# SixTen and Associates **Mandate Reimbursement Services**

OCT 0 5 2009

RECEIVED

COMMISSION ON STATE MANDATES

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October 1, 2009

Paula Higashi, Executive Director Commission on State Mandates 980 Ninth Street, Suite 300 Sacramento, CA 95814

RE:

Yosemite Community College District

Health Fee Elimination

Fiscal Years: 2002-03 through 2006-07

Incorrect Reduction Claim

Dear Ms. Higashi:

Enclosed is the original and two copies of the above referenced incorrect reduction claim for Yosemite Community College District.

SixTen and Associates has been appointed by the District as its representative for this matter and all interested parties should direct their inquiries to me, with a copy as follows:

Teresa Scott, Executive Vice Chancellor Fiscal Services Yosemite Community College District 2201 Blue Gum Avenue Modesto, CA 95358

Thank-you.

Sincerely.

### **COMMISSION ON STATE MANDATES**

### 1. INCORRECT REDUCTION CLAIM TITLE

1/84, 1118/87 Health Fee Elimination

### 2. CLAIMANT INFORMATION

Yosemite Community College District

Teresa Scott
Executive Vice Chancellor, Fiscal Services
2201 Blue Gum Avenue
Modesto, CA 95358

Voice: 209-575-6530 Fax: 209-575-6562

E-Mail: scott@yosemite.edu

# 3. CLAIMANT REPRESENTATIVE INFORMATION

Claimant designates the following person to act as its sole representative in this incorrect reduction claim. All correspondence and communications regarding this claim shall be forwarded to this representative. Any change in representation must be authorized by the claimant in writing, and sent to the Commission on State Mandates.

Keith B. Petersen, President SixTen and Associates 3270 Arena blvd., Suite 400-363 Sacramento, CA 95834 Voice: (916) 419-7093

Fax: (916) 263-9701

E-mail: Kbpsixten@aol.com

	BEARIES	
	For CSM Coo Snly CD	
Filing Date:	OCT 0 5 2009	
	COMMISSION ON STATE MANDATES	

IRC #: 09-4206-I-25

4. IDENTIFICATION OF STATUTES OR EXECUTIVE ORDERS

Statutes of 1984, Chapter 1, 2<sup>nd</sup> E.S. Statutes of 1987, Chapter 1118

### 5. AMOUNT OF INCORRECT REDUCTION

Amount of Reduction
\$39.067
\$80,888
\$12,566
\$182,362
\$136,990
\$451,873

6. NOTICE OF NO INTENT TO CONSOLIDATE

This claim is not being filed with the intent to consolidate on behalf of other claimants.

Sections 7-15 are attached as follows:

7. Written Detailed Narrative:	Pages 1 to 27
8. SCO Results of Review Letters:	Exhibit <u>A</u>
9. Parameters and Guidelines:	Exhibit <u>B</u>
10. SCO Claiming Instructions:	Exhibit <u> </u>
11. SCO Audit Report:	Exhibit D
12. SCO Mandated Cost Manual	
Forward, 2003 edition:	Exhibit <u>E</u>
13. San Francisco Taxpayer's Assn	ExhibitF_
14. Health Fee Revenue Reports	Exhibit <u>G</u>
15. Annual Reimbursement Claims:	Exhibit H

#### 16. CLAIM CERTIFICATION

This claim alleges an incorrect reduction of a reimbursement claim filed with the State Controller's Office pursuant to Government Code section 17561. This incorrect reduction claim is filed pursuant to Government Code section 17551, subdivision (d). I hereby declare, under penalty of perjury under the laws of the State of California, that the information in this incorrect reduction claim submission is true and complete to the best of my own knowledge or information or belief.

Teresa Scott

Executive Vice Chancellor, Fiscal Services

Signature Satt 9-24-08

Date

1 2 3 4 5 6 7 8 9	Claim Prepared by: Keith B. Petersen SixTen and Associates 3270 Arena Blvd., Suite 400-363 Sacramento, CA 95834 Voice: (916) 419-7093 Fax: (916) 263-9701 E-mail: kbpsixten@aol.com  BEFORE THE
11	COMMISSION ON STATE MANDATES
12	STATE OF CALIFORNIA
13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30	INCORRECT REDUCTION CLAIM OF: )  No. CSM  Chapter 1, Statutes of 1984, 2nd E.S. Chapter 1118, Statutes of 1987  YOSEMITE
31	INCORRECT REDUCTION CLAIM FILING
32	PART I. AUTHORITY FOR THE CLAIM
33	The Commission on State Mandates has the authority pursuant to Government
34	Code Section 17551(d) to "hear and decide upon a claim by a local agency or school
35	district filed on or after January 1, 1985, that the Controller has incorrectly reduced
36	payments to the local agency or school district pursuant to paragraph (2) of subdivision
37	(d) of Section 17561." Yosemite Community College District (hereinafter "District" or

"Claimant") is a school district as defined in Government Code Section 17519.<sup>1</sup> Title 2,
 California Code of Regulations (CCR), Section 1185(a), requires claimants to file an
 incorrect reduction claim with the Commission.

This Incorrect Reduction Claim is timely filed. Title 2, CCR, Section 1185(b), requires incorrect reduction claims to be filed no later than three years following the date of the Controller's "written notice of adjustment notifying the claimant of a reduction." A Controller's audit report dated April 30, 2009, has been issued. The audit report constitutes a demand for repayment and adjudication of the claim. The Claimant also received five "result of review" letters dated May 10, 2009. Copies of these letters are attached as Exhibit "A."

There is no alternative dispute resolution process available from the Controller's office. The audit report states that an Incorrect Reduction Claim should be filed with the Commission if the claimant disagrees with the findings.

### PART II. SUMMARY OF THE CLAIM

The Controller conducted a field audit of the District's annual reimbursement claims for the actual costs of complying with the legislatively mandated Health Fee Elimination Program (Chapter 1, Statutes of 1984, 2nd Extraordinary Session and Chapter 1118, Statutes of 1987) for the period of July 1, 2002 through June 30, 2007.

<sup>&</sup>lt;sup>1</sup> Government Code Section 17519, added by Chapter 1459, Statutes of 1984:

<sup>&</sup>quot;School district" means any school district, community college district, or county superintendent of schools.

1 As a result of the audit, the Controller determined that \$451,873 of the claimed costs

### were unallowable:

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3 4	Fiscal <u>Year</u>	Amount <u>Claimed</u>	Audit <u>Adjustment</u>	SCO Payments	Amount Due <a href="#">State&gt; District</a>
5	2002-03	\$39,067	\$39,067	\$39,067	<\$39,067>
6	2003-04	\$151,046	\$80,888	\$0	\$70,158
7	2004-05	\$280,694	\$12,566	\$0	\$268,128
8	2005-06	\$413,324	\$182,362	\$0	\$230,962
9	2006-07*	\$319,864 <sup>2</sup>	<u>\$136,990</u>	\$234,716 <sup>3</sup>	<u>&lt;\$51,842&gt;</u>
10	Totals	\$1,203,995	\$451,873	\$273,783	\$478,339

<sup>\*</sup>Amended

Since the District has been paid \$273,783 for these claims, the audit report concludes that \$478,339 is due to the District.

### PART III. PREVIOUS INCORRECT REDUCTION CLAIMS

The District has not filed any previous incorrect reduction claims for this mandate program. The District is not aware of any other incorrect reduction claims having been adjudicated on the specific issues or subject matter raised by this incorrect reduction claim.

<sup>&</sup>lt;sup>2</sup> \$329,864 less \$10,000 late filing penalty.

<sup>&</sup>lt;sup>3</sup> Although the final audit report, dated April 30, 3009, states that \$234,716 has been paid to the District, the "results of review" letter issued on May 10, 2009, states that the amount is 263,110. The difference is attributable to a \$28,394 payment from the District to the Controller on April 16, 2008.

### PART IV. BASIS FOR REIMBURSEMENT

### 1. <u>Mandate Legislation</u>

Chapter 1, Statutes of 1984, 2nd Extraordinary Session, repealed Education Code Section 72246 and added new Education Code Section 72246, which authorized community college districts to charge a student health services fee for the purposes of providing health supervision and services, and operating student health centers. This statute also required that the scope of student health services provided by any community college district during the 1983-84 fiscal year be maintained at that level in the 1984-85 fiscal year and every year thereafter. The provisions of this statute were to automatically repeal on December 31, 1987.

Chapter 1118, Statutes of 1987, amended Education Code Section 72246 to require any community college district that provided student health services in fiscal year 1986-87 to maintain student health services at that level in 1987-88 and each fiscal year thereafter.

Chapter 753, Statutes of 1992, amended Education Code Section 72246 to increase the maximum fee that community college districts were permitted to charge for student health services. This statute also provided for future increases in the amount of the authorized fees that were linked to the Implicit Price Deflator for State and Local Government Purchase of Goods and Services.

Chapter 8, Statutes of 1993, repealed Education Code Section 72246, and

added Education Code Section 763554 containing substantially the same provisions as

(a) The governing board of a district maintaining a community college may require community college students to pay a fee in the total amount of not more than ten dollars (\$10) for each semester, seven dollars (\$7) for summer school, seven dollars (\$7) for each intersession of at least four weeks, or seven dollars (\$7) for each quarter for health supervision and services, including direct or indirect medical and hospitalization services, or the operation of a student health center or centers, or both.

The governing board of each community college district may increase this fee by the same percentage increase as the Implicit Price Deflator for State and Local Government Purchase of Goods and Services. Whenever that calculation produces an increase of one dollar (\$1) above the existing fee, the fee may be increased by one dollar (\$1).

- (b) If, pursuant to this section, a fee is required, the governing board of the district shall decide the amount of the fee, if any, that a part-time student is required to pay. The governing board may decide whether the fee shall be mandatory or optional.
- (c) The governing board of a district maintaining a community college shall adopt rules and regulations that exempt the following students from any fee required pursuant to subdivision (a):
- (1) Students who depend exclusively upon prayer for healing in accordance with the teachings of a bona fide religious sect, denomination, or organization.
- (2) Students who are attending a community college under an approved apprenticeship training program.
- (3) Low-income students, including students who demonstrate financial need in accordance with the methodology set forth in federal law or regulation for determining the expected family contribution of students seeking financial aid and students who demonstrate eligibility according to income standards established by the board of governors and contained in Section 58620 of Title 5 of the California Code of Regulations.
- (d) All fees collected pursuant to this section shall be deposited in the fund of the district designated by the California Community Colleges Budget and Accounting Manual. These fees shall be expended only to provide health services as specified in regulations adopted by the board of governors.

