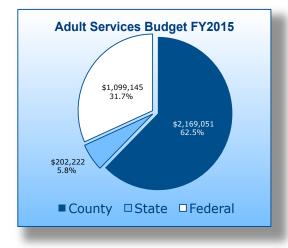
If adults lack capacity, then the agency must work to identify whether or not the adult has an appointed representative to make choices for them. If this does not exist, then the agency must file a petition and request that the court determine who should make legal decisions to ensure the adult's personal

safety, as well as protect any assets they may possess. The agency contracts guardianship services out to Hope

for the Future for our adult guardianship population who lack family or an appropriate person to act of in their best interest.

The goal of the Buncombe County aging plan is to allow adults to age safely in place remaining in their own home. To that end, many adults receive Adult Day Care services or Special Assistance In-Home (SAIH) services. These programs allow adults to remain in their homes longer and safer and provide support to their caretakers.

Adult Day Care Services are provided to eligible elderly disabled adults to allow their caregivers to work. In FY 2015, \$129,143 is budgeted to make this service avail-



able, which is 87.5% Federal and State investment and 12.5% County investment. SAIH is a cash benefit program that provides a cash supplement to adults who qualify for Medicaid to receive monies that allow them to remain in their home. In Buncombe County, there is one budgeted SAIH social worker for FY15 managing an average caseload of 36 adults.

For adults that cannot be safely maintained at home, placement services are provided at the request of an adult or an adult's decision maker. Placement services are primarily provided by Adult Home Specialists, but can also be provided by Planning and Mobilization social workers, as well as the SAIH social worker.

Adult Care Home Services is responsible for monitoring rules, safety compliance, and residents' rights for Adult Care Homes in Buncombe County. In FY2014 we have budgeted for five Adult Home Spe-

cialists to monitor 90 facilities. Funding for this program is provided by Medicaid and the state Adult Home Specialist fund.

An average of 124 reports per month are made concerning the abuse or neglect of an elderly or disabled adult. 90 of these are screened in and evaluated to determine if adults have been abused, neglected by themselves or a caretaker, or exploited.

For FY2015, HHS is again contracting with Hope for the Future to serve as Guardian for our adult guardianship population.

Aging Services

The Buncombe County Aging Coordinating Consortium (ACC) provides a forum for agencies, organizations and individuals to work together towards the following goals:

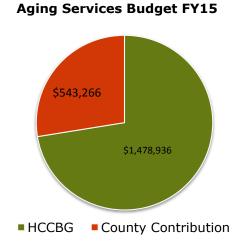
- Plan for coordinated aging services that meet the needs of older adults.
- Advocate for support in meeting these needs through both the public and private sectors.
- Network, exchange information and assure communication and cooperation among organizations whose services affect older adults.
- Promote community awareness regarding the needs of, and the services available to, older adults.
- Stimulate the participation of older adults and others in planning for aging services and programs.
- Submit funding recommendations to the Lead Agency and County Commissioners as to the appropriate allocation of Home and Community Care Block Grant (HCCBG) funds and other funding available for aging services and programs.

Land-of-Sky Regional Council serves as the lead agency to administer funds to providers for services eligible for HCCBG and/or County funding include, but are not limited to:

- Adult Day Programs
- Care Management
- Congregate Nutrition
- Group Respite
- Health Promotion
- Disease Prevention
- Health Screening
- Home-Delivered Meals
- Skilled Home Care

Housing and Home Improvement

- Information and Case Assistance
- In-Home Aide Levels I and II
- Mental Health Counseling
- Respite Care
- Senior Companions
- Senior Center Operations
- Transportation
- Volunteer Program Development



Child and Family Services

The goal for Child and Family Social Work Services is to ensure safe, permanent, and nurturing families to all children in Buncombe County. We work in partnership with families to accomplish this goal.

Every person in North Carolina is mandated to report suspected child abuse or neglect. When a report is received that meets the statutory definition of abuse or neglect, it is assigned by a Child Protective Services Social Worker, per NCGS 7B-302.

An assessment is generally completed within 45 days, and HHS provides In-Home Services to keep the family unit intact by working with the family to eliminate any identified safety concerns. Buncombe County aims to meet the needs of children at risk of abuse or neglect by investing in social work staff and programs for families and children.

Foster Care & Adoption Services

Buncombe County Health and Human Services is responsible for the safety, permanence and well-being of children and families and recognizes that there is a broad range of parenting styles that can keep children safe. When a child cannot be safely maintained in their home due to abuse, neglect or dependency, the child may enter Foster Care when a petition and order for non-secure custody are signed by a judge. The child is temporarily placed in foster care while HHS collaborates with the family to resolve the safety issues that necessitated removal. Efforts are made to place children with relatives or other supports who are familiar to them and to keep children in their daycare, school or community whenever possible. There are no fees, but parents typically pay child support to help with the cost of care.

For the child who does enter Foster Care, HHS provides payments to licensed foster families or group homes. The rates paid for care are set by the state with the costs of these placements shared by the federal, state, and county government. The agency's number one priority is to reunify the child with

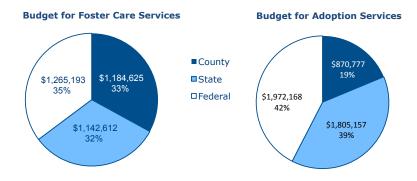
their family. If this is not possible, the agency will move toward another permanent plan such as adoption.

The average placement cost per child in Foster Care is \$998.19 per month.

The number of children in care has risen to 301 at end of FY2014 from 222 at end of FY2012, an increase of almost 36%.

Due to diminished funding for in-home services since 2012, the number of children in care has risen dramatically while the cost of care per child has increased as well. Contributing to this are the com-

plex behaviors and needs of children in care, as well as an increase in state approved foster home stipends and state established facility rates.



Veteran's Services

The primary purpose of this program is to assist veterans in obtaining the benefits they earned through their service to this country. Working in conjunction with federal and state veterans services offices, our local county office assists Buncombe County Veterans obtain new and adjusted benefits for which they are entitled.

The Buncombe County government funds this program. The total FY2015 budget for the program amounts to \$305,390.

