

Instructions

Counties shall report their planned expenditures for all behavioral health funding sources, not limited to only BHSA, along the Behavioral Health Care Continuum in Table One.
Column C: counties shall indicate whether they provide each category of services using the check box.

Columns D through I: counties shall include their estimated total expenditures for the Integrated Plan period across all behavioral health funding sources and programs by each Behavioral Health Care Continuum category.

Columns J and K: counties shall input their estimated total count of all individuals served through the county behavioral health system across all funding sources/programs. These counts may be duplicated.

Row 44: the total projected expenditures in columns D through I and total projected individuals served annually in columns J and K will be auto-populated from rows 26 through 42.

Note: For a list of all funding streams that should be included in the projected expenditures calculation for each BH Care Continuum Category, please see the Behavioral Health Services Act (BHSA) County Policy Manual Chapter 3, Section A.

Reminder: 1) Counties must comply, and must ensure their providers comply, with all applicable conditions for each source of funding, as defined in applicable laws, regulations, and guidance, including the BHSA County Policy Manual. 2) in Chapter 6, Section C of the BHSA County Policy Manual, including requiring BHSA-funded providers to bill appropriately for services covered by the county's Medi-Cal. Counties must promote access to care through efficient use of state and county resources as outlined Behavioral Health Delivery System and make a good faith effort to seek reimbursement from Medi-Cal managed care plans and commercial health insurance. These policies apply only to non-Housing services that are eligible for both BHSA funding and another funding source, such as Medi-Cal payment, commercial payment, etc.

Reminder: 1) Counties must comply, and must ensure their providers comply, with all applicable conditions for each source of funding, as defined in applicable laws, regulations, and guidance, including the BHSA County Policy Manual. 2) Counties must promote access to care through efficient use of state and county resources as outlined in Chapter 6, Section C of the BHSA County Policy Manual, including requiring BHSA-funded providers to bill appropriately for services covered by the county's Medi-Cal Behavioral Health Delivery System and make a good faith effort to seek reimbursement from Medi-Cal managed care plans and commercial health insurance. These policies apply only to non-Housing services that are eligible for both BHSA funding and another funding source, such as Medi-Cal payment, commercial payment, etc.

Table One: Behavioral Health Care Continuum Projected Expenditures									
	Services Are Provided in County	Total Projected Expenditures On Adults and Older Adults			Total Projected Expenditures on Children/Youth (under 21)			Projected Individuals to be Served Annually (May be duplicated)	
		Year One	Year Two	Year Three	Year One	Year Two	Year Three	Eligible Adults and Older	Eligible
Substance Use Disorder (SUD) Services									
Primary Prevention Services	<input type="checkbox"/>	\$ -	\$ -	\$ -	\$ 529,230.52	\$ 530,844.92	\$ 529,610.89	#	#
Early Intervention Services	<input type="checkbox"/>	\$ -	\$ -	\$ -	\$ 1,216,415.92	\$ 1,248,758.55	\$ 1,267,688.51	#	#
Outpatient Services	<input type="checkbox"/>	\$ 13,001,186.72	\$ 13,157,229.55	\$ 13,306,227.93	\$ 502,258.82	\$ 515,121.28	\$ 528,498.25	#	#
Intensive Outpatient Services	<input type="checkbox"/>	\$ 1,157,744.38	\$ 1,186,446.80	\$ 1,299,113.82	\$ -	\$ -	\$ -	#	#
Crisis and Field-Based Services	<input type="checkbox"/>	\$ 2,643,934.74	\$ 2,726,091.53	\$ 2,811,067.24	\$ -	\$ -	\$ -	#	#
Residential Treatment Services	<input type="checkbox"/>	\$ 4,213,078.35	\$ 4,182,541.93	\$ 4,310,437.79	\$ -	\$ -	\$ -	#	#
Inpatient Services	<input type="checkbox"/>	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	#	#
Mental Health (MH) Services									
Primary Prevention Services	<input type="checkbox"/>	\$ 1,148,510.52	\$ 1,178,037.00	\$ 1,208,424.00	\$ -	\$ -	\$ -	#	#
Early Intervention Services	<input type="checkbox"/>	\$ 1,030,509.56	\$ 1,070,834.96	\$ 1,109,975.72	\$ 3,954,601.50	\$ 4,102,994.04	\$ 4,245,767.28	#	#
Outpatient and Intensive Outpatient Services	<input type="checkbox"/>	\$ 21,206,003.43	\$ 21,748,489.71	\$ 22,399,050.46	\$ 19,992,952.67	\$ 20,552,970.00	\$ 21,130,613.00	#	#
Crisis Services	<input type="checkbox"/>	\$ 2,508,303.39	\$ 2,560,152.50	\$ 2,617,317.90	\$ 5,402,866.53	\$ 5,512,606.90	\$ 5,628,821.39	#	#
Residential Treatment Services	<input type="checkbox"/>	\$ 4,579,687.83	\$ 1,752,947.00	\$ 1,788,004.00	\$ 554,745.00	\$ 565,840.00	\$ 577,157.00	#	#
Hospital and Acute Services	<input type="checkbox"/>	\$ 10,376,795.88	\$ 10,584,330.84	\$ 10,796,018.17	\$ 579,695.00	\$ 591,289.00	\$ 603,115.00	#	#
Subacute and Long-Term Care Services	<input type="checkbox"/>	\$ 6,106,940.00	\$ 6,229,079.00	\$ 6,353,660.00	\$ -	\$ -	\$ -	#	#
Housing Services (MH + SUD)									
Housing Intervention Component Services	<input type="checkbox"/>	\$ 7,102,867.44	\$ 8,059,253.00	\$ 8,229,381.00	\$ -	\$ -	\$ -	#	#
Total Projected Expenditures and Individuals Served									
Total Projected Expenditures and Individuals Served (auto-populated)	-	\$ 75,075,562.24	\$ 74,435,433.82	\$ 76,228,678.03	\$ 32,732,765.96	\$ 33,620,424.69	\$ 34,511,271.32	0	

Instructions

Counties shall report their planned expenditures for all behavioral health services and activities, not limited to only BHSA funded services and activities, other than those that are part of the Behavioral Health Care Continuum in Table Two.

Rows 19 through 22: counties shall include their estimated total expenditures for the Integrated Plan period across all behavioral health funding sources and programs for each category listed. These costs are those that do not easily fit under the categories in Table One, "BH CoC Expenditures."

Row 24: total projected expenditures will be auto-populated from rows 19 through 22.

Note:

For a list of all funding streams that should be included in the projected expenditures calculation for Table Two: Other County Expenditures please see the Behavioral Health Services Act County Policy Manual Chapter 3 Section A.