Authorized expenditures shall not include, among other things, athletic trainers' salaries, athletic insurance, medical supplies for athletics, physical examinations for intercollegiate athletics, ambulance services, the salaries of health

<sup>&</sup>lt;sup>4</sup> Education Code Section 76355, added by Chapter 8, Statutes of 1993, effective April 15, 1993, as last amended by Chapter 758, Statutes of 1995:

- 1 former Section 72246, effective April 15, 1993. Chapter 320, Statutes of 2005, effective
- 2 January 1, 2006, amended Education Code Section 76355 to remove the fee
- 3 exemption for low-income students under 76355(c)(3).

### 2. Test Claim

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On November 27, 1985, Rio Hondo Community College District filed a test claim alleging that Chapter 1, Statutes of 1984, 2nd Extraordinary Session mandated increased costs within the meaning of California Constitution Article XIII B, Section 6, by requiring the provision of student health services that were previously provided at the discretion of the community college districts.

On November 20, 1986, the Commission on State Mandates determined that Chapter 1, Statutes of 1984, 2nd Extraordinary Session, imposed a new program upon community college districts by requiring any community college district that provided student health services for which it was authorized to charge a fee pursuant to former

professionals for athletic events, any deductible portion of accident claims filed for athletic team members, or any other expense that is not available to all students. No student shall be denied a service supported by student health fees on account of participation in athletic programs.

<sup>(</sup>e) Any community college district that provided health services in the 1986-87 fiscal year shall maintain health services, at the level provided during the 1986-87 fiscal year, and each fiscal year thereafter. If the cost to maintain that level of service exceeds the limits specified in subdivision (a), the excess cost shall be borne by the district.

<sup>(</sup>f) A district that begins charging a health fee may use funds for startup costs from other district funds and may recover all or part of those funds from health fees collected within the first five years following the commencement of charging the fee.

<sup>(</sup>g) The board of governors shall adopt regulations that generally describe the types of health services included in the health service program.

Section 72246 in the 1983-1984 fiscal year, to maintain student health services at that level in the 1984-1985 fiscal year and each fiscal year thereafter.

At a hearing on April 27, 1989, the Commission on State Mandates determined that Chapter 1118, Statutes of 1987, amended this requirement to apply to all community college districts that provided student health services in fiscal year 1986-1987, and required them to maintain that level of student health services in fiscal year 1987-1988 and each fiscal year thereafter.

### 3. Parameters and Guidelines

On August 27, 1987, the original parameters and guidelines were adopted. On May 25, 1989, those parameters and guidelines were amended. A copy of the May 25, 1989, parameters and guidelines is attached as Exhibit "B."

### 4. Claiming Instructions

The Controller has periodically issued or revised claiming instructions for the Health Fee Elimination mandate. A copy of the September 2003 revision of the claiming instructions is attached as Exhibit "C." The September 2003 claiming instructions are believed to be substantially similar to the version extant at the time the claims that are the subject of this Incorrect Reduction Claim were filed. However, because the Controller's claim forms and instructions have not been adopted as regulations, they have no force of law and no effect on the outcome of this claim.

### PART V. STATE CONTROLLER CLAIM ADJUDICATION

The Controller conducted an audit of the District's annual reimbursement claims

Incorrect Reduction Claim of Yosemite Community College Distric	t
1/84; 1118/87 Health Fee Elimination	

for fiscal years 2002-03, 2003-04, 2004-05, 2005-06, and 2006-07. The audit 1 concluded that \$752,122 of the District's costs claimed was allowable, and \$451,873 2 was unallowable. A copy of the April 30, 2009, audit report and the District's response 3 is attached as Exhibit "D." 4 PART VI. CLAIMANT'S RESPONSE TO THE STATE CONTROLLER 5 By letter dated March 12, 2009, the Controller transmitted a copy of its draft audit 6 report. The District objected to the proposed adjustments set forth in the draft audit 7 report by letter dated March 24, 2009. A copy of District's response is included in 8 9 Exhibit "D," the final audit report. PART VII. STATEMENT OF THE ISSUES 10 Finding 1: Understated services and supplies 11 The District does not dispute this finding. 12 Finding 2 - Overstated indirect costs 13 The Controller asserts that the District overstated indirect costs by \$96,841 for 14 the audit period. 15 16 FY 2002-03 and FY 2003-04 The District had an approved federal rate for FY 2002-03 and FY 2003-04 that 17 was used for the audit adjustment. Since federally approved rates are an acceptable 18 alternative method, the District does not dispute this audit finding as to FY 2002-03 and 19 20 FY 2003-04. 21 1

### FY 2004-05, FY 2005-06 and FY 2006-07

The District calculated its indirect cost rate for FY 2004-05 through FY 2006-07 in the same manner as it did for FY 2002-03 and FY 2003-04, using the FAM-29C method but correcting for instances where the Controller's method did not follow the CCFS-311 characterization of costs as direct or indirect. The District also had a federally approved rate that it did not use for these annual reimbursement claims. However, unlike the first two fiscal years of this audit, the audit report states that "the district's federally-approved rates are irrelevant for FY 2004-05, FY 2005-06, and FY 2006-07" because the claiming instructions no longer allow federally approved indirect cost rates to be used.

There was no amendment of the parameters and guidelines to support this abrupt change of position. The Controller simply decided to stop accepting federally approved rates, after years of accepting them, with no stated justification or opportunity for public comment. The claiming instructions do not comply with the Administrative Procedure Act, and are therefore not enforceable. Accordingly, the auditors cannot rely on them as the basis for this different treatment of FY 2004-05 through FY 2006-07.

### PARAMETERS AND GUIDELINES

No particular indirect cost rate calculation is required by law. The Controller insists that the rate be calculated according to the claiming instructions. The parameters and guidelines for the Health Fee Elimination mandate state that "[i]ndirect costs may be claimed in the manner described by the State Controller in his claiming

instructions." The District claimed these indirect costs "in the manner" described by the Controller. The correct forms were used and the claimed amounts were entered at the correct locations. Further, "may" is not "shall"; the parameters and guidelines do not require that indirect costs be claimed in the manner specified by the Controller. In the audit report, the Controller asserts that because the parameters and guidelines specifically reference the claiming instructions, the claiming instructions thereby become authoritative criteria. Since the Controller's claiming instructions were never adopted as law, or regulations pursuant to the Administrative Procedure Act, the claiming instructions are a statement of the Controller's interpretation and not law.

The Controller's interpretation of Section VI of the parameters and guidelines would, in essence, subject claimants to underground rulemaking at the direction of the Commission. The Controller's claiming instructions are unilaterally created and modified without public notice or comment. The Commission would violate the Administrative Procedure Act if it held that the Controller's claiming instructions are enforceable as standards or regulations. In fact, until 2005, the Controller regularly included a "forward" in the Mandated Cost Manual for Community Colleges (September 30, 2003 version attached as Exhibit "E") that explicitly stated the claiming instructions were "issued for the sole purpose of assisting claimants" and "should not be construed in any manner to be statutes, regulations, or standards."

Neither State law nor the parameters and guidelines make compliance with the Controller's claiming instructions a condition of reimbursement. The District has

followed the parameters and guidelines. The burden of proof is on the Controller to prove that the product of the District's calculation is unreasonable, not to recalculate the rate according to its unenforceable ministerial preferences.

Finally, the audit report notes that no district requested a review of the claiming instructions pursuant to Title 2, CCR, Section 1186. The claiming instructions are not properly adopted regulations or standards. There is no requirement that a claimant request such review, even if they are inconsistent with the parameters and guidelines, because the claiming instructions are not enforceable regulations. Thus, the fact that no review was requested by any of the claimants is not determinative of the validity or force of the claiming instructions.

### PRIOR YEAR CCFS-311

The audit used the most recent CCFS-311 information available for the calculation of the indirect cost rate. The District used the prior year CCFS-311. The CCFS-311 is prepared based on annual costs from the prior fiscal year for use in the current budget year. While the audit report is correct that there are "no mandate-related authoritative criteria" supporting the District's method, there is also none that supports the Controller's method. As a practical matter, the CCFS-311 for the current year is often not available at the time that mandate reimbursement claims are due. Therefore, the District is unable to rely on that data and must determine its indirect cost rates based on the prior year CCFS-311.

The audit report asserts that the Controller's use of the most recent CCFS-311 is

supported by the need to claim only actual costs. However, this is inconsistent with the parameters and guidelines and the Controller's claiming instructions. The parameters and guidelines do not specify any particular method of calculating indirect costs, nor do they require any particular source be used for the data used in the computation. The Controller's claiming instructions, while not enforceable, are also silent as to whether the prior or current year CCFS-311 should be used in the FAM-29C methodology. Additionally, the claiming instructions for some programs accept the use of a federally approved rate or a flat 7% rate, which has no relationship at all to actual indirect costs incurred.

As a practical example of the baselessness of the Controller's position on prior year CCFS-311 reports, note that federally approved indirect cost rates, such as the federal rate the auditors used for FY 2002-03 and FY 2003-04, are approved for periods of two to four years. This means the data from which the rates were calculated can be from three to five years removed from the last fiscal year in which the federal rate is used. The final audit report claims that this is "irrelevant" because the Controller is no longer accepting federally approved rates. However, the longstanding practice of the Controller prior to FY 2004-05 had been to accept federally approved rates. Further, the development of these rates, which are used for a several programs, is relevant to the propriety of the Controller's methods and determining whether they comply with general cost accounting principles.

### **EXCESSIVE OR UNREASONABLE**

The audit did not conclude that the District's FY 2005-06 and FY 2006-07 indirect cost rates were excessive. The Controller is authorized to reduce a claim only if it determines the claim to be excessive or unreasonable. Here, the District has computed its indirect cost rates using the CCFS-311 report, and the Controller has disallowed it without a determination of whether the product of the District's calculation is excessive, unreasonable, or inconsistent with cost accounting principles.

The Controller has the burden to show that the indirect cost rate used by the District is excessive or unreasonable, pursuant to Government Code Section 17561(d)(2). In response to this assertion, the audit report states:

Government Code section 17561, subdivision (d)(2), allows the SCO to audit the district's records to verify actual mandate-related costs <u>and</u> reduce any claim that the SCO determines is excessive or unreasonable. In addition, Government Code section 12410 states, "The Controller shall audit all claims against the state, and may audit the disbursement of any state money, for correctness, legality, and for sufficient provisions of law for payment." (Emphasis in original)

The audit report then concludes, without any further discussion, that "the district's contention is without merit." The Controller has failed to demonstrate how the cited Government Code Sections relieve him of the burden to demonstrate that costs are excessive or unreasonable prior to reducing an annual reimbursement claim.