The dollar value of newly awarded Veterans Benefits where staff assisted in the application process exceeded \$2.9 million in FY2014.

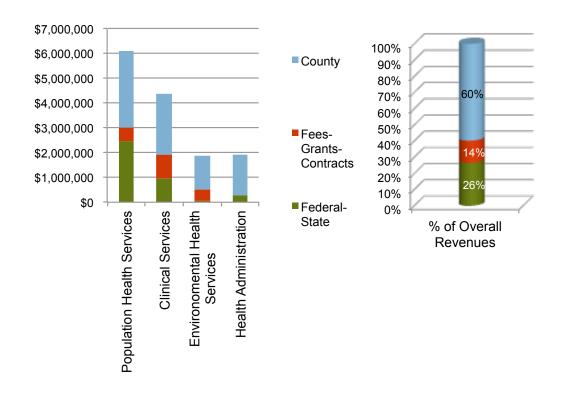
Our Veteran's Services office is located on the "A" level at 35 Woodfin Street, across from the County Courthouse.



PUBLIC HEALTH BUDGET FY2015

Program	Total Expenditure	Fed/State Revenues	Fees Contracts Grants	County Revenue
Health Administration	1,908,110	288,171		1,619,939
Clinical Services	4,359,433	980,884	951,100	2,427,449
Environmental Health	1,894,439	43,064	460,517	1,390,858
Population Health Services	6,108,985	2,468,311	558,194	3,082,480
Total	14,270,967	3,780,430	1,969,811	8,520,726

Public Health FY2015 Budget by Program Area & Revenue Sources



Public Health Priorities and Responsibilities

Both as taxpayers and consumers, all residents of Buncombe County have a stake in the work of the Buncombe County HHS Division of Public Health. In response to concerns that that today's children are growing up less healthy than their parents, Public Health departments and community partners across the nation are on a mission to collectively impact the health of their communities.

Public Health addresses community priorities through the essential roles and responsibilities of public health, established two decades ago by the Centers for Disease Control and Prevention (CDC):

Assessment

- Monitor health status to identify community health problems
- Diagnose and investigate health problems and health hazards in the community
- Evaluate effectiveness, accessibility, and quality of personal and population-based health services

Policy Development

- Develop policies and plans that support individual and community health efforts
- Enforce laws and regulations that protect health and ensure safety.

Assurance

- Link people to needed personal health services and assure the provision of health care when otherwise unavailable
- Assure a competent public health and personal health care workforce
- Inform, educate, and empower people about health issues
- Mobilize community partnerships to identify and solve health problems

The Community Health Improvement Plan or CHIP, outlines priority health issues for our community and how these issues will be addressed. This plan was created through a community-wide, collaborative process that engages partners and organizations to develop, support, and implement the plan. Priority Area Workgroups are formed around each of the priority areas identified as a result of the Community Health Assessment (CHA) process. CHIP priorities for 2012 – 2015 are:

- Healthy Living Physical Activity, Nutrition and Healthy Weight
- Tobacco Prevention and Cessation
- Preconception Health
- Early Childhood Development
- Access to Care

Representatives from each workgroup report regularly to the Public Health Advisory Council to share actions, emerging issues, and policy recommendations.

Public Health Program Accounting Areas

Public Health responsibilities are budgeted under three primary programmatic areas – Clinical Services, Environmental Health Services, and Population Health Services – plus an administrative accounting unit.

Clinical Services: \$4,359,433 (31%)

- Breast and Cervical Cancer Control (BCCCP) and WISEWOMAN programs
- Communicable Disease Control (disease investigation and outreach, TB)
- Family Planning
- Immunizations and Foreign Travel
- STD / HIV
- Support Services Medical Lab, Pharmacy, Patient Processing

Environmental Health Services: \$1,894,439 (13%)

- Food and Lodging Inspections
- On-Site Wastewater Inspections

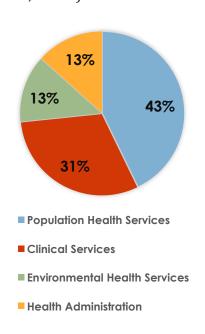
Population Health Services: \$6,108,985 (43%)

- Community Health Assessment & Community Health Improvement Plan (CHIP)
- Nurse Family Partnership
- Nutrition / WIC
- School Nurses (budget detailed separately, but included in division total, above)

Administration: \$1,908,110 (13%)

- Health Director
- Accreditation and Quality Improvement*
- Advisory Council Expenses
- Language Access Services
- Vital Records
- Community Contracts including:
 - Safety-Net Dental Care (WNCCHS)
 - Safety-Net Prenatal Care (WNCCHS) and
 - Community Dental Sealant Program (Eblen Charities)

Accreditation and Quality Improvement are budgeted in Population Health but supervised in Administration.



Administration Supervised Services

Language Access Services

Agencies who receive federal funding are required under Title VI to meet the language access needs of their clients to assure meaningful .

1 in 10 clients receiving our Public Health services uses a language other than English. Many need language assistance to communicate accurately about matters important to their health.

Health and Human Services has staff interpreters for Spanish and Russian and meets other language needs through local and national contracts.

In FY2014, HHS staff interpreters provided a total of 12,113 contacts (in-person or by phone).

Quality Improvement

Quality Improvement (QI) principles are applied to programs in Population Health, Clinical and Environmental Health Services.

The use of QI helps address efficiencies that can improve and sustain the quality of programs and services. QI efforts demonstrate a return on investment and help meet the requirements of the NC accreditation program for local health departments. Through QI, the Public Health division maintains a system to seek and respond to client and staff input on our health services.

Federal compliance with Title VI and HIPAA is promoted through monitoring and staff training.

Vital Records

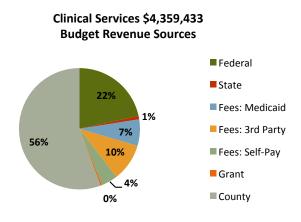
Vital Records processes certificates for all births and deaths occurring in Buncombe County.