Reminder: 1) Counties must comply, and must ensure their providers comply, with all applicable conditions for each source of funding, as defined in applicable laws, regulations, and guidance, including the BHSA County Policy Manual. 2) Counties must promote access to care through efficient use of state and county resources as outlined in Chapter 6, Section C of the BHSA County Policy Manual, including requiring BHSA-funded providers to bill appropriately for services covered by the county's Medi-Cal Behavioral Health Delivery System and make a good faith effort to seek reimbursement from Medi-Cal managed care plans and commercial health insurance. These policies apply only to non-Housing services that are eligible for both BHSA funding and another funding source, such as Medi-Cal payment, commercial payment, etc.

Table Two: Other County Expenditures				
Other Expenditures	Total Projected Expenditures			
	Year One	Year Two	Year Three	
Capital Infrastructure Activities	\$ 524,463.09	\$ 541,752.00	\$	559,670.00
Workforce Investment Activities	\$ -	\$ -	\$	-
Quality & Accountability, Data Analytics, and Plan Management & Administrative Activities (including indirect administrative activities)	\$ 25,611,277.65	\$ 25,484,710.30	\$	26,366,650.22
Other County Behavioral Health Agency Services/Activities (e.g., Public Guardian, CARE Act, LPS Conservatorships, DSH for Housing, Court Diversion Programs)	\$ 575,327.95	\$ 546,162.76	\$	564,508.03
Total Projected Expenditures				
Total Projected Expenditures (auto-populated)	\$ 26,711,068.69	\$ 26,572,625.06	\$	27,490,828.25

Instructions

Counties shall report their planned revenue across the county behavioral health delivery system to support all behavioral health services and programs by funding source in Table Three.

Rows 19 through 34: counties shall report projected expenditures for each funding source/program.

Row 22: for State General Fund, include funds received for the non-federal share of Medi-Cal payments.

Row 27: for Commercial Insurance (including Medicare), reporting reflects planned reimbursement obtained by county-operated providers, not county-contracted providers.

Row 36: total expenditures will be auto-populated from rows 19 through 34.

Row 37: will be auto-validated by DHCS against rows 36, 38, and 39. Validation: total projected unspent BHSA funds should total out to \$0.

Rows 38 and 39: will be auto-validated by DHCS against total projected expenditures in Tables One and Two.

Reminder: 1) Counties must comply, and must ensure their providers comply, with all applicable conditions for each source of funding, as defined in applicable laws, regulations, and guidance, including the BHSA County Policy Manual.

2) Counties must promote access to care through efficient use of state and county resources as outlined in Chapter 6, Section C the BHSA County Policy Manual, including requiring BHSA-funded providers to bill appropriately for services covered by the county's Medi-Cal Behavioral Health Delivery System and make a good faith effort to seek reimbursement from Medi-Cal managed care plans and commercial health insurance. These policies apply only to non-Housing services that are eligible for both BHSA funding and another funding source, such as Medi-Cal payment, commercial payment, etc.

Table Three: Projected Annual Expenditures by County BH Funding Source			
	Total Annual Projected Expenditures (Year One)	Total Annual Projected Expenditures (Year Two)	Total Annual Projected Expenditures (Year Three)
BHSA	\$ 27,129,412.60	\$ 28,232,840.00	\$ 29,122,423.00
1991 Realignment (Bronzan-McCorquodale Act)	\$ 8,825,414.66	\$ 8,815,542.23	\$ 8,805,373.63
2011 Realignment (Public Safety Realignment)	\$ 19,721,734.46	\$ 19,820,519.73	\$ 20,329,378.63
State General Fund	\$ 5,599,566.87	\$ 5,844,846.52	\$ 5,935,401.93
FFP (SMHS, DMC/DMC-ODS, NSMHS)	\$ 38,922,291.54	\$ 40,730,380.77	\$ 41,485,466.50
Projects for Assistance in Transition from Homelessness (PATH)	\$ 99,048.45	\$ 50,772.00	\$ 50,772.00
Community Mental Health Block Grant (MHBG)	\$ 769,631.00	\$ 769,631.00	\$ 769,631.00
Substance Use Block Grant (SUBG)	\$ 2,410,662.64	\$ 1,699,923.15	\$ 1,702,166.90
Commercial Insurance	\$ 110,000.00	\$ 110,000.00	\$ 110,000.00
County General Fund	\$ 19,085,642.45	\$ 19,740,877.53	\$ 21,084,347.65
Opioid Settlement Funds	\$ 1,560,268.85	\$ 1,569,628.96	\$ 1,579,363.48
Other Funding Sources	Total Annual Projected Expenditures (Year One)	Total Annual Projected Expenditures (Year Two)	Total Annual Projected Expenditures (Year Three)
Other federal grants	\$ -	\$ -	\$ -
Other state funding (including DSH funding)	\$ 8,546,134.32	\$ 5,692,886.11	\$ 5,699,534.87
Other county mental health or SUD funding	\$ 27,000.00	\$ 27,000.00	\$ 27,000.00
Other foundation funding	\$ 1,712,589.05	\$ 1,523,635.57	\$ 1,529,918.01
Summary	Total Annual Projection (Year One)	Total Annual Projection (Year Two)	Total Annual Projection (Year Three)
Total projected expenditures (all BH funding streams/ programs) (auto-populated)	\$ 134,519,396.89	\$ 134,628,483.57	\$ 138,230,777.60
Total projected unspent BHSA funds	\$ -	\$ (0.00)	\$ (0.00)
Auto-validation: Table 1: Behavioral Health Care Continuum Projected Expenditures	\$ 107,808,328.20	\$ 108,055,858.51	\$ 110,739,949.35
Auto-validation: Table 2: Other County Expenditures	\$ 26,711,068.69	\$ 26,572,625.06	\$ 27,490,828.25

Instructions

Counties shall report all of their planned transfers and approved Housing Intervention Component Exemption 1 in Table Four.

Rows 38-47: this section will be auto-populated from the sections below it.

Rows 38, 41, and 44: the total adjusted allocation percentages for each component, inclusive of both exemptions and transfers.

Rows 39, 42, and 45: is the projected amount of funding, in dollars, based on the adjusted total allocation percentages.

Row 46: reflects the unspent MHSA funding that will be transferred to each of the Behavioral Health Services Act (BHSA) component allocations.

Row 47: reflects the excess prudent reserve funding that will be transferred to each of the BHSA components.

Row 50: enter the base funding for Housing Interventions in dollars in D50. The base percentage will be auto-populated in C50.