Section 12410 is found in the part of the Government Code that provides a general description of the duties of the Controller. It is not specific to the audit of mandate reimbursement claims. It is a well-settled maxim of statutory interpretation that "[a] specific provision relating to a particular subject will govern in respect to that

subject, as against a general provision, although the latter, standing alone, would be broad enough to include the subject to which the more particular provision relates." The audit authority in Section 17561(d)(2) is more specific than the Controller's general audit authority contained in Government Code Section 12410. Therefore, the Controller only has the audit authority granted by Government Code Section 17561(d)(2) when auditing mandate reimbursement claims.

Further, the Controller has not asserted or demonstrated that, if Section 12410 was the applicable standard, the audit adjustments were made in accordance with this standard. The District's claim was correct, in that it reported the actual costs incurred. There is also no allegation in the audit report that the claim was in any way illegal. Finally, the phrase "sufficient provisions of law for payment" refers to the requirement that there be adequate appropriations prior to the disbursement of any funds. There is no indication that any state funds were disbursed without sufficient appropriations. Thus, even if the standards of Section 12410 were applicable to mandate reimbursement audits, the Controller has failed to put forth any evidence that these standards are not met.

There is no indication that the Controller is actually relying on the audit standards put forth in Section 12410 for the adjustments to the District's reimbursement claims.

The final audit report claims that the Controller did actually determine that the District's

<sup>&</sup>lt;sup>5</sup> San Francisco Taxpayers Assn. V. Board of Supervisors (1992) 2 Cal.4th 571, 577. Attached as Exhibit "F."

costs were excessive<sup>6</sup>, as required by Section 17561(d)(2), because the claimed costs were not "proper" since the indirect cost rates used did not match the rates derived by the auditors using the Controller's alternative methodology.

Neither State law nor the parameters and guidelines make compliance with the Controller's claiming instructions a condition of reimbursement. The District has followed the parameters and guidelines. The burden of proof is on the Controller to prove that the product of the District's calculation is unreasonable, not to recalculate the rate according to its unenforceable ministerial preferences.

# Finding 3 - Offsetting savings/reimbursements incorrectly reported as authorized health service fees

The District does not dispute this finding.

### Finding 4 - Understated authorized health service fee revenues claimed

The audit report concludes that the District understated offsetting revenue by \$316,222 for the audit period because it claimed student health service fees that were actually collected, rather than those that were merely authorized. In doing so, the audit report asserts that "the district failed to follow specific SCO claiming instructions."

<sup>&</sup>lt;sup>6</sup> The audit report states that it found the FY 2005-06 and FY 2006-07 indirect cost rates to be excessive, while the FY 2004-05 indirect costs were understated. It then remarks that "[t]he district did not explain why it is contesting an audit adjustment in its favor." While no explanation is required, the District does not subscribe to the implied philosophy that actions in contradiction to the parameters and guidelines should be overlooked simply because of the result obtained. The Controller does not explain how the same auditing methods could somehow be proper when applied to FY 2004-05, but improper when applied to FY 2005-06 and FY 2006-07.

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However, as previously discussed, the Controller's claiming instructions are not enforceable because they are unilaterally adopted by the Controller and do not comply with the Administrative Procedure Act. Therefore, they cannot be the basis of an audit finding. The District complied with the parameters and guidelines for the Health Fee Elimination mandate when it properly reported revenue actually received from student health service fees.

In fact, the District did claim health service fee offsets based on fees authorized for FY 2002-03 in accordance with the claiming instructions methodology, which lead to an inaccurate result. This resulted in claimed fee offsets of \$166,464 for the Fall semester, \$151,488 for the Spring semester, and \$52,461 for the Summer semester. However, the fees actually collected were greater, which demonstrates that the Controller's preferred calculation is merely an estimate. This would have resulted in slightly higher fee offsets of \$168,720 for Fall semester, \$158,652 for Spring semester, and \$53,897 for Summer semester, as evidenced by the District's revenue reports, which are attached as Exhibit "G." The audit report states that it used data from the California Community Colleges Chancellor's Office (CCCCO) to calculate health service fees authorized for each of the fiscal years, without explanation as to how this data, which is "extracted" from data reported by the District, is more reliable or relevant than the District's own records. However, this issue is unimportant since the proper offset for health service fee revenue is calculated by fees actually received in accordance with the parameters and quidelines.

### Parameters and Guidelines

The audit report asserts that the "Parameters and Guidelines states that health fees authorized by Education Code must be deducted from costs claimed." The parameters and guidelines actually state:

Any offsetting savings that the claimant experiences as a direct result of this statute must be deducted from the costs claimed. In addition, reimbursement for this mandate received from any source, e.g., federal, state, etc., shall be identified and deducted from this claim. This shall include the amount of [student fees] as authorized by Education Code Section 72246(a)<sup>7</sup>.

In order for the District to "experience" these "offsetting savings" the District must actually have collected these fees. Note that the student health fees are named as a potential source of the reimbursement *received* in the preceding sentence. The use of the term "any offsetting savings" further illustrates the permissive nature of the fees. Student fees actually collected must be used to offset costs, but not student fees that could have been collected and were not. Thus, the Controller's conclusion is based on an illogical interpretation of the parameters and guidelines by the Controller.

The audit report claims that the Commission's intent was for claimed costs to be reduced by fees authorized, rather than fees received as stated in the parameters and guidelines. It is true that the Department of Finance proposed, as part of the amendments that were adopted on May 25, 1989, that a sentence be added to the offsetting savings section expressly stating that if no health service fee was charged,

<sup>&</sup>lt;sup>7</sup> Former Education Code Section 72246 was repealed by Chapter 8, Statutes of 1993, and was replaced by Education Code Section 76355.

the claimant would be required to deduct the amount authorized. However, the Commission declined to add this requirement and adopted the parameters and guidelines without this language.

The fact that the Commission staff and the California Community College Chancellors Office agreed with DOF's interpretation does not negate the fact that the Commission adopted parameters and guidelines that *did not* include the additional language. It would be nonsensical if the Commission held that every proposal that is discussed was somehow implied into the adopted document, because the proposals of the various parties are often contradictory. The Commission intends the language of the parameters and guidelines to be construed as written, and only those savings that are experienced are to be deducted.

### Education Code Section 17556

The Controller continues to rely on Education Code Section 17556(d), while neglecting its context and omitting a crucial clause. Section 17556(d) does specify that the Commission on State Mandates shall not find costs mandated by the state if the local agency has the authority to levy fees, but only if those fees are "sufficient to pay for the mandated program" (emphasis added). Section 17556 pertains specifically to the Commission's determination on a test claim, and does not concern the development of parameters and guidelines or the claiming process. The Commission has already found state-mandated costs for this program, and the Controller cannot substitute its judgment for that of the Commission through the audit process.

The two court cases the audit report relies upon (*County of Fresno v. California* (1991) 53 Cal.3d 482 and *Connell v. Santa Margarita* (1997) 59 Cal.App.4th 382) are similarly misplaced. Both cases concern the approval of a test claim by the Commission. They do not address the issue of offsetting revenue in the reimbursement stages, only whether there is fee authority *sufficient to fully fund* the mandate that would prevent the Commission from approving the test claim.

In *County of Fresno*, the Commission had specifically found that the fee authority was sufficient to fully fund the test claim activities and denied the test claim. The court simply agreed to uphold this determination because Government Code Section 17556(d) was consistent with the California Constitution. The Health Fee Elimination mandate, as decided by the Commission, found that the fee authority is not sufficient to fully fund the mandate. Thus, *County of Fresno* is not applicable because it concerns the activity of approving or denying a test claim and has no bearing on the annual claim reimbursement process.

Similarly, although a test claim had been approved and parameters and guidelines were adopted, the court in *Connell* focused its determination on whether the initial approval of the test claim had been proper. It did not evaluate the parameters and guidelines or the reimbursement process because it found that the initial approval of the test claim had been in violation of Section 17556(d).

### Finding 5 - Understated offsetting savings/reimbursements

The audit report concludes that the District understated offsetting savings and

reimbursements by \$118,807 for the audit period because it did not report fees charged for supplemental services, revenue recognized when converting from a cash to accrual basis accounting system, and interest.

### Supplemental Service Fees

In accordance with governmental accounting practices, the District separately accounted for some costs and revenues (e.g., clinical services) in a fund (Fund 12) separate from the student health service center fund (Fund 14). Finding 1 merges those costs (\$59,763) and revenue (\$14,411 located in Finding 5) with Fund 14 which is consistent with the cost accounting practice of matching costs and revenues. The District does not dispute Finding 1 or this portion of Finding 5.

### FY 2003-04 Corrections

Finding 3 properly reverses \$19,965 in revenue reductions to the FY 2003-04 claimed costs that were either duplicated from Fund 12 or the result of changes in accruals. The District does not dispute Finding 3 or this portion of Finding 5.

### Interest Income

Finding 5 asserts that the District understated offsetting savings by \$84,431 for the audit period because it did not claim interest income received. The interest income is paid by the Stanislaus County Treasurer, where the District deposits its cash in a pooled investment fund. The District then allocates the total investment income reported by the County to its various funds. The audit report asserts that this interest income constitutes offsetting savings experienced as a direct result of the test claim

statute because it is earned from the student health service fees that are collected under the fee authority established by Chapter 1118, Statutes of 1987. However, the parameters and guidelines do not identify interest earned as an offsetting savings, nor are they required to under the applicable regulations.

Title 2, CCR, Section 1183.1(a)(7) identifies the offsetting revenues that must be recognized in the parameters and guidelines for each program. These offsetting revenues include: "i. Dedicated state and federal funds appropriated for this program. ii. Non-local agency funds dedicated for this program. iii. Local agency's general purpose funds for this program. iv. Fee authority to offset partial costs of this program." The interest income is not funding appropriated for the Health Fee Elimination mandate by any of these sources, and it does not constitute a fee authority to offset this mandate. The interest income does not fall under any of the categories identified as offsetting revenue, nor is it recognized in the Health Fee Elimination parameters and guidelines as an identified source of offsetting revenue, and therefore it is not offsetting revenue for mandate purposes.