Clinical Services

The Clinical Services division provides an array of health care services to individuals including the Breast and Cervical Cancer Control Program (BCCCP) / WISEWOMAN health screening programs, Communicable Disease Control, Family Planning, Sexually Transmitted Disease (STD)/HIV services, Immunization services including child and adult vaccines and travel vaccine, and clinical service supports – Laboratory, Pharmacy and the Patient Processing Unit.

Source of Funding

Immunizations and Communicable Disease control are mandated to protect the health of the entire community. These are funded through a combination of county, state, and federal The Breast and Cervical Cancer Control Program (BCCCP) and WISEWOMAN programs provide free health screening, education, and referrals to low-income, uninsured women. In collaboration with numerous community partners – Asheville Breast Center, BCMS Project Access and Mission Hospitals – BCCCP provided health education and screening (clinical breast exams, mammograms and/or Pap smears) to 1,776 program participants in FY2014.



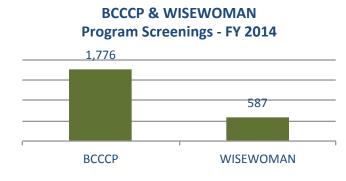
dollars. Fees are charged as allowed by law for some direct customer services in Disease Control. Other Clinical Services provide fee-based direct services to individual clients. Insurance payments for services to clients with Medicaid, Medicare, and/or private insurance fund 17% of Clinical Services' FY2015 budget. Many clients have low income and no insurance. HHS Public Health offers clients a sliding-scale for several of its fees, based on federal poverty guidelines.

While Public Health is no longer a direct provider of Prenatal Care, we continue to focus on assuring access to care through a memorandum of understanding with community partners around the provision of prenatal services.

Public Health has contracts with the Minnie Jones Health Center, a Federally Qualified Health Center, to assure access to prenatal care and dental care.

BCCCP / WISEWOMAN

The Breast and Cervical Cancer Control Program (BCCCP) and WISEWOMAN programs provide free health screening, education, and referrals to low-income, uninsured women. In collaboration with numerous community partners – Asheville Breast Center, BCMS Project Access and Mission Hospitals – BCCCP provided health education and screening (clinical breast exams, mammograms and/or Pap smears) to 1,776 program participants in FY2014.



WISEWOMAN screened 587 women for heart disease and diabetes in FY2014 and educated them on good nutrition and other steps to prevent cardiovascular problems. These programs are supported by federal and state funds.



Communicable Disease Control

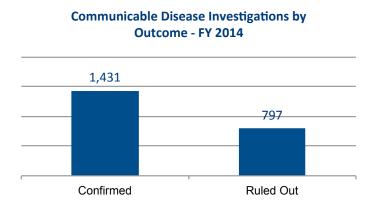
Provides investigation, surveillance, and prevention activities needed to control communicable disease and protect the health of the public. Disease Control services are funded in part by federal and state dollars.

There were 2,228 communicable disease investigations in FY2014. Investigations result in either a reportable communicable disease or a rule-out (when the investigation determines it does not meet reportable disease criteria.)

The TB (Tuberculosis) Clinic had 1,089 visits.

The HHS division of Public Health is the lead agency for investigation and documentation of communicable diseases cases that providers are required to report, including:

- Flu Deaths
- Hepatitis
- HIV
- Lyme Disease
- Meningitis
- Salmonella
- Tuberculosis
- Whooping Cough



Family Planning

Our Family Planning services include: yearly physical exams; pap smear and lab tests; pregnancy testing; preventive health education; and methods of birth control.

Cost for family planning services is based on income. Based on this sliding-fee-scale services may be at low cost or no cost for the client. In FY2014, 3,012 clients came for 5,899 Family Planning

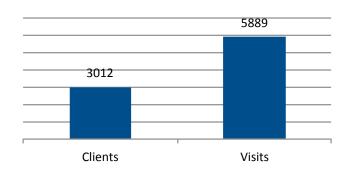
visits.

Notifications

While Health is no longer a provider of Prenatal Care, the agency continues to focus on assuring access to care through a memorandum with community partners on provision of prenatal services.

Public Health has a contract with the Minnie Jones Health Center, a Federally Qualified Health Center, to assure access to prenatal care and dental care.

Family Planning - FY 2014



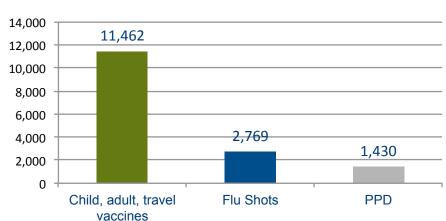
Immunizations

The Immunization clinic provides child and adult vaccine, and travel vaccine. Service fees are charged

for immunizations and for foreign travel shots. Immunizations may be reimbursed through Medicaid, Medicare and/or private insurance, or may be subsidized for clients in need through state-supplied vaccine.

Immunization clinic provided 14,231 immunizations in FY2014, including 2,769 seasonal flu shots.

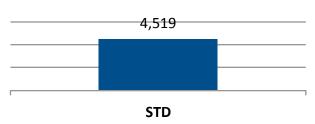
Immunization Services - FY 2014



STD/HIV

Clinical Services for the detection and treatment of Sexually Transmitted Disease (STD) and HIV* limit the spread of disease to other residents.

STD Visits - FY 2014



Support Services

Laboratory

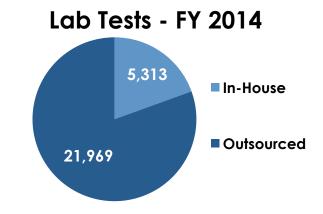
An on-site medical laboratory serves our Women's Health and Disease Control clinics and the Environmental Health services. In FY2014 the Medical Lab performed 5,313 tests directly in-house, and collected and sent out 21,969 tests for processing at other labs, for a total of 27,828 tests.

Pharmacy

On-site pharmacy services give access to affordable medications in a one-stop setting. Using a clinic-based dispensing model, a pharmacist oversees the nurses and clinicians in delivering medications directly to clients during their clinic visit, rather than have them go to a separate Pharmacy window. In FY2014 our clinic Pharmacy dispensed 11,636 prescriptions.