Note: the base funding available for all three components is net of BHSA plan administration expenses as detailed on tab "B. BHSA, PlanAdmin." For example, a total BHSA allocation of \$1 million -

9% Plan Admin (4% B&A for a small county + 5% IP annual planning) = \$910,000 total allocation available for all three components. This would result in \$273,000 in base funding for HI (30% of \$910,000) and \$318,500 for both FSP and BHSS (35% of \$910,000).

Row 51: if your county has an approved housing exemption, enter the percent of funds you are moving out of Housing Interventions into the other components in C51. Enter this percentage as a positive value.

It will automatically display as a negative value in the cell.

Row 52: if your county has an approved housing exemption, enter the percent of funds you are moving out of the other components and into Housing Interventions in C52. Enter this percentage as a positive value.

Row 55: enter the base funding for Full Service Partnerships, in dollars, in D55. The base percentage will be auto-populated in C55. See the "Note" for Row 50 related to the total BHSA allocation and plan admin.

Row 59: enter the base funding for Behavioral Health Services and Supports, in dollars, in D59. The base percentage will be auto-populated in C59. See the "Note" for Row 50 related to the total BHSA allocation and plan admin.

Rows 56 and 60: enter the percentage transferred from Housing Interventions for Full Service Partnerships (FSP) and Behavioral Health Services and Supports (BHSS), respectively.

Rows 53, 57, and 61: the updated base percentage will be auto-populated for Housing Interventions, FSP, and BHSS, respectively.

Rows 65, 71, and 77: auto-populated.

Rows 66, 72, and 78: Enter the transfer-out percentage as a positive number. It will automatically display as a negative value in the cell.

Note: If your county plans to use Housing Intervention funds (up to 7 percent) to provide outreach and engagement, the amount of funds the county can transfer out of the Housing Intervention component (**Row 66**) must be decreased by the corresponding amount. Counties will document the amount dedicated to outreach and engagement in Tab 5: Housing Interventions.

Rows 67, 73, and 79: enter your transfer in percentage as a positive number.

Rows 68, 74, and 80: the new base percentage is auto-populated for each year.

Row 83-87: enter the amount of MSHA funds by component allocation transferring to each BHSA component. Unspent MSHA funds do not include encumbered WET, CFTN, or INN projects that were operational prior to July 1, 2026. Please see Policy Manual Chapter 6, Section 7 for additional information regarding MSHA to BHSA transitions.

Row 88: the total dollar amount is auto-populated.

Row 91: enter the dollar amount of prior year prudent reserve ending balance.

Row 92: enter the prudent reserve maximum for your county.

Row 93: the dollar amount of excess prudent reserve funding to be transferred out of the prudent reserve will auto-populate.

Row 94-96: enter the amount of excess prudent reserve funds to allocated to each component.

Row 97: auto-populated.

Reminder: 1) Counties must comply, and must ensure their providers comply, with all applicable conditions for each source of funding, as defined in applicable laws, regulations, and guidance, including the BHSA County Policy Manual. 2) Counties must promote access to care through efficient use of state and county resources as outlined in Chapter 6, Section C of the BHSA County Policy Manual, including requiring BHSA-funded providers to bill appropriately for services covered by the county's Medicaid, Behavioral Health Delivery System and make a good faith effort to seek reimbursement from Medi-Cal managed care plans and commercial health insurance. These policies apply only to non-Housing services that are eligible for both BHSA funding and another funding source, such as Medi-Cal payment, commercial payment, etc.

Reminder: 1) Counties must comply, and must ensure their proxy comply, with all applicable laws, regulations, and guidance, including the BHSA County Policy Manual. 2) Counties must promote access to care through efficient use of state and county resources as outlined in Chapter 6, Section C of the BHSA County Policy Manual, including requiring BHSA-funded providers to bill appropriately for services covered by the county's Medi-Cal Behavioral Health Delivery System and make a good faith effort to seek reimbursement from Medi-Cal managed care plans and commercial health insurance. These policies apply only to non-housing services that are eligible for both BHSA funding and another funding source, such as Medi-Cal payment, commercial payment, etc.						
Table Four: BHSA Transfers Summary (auto-populated)						
	Housing Intervention		Full-Service Partnership		Behavioral Health Services and Support	Totals
Year One						
Adjusted Total Allocation Percentages (Exemptions and Transfers)		30%		35%	35%	100%
Projected Component Allocation (Based on Adjusted Allocation Percentages)	\$	-	\$	-	\$	-
Year Two						
Adjusted Total Allocation Percentages (Exemptions and Transfers)		30%		35%	35%	100%
Projected Component Allocation (Based on Adjusted Allocation Percentages)	\$	-	\$	-	\$	-
Year Three						
Adjusted Total Allocation Percentages (Exemptions and Transfers)		30%		35%	35%	100%
Projected Component Allocation (Based on Adjusted Allocation Percentages)	\$	-	\$	-	\$	-
Unspent Mental Health Services Act (MHSA) to BHSA	\$	-	\$	1,000,000.00	\$	14,269,574.00
Excess Prudent Reserve (PR) to BHSA	\$	-	\$	-	\$	-
Behavioral Health Services Fund (BHSP) Housing Intervention Component Exemption (Ability to change component's overall percentage)						
Base Component	Housing Intervention Component Percentage		Housing Intervention Funds			
Base Percentage		30%	\$	-		
Amount Transferring Out		0%	\$	-		
Amount Transferring In		0%	\$	-		
New Housing Interventions Base Percentage (auto-populated)		30%	\$	-		
Transferred To/From	Full Service Partnership Percentage		Full Service Partnership Funds			
Base Percentage		35%	\$	-		
Percentage Added		0%	\$	-		
New FSP Base Percentage (auto-populated)		35%	\$	-		
Transferred To/From	Behavioral Health Services and Support Percentage					
Base Percentage		35%	\$	-		
Percentage Added		0%	\$	-		
New BHSS Base Percentage (auto-populated)		35%	\$	-		
Funding Transfer Request Allocations						
Year 1						
	Housing Intervention Component (1)		Full-Service Partnership		Behavioral Health Services and Support	
Base Percentage after Housing Intervention Component Exemption (auto-populated)		30%		35%		35%
Amount Transferring Out		0%		0%		0%
Amount Transferring In		0%		0%		0%
New Base Percentage after Funding Transfer Request (auto-populated)		30%		35%		35%
Year 2						
	Housing Intervention Component (1)		Full-Service Partnership		Behavioral Health Services and Support	
Base Percentage after Housing Intervention Component Exemption (auto-populated)		30%		35%		35%
Amount Transferring Out		0%		0%		0%
Amount Transferring In		0%		0%		0%
New Base Percentage after Funding Transfer Request (auto-populated)		30%		35%		35%
Year 3						
	Housing Intervention Component (1)		Full-Service Partnership		Behavioral Health Services and Support	
Base Percentage after Housing Intervention Component Exemption (auto-populated)		30%		35%		35%
Amount Transferring Out		0%		0%		0%
Amount Transferring In		0%		0%		0%
New Base Percentage after Funding Transfer Request (auto-populated)		30%		35%		35%
MHSA Transfers to BHSA						
MHSA Component	Available Unspent BHSA Funds		Transferred to Housing Intervention Component		Transferred to Full-Service Partnership	Transferred to Behavioral Health Services and Support
CSS	\$	6,141,021.00	\$	-	1,000,000.00	\$ 5,141,021.00
PEI	\$	7,258,831.00	\$	-	-	\$ 7,258,831.00
INN	\$	869,722.00	\$	-	-	\$ 869,722.00
WET	\$	-	\$	-	-	\$ -
CFTN	\$	-	\$	-	-	\$ -
Total (auto-populated)	\$	14,269,574.00	\$	-	1,000,000.00	\$ 13,269,574.00
Excess Prudent Reserve to BHSA Components						
Transfer from Prudent Reserve to BHSA Component Allocation	Amount					
Estimated Local Prudent Reserve Balance At End of Previous Fiscal Year	\$ 3,868,904.00					
Local Prudent Reserve Maximum (2)	\$ 3,868,904					
Excess Prudent Reserve Funding that must be transferred	\$ -					
Housing Intervention (3)	\$ -					
FSP	\$ -					
BHSS (4)	\$ -					
Total Transferred Excess Prudent Reserve (auto-populated)	\$ -					
References						
1. BHSA County Policy Manual section 6.8.5 states counties may use up to seven percent of Housing Interventions component funds on outreach and engagement. The amount of funds transferred out of the Housing Interventions component into another funding component must be decreased by a corresponding amount. Counties are not required to use Housing Intervention component funding for outreach and engagement, or other funding transfer requests. It remains at the discretion of the counties to transfer up to a total of 14 percent of its BHSA funds in a fiscal year.						
2. WBI Code § 5892, subdivision (b)(3)-(4) states a county's prudent reserve must not exceed 20% of average of the total funds distributed to the county. Behavioral Health Services Fundover past five years (25% for counties with a population of less than 200,000).						
3. WBI Code § 5892, subdivision (b)(6)(B) states prudent reserve funding cannot be spent on capital development.						
4. WBI Code § 5892, subdivision (b)(6)(A) states counties must spend prudent reserve funds Housing Intervention, FSP, and/or BHSS programs or services only.						