Title 2, CCR, Section 1183.1(a)(8) specifies that parameters and guidelines must identify offsetting savings "in the same program experienced because of the same statute(s) or executive order(s) found to contain a mandate." However, the interest income is not an offsetting savings - it is revenue. The interest income does not result from any increased efficiency or reduced services that might produce a reduction in District expenses. Therefore, it cannot be the basis for an audit finding.

### 1 Statute of Limitations FY 2002-03 claim filed by the District 2 January 12, 2004 FY 2003-04 claim filed by the District 3 January 10, 2005 FY 2002-03 statute of limitations for audit expires 4 January 12, 2007 FY 2003-04 statute of limitations for audit expires 5 January 10, 2008 Audit entrance conference for all fiscal years 6 March 24, 2008 7 This is not an audit finding. The District alleges that the audit of the FY 2002-03 and FY 2003-04 annual reimbursement claims commenced after the time limitation for 8 9 audit had passed. The final audit report asserts that initiation of the audit was proper 10 because the initial payment for the FY 2002-03 claim did not occur until October 25, 2006, and there has been no payment for the FY 2003-04 claim. However, the clause in 11 Government Code Section 17558.5 that delays the commencement of the time for the 12 13 Controller to audit to the date of initial payment is void because it is impermissibly 14 vague. 15 Applicable Time Limitation for Audit 16 Prior to January 1, 1994, no statute specifically governed the statute of limitations for audits of mandate reimbursement claims. Statutes of 1993, Chapter 906, 17 Section 2, operative January 1, 1994, added Government Code Section 17558.5 to 18 establish for the first time a specific statute of limitations for audit of mandate 19 20 reimbursement claims: A reimbursement claim for actual costs filed by a local agency or school

district pursuant to this chapter is subject to audit by the Controller no later than

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1 2 3 4	four years after the end of the calendar year in which the reimbursement claim is filed or last amended. However, if no funds are appropriated for the program for the fiscal year for which the claim is made, the time for the Controller to initiate an audit shall commence to run from the date of initial payment of the claim.
5	Thus, there are two standards. A funded claim is "subject to audit" for four years after
6	the end of the calendar year in which the claim was filed. An unfunded claim must have
7	its audit initiated within four years of first payment.
8	Statutes of 1995, Chapter 945, Section 13, operative July 1, 1996, repealed and
9	replaced Section 17558.5, changing only the length of the period of limitations:
10 11 12 13 14	(a) A reimbursement claim for actual costs filed by a local agency or school district pursuant to this chapter is subject to audit by the Controller no later than two years after the end of the calendar year in which the reimbursement claim is filed or last amended. However, if no funds are appropriated for the program for the fiscal year for which the claim is made, the time for the Controller to initiate an audit shall commence to run from the date of initial payment of the claim.
16	Statutes of 2002, Chapter 1128, Section 14.5, operative January 1, 2003
17	amended Section 17558.5 to state:
18 19 20 21 22 23 24 25	(a) A reimbursement claim for actual costs filed by a local agency or school district pursuant to this chapter is subject to the <u>initiation of an</u> audit by the Controller no later than <u>three</u> years after the <u>end of the calendar year in which the date that the actual</u> reimbursement claim is filed or last amended, <u>whichever is later</u> . However, if no funds are appropriated <u>or no payment is made to a claimant</u> for the program for the fiscal year for which the claim is <u>made filed</u> , the time for the Controller to initiate an audit shall commence to run from the date of initial payment of the claim.
27	The annual reimbursement claim for FY 2002-03 is subject to the three-year statute of
28	limitations established by Chapter 1128, Statutes of 2002 which requires the audit to be
29	"initiated" within three years of the date the actual claim is filed.

The amendment is pertinent because this is the first time that the factual issue of

the date the audit is "initiated" is introduced for mandate programs for which funds are appropriated. This amendment also means that it is impossible for the claimant to know when the statute of limitations will expire at the time the claim is filed, which is contrary to the purpose of a statute of limitations. It allows the Controller's own unilateral delay, or failure to make payments from funds appropriated for the purpose of paying the claims, to control the tolling of the statute of limitations, which is also contrary to the purpose of a statute of limitations.

Statutes of 2004, Chapter 890, Section 18, operative January 1, 2005 amended Section 17558.5 to state:

(a) A reimbursement claim for actual costs filed by a local agency or school district pursuant to this chapter is subject to the initiation of an audit by the Controller no later than three years after the date that the actual reimbursement claim is filed or last amended, whichever is later. However, if no funds are appropriated or no payment is made to a claimant for the program for the fiscal year for which the claim is filed, the time for the Controller to initiate an audit shall commence to run from the date of initial payment of the claim. In any case, an audit shall be completed not later than two years after the date that the audit is commenced.

The annual reimbursement claim for FY 2003-04 is subject to this version of Section 17558.5, retains the same limitations period as the prior version, but also adds the requirement that an audit must be completed within two years of its commencement.

### <u>Vagueness</u>

The two versions of Section 17558.5 applicable to the FY 2002-03 and FY 2003-04 annual reimbursement claims both provide that the time limitation for audit "shall commence to run from the date of initial payment" if no payment is made. However, this

provision is void because it is impermissibly vague. At the time a claim is filed, the claimant has no way of knowing when payment will be made or how long the records applicable to that claim must be maintained. The current backlog in mandate payments, which continues to grow every year, could potentially require claimants to maintain detailed supporting documentation for decades. Additionally, it is possible for the Controller to unilaterally extend the audit period by withholding payment or directing appropriated funds only to those claims that have already been audited.

Therefore, the only specific and enforceable time limitation to commence an audit is three years from the date the claim was filed, and the annual reimbursement claims for FY 2002-03 and FY 2003-04 were past this time period when the audit was commenced on March 24, 2008. All adjustments to these two fiscal years are void and should be withdrawn.

### PART VIII. RELIEF REQUESTED

The District filed its annual reimbursement claims within the time limits prescribed by the Government Code. The amounts claimed by the District for reimbursement of the costs of implementing the program imposed by Chapter 1, Statutes of 1984, 2nd E.S., Chapter 1118, Statutes of 1987, and Education Code Section 76355 represent the actual costs incurred by the District to carry out this program. These costs were properly claimed pursuant to the Commission's Parameters and Guidelines. Reimbursement of these costs is required under Article XIII B, Section 6 of the California Constitution. The Controller denied reimbursement without any basis

# Incorrect Reduction Claim of Yosemite Community College District 1/84; 1118/87 Health Fee Elimination

in law or fact. In many cases, the audit report fails to specify the activity or costs denied which prevents a comprehensive evaluation of the Controller's action. The District has met its burden of going forward on this claim by complying with the requirements of Section 1185, Title 2, California Code of Regulations. Because the Controller has enforced and is seeking to enforce these adjustments without benefit of statute or regulation, the burden of proof is now upon the Controller to establish a legal basis for its actions.

The District requests that the Commission make findings of fact and law on each and every adjustment made by the Controller and each and every procedural and jurisdictional issue raised in this claim, and order the Controller to correct its audit report findings therefrom.

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1 PART IX. CERTIFICATION 2 By my signature below, I hereby declare, under penalty of perjury under the laws 3 of the State of California, that the information in this Incorrect Reduction Claim submission is true and complete to the best of my own knowledge or information or 4 5 belief, and that the attached documents are true and correct copies of documents received from or sent by the state agency which originated the document. 6 Executed on September 34, 2009, at Modesto, California, by 7 Juien Stat 8 Teresa M. Scott, Executive Vice Chancellor 9 Yosemite Community College District 10 11 2201 Blue Gum Avenue Modesto, CA 95358 12 Phone: (209) 575-6530 13 14 Fax: (209) 575-6562 E-Mail: scottt@yosemite.edu 15 16 APPOINTMENT OF REPRESENTATIVE Yosemite Community College District appoints Keith B. Petersen, SixTen and 17 Associates, as its representative for this incorrect reduction claim. 18 Quela Josef 19 Teresa M. Scott, Executive Vice Chancellor 20 21 Yosemite Community College District 22 Attachments: "Results of Review" letters dated May 10, 2009 23 Exhibit "A" Parameters and Guidelines as amended May 25, 1989 24 Exhibit "B" 25 Exhibit "C" Controller's Claiming Instructions, September 2003 Exhibit "D" Controller's Audit Report and the District's response, April 30, 2009 26 Controller's Mandated Cost Manual, September 2003 version 27 Exhibit "E" San Francisco Taxpayers Assn. V. Board of Supervisors (1992) 2 28 Exhibit "F" 29 Cal.4th 571 District Health Fee Revenue reports for FY 2002-03 30 Exhibit "G" **Annual Reimbursement Claims** 31 Exhibit "H"

2-- 575-6562



## JOHN CHIANG

CC50150 00234 2009/05/10 California State Controller Pibision of Accounting and Reporting MAY 10, 2009

BOARD OF TRUSTEES YOSEMITE COMM COLL DIST STANISLAUS COUNTY P O BOX 4065 MODESTO CA 95352

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MAY I 3 2003

DEAR CLAIMANT,

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RE: HEALTH FEE ELIMINATION (CC)

WE HAVE REVIEWED YOUR 2002/2003 FISCAL YEAR REIMBURSEMENT CLAIM FOR THE MANDATED COST PROGRAM REFERENCED ABOVE. THE RESULTS OF OUR REVIEW ARE AS FOLLOWS:

AMOUNT CLAIMED

39,067.00

TOTAL ADJUSTMENTS (DETAILS BELOW)

39,067.00

TOTAL PRIOR PAYMENTS (DETAILS BELOW)

~39,067.00

39,067.00

AHOUNT DUE STATE

PLEASE REMIT A HARRANT IN THE AMOUNT OF \$ 39.067.00 WITHIN 30 DAYS FROM THE DATE OF THIS LETTER, PAYABLE TO THE STATE CONTROLLER'S OFFICE, DIVISION OF ACCOUNTING AND REPORTING, P.O. BOX 942850, SACRAMENTO, CA 94250-5875 WITH A COPY OF THIS LETTER. FAILURE TO REMIT THE AMOUNT DUE WILL RESULT IN OUR OFFICE PROCEEDING TO OFFSET THE AMOUNT FROM THE NEXT PAYMENTS DUE TO YOUR AGENCY FOR STATE MANDATED COST PROGRAMS.

IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT GHEN CARLOS AT (916) 324-2341 OR IN WRITING AT THE ABOVE ADDRESS.

