



Date Approved: 2.23.17  
By: [Signature]  
**James Wagner, LMFT/LPCC**  
Behavioral Health Deputy Director

<b>POLICY TITLE</b>  <b>Expending and Reporting Perinatal Funding</b>	<b>Policy No: 1350-1-3</b>  <b>Date Effective: 02/21/2017</b>
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**PURPOSE**

Establish a written process for expending and reporting perinatal funds.

**AUTHORITY**

Ensure compliance with the terms of the Substance Use Disorder (SUD) State/County Contract Exhibit B, A3, Part 1, Section 1, H, 3.

**SCOPE**

All perinatal programs receiving Substance Abuse Prevention and Treatment Block Grant (SABG) funding under a subcontract with Alameda County, in addition to Alameda County Behavioral Health Care Services administration.

**POLICY**

Establish a process for determining whether the activities of a program comply with the statutes, regulations, and terms and conditions of the SABG. Monitor the program's costs and activities to ensure SABG funding is expended as intended.

**PROCEDURE**

From the planning process through cost reporting, Operations, the Network Office, and the Finance Department work together to ensure perinatal programs have sufficient and appropriate funding to deliver the mandated services:

- A. The Perinatal Operations Manager, the Network Office, and Finance Department consider if a program may be funded with SABG Perinatal Set-Aside:
  - i. The Perinatal Operations Manager works with all perinatal programs – outpatient, intensive outpatient, residential, case management, and outreach – to ensure the services defined in 45 CFR 96.124(e) and the Perinatal Services Network Guidelines FY 2016-17 are available to pregnant women, women with dependent children, and women who are attempting to regain custody of their children. Providers must accept all provisions to receive SABG Perinatal Set-Aside funding, as described in Subcontract Exhibit A-2.
  - ii. The policy *Expending the Substance Abuse Prevention and Treatment Block Group* is followed to determine whether the program's expenses are allowable.

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- B. After a program is funded, the Network Office and the Perinatal Operations Manager monitor and audit all perinatal programs to ensure continued compliance with 45 CFR 96.124(e) and the Perinatal Services Network Guidelines FY 2016-17. They also review program activities and performance for compliance with Subcontract Exhibit A.
- C. The Finance Department budgets SABG Perinatal Set Aside, Perinatal Local Revenue Funds (formerly State General Funds), and Women and Children's Residential Treatment Services funding only to programs serving pregnant women, women with dependent children, and women who are attempting to regain custody of their children. The Source of Funds document shows allocations and funding streams for each program. Organized by population and modality, the Finance Department can easily identify which programs are appropriate for perinatal funding and whether the Women Services Maintenance of Effort (MOE) requirement will be met.
- D. At midyear, the Finance Department projects costs based on invoices and utilization based on the first six months. If the cost projection indicates a program may not spend its SABG Perinatal Set-Aside allocation, the Source of Funds is revised by shifting the funding to a perinatal program within the same treatment modality. At this point, the County will alert the State if there is risk of not spending the entire SABG allocation or meeting the MOE, although the County has never had this issue.
- E. The Network Office collects monthly invoices, quarterly financial reports, and an annual cost report from the providers. They review program utilization and costs, and determine reimbursement on a monthly basis and at cost settlement.
- F. After the Network Office reviews the annual cost report, it is submitted to the Finance Department for further review. Finance assigns final funding to perinatal programs, and ensures the County's perinatal funding is expended as planned. Perinatal program information including utilization data and funding streams is recorded in *FY SDADP Worksheets* and *FY Administration Cost Allocation*. These two workbooks will be the data source for the cost report, which is submitted to the State as required by HSC Section 14124.24 (g).

### HISTORY

**Original Author** *Jill Louie*

**Original Date of Approval:** xx/xx/xxxx by (Name of Behavioral Health Director)

**Revisions:**

Revise Author	Date of Approval by (Name)

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### DEFINITIONS

**Substance Use Disorder (SUD) State/County Contract Exhibit B, A3, Part 1, Section 1, H, 3**

Pursuant to subdivision (b) of Section 11978.1, a county shall notify the Department in writing of proposed local changes to the county's expenditure of funds. The Department shall review and may approve the proposed local changes depending on the level of expenditures needed to maintain the statewide SAPT Block Grant MOE.

**45 CFR 96.124(e)**

With respect to paragraph (c) of this section, the amount set aside for such services shall be expended on individuals who have no other financial means of obtaining such services as provided in § 96.137.

All programs providing such services will treat the family as a unit and therefore will admit both women and their children into treatment services, if appropriate. The State shall ensure that, at a minimum, treatment programs receiving funding for such services also provide or arrange for the provision of the following services to pregnant women and women with dependent children, including women who are attempting to regain custody of their children:

- (1) primary medical care for women, including referral for prenatal care and, while the women are receiving such services, child care;
- (2) primary pediatric care, including immunization, for their children;
- (3) gender specific substance abuse treatment and other therapeutic interventions for women which may address issues of relationships, sexual and physical abuse and parenting, and child care while the women are receiving these services;
- (4) therapeutic interventions for children in custody of women in treatment which may, among other things, address their developmental needs, their issues of sexual and physical abuse, and neglect; and
- (5) sufficient case management and transportation to ensure that women and their children have access to services provided by paragraphs (e) (1) through (4) of this section.

**Perinatal Services Network Guidelines FY 2016-17**

**HSC Section 14124.24 (g)**

(g)(1) A county or a contracted provider, except for a provider to whom subdivision (h) applies, shall submit accurate and complete cost reports for the previous fiscal year by November 1, following the end of the fiscal year. The department may settle Drug Medi-Cal reimbursable services, based on the cost report as the final amendment to the approved county Drug Medi-Cal contract. (2) Amounts paid for services provided to Drug Medi-Cal beneficiaries shall be audited by the department in the manner and form described in Section 14170. (3) Administrative appeals to review grievances or complaints arising from the findings of an audit or examination made pursuant to this section shall be subject to Section 14171.