Instructions

Counties shall report their requested expenditures for their BHSA Housing Interventions allocation component. Counties shall report requested expenditures for all other non-BHSA funding sources in Table Five.

Row 35-37: must the estimated total Housing Intervention component allocation received for each year. Row 35 will include projected BHSA funding received. Row 36 will include component BHSA funding received from Row 37 will also include the sum of Row 35, 36 as reported for total funding.

Row 42-57: must the projected expenditures and associated debts for each Housing Intervention component service category or program for each year.

Row 43: The sum of Housing Interventions is to help individuals achieve permanent housing stability. To the maximum extent possible, counties should seek to place individuals in permanent housing solutions. Housing Interventions may only be used for placement in interim solutions for a limited time. 6 months for BHSA eligible individuals who have exhausted the Transitional Rent benefit and 12 months for BHSA eligible individuals who are eligible to receive Transitional Rent through their Medi-Cal MP.

Row 48: Pursuant to WAC Code section 5B02, subdivision (3)(2), BHSA Housing Interventions may not be used for housing services covered by Medi-Cal Managed Care Plans (MCP). Please indicate the projected expenditures for BHSA funding ONLY in columns C, E, and G. Please indicate the projected expenditures for all other funding sources excluding BHSA in columns I - K.

Row 58: the sub-total of row 42 - 57 will be auto-calculated, exclusive the percentage of rental and co-occurring subsidies administered through Fee Proofs.

Row 60: must the projected expenditures for Housing Interventions component's administration for each year (see Policy Manual Chapter 6, Section B.8, Cost Principles).

Row 61: the overall total of Housing Intervention expenditures will be auto-calculated from rows 58 and 60.

Row 63: must the total dollar amount for Housing Intervention component programs and services that will be dedicated to the chronically homeless population. allocations. This amount should equal 50% of Housing Intervention component.

Row 64: must the total dollar amount for Housing Intervention component programs and services that will be dedicated to serving individuals with only a substance use disorder. If provided by the county, DHS resources may be dedicated with funds captured in row 63.

Row 65: must the total dollar amount projected to be added to Housing Intervention component funds from the transient reserve, if applicable.

Row 67: must the total dollar amount projected to be transferred out of Housing Intervention component funds into the transient reserve.

Row 69: the exception of funds dedicated to capital development funds will be auto-calculated from rows 65 and 67.

Row 70: the exception of funds dedicated to the chronically homeless population will be auto-calculated from rows 63 and 67.

Row 72 and 73: must the individual unit/bedroom count of individuals that will be served across all Housing Intervention component services.

Reminder: 1) Counties must comply and must secure their resources comply with all applicable provisions for each source of funding as defined in applicable laws, regulations, and policies including the BHSA County Policy Manual.

2) Counties must ensure access to care through official use of state and federal resources as outlined in Chapter 6, Section 7 of the BHSA County Policy Manual. Deviations requires BHSA's local consultation to help understand the services provided by the county's Medi-Cal Behavioral Health Plan. Counties must make a good faith effort to seek reimbursement from Medi-Cal for managed care rates and commercial health insurance. These policies apply only to non-BHSA services that are eligible for both BHSA funding and available funding source, such as Medi-Cal managed commercial coverage, etc.