Patent Processing

Patient processing checks clients in and out of clinical service areas, makes follow-up appointments and manages confidential records for all active clinic clients as well as inactive client medical records.



Client self-pay and third-party reimbursement contributes revenue for lab services.

Environmental Health Services

The mission of Environmental Health Services is to safeguard health and protect the environment through the practice of modern environmental health sciences, technology, rules, and public education. Environmental Health enforces North Carolina laws and rules under the authority and technical guidance of the state's Department of Environment and Natural Resources.

Source of Funding

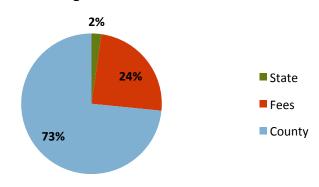
Environmental Health services are mandated to protect the health of the entire community. These are funded through a combination of county, state, and federal dollars.

Fees are charged as allowed by law for some direct customer services in Environmental Health.

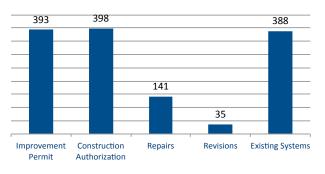
Food & Lodging Inspections

Restaurants comprise over 50% of the inspections completed by Environmental Health. Other Food & Lodging inspections include festivals, schools, child care, swimming pools, nursing homes, tattoo parlors, and other facilities that serve both our residents and visitors.

Environmental Health \$1,894,439 Budget Revenue Sources



Onsite Wastewater Services - FY14



In FY2014, officials conducted 3,629 Food & Lodging inspections.

On-site Wastewater

The On-site Wastewater program protects our communities' groundwater. Environmental Health is responsible for conducting inspections and approving permits for septic systems. The unit also conducts water sampling and performs inspection and permitting for well systems.

Environmental Health Services include not only Food & Lodging and well and septic system inspections, but also such services as:

- Childhood lead poisoning investigation
- Radon awareness
- Vector control (e.g. mosquito habitat)
- Rabies investigation
- Methamphetamine lab clean up
- "Serving Safe Food" classes

Population Health Services

Outreach is a key aspect of Population Health Services. Essential public health services are provided

in locations appropriate to our clients' needs – in the home, school, medical offices, and other community settings, in addition to services at our Public Health locations. This division includes Community Health Improvement, Nurse Family Partnership, School Health and Nutrition.

Source of Funding

Population Health Services address the specific health needs of targeted client-populations, with major support from federal and state dollars.

Nurse home visiting receives state funding, grants from outside funders, county funding, and limited Medicaid reimbursement.

Budget Revenue Sources

Federal
State
Contracts & Grants
Fees: Medicaid
County

Population Health \$6,108,985

The Women, Infant, and Children (WIC) nutrition program is funded with federal dollars, paid through the state. Other programs are funded in combination, by the state, county, and local partners for specific initiatives.

Community Health Improvement

In FY15, HHS entered a new partnership with MAHEC to improve Buncombe County's community health outcomes. This model builds a bridges between clinical behavior change efforts and community-wide efforts at improving population health.

We realize that if we are to make

improvements in the health outcomes of our community we must do a better job of connecting clinical efforts with the community work. This partnership integrates the Community Health Improvement Process Team within MAHEC to better align our community's prevention efforts with their efforts to improve healthcare. Staff will be fully integrated into the MAHEC team while continuing to provide support for the community health improvement process on our prioritized community-wide health strategies.

This new model will capitalize on MAHEC's expertise in preventive medicine, healthy lifestyles, and health management of diseases and the Division of Public Health's expertise in larger population health that impacts the entire community. Buncombe County Health and Human Services' division of Public Health will continue to oversee the successful implementation of the Community Health Improvement Process (CHIP)

Buncombe County Community Health Improvement Plan

0.3%

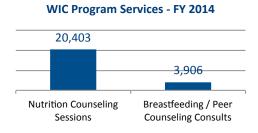


NFP by the Numbers – FY2014		
Number of Babies Born	51	
Number of Mother/Families Served	171	
Number of NFP Home Visits	2,066	
Number of NFP Nurses *	5	

that began last year, engaging over 60 partner agencies around the four community health priorities:

- Healthy Living physical activity, nutrition and tobacco-free living
- Preconception Health
- Early Childhood Development
- Access to Care Clinical Community Connections

Community Health Improvement Specialists will create individual and community-wide consumer education messaging emphasizing evidence-based and best practice guidelines. They will also work to integrate these messages with the broader community strategies that impact the health priorities.

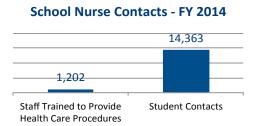


Buncombe County HHS will continue to collaborate with Mission Hospital to provide the Community Health Assessment. This new partnership with MAHEC will bring all three organizations together to enhance the culture of health in our community.

Nurse Family Partnership

Nurse Family Partnership (NFP) is an evidence-based nurse home visiting program that targets low-income, first-time parents and their children to improve pregnancy outcomes; improve child health and development; and increase economic self-sufficiency.

HHS received additional funding through the NC DHHS Children and Youth Branch to increase the number of nurses to 8 as of March 2013.



Nutrition

The Women, Infants, & Children (WIC) Special Supplemental Nutrition Program improves the health of low income pregnant, breastfeeding and postpartum women, infants, and children up to age 5 who are at nutritional risk

WIC provides nutrition education, vouchers for specific foods, and referrals for health care. A board certified Lactation Consultant provides breastfeeding support.

In FY2014, the WIC program provided \$3,397,823 in food vouchers to financially eligible families, which in turn are dollars spent within our community.

School Health Nursing

The School Nursing Program helps schools reduce health barriers that can impact educational achievement. Services range from supporting children with complex health issues to encouraging healthy lifestyle choices among all students. School nurses deliver direct services to our public school students and train school staff to provide health care procedures and administer medications. In FY2014, there were 1,436 Buncombe students on medications and 9,457 special health care needs identified.

Behavioral health services include mental health and substance abuse services, and are primarily funded by Smoky Mountain Center; however, the County funds a number of initiatives which address service gaps and areas of liability.