ADJUSTMENT TO CLAIM:
FIELD AUDIT FINDINGS
TOTAL ADJUSTMENTS:
PRIOR PAYMENTS:
SCHEDULE NO. MAGGE
PAID 10-25-2006
TOTAL PRIOR PAYMENTS

39,067.00

39,067.00

MA64136A

~39,067.00

-39,067.00

SINCERELY,

Bremmel GINNY BRUMMELS, MANAGER

LOCAL REIMBURSEMENT SECTION P.O. BOX 942850 SACRAMENTO, CA 94250-5875

PAGE 05

p.5



# JOHN CHIANG California State Controller Dission of Accounting and Reporting MAY 10, 2009

BOARD OF TRUSTEES
YOSEMITE COMM COLL DIST
STANISLAUS COUNTY
P O BOX 4065
MODESTO CA 95352

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MAY 10 2009

DEAR CLAIMANT:

RE: HEALTH FEE ELIMINATION (CC)

HE HAVE REVIEWED YOUR 2003/2004 FISCAL YEAR REIMBURSEMENT CLAIM FOR THE HANDATED COST PROGRAM REFERENCED ABOVE. THE RESULTS OF OUR REVIEW ARE AS FOLLOWS:

AMOUNT CLAIMED

151,046.00

ADJUSTMENT TO CLAIM;

FIELD AUDIT FINDINGS

80,888.00

TOTAL ADJUSTMENTS

80,888.00

AMOUNT DUE CLAIMANT

9 70,158.no

IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT GMEN CARLOS AT (916) 324-2341 OR IN WRITING AT THE STATE CONTROLLER'S OFFICE, DIVISION OF ACCOUNTING AND REPORTING, P.O. BOX 942850, SACRAMENTO, CA 94250-5875, DUE TO INSUFFICIENT APPROPRIATION, THE BALANCE DUE HILL BE FORTHCOMING WHEN ADDITIONAL FUNDS ARE MADE AVAILABLE.

SINCERELY,

Sinny Brummoh GINNY BRUMMELS, MANAGER

P.O. BOX 942850 SACRAMENTO, CA 94250-5875

p.2

575-6562



# JOHN CHIANG

CC50150 00234 2009/05/10 California State Cantroller 2000 Dibision of Accounting and Reporting MAY 10, 2009

BOARD OF TRUSTEES YOSEMITE COMM COLL DIST STANISLAUS COUNTY P O BOX 4065 MODESTO CA 95352

RECEIVED

MAY I 2 2009

COMPANIES OFFICE

DEAR CLAIMANT:

RE: HEALTH FEE ELIMINATION (CC)

WE HAVE REVIEWED YOUR 2004/2005 FISCAL YEAR REIMBURSEMENT CLAIM FOR THE MANDATED COST PROGRAM REFERENCED ABOVE. THE RESULTS OF OUR REVIEW ARE AS FOLLOWS:

AMOUNT CLAIMED

280,694.00

ADJUSTMENT TO CLAIM:

FIELD AUDIT FINDINGS

12,566.00

TOTAL ADJUSTMENTS

12,566.00

AMOUNT DUE CLAIMANT

268,128.00

IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT GWEN CARLOS AT (916) 324-2341 OR IN WRITING AT THE STATE CONTROLLER'S OFFICE, DIVISION OF ACCOUNTING AND REPORTING, P.O. BOX 942850, SACRAMENTO, CA 94280-5875. DUE TO INSUFFICIENT APPROPRIATION, THE BALANCE DUE WILL BE FORTHCOMING WHEN ADDITIONAL FUNDS ARE MADE AVAILABLE.

SINCERELY,

anny Brummok GINNY BRUHMELS, HANAGER

P.O. BOX 942850 SACRAMENTO, CA. 94250-5875

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### JOHN CHIANG

CC50150 00234 2009/05/10

California State Controller Division of Accounting and Reporting MAY 10, 2009

BOARD OF TRUSTEES YDSEMITE COMM COLL DIST STANISLAUS COUNTY P 0 BOX 4065 MODESTO CA 95352

Post-It® Fax Note 7671	Date 513109 pages 504
co/Dept Perez	From Dorothy Pinecula
Phone #	Co.
Fax #	Fax II

COMPOLITES CARGO

DEAR CLAIMANT:

RE: HEALTH FEE ELIMINATION (CC)

WE HAVE REVIEWED YOUR 2005/2006 FISCAL YEAR REIMBURSEMENT CLAIM FOR THE MANDATED COST PROGRAM REFERENCED ABOVE. THE RESULTS OF OUR REVIEW ARE AS FOLLOWS:

AMOUNT CLAIMED

413,324.00

ADJUSTMENT TO CLAIM:

FIELD AUDIT FINDINGS

182,362.00

TOTAL ADJUSTMENTS

182,362.00

AMOUNT DUE CLAIMANT

230,962.00

IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT GHEN CARLOS AT (916) 324-2341 DR IN HRITING AT THE STATE CONTROLLER'S OFFICE, DIVISION OF ACCOUNTING AND REPORTING, P.O. BOX 942850, SACRAMENTO, CA 94250-5875. DUE TO INSUFFICIENT APPROPRIATION, THE BALANCE DUE WILL BE FORTHCOMING WHEN ADDITIONAL FUNDS ARE MADE, AVAILABLE.

SINCERELY,

Sing Brummol GINNY BRUMMELS, MANAGER

LOCAL REIMBURSEMENT SECTION P.O. BDX 942850 SACRAMENTO, CA 94250-5875

575-6562

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### **JOHN CHIANG**

CC50150 00234 2009/05/10 California State Controller Dibision of Accounting and Reporting MAY 10, 2009

BOARD OF TRUSTEES YOSEMITE COMM COLL DIST STANISLAUS COUNTY P 0 BDX 4065 MODESTO CA 95352

RECEIVED

MAY 1 % 2009

CONTROL LINES OF WAR

DEAR CLAIMANT

RE: HEALTH FEE ELIMINATION (CC)

ME HAVE REVIEWED YOUR 2006/2007 FISCAL YEAR REIMBURSEMENT CLAIM FOR THE MANDATED COST PROGRAM REFERENCED ABOVE. THE RESULTS OF OUR REVIEW ARE AS FOLLOWS:

AMOUNT CLAIMED

329,864.00

TOTAL ADJUSTMENTS (DETAILS BELOW)

118,596.00

TOTAL PRIOR PAYMENTS (DETAILS BELOW)

-263,110.00

AMOUNT DUE STATE

51,842.00

PLEASE REMIT A WARRANT IN THE AMOUNT OF \$ 51,842.00 MITHIN 30 DAYS FROM THE DATE OF THIS LETTER, PAYABLE TO THE STATE CONTROLLER'S OFFICE, DIVISION OF ACCOUNTING AND REPORTING, P.O. BOX 942850, SACRAMENTO, CA 94250-5875 WITH A COPY OF THIS LETTER. FAILURE TO REMIT THE AMOUNT DUE WILL RESULT IN OUR OFFICE PROCEEDING TO OFFSET THE AMOUNT FROM THE NEXT PAYMENTS DUE TO YOUR AGENCY FOR STATE MANDATED COST PROGRAMS.

IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT GHEN CARLDS AT (916) 324-2341 DR IN WRITING AT THE ABOVE ADDRESS.

ADJUSTMENT TO CLAIM: FIELD AUDIT FINDINGS LATE CLAIM PENALTY PRIOR COLLECTIONS

136,990.00 10,000.00 28,394.00

118,596.DD

TOTAL ADJUSTMENTS
PRIOR PAYMENTS:
SCHEDULE NO. MA64147E
PAID 03-12-2007
TOTAL PRIOR PAYMENTS

-263,110. BO

-263,110.00

SINCERELY,

Brismones. GINNY BRUMMELS, MANAGER

LOCAL REIMBURSEMENT SECTION F.O. BOX 942850 SACRAMENTO, CA 94250-5875

**Adopted:** 8/27/87 **Amended:** 5/25/89

### PARAMETERS AND GUIDELINES Chapter 1, Statutes of 1984, 2nd E.S. . Chapter 1118, Statutes of 1987 Health Fee Elimination

### I. SUMMARY OF MANDATE

Chapter 1, Statutes of 1984, 2nd E.S. repealed Education Code Section 72246 which had authorized community college districts to charge a health fee for the purpose of providing health supervision and services, direct and indirect medical and hospitalization services, and operation of student health centers. This statute also required that health services for which a community college district charged a fee during the 1983-84 fiscal year had to be maintained at that level in the 1984-85 fiscal year and every year thereafter. The provisions of this statute would automatically repeal on December 31, 1987, which would reinstate the Community colleges districts' authority to charge a health fee as specified.

Chapter 1118, Statutes of 1987, amended Education Code section 72246 to require any community college district that provided health services in 1986-87 to maintain health services at the level provided during the 1986-87 fiscal year in 1987-88 and each fiscal year thereafter.

### II. COMMISSION ON STATE MANDATES DECISION

At its hearing on November 20, 1986, the Commission on State Mandates determined that Chapter 1, Statutes of 1984, 2nd E.S. imposed a "new program' upon community college districts by requiring any community college district which provided health services for which it was authorized to charge a fee pursuant to former Section 72246 in the 1983-84 fiscal year to maintain health services at the level provided during the 1983-84 fiscal year in the 1984-85 fiscal year and each fiscal year thereafter. This maintenance of effort requirement applies to all community college districts which levied a health services fee in the 1983-84 fiscal year, regardless of the extent to which the health services fees collected offset the actual costs of providing health services at the 1983-84 fiscal, year level.

At its hearing of April 27, 1989, the Commission determined that Chapter 1118, Statutes of 1987, amended this maintenance of effort requirement to apply to all community college districts which provided health services in fiscal year 1986-87 and required them to maintain that level in fiscal year 1987-88 and each fiscal year thereafter.

### III. ELIGIBLE CLAIMANTS

Community college districts which provided health services in 1986-87 fiscal year and continue to provide the same services as a result of this mandate are eligible to claim reimbursement of those costs.

### IV. PERIOD OF REIMBURSEMENT

Chapter 1, Statutes of 1984, 2nd E.S., became effective July 1, 1984. Section 17557 of the Government Code states that a test claim must be submitted on or before November 30th following a given fiscal year to establish for that fiscal year. The test claim for this mandate was filed on November 27, 1985; therefore, costs incurred on or after July 1, 1984, are reimbursable. Chapter 1118, Statutes of 1987, became effective January 1, 1988. Title 2, California Code of Regulations, section 1185.3(a) states that a parameters and guidelines amendment filed before the deadline for initial claims as specified in the Claiming Instructions shall apply to all years eligible for reimbursement as defined in the original parameters and guidelines; therefore, costs incurred on or after January 1, 1988, for Chapter 1118, Statutes of 1987, are reimbursable.