Table Four: BHSA Components

Row 7B: 70% of the concentration of funds dedicated to the chronically homeless population will be auto-allocated from rows E1 and E7.						
Row 7C: 30% of the concentration of funds dedicated to the non-chronically homeless population will be auto-allocated across all Housing Interventions component services.						
Row 7D: 11.7% of the total funds will be allocated to the chronically homeless population, with all available resources for each row of the table as defined in available law and regulations, and resources available for the non-chronically homeless population as defined in Chapter 6, Section 6.1 of the BHSRA, County Board of Health Services.						
30 Percent of the total funds will be allocated to the non-chronically homeless population, with all available resources for each row of the table as defined in available law and regulations, and resources available for the chronically homeless population as defined in Chapter 6, Section 6.1 of the BHSRA, County Board of Health Services.						
The BHSRA and BHSRA regulations will be used to allocate the funds received by the county's BHSRA, County Board of Health Services. The county will make a good faith effort to use the funds received by the county's BHSRA, County Board of Health Services to the maximum extent possible for the non-chronically homeless population that are eligible for both BHSRA funds and another funding source with a BHSRA, County Board of Health Services component.						
Total Housing Interventions Funding (E)		Total BHSRA Components				
	Year 1	Year 2	Year 3			
Total Estimated Behavioral Health Services and Support Funding Received (BHSA Funds)	\$ 6,930,881.00	\$ 6,792,267.00	\$ 6,656,422.00			
Total Estimated Behavioral Health Services and Support Funding Allocated (MHSA - Unspent Carryover Funds)	\$ -	\$ -	\$ -			
Total Estimated Behavioral Health Services and Support Funding (BHSA + MHSA Funds)	\$ 6,930,881.00	\$ 6,792,267.00	\$ 6,656,422.00			
	Projected Expenditures - Unspent MHSA and BHSA Funding Only			Projected Expenditures - All Other Funding Sources		
	Year 1	Year 2	Year 3	Year 1	Year 2	Year 3
Housing Interventions Component						
Programs/Services						
Non-Tenure Limited Permanent Settings (e.g., supportive housing, apartments, single and multi-family homes, shared housing) (2)						
Boarded Subsidies	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Boarded Subsidies	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Buried Rental and Operating Subsidies	\$ 5,114,607.00	\$ 5,783,599.00	\$ 5,698,977.00	\$ -	\$ -	\$ -
% of Rental and Operating Subsidies Administered through Fee Proofs	0%	0%	0%	0%	0%	0%
Time Limited Interim Settings (e.g., hotel and motel stays, co-located congregate interim housing, medical, recuperative)						
Boarded Subsidies	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Boarded Subsidies	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Buried Rental and Operating Subsidies	\$ -	\$ 450,000.00	\$ 439,000.00	\$ -	\$ -	\$ -
% of Rental and Operating Subsidies Administered through Fee Proofs	0%	0%	0%	0%	0%	0%
Other Housing Supports: Landlord Outreach and Education Funds (2)	\$ 150,000.00	\$ 153,000.00	\$ 156,060.00	\$ -	\$ -	\$ -
Other Housing Supports: Participant Assistant Funds (2)	\$ 150,000.00	\$ 153,000.00	\$ 156,060.00	\$ -	\$ -	\$ -
Other Housing Supports: Housing Transition Navigation Services and Housing Tenancy Sustaining Services (2)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Other Housing Supports: Outreach and Engagement (2)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Capital Development Projects	\$ 900,000.00	\$ -	\$ -	\$ -	\$ -	\$ -
Housing Fee Proof Expenditures (start-up)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Innovative Housing Intervention Pilots and Projects	\$ -	\$ -	\$ -			
Subtotal (auto-populated)	\$ 6,314,607.00	\$ 6,339,599.00	\$ 6,270,907.00	\$ -	\$ -	\$ -

Housing Interventions Component Administrative Information		Year 1	Year 2	Year 3
Housing Interventions Component Administration		\$ 464,991.00	\$ 483,456.00	\$ 502,836.00
Total Housing Interventions Expenditures (auto-populated)		\$ 6,779,598.00	\$ 7,023,055.00	\$ 7,172,033.00
Housing Interventions Expenditures to be Served		Year 1	Year 2	Year 3
Total Housing Interventions Component Funds Dedicated to Chronically Homeless Populations (2)		\$ 3,525,390.96	\$ 3,441,316.55	\$ 3,371,278.51
Total Housing Interventions Component Funds Dedicated to Serving Individuals with a SUD only (5)		\$ -	\$ -	\$ -
Housing Interventions Transfer Information		Year 1	Year 2	Year 3
Transfers into Housing Intervention component from Local Prudent Reserve		\$ -	\$ -	\$ -
Transfers out of Housing Intervention component into Local Prudent Reserve (6)		\$ -	\$ -	\$ -
Housing Interventions Component Funds Validation (auto-populated based on inputs above)		Year 1	Year 2	Year 3
Housing Intervention Component Funds Dedicated to Capital Development/Total Housing Interventions Funding (7) (auto-populated)		13%	0%	0%
Housing Interventions Component Funds Dedicated to Chronically Homeless Populations/Total Housing Intervention Component Funding (8) (auto-populated)		51%	51%	51%
Projected Individuals to be Served (Unpublished)		Year 1	Year 2	Year 3
Eligible Children (A)		#	#	#
Eligible Adults (B) Adults		249	284	284

References	
1. WAC Code 5B02, subdivision (4)(T)(A)(ii) states 30% of BHSA funds distributed to counties shall be used for Housing Interventions.	
2. See Policy Manual Section C-9 Allowable Expenditures and Related Requirements for further information regarding allowable Housing Interventions expenditures.	
3. Single room occupancy and recovery housing can be interim or permanent. If interim, Housing Interventions is limited to 6 months for those who have exhausted Transitional Rent or 12 months for those not eligible for Transitional Rent. Appendix B of the Policy Manual includes a crosswalk of coverage by select programs.	
4. Congregate settings that have only a small number of individuals per room and sufficient common space (not larger dormitory sleeping hall) and does not include behavioral health residential treatment settings.	
5. Counties must provide Housing Intervention services to eligible children, youth, and adults (defined in WAC Code section 5B02) who are chronically homeless, experiencing homelessness, or at risk of homelessness. The provision of BHSA-funded Housing Interventions specifically for individuals with a substance use disorder is optional for counties, per WAC Code section 5B01, subdivision (4)(2).	
6. WAC Code 5.1802, subdivision (2)(b).	
7. WAC Code 5.1802, subdivision (4)(T)(A)(ii) states no more than 25% of Housing Intervention funds may be used for capital development.	
8. WAC Code 5.1802, subdivision (4)(T)(A)(ii) states 50% of Housing Interventions funds shall be used for housing interventions for persons who are chronically homeless with a focus on those in encampments.	

Rows 22-24: input the total estimated FSP component allocation received for each year. Row 22 will include projected BHSA funding received. Row 23 will include unspent MHSA dollars carried over. Row 24 will auto-populate the sum of Rows 22-23 to account for total funding.

Note: DHCS expects other required uses of FSP funding (e.g., mental health services, supportive services, substance use disorder (SUD) treatment services, ongoing engagement services) to be captured within rows 29 - 34. Any mental health and supportive service or SUD treatment service expenditures not included in these rows should be accounted for in rows 35 and 36, accordingly.