FY2015 Behavioral Health Budget

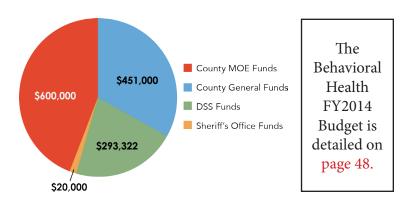
Behavioral health services include mental health and substance abuse services, and are primarily funded by Smoky Mountain Center; however, the County funds a number of initiatives which address service gaps and areas of liability.

The Behavioral Health budget in FY15is \$1,364,322, including \$600,000 in Maintenance of Effort (MOE) funds for which the County designates use; these are statutorily obligated funds dispersed through Smoky Mountain Center.

Behavioral Health funds have been allocated in five areas:

Assessment Center - \$276,565

A contract with RHA Health Services expedites forensic evaluations for the Courts and HHS Social Work clients. A contract with Family Preservation Services provides Trauma-Focused Cognitive Behavior Therapy.



Jail Diversion - \$579,750

The County contracts with RHA Health Services and Mission Health for jail diversion services: hospital ER evaluation drop-off service, jail reentry services, alternative court programs, and a fulltime forensic coordinator.

Homeless Initiative - \$317,000

The County contracts with the City of Asheville, Homeward Bound, WNC Community Health Services, and Pisgah Legal Services to place chronically homeless individuals in permanent housing and provide ongoing support services, including disability application and access to medical care.

Prevention - \$176,645

The County contracts with ARP-RHA Health Services to provide critical incident stress management for HHS first responders, including resiliency training and support for the Veteran's Program clients with trauma histories, and to support coalition efforts to prevent youth from engaging in substance abuse behaviors.

Buncombe County Behavioral Health - \$14,362

These funds support strategic initiatives by community coalitions.

Additionally, behavioral health programs are receiving \$382,722 of grant funds: Governor's Highway Safety Program, Governor's Crime Commission, Department of Public Safety, and Project Lazarus. Behavioral health also leases two County facilities for \$1/yr. to providers, with a total value of \$115,665.

FY2015 Grant Initiatives Budget

Buncombe County Health & Human Services engages in numerous grant-funded initiatives in partnership with key non-profit organizations in our community....... Regarding the initiatives described below, please note that funding is carried outside the HHS budget in the County grants fund for: Changing Together; Community Transformation Grant; DWI Treatment Court; Ex-Offender Re-entry; and Triple P. The remaining initiatives are reflected in the FY2015 HHS budget: Children's Trust Fund (DSS); Innovative Approaches (Health); Office of Minority Health (Health) and Project Lazarus (Behavioral Health).

Changing Together

Goal: To combat chronic violence in Buncombe County using recognized focused deterrence prevention efforts.

Description: Coordinates the intervention and suppression efforts that identify, notify, deter and redirect violent offenders in Buncombe County. Violent offenders attend Call-ins to receive information about criminal consequences and optional services such as case management, education, support and resource coordination.

Funding: Total FY2015 funding is \$100,000 (\$75,000 North Carolina Department of Public Safety Governor's Crime Commission grant; \$25,000 Buncombe County Service Foundation match)

Key Partners: Leverages resources from a broad coalition of law enforcement, service, and community organizations including Asheville Police Department; Buncombe County Sheriff's Office; District and US Attorneys; Housing Authority of the City of Asheville.

Children's Trust Fund

Goal: To prevent child abuse and neglect and improve well-being among children and families at risk, through the provision of voluntary supportive family services

Description: This "Under Six Initiative" and Community Response Program includes range of services (assessments, referrals, case management, parenting skills, financial support, support groups, etc.) for families of children under 6 years old who are subject of a screened-out Child Protective Services report and are at or below 100% poverty level

Funding: Total FY2015 funding is \$130,929 (\$98,177 NC Department of Health and Human Services grant + \$32,752 county match); 3-year award, July 2012 through June 2015

Key Partners: Community Action Opportunities & FIRST (Subcontractors)

Community Transformation Grant

Goal: To support reduction of obesity and tobacco related chronic disease by increasing access to safe places for physical activity, healthy foods, tobacco free spaces, and increasing access to community-based supports for disease management

Description: Buncombe County HHS as the lead agency and works with six other area health departments and community partners that represent an eleven-county region to address Active Living and Healthy Eating; Tobacco-Free Living; and High Impact Evidence-Based Clinical and Other Preventive Services.

HHS Grant Initiatives

Funding: Funding from Centers for Disease Control and Prevention via a NC Department of Public Health grant. Total FY2015 funding is \$140,000. Federal funding ends September 20, 2014.

Key Partners: Coordination of efforts is carried out under the guidance of a Leadership Advisory team that represents local food, land use, clinical care, university, and nonprofit sectors. A core-collaborative of health directors, educators, and others key health leaders assists in guiding the plan and budgeting allocation dollars.

DWI Treatment Court

Goal: Reduce recidivism and prevent costs to the court and human service systems

Description: Eligible people charged with Driving While Impaired will be given an option to participate in DWI court as an alternative to prosecution. DWI court mandates alcohol treatment and monitoring, and participants report to court over a 6-12 month period before successfully exiting the program. Participants not successful in the program are subject to prosecution.

Funding: North Carolina Governor's Highway Safety Program; HHS portion of FY2014 funding is \$95,060; 1-year award, October 2013 – September 2014

Key Partners: RHA Health Services (HHS Subcontractor handling coordination & monitoring); Administrative Office of the Courts (Prosecutor's Office handling court aspects of grant)

Ex-Offender Re-Entry

Goal: Enhance services for formerly incarcerated individuals to increase self-sufficiency and reduce recidivism/victimization

Description: Developing a Reentry Council and a comprehensive local reentry plan for the reintegration of individuals formerly incarcerated in state prison and returning to Buncombe County. Includes coordination of resources: temporary shelter; permanent housing; employment services; food; clothing; vocational training; transportation; substance abuse and mental health treatment; mentoring programs and other supportive services.