Actual costs for one fiscal year should be included in each claim. Estimated costs for the subsequent year may be included on the same claim if applicable. Pursuant to Section 17561(d)(3) of the Government Code, all claims for reimbursement of costs shall be submitted within 120 days of notification by the State Controller of the enactment of the claims bill.

If the total costs for a given fiscal year do not exceed \$200, no reimbursement shall be allowed, except as otherwise allowed by Government Code Section 17564.

### **V. REIMBURSABLE COSTS**

### A. Scope of Mandate

Eligible community college districts shall be reimbursed for the costs of providing a health services program. Only services provided in 1986-87 fiscal year may be claimed.

### B. Reimbursable Activities

For each eligible claimant, the following cost items are reimbursable to the extent they were provided by the community college district in fiscal year 1986-87:

### ACCIDENT REPORTS

### **APPOINTMENTS**

College Physician - Surgeon
Dermatology, Family Practice, Internal Medicine
Outside Physician
Dental Services
Outside Labs (X-ray, etc.)
Psychologist, full services
Cancel/Change Appointments
R.N.
Check Appointments

```
ASSESSMENT, INTERVENTION 81 COUNSELING
    Birth Control
   Lab Reports
   Nutrition
   Test Results (office)
    VD
    Other Medical Problems
   CD
   URI
   ENT
   Eye/Vision
   Derm./Allergy
   Gyn/Pregnancy
                   Services
   Neuro
   Ortho
   GU
   Dental
   GI
   Stress
            Counseling
   Crisis
            Intervention
   Child Abuse Reporting and Counseling
   Substance Abuse Identification and Counseling
   Aids
   Eating
           Disorders
   Weight Control
   Personal |
             Hygiene
   Burnout
EXAMINATIONS
              (Minor Illnesses)
   Recheck Minor Injury
HEALTH TALKS OR FAIRS - INFORMATION
             Transmitted
   Sexually
                          Disease
   Drugs
   Aids
   Child Abuse
          Control/Family Planning
   Birth
   Stop Smoking
   Etc.
   Library - videos
                       and
                             cassettes
FIRST AID (Major Emergencies)
FIRST AID (Minor Emergencies)
FIRST AID KITS (Filled)
IMMUNIZATIONS
   Diptheria/Tetanus
   Measles/Rubella
   Influenza
   Information
```