Row 40: input the projected expenditures for the FSP component's administration for each year

Row 43: input the total dollar amount projected to be added to FSR from the prudent reserve, if applicable.

Row 44: input the total dollar amount projected to be transferred out of FSP into the prudent reserve.

2) Counties must promote access to care through efficient use of state and county resources as outlined in Chapter 6, Section C of the BHSA County Policy Manual, including requiring BHSA-funded providers to bill appropriately for services covered by the county's Medi-Cal Behavioral Health Delivery System and make a good faith effort to seek reimbursement from Medi-Cal managed care plans and commercial health insurance.

Instructions

Counties shall report their projected expenditures of their Behavioral Health Services and Supports funding for their BHSA allocation component, federal financial participation, and all other non-BHSA funding sources in Table Seven.

Row 26-28: Input the total estimated BHSS component allocation received for each year. Row 26 will include projected BHSA funding received. Row 27 will include unspent BHSA dollars carried over. Row 28 will auto-populate the sum of Rows 26-27 to account for total funding.

Rows 31-43: Input the projected expenditures for each BHSS service category or program for each year.

Row 44: the subtotal for projected expenditures will be auto-populated from rows 31-33, 36, 37, 40, and 43.

Row 46: Input the total projected expenditures for BHSS administration for each year (see Policy Manual Chapter 6, Section B.8, Cost Principles).

Row 47: the total for projected BHSS expenditures will be auto-populated from rows 44 and 46.

Row 48: Input the total dollar amount projected to the BHSS funding component from the prudent reserve (if applicable).

Row 50: Input the total dollar amount projected to be transferred out of the BHSS funding component into the prudent reserve.

Row 52: the proportion of E funds will auto-populate from rows 33 and 28. Note: MHSA WET and CF/TN funds in Row 61-62 will be deducted from the revenue.

Row 53: the proportion of Youth-Focused E funds will auto-populate from rows 33 and 34.

Rows 55 and 56: Input the estimated unduplicated count of individuals that will be served across all BHSA-funded programs.

Rows 58 and 59: Input the estimated amount of BHSS funds that will be transferred to WET and CF/TN for each year.

Rows 61 and 62: auto-populates projected estimated amount of MHSA WET and CF/TN funds that will be available in the BHSA BHSS component for each year.

Reminder: 1) Counties must comply, and must ensure their providers comply, with all applicable conditions for each source of funding, as defined in applicable laws, regulations, and guidance, including the BHSA County Policy Manual.

2) Counties must promote access to care through efficient use of state and county resources as outlined in Chapter 6, Section C of the BHSA County Policy Manual, including requiring BHSA-funded providers to bill appropriately for services covered by the county's Medi-Cal Behavioral Health Delivery System and make a good faith effort to seek reimbursement from Medi-Cal managed care plans and commercial health insurance. These policies apply only to non-Hospice services that are eligible for both BHSA funding and another funding source, such as Medi-Cal payment, commercial payment, etc.

Type of Service	Table Seven: BHSA Components			Projected Expenditures - Federal Financial Participation			Projected Expenditures - All Other Funding Sources		
	Year 1	Year 2	Year 3	Year 1	Year 2	Year 3	Year 1	Year 2	Year 3
Total Estimated Behavioral Health Services and Support Funding Received (BHSA Funds)	\$ 8,086,032.00	\$ 7,924,312.00	\$ 7,765,825.00						
Total Estimated Behavioral Health Services and Support Funding Allocated (MHSA - Unspent Carryover Funds)	\$ -	\$ -	\$ -						
Total Estimated Behavioral Health Services and Support Funding (BHSA + MHSA Funds)	\$ 8,086,032.00	\$ 7,924,312.00	\$ 7,765,825.00						
Behavioral Health Services and Supports Category (1)									
BHSS Administration Services									
Children's System of Care Non-FSP	\$ 823,448.00	\$ 814,319.00	\$ 886,272.00	\$ 250,000.00	\$ 250,000.00	\$ 250,000.00	\$ -	\$ -	\$ -
Adult and Older Adult System of Care, Excluding Populations Identified in SB92(a)(1) and SB92(a)(2)-Non-FSP	\$ 1,903,926.00	\$ 1,939,683.00	\$ 1,977,180.00	\$ 950,000.00	\$ 950,000.00	\$ 950,000.00	\$ -	\$ -	\$ -
Early Intervention Expenditures	\$ 4,156,467.00	\$ 4,294,056.00	\$ 4,438,592.00	\$ 2,100,000.00	\$ 2,100,000.00	\$ 2,100,000.00	\$ 735,000.00	\$ -	\$ -
Total Youth-Focused (25 years and younger) Early, Coordinated, Specialty Care for	\$ 3,187,245.60	\$ 3,309,571.80	\$ 3,434,087.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Outreach and Engagement	\$ 318,944.00	\$ 332,014.00	\$ 345,201.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Workforce Education and Training (WET)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Dedicated BHSA	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Dedicated MHSA	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Capital Facilities and Technological Needs (CF/TN)	\$ 542,158.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Dedicated BHSA	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Dedicated MHSA	\$ 542,158.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Innovative BHSS Pilots and Projects	\$ 594,152.00	\$ -	\$ -	\$ 3,300,000.00	\$ 3,300,000.00	\$ 3,300,000.00	\$ 735,000.00	\$ -	\$ -
Subtotal (auto-populated)	\$ 8,467,144.00	\$ 7,551,416.00	\$ 7,783,857.00	\$ 3,300,000.00	\$ 3,300,000.00	\$ 3,300,000.00	\$ 735,000.00	\$ -	\$ -
BHSS Administrative Information									
Behavioral Health Services and Supports Administration	\$ 4,389,640.00	\$ 4,491,982.00	\$ 4,605,416.00						
Total Behavioral Health Services and Supports Expenditures (auto-populated)	\$ 12,846,784.00	\$ 12,043,398.00	\$ 12,389,273.00						
BHSS Prudent Reserve Transfer Information									
Transfers into BHSS component from Local Prudent Reserve	\$ -	\$ -	\$ -						
Transfers out of BHSS component into Local Prudent Reserve	\$ -	\$ -	\$ -						
Behavioral Health Services and Supports Validation (auto-populated based on inputs above)									
BHSS Funds Early Intervention Expenditures/Total BHSS Expenditures (%)	51%	51%	53%						
Youth-Focused Early Intervention Expenditures/Total Allocated Early Intervention Funds (%)	77%	77%	77%						
Projected Individuals to be Served (Unduplicated)	Year 1	Year 2	Year 3						
Eligible Children/YAY	36,730	36,865	36,960						
Eligible Adults/Older Adults	91,830	91,545	91,700						
Projected BHSS Funds transferred to WET or CF/TN	Year 1	Year 2	Year 3						
BHSS transfer to WET	\$ -	\$ -	\$ -						
BHSS transfer to CF/TN	\$ -	\$ -	\$ -						
Projected MHSA- Origin WET and CF/TN Funds Available (exempt from suballocation requirements)	Year 1	Year 2	Year 3						
Estimated MHSA WET Funds	\$ -	\$ -	\$ -						
Estimated MHSA CF/TN Funds	\$ -	\$ (642,158.00)	\$ (642,158.00)						
References									

1. W&I Code § 5892, subdivision (a)(3)(A) states 35% of BHS funds distributed to counties shall be used for Behavioral Health Services and Supports (BHSS).