Funding: North Carolina Department of Public Safety; \$203,712; 1-year award, January – December 2014

Key Partners: RHA Health Services (Subcontractor staffing the Reentry Council with a coordinator & job placement specialist)

Innovative Approaches

Goal: Improve community-wide systems of care that will increase family satisfaction with services received and improve outcomes for children and youth with special health care needs (CYSHCN)

Description: Community-based and family-focused initiative; steering committee of over 30 members/organizations works to improve systems of care for CYSHCN.

Funding: NC Children and Youth Branch. Total FY 2015 funding is \$135,000.

Key Partners: CCWNC, MAHEC, Buncombe County Schools, Asheville City Schools, FIRST, Family

Support Network, Smart Start, Head Start, DSS, Family Preservation Services, Mission Hospital, Care Partners, Mission Fullerton Genetics, Early Intervention, Children's Developmental Services Agency, NCIMHA, MAHEC Family Medicine, 7 Buncombe County primary care practices, and 8+ parent representatives.

Office of Minority Health and Health Disparities

Goal: Close the gap in health disparities between minority populations and the white population

Description: BCHHS subcontracts with 5 local agencies to implement and evaluate an evidence-based medical home model to increase access to a medical home, prevention education, testing/screening, and referral services related to 7 health focus areas (heart disease, stroke, diabetes, obesity, asthma, HIV/AIDS/STD's and cancer).

Funding: Office of Minority Health and Health Disparities, 3 year funding through FY 2015. Total FY2015 funding is \$207,600

Key Partners: ABIPA, Land-of-Sky Regional Council, Mount Zion Community Development, NC Center for Health and Wellness, and YWCA

Project Lazarus

Goal: Reduce prescription drug abuse, including harm reduction

Description: Project Lazarus is a prescription drug abuse prevention model which was developed in Wilkes County. It is being replicated throughout the State. In Buncombe County, the Partnership for Substance Free Youth is taking the lead.

Funding: Total FY 2015 funding is \$2,500.

Key Partners: ARP/RHA Health Services, through its County-funded Prevention Specialist is working with the Partnership for Substance Free Youth.

Triple P - Positive Parenting Program

Goal: Reduce substantiated child abuse, maltreatment-related hospitalizations, and out-of-home placements

Description: One of the most widely recognized evidence-based parenting support programs; Triple P is a system of education and support for parents and caregivers of children and adolescents. Increases parenting skills and parenting confidence by engaging, encouraging and empowering families to address common child and adolescent social, emotional, and behavioral problems. Focused on the 0-6 population; consistent with the Community Health Improvement Plan (CHIP) early childhood development priority and the Under Six Initiative

Funding: 3 year award from North Carolina Division of Public Health-Children and Youth Branch, April 2013 - May 2016; Total FY15 funding is \$191,629.

Key Partners: ABCCM; ARP; Asheville City Schools-Preschool; Buncombe County HHS Foster, Navigators and Prevention; Buncombe County Schools; Care Partners; Children First/CIS; Community Action Opportunities; Eliada Home; Family Support Network; Mountain Area Child and Family Center; Women's Wellbeing and Development Foundation; and YWCA

BUNCOMBE COUNTY HEALTH & HUMAN SERVICES

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SOCIAL SERVICES BUDGET PROPOSAL FISCAL YEAR 2015

ADMINISTRATION

Salary-Regular	\$	2,325,534
Salary-Temp/PT		42,320
Salary-Longevity		100,319
401 K		186,043
FICA		188,815
Retirement		176,034
Health Insurance		565,493
Life Insurance		2,599
Unemployment Insurance		231,893
Workers Compensation		238,088
DSS Board Per Diem		4,740
Services		177,000
Motor Fuels		8,500
Supplies		265,000
Data Proc. Supplies		0
Travel-Mileage		40,067
Telephone		254,212
Postage		140,000
Printing Military 20 Provide Ph. 1		36,684
Maintenance & Repair - Bldg.		32,000
Maintenance & Repair - Equip.		7,000
Legal Advertising		3,000
Emp. Training Contract Service		40,212
Contract - DSS File Room		87,008
		469,656 0
College St Parking Deck Rental-Land		156,966
Rental-Wireless Access Space		130,700
Rental-Equipment		0
Rental-Copiers		130,000
Insurance & Bonds		83,002
Dues & Subscriptions		13,000
Bank Service Charges		1,000
Claims		34,013
Total Sal & Fringe		4,057,137
Total Operating		1,983,060
Total Admin Division	\$	6.040.107
Total Admini Division		6,040,197
CHILD SUPPORT		
Salary-Regular	\$	124,402
Salary-Temp/PT		0
Salary-Longevity		6,614
Supp. Law Enforcement Retirement		9,952
FICA		10,023
Retirement		9,708
Health Insurance		27,192
Life Insurance		205
Professional Services		1,788,000
Travel-Mileage		0
Office Supplies		0

Telephone Court Fees Rent-Building Insurance & Bonds Emp. Training Rent Of Vehicles Rent Of Other Equip Misc. Expenses Total Sal & Fringe Total Operating	45,00	80 0 0 0 0 0 0 0
Total Child Support Division	\$ 2,196,47	6
WORK	FIRST	
Salary-Regular Salary-Temp/PT Salary-Longevity 401 K FICA Retirement Health Insurance Life Insurance Professional Services Motor Fuels Travel-Mileage Emp. Training Contract Service AB Tech/ HRD Case Management Contract WF Demonstration Grant EAIssuance WF Incidental WF CLT Trans. WF Training Helpmate/Domestic Violence Aspire Consumer Credit Job Developer Total Sal & Fringe Total Operating Total Program	\$ 86,05 4,65 6,88 6,93 6,41 26,18 13 10,00 10 1,50 70 24,74 165,00 31,00 15,00 100,00 1,50	0 34 39 38 38 38 38 30 30 30 30 30 30 30 30 30 30
Total Work First Division	\$ 490,60	7
	E CIIDCIDY	_
Travel-Mileage Employee Training Contracts Total Sal & Fringe Total Operating	\$ 405,61	0
Total Child Care Subsidy	\$ 405,61	6