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INSURANCE
    On Campus Accident
    Voluntary
                               Administration
    Insurance
                Inquiry/Claim
 LABORATORY TESTS DONE
    Inquiry/Interpretation
    Pap Smears
 PHYSICALS
    Employees
    Students
   Athletes
MEDICATIONS
            (dispensed OTC for misc. illnesses)
   Antacids
   Antidiarrhial
   Antihistamines
   Aspirin, Tylenol, etc.
   Skin rash preparations
   Misc.
   Eye drops
   Ear drops
   Toothache - 0il cloves
   Stingkill
   Midol - Menstrual Cramps
PARKING
        CARDS/ELEVATOR KEYS
   Tokens
   Return
           card/key
   Parking inquiry
   Elevator passes
   Temporary handicapped parking permits
REFERRALS TO OUTSIDE AGENCIES
   Private Medical Doctor
   Health
            Department
   Clinic
   Dental
   Counseling
               Centers
   Crisis Centers
   Transitional Living Facilities
                                     (Battered/Homeless
                                                         Women)
   Family Planning Facilities
   Other Health Agencies
TESTS
   Blood
          Pressure
   Hearing
   Tuberculosis
      Reading
      Information
   Vision
   G1 ucometer
  Urinalysis
```

Hemoglobin
E.K.G.
Strep A testing
P.G. testing
Monospot
Hemacult
Misc.

### **MISCELLANEOUS**

Absence Excuses/PE Waiver
Allergy Injections
Bandaids
Booklets/Pamphlets
Dressing Change
Rest
Suture Removal
Temperature
Weigh
Misc.
Information
Report/Form
Wart Removal

### COMMITTEES

Safety Environmental Disaster Planning

SAFETY DATA SHEETS Central file

X-RAY SERVICES

COMMUNICABLE DISEASE CONTROL

**BODY FAT MEASUREMENTS** 

MINOR SURGERIES

SELF-ESTEEM GROUPS

MENTAL HEALTH CRISIS

AA GROUP

ADULT CHILDREN OF ALCOHOLICS GROUP

### WORKSHOPS

Test Anxiety
Stress Management
Corrmwnication Skills
Weight Loss
Assertiveness Skills

### VI. CLAIM PREPARATION

Each claim for reimbursement pursuant to this mandate must be timely filed and set forth a list of each item for which reimbursement is claimed under this mandate.

### A. Description of Activity

- 1. Show the total number of full-time students enrolled per semester/quarter.
- 2. Show the total number of full-time students enrolled in the summer program.
- 3. Show the total number of part-time students enrolled per semester/quarter.
- 4. Show the total number of part-time students enrolled in the summer program.
- B. Actual Costs of Claim Year for Providing 1986-87 Fiscal Year Program Level of Service

Claimed costs should be supported by the following information:

1. Employee Salaries and Benefits

Identify the employee,(s), show the classification of the employee(s) involved, describe the mandated functions performed and specify the actual number of hours devoted to each function, the productive hourly rate, and the related benefits. The average number of hours devoted to each function may be claimed if supported by a documented time study.

2. Services and Supplies

Only expenditures which can be identified as a direct cost of the mandate can be claimed. List cost of materials which have been consumed or expended specifically for the purpose of this mandate.

3. Allowable Overhead Cost

Indirect costs may be claimed in the manner described by the State Controller in his claiming instructions.

### VII. SUPPORTING DATA

For auditing purposes, all costs claimed must be traceable to source documents and/or worksheets that show evidence of the validity of such costs. This would include documentation for the fiscal year 1986-87 program to substantiate a maintenance of effort. These documents must be kept on file by the agency submitting the claim for a period of no

less than three years from the date of the final payment of the claim pursuant to this mandate, and made available on the request of the State Controller or his agent.

### VIII. OFFSETTING SAVINGS AND OTHER REIMBURSEMENTS

Any offsetting savings the claimant experiences as a direct result of this statute must be deducted from the costs claimed. In addition, reimbursement for this mandate received from any source, e.g., federal, state, etc., shall be identified and deducted from this claim. This shall include the amount of \$7.50 per full-time student per semester, \$5.00 per full-time student for summer school, or \$5.00 per full-time student per quarter, as authorized by Education Code section 72246(a). This shall also include payments (fees) received from individuals other than students who are not covered by Education Code Section 72246 for health services.

### IX. REQUIRED CERTIFICATION

The following certification must accompany the claim:

I DO HEREBY CERTIFY under penalty of perjury:

THAT the foregoing is true and correct:

THAT Section 1090 to 1096, inclusive, of the Government Code and other applicable provisions of the law have been complied with;

and

THAT I am the person authorized by the local agency to file claims for funds with the State of California.

Signature	of	Authorized	Representative	Date	
Title		<del></del>		Telephone No.	

### **HEALTH FEE ELIMINATION**

### 1. Summary of Chapters 1/84, 2nd E.S., and Chapter 1118/87

Chapter 1, Statutes of 1984, 2nd E.S., repealed Education Code § 72246 which authorized community college districts to charge a fee for the purpose of providing health supervision and services, direct and indirect medical and hospitalization services, and operation of student health centers. The statute also required community college districts that charged a fee in the 1983/84 fiscal year to maintain that level of health services in the 1984/85 fiscal year and each fiscal year thereafter. The provisions of this statute would automatically repeal on December 31, 1987, which would reinstate the community college districts' authority to charge a health fee as specified.

Chapter 1118, Statutes of 1987 amended Education Code § 72246 to require any community college district that provided health services in the 1986/87 fiscal year to maintain health services at that level in the 1986/87 fiscal year and each fiscal year thereafter. Chapter 8, Statutes of 1993, has revised the numbering of § 72246 to § 76355.

### 2. Eligible Claimants

Any community college district incuming increased costs as a result of this mandate is eligible to claim reimbursement of these costs.

### 3. Appropriations

To determine if current funding is available for this program, refer to the schedule "Appropriations for State Mandated Cost Programs" in the "Annual Claiming Instructions for State Mandated Costs" issued in mid-September of each year to community college presidents.

### 4. Types of Claims

### A. Reimbursement and Estimated Claims

A claimant may file a reimbursement claim and/or an estimated claim. A reimbursement claim details the costs actually incurred for a prior fiscal year. An estimated claim shows the costs to be incurred for the current fiscal year.

### B. Minimum Claim

Section 17564(a), Government Code, provides that no claim shall be filed pursuant to Section 17561 unless such a claim exceeds \$200 per program per fiscal year.

### 5. Filing Deadline

(1) Refer to item 3 "Appropriations" to determine if the program is funded for the current fiscal year. If funding is available, an estimated claim must be filed with the State Controller's Office and postmarked by November 30, of the fiscal year in which costs are to be incurred. Timely filed estimated claims will be paid before late claims.

After having received payment for an estimated claim, the claimant must file a reimbursement claim by November 30, of the following fiscal year regardless whether the payment was more or less than the actual costs. If the local agency fails to file a reimbursement claim, monies received must be returned to the State. If no estimated claim was filed, the local agency may file a reimbursement

claim detailing the actual costs incurred for the fiscal year, provided there was an appropriation for the program for that fiscal year. (See item 3 above).

(2) A reimbursement claim detailing the actual costs must be filed with the State Controller's Office and postmarked by November 30 following the fiscal year in which costs were incurred. If the claim is filed after the deadline but by November 30 of the succeeding fiscal year, the approved claim must be reduced by a late penalty of 10%, not to exceed \$1,000. Claims filed more than one year after the deadline will not be accepted.

### 6. Reimbursable Components

Eligible claimants will be reimbursed for health service costs at the level of service provided in the 1986/87 fiscal year. The reimbursement will be reduced by the amount of student health fees authorized per the Education Code § 76355.

After January 1, 1993, pursuant to Chapter 8, Statutes of 1993, the fees students were required to pay for health supervision and services were not more than:

\$10.00 per semester

\$5.00 for summer-school-

\$5.00 for each quarter

Beginning with the summer of 1997, the fees are:

\$11.00 per semester

\$8.00 for summer school or

\$8.00 for each quarter

The district may increase fees by the same percentage increase as the Implicit Price Deflator (IPD) for the state and local government purchase of goods and services. Whenever the IPD calculates an increase of one dollar (\$1) above the existing amount, the fees may be increased by one dollar (\$1).

### 7. Reimbursement Limitations

- A. If the level at which health services were provided during the fiscal year of reimbursement is less than the level of health services that were provided in the 1986/87 fiscal year, no reimbursement is forthcoming.
- B. Any offsetting savings or reimbursement the claimant received from any source (e.g. federal, state grants, foundations, etc.) as a result of this mandate, shall be identified and deducted so only net local costs are claimed.

### 8. Claiming Forms and Instructions

The diagram "Illustration of Claim Forms" provides a graphical presentation of forms required to be filed with a claim. A claimant may submit a computer generated report in substitution for forms HFE-1.0, HFE-1.1, and form HFE-2 provided the format of the report and data fields contained within the report are identical to the claim forms included in these instructions. The claim forms provided with these instructions should be duplicated and used by the claimant to file estimated and reimbursement claims. The State Controller's Office will revise the manual and claim forms as necessary. In such instances, new replacement forms will be mailed to claimants.

### A. Form HFE- 2, Health Services

This form is used to list the health services the community college provided during the 1986/87 fiscal year and the fiscal year of the reimbursement claim.

### B. Form HFE-1.1, Claim Summary

This form is used to compute the allowable increased costs an individual college of the community college district has incurred to comply with the state mandate. The level of health services reported on this form must be supported by official financial records of the community college district. A copy of the document must be submitted with the claim. The amount shown on line (13) of this form is carried to form HFE-1.0.

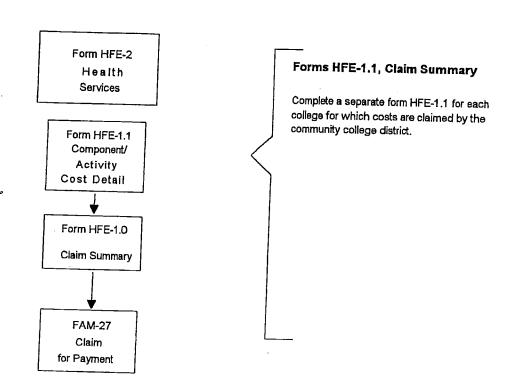
### C. Form HFE-1.0, Claim Summary

This form is used to list the individual colleges that had increased costs due to the state mandate and to compute a total claimable cost for the district. The "Total Amount Claimed", line (04) on this form is carried forward to form FAM-27, line 13, for the reimbursement claim, or line (07) for the estimated claim.

### D. Form FAM-27, Claim for Payment

This form contains a certification that must be signed by an authorized representative of the local agency. All applicable information from form HFE-1.0 and HFE 1.1 must be carried forward to this form for the State Controller's Office to process the claim for payment.

### Illustration of Claim Forms



	State Controller's	Office			С	ommunity College Mand	iated Cost Manus
		CLAIM FOR PAYM				For State Controller Use	
)	Pursu	ant to Government Cod	e S	ection 17561		(19) Program Number 0023	4
		HEALTH FEE ELIMIN	AT	ION		(20) Date Filed//	
	(01) Claimant Identification N					(21) LRS Input//	
( A	(02) Claimant Name					Reimbursement	Claim Data
B E	(02) Glaimant Name					(22) HFE-1.0, (04)(b)	
L	County of Location					(23)	
H	Street Address or P.O. Box			Suite		<del></del>	
R	City	State		Zip Code		(24)	<del></del>
\	T	<del></del>	_			(25)	
	Type of Claim	Estimated Claim		Reimbursement C	laim	(26)	
		(03) Estimated	] [	(09) Reimbursement		(27)	
		(04) Combined	, l	(10) Combined		(28)	
		(05) Amended	,	(11) Amended		<del></del>	<del></del>
ı	Fiscal Year of Cost	<del></del>	+		<u> </u>	(29)	
ŀ	<del></del>	(06) 20/20		(12) 20/20		(30)	
ļ	Total Claimed Amount	(07)	_[0	(13)		(31)	
	Less: 10% Late Penalty	, not to exceed \$1,000		14)		(32)	
1	Less: Prior Claim Paym	ent Received	7	(15)		(33)	<del></del>
ľ	Net Claimed Amount		(	(16)		(34)	
ב	Due from State	(08)	(	[7 <u>]</u>		(35)	,
	Oue to State		(1	8)		(36)	
	37) CERTIFICATION						
Vi	iolated any of the provisio	visions of Government Code st claims with the State of Ca ons of Government Code Sect	lion	s 1090 to 1098, inclusiv	and ce /e.	rtify under penalty of perjury	that I have not
ar		ras no application other than to such costs are for a new prog rth in the Parameters and Gui aintained by the claimant.					
	ne amounts for this Estima tual costs set forth on the regoing is true and correc	ated Claim and/or Reimbursei a attached statements. I certif ct.	mer y ur	nt Claim are hereby clainder penalty of perjury	imed fi under	rom the State for payment of the laws of the State of Calif	estimated and/or ornia that the
Sig	nature of Authorized Office	er			С	Date	
-				_	_		
Тур	e or Print Name			-	<del>-</del> -		
_	) Name of Contact Person for C	Claim				itle	
				Telephone Numbe	r <u>(</u>	E	xt.
				E-Mail Address			

Program **234** 

# HEALTH FEE ELIMINATION Certification Claim Form Instructions

FORM FAM-27

- (01) Enter the payee number assigned by the State Controller's Office.
- (02) Enter your Official Name, County of Location, Street or P. O. Box address, City, State, and Zip Code.
- (03) If filing an estimated claim, enter an "X" in the box on line (03) Estimated.
- (04) Leave blank.
- (05) If filling an amended estimated claim, enter an "X" in the box on line (05) Amended.
- (06) Enter the fiscal year in which costs are to be incurred.
- (07) Enter the amount of the estimated claim. If the estimate exceeds the previous year's actual costs by more than 10%, complete form HFE-1.1 and enter the amount from line (13).
- (08) Enter the same amount as shown on line (07).
- (09) If filling a reimbursement claim, enter an "X" in the box on line (09) Reimbursement.
- (10) Leave blank.