2. W&I Code § 5892, subdivision (a)(3)(B)(ii) states counties shall utilize at least 51% of BHSS funding for early intervention.

3. W&I Code § 5892, subdivision (a)(3)(B)(iii) states that at least 51% of funds allocated for early intervention programs must serve individuals 25 years of age and younger.

4. BHSA Policy Manual Ch. 6 § B.7.3 states that MHSA WET or CF/TN funds transferred into BHSA BHSS will remain WET or CF/TN funds and will not be subject to the suballocation requirements. Counties may set aside BHSS funds for WET and CF/TN; the reversion period for these specific funds is ten years. All transfers into WET and CF/TN are irrevocable and cannot be transferred out of WET and CF/TN. Counties may continue to keep separate fund accounts for WET and CF/TN funds.

B.8.2.2 states that the share of indirect costs attributed to BHSA funding should be in proportion to the extent the BHSA program benefits from the support activity. Proportional administrative and indirect costs will be verified through the Behavioral Health Outcomes Accountability and Transparency Report (BHOUTR). Counties should ensure that their cost-allocation methodology complies with 2 C.R. 201 and appropriately distributes costs in proportion.

Instructions

Counties shall report their projected spending for Behavioral Health Services Act (BHSA) plan administration in Table Eight.

Row 30: the total dollar amounts of BHSA component allocations dedicated to improvement and monitoring activities, including plan operations, quality and outcomes, data reporting pursuant to W&I Code § 5963.04, and monitoring of subcontractor compliance for all county behavioral health programs, including, but not limited to, programs administered by a Medi-Cal behavioral health delivery system, as defined in subdivision (i) of Section 14184.101, and programs funded by the Projects for Assistance in Transition from Homelessness grant, the Community Mental Health Services Block Grant, and other Substance Abuse and Mental Health Services Administration grants by year. Under W&I Code § 5892 (e)(2)(B), the total amount shall equal 2% or less of total projected annual revenues of the local behavioral health services fund for counties with a population over 200,000 or 4% of the total projected annual revenues of the local behavioral health services fund for counties with a population of less than 200,000. Any costs that exceed that amount will be included in the governor's budget.

Row 31: the total dollar amount of BHSA component allocations dedicated to county Integrated Plan annual planning costs, including stakeholder engagement in planning and local Behavioral Health Board activities by year. Under W&I Code § 5892 (e)(1)(B), this amount shall be 5% or less of total projected annual revenues of the local behavioral health services fund. Any costs that exceed that amount will be included in the governor's budget.

Row 32: The total dollar amounts for new and ongoing county and behavioral health agency administrative costs to implement W&I Code § 5963-5963.06 and § 14197.71.

Row 34: the total projected annual revenues of the Local Behavioral Health Services Fund.

Row 35: the proportion of funding used for improvement and monitoring will be auto-populated from rows 30 and 34.

Row 36: the proportion of funding used for planning expenditures will be auto-populated from rows 31 and 34.

Row 37: For counties with a population under 200,000: add any Improvement and Monitoring expenditures that exceed 4% of the total projected annual revenues of the Local Behavioral Health Services Fund, any County Integrated Plan Annual Planning expenditures that exceed 5% of the total projected annual revenues of the Local Behavioral Health Services Fund, and any new and ongoing administrative costs to obtain the input for this cell.

For counties with a population over 200,000: add any Improvement and Monitoring expenditures that exceed 2% of the total projected annual revenues of the Local Behavioral Health Services Fund, any County Integrated Plan Annual Planning expenditures that exceed 5% of the total projected annual revenues of the Local Behavioral Health Services Fund, and any new and ongoing administrative costs to obtain the input for this cell.

Table Eight: BHSA Plan Administration			
INTEGRATED PLAN ADMINISTRATION AND MONITORING	Year 1	Year 2	Year 3
Total Projected Improvement and Monitoring Expenditures	\$ 462,058.00	\$ 452,817.00	\$ 443,761.00
Total Projected County Integrated Plan Annual Planning Expenditures	\$ 1,155,147.00	\$ 1,132,044.00	\$ 1,109,403.00
New and Ongoing Administrative Costs	\$ -	\$ -	\$ -
Administrative Information Validation			
Total Projected Annual Revenues of Local Behavioral Health Services Fund	\$ 23,102,949.00	\$ 22,640,890.00	\$ 22,188,072.00
Improvement and Monitoring Expenditures/Total Annual Revenues of Local Behavioral Health Services Fund (auto-populated)	2%	2%	2%
Total Projected Planning Expenditures/Total Projected Annual Revenues for Local Behavioral Health Services Fund (auto-populated)	5%	5%	5%
Supplemental BHT Implementation Funding (1)	\$ -	\$ -	\$ -
References			
<p>1. W&I Code § 5963, subdivision (c) states that any costs incurred for BHSA implementation exceeding the required maximums set forth in W&I Code § 5892, subdivision (e)(1)(B) and W&I Code § 5892, subdivision (e)(2)(B) will be included in the Governors 2024-2025 May Revision.</p>			

Instructions

Counties shall report their estimated local prudent reserve maximums for each allocation component in Table Nine.

Rows 18 and 19: dollar amounts will be auto-populated from Table 4 rows 91 and 92

Row 20: total excess prudent reserve dollars will be auto-populated from rows 18 and 19.

Rows 21-23: total dollar amounts will be auto-populated from Table 4, rows 94-96.

Row 24: total excess prudent reserve funds allocated to BHSA components will be auto-populated from rows 21 through 23.

Row 25: auto-validates from rows 20 and 24 to ensure the dollar amounts match with "equal" or "does not equal" statements.

Row 26: the total amount of planned contributions into the prudent reserve from all BHSA components allocations for each plan year will be auto-populated from Table 5 row 65, Table 6 row 42, and Table 7 row 46.

Row 27: the total amount of planned distributions from the prudent reserve into the BHSA component allocations for each plan year will be auto-populated from Table 5 row 64, Table 6 row 41, and Table 7 row 45.