INCOME MAINTENANCE

Salary-Regular	\$ 10,302,021
Salary-Overtime	0
Salary-Temp/PT	310,523
Salary-Longevity	372,122
401k	824,162
FICA	840,327
Retirement	771,615
Health Insurance	3,011,264
Life Insurance	15,733
Professional Services	14,000
Motor Fuels	400
Travel-Mileage	17,381
Emp. Training	6,310
College Street Parking	0
Contracts	712,427
EA Issuance	0
Carolina Access/BCMS	0
Outreach Activities	0
Misc. Expenses	0
FS E&T Payments	14,513
EBT Training	0
Total Sal & Fringe	16,447,766
Total Operating	750,518
Total Program	14,513
Total Income Maintenance Division	\$ 17,212,797

ADULT SERVICES

Salary-Regular	\$ 1,282,583
Salary-Temp/PT	0
Salary-Longevity	56,580
401 K	102,605
FICA	102,444
Retirement	94,677
Health Insurance	288,034
Life Insurance	1,505
Professional Services	578,862
Motor Fuels	3,600
Travel-Mileage	55,000
Emp. Training	7,070
Contract Service	26,000
College St Parking Deck	0
IH Aide Contract	172,332
IH Aide Travel	0
Irene Wortham - ADC	129,143
MA CAP BCHD Assess	0
MA CAP MED Supplies	0

Adult Donations Total Sal & Fringe Total Operating Total Program		0 1,928,428 670,532 301,475
Total Adult Services	\$	2,900,435
CHILDREN AND FAMILY SERVI	CFC	
Salary-Regular	\$	8,882,437
Salary-Temp/PT	Ψ	26,165
Salary-Longevity		356,110
401 K		710,583
FICA		708,739
Retirement		653,154
Health Insurance		2,022,784
Life Insurance		10,570
Professional Services		1,099,427
Motor Fuels		12,200
Travel-Mileage		366,612
Emp. Training		90,620
Contract Services (Hepatitis B Shots)		0
College St Parking Deck		0
Children's Law Project		72,250
Legal (Ott, Cone, Redpath)		45,563
Family Treatment Court		22,500
Links Trust		86,000
Helpmate		16,000
DV Lethality Prevention		69,350
Foster Care Supplement		638,856
Recruit & Retention		30,000
Foster Care - Training		0
Foster Care - Clothing		25,000
Foster Care - Donations		0
Foster Care – Misc.		23,000
FSC-Parent Training		40,000
Ind. Living		63,185
Psychologicals		135,000
Foster Care - SSI		150,000
CP Fatality Task Force		2,000
Post Adoption SSBG2		50,000
FFK Court Coordinator		12 270 540
Total Sal & Fringe		13,370,540
Total Operating		1,709,172
Total Program		1,328,391
Total Children And Family Services Division	\$	16,408,103

EMERGENCY ASSISTANCE

LIVIERGENCI ASSISTANC.	L	
AFDC-EA	\$	400,500
Project Share		125,000
LIHEAP Assistance		1,306,738
CIP		1,000,000
County GA		23,500
Family Pres. EA		52,750
Unclaimed Bodies		7,000
officialified bodies		7,000
Total Emergency Assistance	\$	2,915,488
PUBLIC ASSISTANCE PAYME	NTS	
Adoption-Assistance	\$	895,718
Adoption-Vendor	Ψ	85,829
Foster Care TANF		03,029
Aid To Blind		43,967
		43,907
TANF County Paid		· ·
Medicaid Transportation		1,400,000
Foster Care Assistance - IVE		2,055,545
Foster Care Assistance - SFHF		1,536,886
Child Care Subsidy		7,541,725
Smart Start Child Care		1,008,160
Child Care Subsidy - ARRA		0
SAA-Rest Homes		2,083,418
Total Public Assistance Payments	\$	16,651,248
VETERANS SERVICE		
Salary-Regular	\$	186,462
Salary-Longevity	Ψ	5,042
401 K		14,917
FICA		14,650
Retirement		13,539
		·
Health Insurance		54,384
Life Insurance		273
Motor Fuels		1,500
Travel-Mileage		13,886
Emp. Training		735
College St Parking Deck		0
Total Sal & Fringe		289,268
Total Operating		16,121
Total Program		0
Total Veteran Services	\$	305,389

NON-COUNTY BUDGET REVENUES

MOM-COUNTI BUDGET REVENUES	
Social Services Administration Social Service Intergovernmental Miscellaneous Miscellaneous Revenues From Human Services	0 2,000 0
Child Support Social Service Intergovernmental Social Service Service	1,670,515 62,357
Income Maintenance Social Service Intergovernmental Social Service Third Social Service Contr.	11,024,220 74,890 60,000
Adult Services Social Service Intergovernmental Social Service Intergovernmental Social Service Contr.	1,060,118 184,218 0
Children And Family Services Social Service Intergovernmental Social Service Intergovernmental Grants Social Service Service Social Service Contr.	5,564,885 599,613 0 101,200 0
Emergency Assistance Social Service Intergovernmental Social Service Third	2,306,738 3,500 125,000
Public Assistance Social Service Intergovernmental ARRA Child Care Subsidy Social Service Intergovernmental	8,253,583 0 4,194,943
Veteran Service Social Service Intergovernmental	1,497
Child Care Subsidy Social Service Intergovernmental Social Service Intergovernmental	313,026 0

Work First

N/A

EXPENDITURES

Total Salary	\$ 23,568,500
Total Salary-Longevity	901,436
Total 401 K	1,855,145
Total FICA	1,871,937
Total Retirement	1,725,141
Total Health Insurance	5,995,335
Total Life Insurance	31,023
Total Unemployment Insur	231,893
Total Workers Comp	238,088
Total Sal & Fringe	36,418,497
Total Operating	7,776,445
Total Program	21,331,415
Sub-Total Expenditures	65,526,357
Total Expenditures	65,526,357
Total Revenues	35,602,303
Grand Total	29,924,054
Federal Revenues	30,193,085
State Revenues	4,983,771
Total	\$ 35,176,856