Table Nine: Estimated Local Prudent Reserve Balance	
Estimated Local Prudent Reserve Balance At End of Previous Fiscal Year	\$ 3,868,904.00
Local Prudent Reserve Maximum (1)	\$ 3,868,904.00
Excess Prudent Reserve Funds (auto-populated)	\$ -
Total prudent reserve funds above prudent reserve maximum allocated to Housing Interventions	\$ -
Total prudent reserve funds above maximum allocated to Full Service Partnerships	\$ -
Total prudent reserve funds above maximum allocated to Behavioral Health Services and Supports	\$ -
Total Excess Prudent Reserve Funds allocated to BHSA Component Allocations (auto-populated)	\$ -
Auto-validation: allocation of all excess Prudent Reserve Funds	EQUALS
Total Contributions Into the Local Prudent Reserve (auto-populated)	\$ -
Total Distributions From the Local Prudent Reserve (auto-populated)	\$ -
References	
1. W&I Code § 5892, subdivision (b)(3)-(4) states a county's prudent reserve must not exceed 20% of average of the total funds distributed to the county Behavioral Health Services Fund over past five years (25% for counties with a population of less than 200,000).	

Instructions

Counties will complete Tables One through Nine prior to completing Table Ten. Data on other tables will auto-populate to Table Ten.

Row 22: the new base percentage for each component will be auto-populated from Table 4, row 38.

Rows 23-25: the dollar amount allocated to each component for each year of the Integrated Plan will be auto-populated from Table 5, row 35; Table 6, row 22; and Table 7, row 25, respectively.

Row 28: the total amount of unspent MHSA-carryover funds from prior fiscal years, will be auto-populated from Table 4 row 46.

Rows 30, 37, and 44: The total amount of funding transferred from each BHSA component into the prudent reserve for each plan year will be auto-populated from Table 5, row 67; Table 6, row 44; and Table 7, row 49.

Rows 31, 38, and 45: the total amount of funding transferred from the prudent reserve into each BHSA component allocation for each plan year will be auto-populated from Table 5, row 66; Table 6, row 43; and Table 7, row 48.

Rows 32, 39, and 46: estimated available funding will be auto-populated from rows 28 through 31, 35 through 38, and 42 through 45.

Rows 33, 40, and 47: estimated expenditures for each component will be auto-populated from Table 5, row 61; Table 6, row 41; and Table 7, row 46.

Rows 35 and 42: The estimated unspent funds from prior fiscal years will be auto-populated from rows 32 and 33 and rows 39 and 40, respectively.

Reminder: 1) Counties must comply, and must ensure their providers comply, with all applicable conditions for each source of funding, as defined in applicable laws, regulations, and guidance, including the BHSA County Policy Manual.

2) Counties must promote access to care through efficient use of state and county resources as outlined in Chapter 6, Section C of the BHSA County Policy Manual, including requiring BHSA-funded providers to bill appropriately for services covered by the county's Medi-Cal Behavioral Health Delivery System and make a good faith effort to seek reimbursement from Medi-Cal managed care plans and commercial health insurance. These policies apply only to non-Housing services that are eligible for both BHSA funding and another funding source, such as Medi-Cal payment, commercial payment, etc.

Table Ten: BHSA Funding Summary (auto-populated)

	Housing Interventions	Full-Service Partnerships	Behavioral Health Services and Supports	Total
Allocation Percentage, with Transfers	30%	35%	35%	100%
Year One Component Allocations	\$ 6,930,885.00	\$ 8,086,032.00	\$ 8,086,032.00	\$ 23,102,949.00
Year Two Component Allocations	\$ 6,792,267.00	\$ 7,924,312.00	\$ 7,924,312.00	\$ 22,640,891.00
Year Three Component Allocations	\$ 6,656,422.00	\$ 7,765,825.00	\$ 7,765,825.00	\$ 22,188,072.00
BHSA Funding Summary	Housing Interventions	Full Service Partnerships	Behavioral Health Services and Supports	Totals
Year One				
Estimated Unspent Funds From Prior Fiscal Years (Including MHSA Funds)				
(Unspent Carryover MHSA Funds)	\$ -	\$ 1,000,000.00	\$ 13,269,574.00	\$ 14,269,574.00
Estimated Year One Component Allocations				
(BHSA Funding Only)	\$ 6,930,885.00	\$ 8,086,032.00	\$ 8,086,032.00	\$ 23,102,949.00
Transfers Into PR	\$ -	\$ -	\$ -	\$ -
Transfers From PR	\$ -	\$ -	\$ -	\$ -
Estimated Total Available Funding for Year One	\$ 6,930,885.00	\$ 9,086,032.00	\$ 21,355,606.00	\$ 37,372,523.00
Estimated Total Year One Expenditures	\$ 6,779,598.00	\$ 8,045,188.00	\$ 12,846,784.00	\$ 27,671,570.00
Year Two				
Estimated Unspent Funds From Prior Fiscal Years (Including MHSA Funds)	\$ 151,287.00	\$ 1,040,844.00	\$ 8,508,822.00	\$ 9,700,953.00
Estimated New Year Two Component Allocations				
(BHSA Funding Only)	\$ 6,792,267.00	\$ 7,924,312.00	\$ 7,924,312.00	\$ 22,640,891.00
Transfers Into PR	\$ -	\$ -	\$ -	\$ -
Transfers from PR	\$ -	\$ -	\$ -	\$ -
Estimated Total Available Funding for Year Two	\$ 6,943,554.00	\$ 8,965,156.00	\$ 16,433,134.00	\$ 32,341,844.00
Estimated Total Year Two Expenditures	\$ 7,023,095.00	\$ 8,247,553.00	\$ 12,043,398.00	\$ 27,314,046.00
Year Three				
Estimated Unspent Funds From Prior Fiscal Years (Including MHSA Funds)	\$ (79,541.00)	\$ 717,603.00	\$ 4,389,736.00	\$ 5,027,798.00
Estimated New Year Three Component Allocations				
(BHSA Funding Only)	\$ 6,656,422.00	\$ 7,765,825.00	\$ 7,765,825.00	\$ 22,188,072.00
Transfers Into PR	\$ -	\$ -	\$ -	\$ -
Transfers from PR	\$ -	\$ -	\$ -	\$ -
Estimated Total Available Funding for Year Three	\$ 6,576,881.00	\$ 8,483,428.00	\$ 12,155,561.00	\$ 27,215,870.00
Estimated Total Year Three Expenditures	\$ 7,172,933.00	\$ 8,623,033.00	\$ 12,389,273.00	\$ 28,185,239.00