ADMINISTRATION

Calarias & Wagaa Dagular	\$	250,002
Salaries & Wages Regular	Ф	358,093
Longevity 401k		15,607
FICA		28,647
Retirement		28,588 26,421
Group Insurance		108,768
Life Insurance		342
Unemployment Compensation		72,036
Workers Compensation		69,835
Total Salary & Benefits		708,337
Medical Supplies		128,182
Supplies		153,863
Travel		12,261
Transport Clients/Others		0
Telephone		117,939
Postage		36,893
Printing		35,591
Maint & Repair Equipment		5,100
Employee Training		15,875
Contracted Services		193,701
Bioterrorism Preparedness And Response		74,825
Dental		121,000
Rental-Land		38,560
Rental-Copiers		60,020
Insurance & Bonds		47,926
Dues & Subscriptions		4,062
Bank Service Charges		8,000
Claims/Benefit Payments		9,975
Total Operating		1,063,773
Contracts, Grants, & Subs		136,000
Total Salary & Benefits		708,337
Total Operating		1,063,773
Total Community Program Support		136,000
Total Expenditures	\$	1,908,110
CLINICAL SERVIC	ES	
Salaries & Wages Regular	\$	2,193,261
Salaries & Wages Temp	4	45,650
Longevity		101,043
401k		175,461
FICA		179,006
Retirement		162,207
Group Insurance		530,244
Life Insurance		2,736
Total Salary & Benefits		3,389,608
Uniforms		1,030
Education/Program Materials		3,535
Pharmaceuticals		186,747
Pharmaceuticals - Flu Vaccine		34,000

Pharmaceuticals – Vaccines Travel Maintenance & Repair Equipment Laundry & Dry Cleaning Employee Training Contracted Services Dues & Subscriptions Total Operating Total Salary & Benefits Total Operating Total Expenditures	\$	442,265 20,985 1,535 1,184 15,021 258,829 4,694 969,825 3,389,608 969,825
ENVIRONMEN	<u> </u>	1,000,100
Salaries & Wages Regular Longevity 401k FICA Retirement Group Insurance Life Insurance Total Salary & Benefits Education/Program Materials Motor Fuels Travel Maintenance & Repair Equipment Employee Training Dues & Subscriptions Total Operating Total Salary & Benefits Total Operating	\$	1,174,500 57,609 93,960 94,256 87,110 312,708 1,573 1,821,716 8,013 26,734 33,706 465 2,630 1,175 72,723 1,821,716 72,723
Total Expenditures	\$	1,894,439
POPULATIO	N HEALTH	
Salaries & Wages Regular Salaries & Wages Temp Longevity 401k FICA Retirement Group Insurance Life Insurance Total Salary & Benefits Education/Program Materials Travel Employee Training Contracted Services Eliminating Health Disparities Grant Innovative Approaches Grant Health Promotion-MAHEC Breastfeeding Peer Counselor Regional	\$	1,561,867 50,427 53,859 124,719 127,460 117,594 421,476 2,257 2,459,659 26,986 83,269 12,303 204,224 207,600 135,000 291,815 8,304

Dues & Subscriptions Total Operating Total Salary & Benefits Total Operating		1,045 970,546 2,459,659 970,546
Total Expenditures	\$	3,430,205
SCHOOL N	URSES	
Salaries & Wages Regular Longevity 401k FICA Retirement Group Insurance Life Insurance Total Salary & Benefits Education/Program Materials Medical Supplies Office Supplies Travel Telephone Postage Printing Employee Training Dues & Subscriptions Total Operating Total Salary & Benefits Total Operating	\$	1,765,202 79,897 140,611 141,150 129,914 367,092 1,984 2,625,850 2,501 1,700 3,300 16,088 17,820 186 700 10,335 300 52,930 2,625,850 52,930
Total Expenditures	\$	2,678,780
GRAND TO	OTALS	_
Total Salary - Regular Total Salary - Temporary Total Salary - Longevity Total 401k Total FICA Total Retirement Total Group Insurance Total Life Insurance Total Unemployment Compensation Total Workers Compensation Grand Total Salary & Benefits Grand Total Operating Grand Total Community Program Support Grand Total Expenditures Total Federal Revenue Total State Revenue Total Service Fees Revenue Total Contracts & Grants Revenue Grand Total Revenues	\$	7,052,923 96,077 308,015 563,398 570,460 523,246 1,740,288 8,892 72,036 69,835 11,005,170 3,129,797 136,000 14,270,967 2,960,541 819,889 1,410,579 559,232 5,750,241
Net County Cost	\$	8,520,726

BEHAVIORAL HEALTH BUDGET FY 15

JAIL DIVERSION

Jail Re-Entry Services Drug Court Support Services Forensic Coordinator Drug Court Family Treatment Court Law Enforcement Emergency Dept. Drop-Off	\$ 142,134 42,500 85,197 72,833 72,833 164,250
HOMELESS INITIATIVE Homeless Coordinator Supported Housing Case Management Community Health Navigation SOAR Disability Program	\$ 32,000 90,000 105,000 90,000
ASSESSMENT CENTER Forensic Evaluations Trauma Focused CBT	\$ 202,565 74,000
PREVENTION SERVICES Partnership For Substance Free Youth In BC CISM/Veteran's Trauma Specialist Buncombe County Behavioral Health	\$ 79,823 96,822 14,362
Total Behavioral Health Expenditures	\$ 1,364,322
County Maintenance Of Effort Funds Sheriff's Office Funds HHS Social Work Funds County General Funds Total Behavioral Health Revenues	600,000 20,000 293,322 451,000 1,364,322
BC Behavioral Health	\$ 1,364,322

Community Contracts

WCMS – Project Access United Way 211 Mission – High School Nurse Incentive	350,000 105,000 28,500
Bunc. Cty. Partnership For Children MAHEC Rural Health	153,000 324,000
Total Community Contracts	\$ 3,570,560

Net County Cost

Net HHS County Cost With Community Contracts Included	\$ 42,398,282
Public Health Budget	8,520,726
DSS Budget	29,855,996
Community Contracts Budget	3,570,560
Behavioral Health Budget	\$ 451,000