- (11) If filing an amended reimbursement claim, enter an "X" in the box on line (11) Amended.
- Enter the fiscal year for which actual costs are being claimed. If actual costs for more than one fiscal year are being claimed, complete a separate form FAM-27 for each fiscal year.
- (13) Enter the amount of the reimbursement claim from form HFE-1.1, line (13). The total claimed amount must exceed \$1,000.
- Reimbursement claims must be filed by January 15 of the following fiscal year in which costs are incurred or the claims shall be reduced by a late penalty. Enter zero if the claim was timely filed, otherwise, enter the product of multiplying line (13) by the factor 0.10 (10% penalty), or \$1,000, whichever is less.
- (15) If filing an actusl reimbursement claim and an estimated claim was previously filed for the same fiscal year, enter the amount received for the claim. Otherwise, enter a zero.
- (16) Enter the result of subtracting line (14) and line (15) from line (13).
- (17) If line (16), Net Claimed Amount, is positive, enter that amount on line (17), Due from State.
- (18) If line (16), Net Claimed Amount, is negative, enter that amount on line (18), Due to State.
- (19) to (21) Leave blank.
- (22) to (36) Reimbursement Claim Data. Bring forward the cost information as specified on the left-hand column of lines (22) through (36) for the reimbursement claim, e.g., HFE-1.0, (04)(b), means the information is located on form HFE-1.0, block (04), column (b). Enter the information on the same line but in the right-hand column. Cost information should be rounded to the nearest dollar, i.e., no cents. Indirect costs percentage should be shown as a whole number and without the percent symbol, i.e., 7.548% should be shown as 8. Completion of this data block will expedite the payment process.
- (37) Read the statement "Certification of Claim." If it is true, the claim must be dated, signed by the agency's authorized officer, and must include the person's name and title, typed or printed. Claims cannot be paid unless accompanied by an original signed certification. (To expedite the payment process, please sign the form FAM-27 with blue ink, and attach a copy of the form FAM-27 to the top of the claim package.)
- Enter the name, telephone number, and e-mail address of the person whom this office should contact if additional information is required.

Claims should be rounded to the nearest dollar. Submit a signed original and a copy of form FAM-27, Claim for Payment, and all other forms and supporting documents. (To expedite the payment process, please sign the form in blue ink, and attach a copy of the form FAM-27 to the top of the claim package.) Use the following mailing addresses:

Address, if delivered by U.S. Postal Service:

OFFICE OF THE STATE CONTROLLER ATTN: Local Reimbursements Section Division of Accounting and Reporting P.O. Box 942850 Sacramento, CA 94250 Address, if delivered by other delivery service:

OFFICE OF THE STATE CONTROLLER ATTN: Local Reimbursements Section Division of Accounting and Reporting 3301 C Street, Suite 500 Sacramento, CA 95816

State Controller's Office	School Mand	ated Cost Manua
	MANDATED COSTS HEALTH FEE ELIMINATION CLAIM SUMMARY	FORM HFE-1.0
(01) Claimant	(02) Type of Claim Reimbursement Estimated	Fiscal Year
(03) List all the colleges of th	ne community college district identified in form HFE-1.1, lin	
	(a) Name of College	(b) Claimed
1.		Amount
2.		
3.		
4.		
5.		
3.		
7.		
3.		
).	<u> </u>	
0.		
1.		
2.		
3.		
4.		
5.		
3.		
	·	
) Total Amount Claimed	II Ino /2 4h) + Ba- /2 CB + II - /2 CB + II	
	[Line (3.1b) + line (3.2b) + line (3.3b) +line (3.21b)]	1

# HEALTH FEE ELIMINATION CLAIM SUMMARY Instructions

FORM HFE-1.0

- (01) Enter the name of the claimant. Only a community college district may file a claim with the State Controller's Office on behalf of its colleges.
- (02) Check a box, Reimbursement or Estimated, to identify the type of claim being filed. Enter the fiscal year for which the expenses were/are to be incurred. A separate claim must be filed for each fiscal year.

Form HFE-1.0 must be filed for a reimbursement claim. Do not complete form HFE-1.0 if you are filing an estimated claim and the estimate is not more than 110% of the previous fiscal year's actual costs. Simply enter the amount of the estimated claim on form FAM-27, line (07). However, if the estimated claim exceeds the previous fiscal year's actual costs by more than 10%, forms HFE-1.0 and HFE-1.1 must be completed and a statement attached explaining the increased costs. Without this information the high estimated claim will automatically be reduced to 110% of the previous fiscal year's actual costs.

- (03) List all the colleges of the community college district which have increased costs. A separate form HFE-1.1 must be completed for each college showing how costs were derived.
- (04) Enter the total claimed amount of all colleges by adding the Claimed Amount, line (3.1b) + line (3.2b) ...+ (3.21b).

Stat	te Controller's Office				ommunity	College W	andated O	Joe manual
•	Program  ANDATED COSTS  HEALTH FEE ELIMINATION  CLAIM SUMMARY							FORM HFE-1.1
(0.1)	Claiment			(02) Type	of Claim		Fi	scal Year
(01)	) Claimant				bursement			
				Estim	ated		20	/20
(03)	) Name of College							
(0.4)	) Indicate with a check mark,	the level at which	health service	Old elem sec	vided durina	the fiscal vea	ar of reimbur	sement in
com	parison to the 1986-87 fiscal	year. If the "Less	" box is chec	kea, 510P, (	10 HOL COMP	iete the ionii.	No reimburs	ement is
allov	wed.	LESS	SA	ME	MOI	RE ]		
		<u> </u>		<u></u>		Direct Cost	Indirect Cost	Total
(05)	) Cost of health services f	or the fiscal yea	r of claim					
				<del></del>	f (1000 07)			
(06)	) Cost of providing current	t fiscal year hea	Ith services	in excess o	1986-87			
(07)	) Cost of providing current	t fiscal year hea	Ith services	at 1986-87	level			
(08)	[Line (05) - line (06)] ) Complete columns (a) the	rough (g) to pro	vide detail (	data for hea	Ith fees			
<del> </del>		<del></del>	<del></del>	<u> </u>	l	(e)	(f)	(g)
	Collection Period	(a) Number of Students Enrolled	EC	(c) Students Exempt per EC 76355(c)(2)	EC	Number of Students Subject to	Unit Cost Per Student Per EC 76355	Student Health Fees (e) x (f)
1.	Per Fall Semester							
2. 1	Per Spring Semester							
3. 1	Per Summer Session							
4. 1	Per First Quarter							
5.	Per Second Quarter							
6.	Per third Quarter			<u> </u>				
(09)	) Total health fee that cou	ld have been co	llected: The	sum of (Line (	(08)(1)(c) thro	ugh line (08)(6	)(c)	
(10) Subtotal [Line (07) - line (09)]								
Cos	st Reduction							
(11)	) Less: Offsetting Saving	S						
(12)	Less: Other Reimburse	ments						
(4.2)	Total Claimed Amount			[Line (10) -	{line (11) + lin	ne (12)}]		

Program **234** 

# HEALTH FEE ELIMINATION CLAIM SUMMARY Instructions

FORM HFE-1.1

- (01) Enter the name of the claimant. Only a community college district may file a claim with the State Controller's Office (SCO) on behalf of its colleges.
- (02) Type of Claim. Check a box, Reimbursement or Estimated, to identify the type of claim being filed. Enter the fiscal year of costs.

Form HFE-1.1 must be filed for a reimbursement claim. Do not complete form HFE-1.1 if you are filing an estimated claim and the estimate does not exceed the previous fiscal year's actual costs by more than 10%. Simply enter the amount of the estimated claim on form FAM-27, line (07). However, if the estimated claim exceeds the previous fiscal year's actual costs by more than 10%, form HFE-1.1 must be completed and a statement attached explaining the increased costs. Without this information the high estimated claim will automatically be reduced to 110% of the previous fiscal year's actual costs.

- (03) Enter the name of the college or community college district that provided student health services in the 1986-87 fiscal year and continue to provide the same services during the fiscal year of claim.
- (04) Compare the level of services provided during the fiscal year of reimbursement to the 1986-87 fiscal year and indicate the result by marking a check in the appropriate box. If the "Less" box is checked, STOP and do not complete the remaining part of this claim form. No reimbursement is forthcoming.
- (05) Enter the direct cost, indirect cost, and total cost of health services for the fiscal year of claim on line (05). Direct cost of health services is identified on the college expenditure report authorized by Education Code §76355 and included in the Community College Annual Financial and Budget Report CCFS-311, EDP Code 6440, column 5. If the amount of direct costs claimed is different than that shown on the expenditure report, provide a schedule listing those community college costs that are in addition to, or a reduction to expenditures shown on the report. For claiming indirect costs, college districts have the option of using a federally approved rate from the Office of Management and Budget Circular A-21, form FAM-29C, or a 7% indirect cost rate.
- (06) Enter the direct cost, indirect cost, and total cost of health services that are in excess of the level provided in the 1986-87 fiscal year.
- (07) Enter the difference of the cost of health services for the fiscal year of claim, line (05) and the cost of providing current fiscal year services that are in excess of the level provided in the 1986-87 fiscal year line (06).
- (08) Complete columns (a) through (g) to provide details on the number of students enrolled, the number of students exempt per EC Section 76355(c)(1), (2), and (3), and the amount of health service fees that could have been collected. After 05/01/01, the student fees for health supervision and services are \$12.00 per semester, \$9.00 for summer school, and \$9 for each quarter.
- (09) Enter the sum of student health fees that could have been collected, other than exempt students.
- (10) Enter the difference of the cost of providing health services at the 1986-87 level, line (07) and the total health fee that could have been collected, line (09). If line (09) is greater than line (07), no claim shall be filed.
- (11) Enter the total savings experienced by the school identified in line (03) as a direct cost of this mandate. Submit a detailed schedule of savings with the claim.
- (12) Enter the total of other reimbursements received from any source, (i.e., federal, other state programs, etc.,) Submit a detailed schedule of reimbursements with the claim.
- (13) Subtract the sum of Offsetting Savings, line (11), and Other Reimbursements, line (12), from Total 1986-87 Health Service Cost excluding Student Health Fees.

# MANDATED COSTS HEALTH ELIMINATION FEE HEALTH SERVICES

FORM HFE-2

		1	
(01) Claimant:	(02) Fiscal Year costs were incu	rred:	
03) Place an "X" in columns (a) and/or (b), as applicable vere provided by student health service fees for the indic	, to indicate which health services cated fiscal years.	(a) FY 1986/87	(b) FY of Claim
Accident Reports			
Appointments			
College Physician, surgeon		1	
Dermatology, family practice			
Internal Medicine			
Outside Physician			
Dental Services	•	1	
Outside Labs, (X-ray, etc.)			
Psychologist, full services	•	1	
Cancel/Change Appointments		1 1	
Registered Nurse			
Check Appointments			
Assessment, Intervention and Counseling			
Birth Control			
Lab Reports		]	
Nutrition			
Test Results, office			
Venereal Disease		]	
Communicable Disease			
Upper Respiratory Infection		1 1	
Eyes, Nose and Throat	•		
Eye/Vision			
Dermatology/Allergy		1	
Gynecology/Pregnancy Service			
Neuralgic			
Orthopedic			
Genito/Urinary			
Dental			
Gastro-Intestinal			
Stress Counseling		1	
Crisis Intervention	·	1	
Child Abuse Reporting and Counseling			
Substance Abuse Identification and Counseling		{	
Acquired Immune Deficiency Syndrome		İ	
Eating Disorders			
Weight Control Personal Hygiene			
Burnout			
Other Medical Problems, list			
kaminations, minor illnesses			
Recheck Minor Injury			
ealth Talks or Fairs, Information			
Sexually Transmitted Disease	Í	-	
Drugs			
Acquired Immune Deficiency Syndrome	{		
,		1	T T

# MANDATED COSTS HEALTH ELIMINATION FEE HEALTH SERVICES

FORM HFE-2

HEALTH SERVICE	:5		
(01) Claimant:	(02) Fiscal Year costs were incurre	ed:	<del>_</del>
(03) Place an "X" in column (a) and/or (b), as applicable, to in provided by student health service fees for the indicated fisca	(a) FY 1986/87	(b) FY of Claim	
Child Abuse Birth Control/Family Planning Stop Smoking Library, Videos and Cassettes			
First Aid, Major Emergencies			
First Aid, Minor Emergencies			
First Aid Kits, Filled			
Immunizations Diphtheria/Tetanus Measles/Rubella Influenza Information			
Insurance On Campus Accident Voluntary Insurance Inquiry/Claim Administration			
Laboratory Tests Done Inquiry/Interpretation Pap Smears			
Physical Examinations Employees Students Athletes			İ
Medications Antacids Antidiarrheal Aspirin, Tylenol, Etc Skin Rash Preparations Eye Drops Ear Drops Toothache, oil cloves Stingkill Midol, Menstrual Cramps Other, list			
Parking Cards/Elevator Keys Tokens Return Card/Key Parking Inquiry Elevator Passes Temporary Handicapped Parking Permits			

# MANDATED COSTS HEALTH ELIMINATION FEE HEALTH SERVICES

FORM HFE-2

	ES	ļ	
(01) Claimant:	(02) Fiscal Year costs were incu	rred:	
(03) Place an "X" in columns (a) and/or (b), as applicable, to were provided by student health service fees for the indicate	o indicate which health services d fiscal years.	(a) FY 1986/87	(b) FY of Claim
Referrals to Outside Agencies Private Medical Doctor Health Department Clinic Dental Counseling Centers			
Crisis Centers Transitional Living Facilities, battered/homeless wome Family Planning Facilities Other Health Agencies	en		
Tests Blood Pressure			
Hearing Tuberculosis Reading Information			
Vision Glucometer Urinalysis Hemoglobin			
EKG Strep A testing PG Testing Monospot			
Hemacult Others, list			
/liscellaneous Absence Excuses/PE Waiver			
Allergy Injections Bandaids Booklets/Pamphlets			
Dressing Change Rest Suture Removal Temperature			
Weigh Information Report/Form	·		
Wart Removal Others, list			
ommittees Safety Environmental			
Disaster Planning			

# YOSEMITE COMMUNITY COLLEGE DISTRICT

Audit Report

### **HEALTH FEE ELIMINATION PROGRAM**

Chapter 1, Statutes of 1984, 2<sup>nd</sup> Extraordinary Session, and Chapter 1118, Statutes of 1987

July 1, 2002, through June 30, 2007



JOHN CHIANG
California State Controller

April 2009



# JOHN CHIANG California State Controller

April 30, 2009

Anne DeMartini, Board Chair Board of Trustees Yosemite Community College District 2201 Blue Gum Avenue Modesto, CA 95358

Dear Ms. DeMartini:

The State Controller's Office audited the costs claimed by Yosemite Community College District for the legislatively mandated Health Fee Elimination Program (Chapter 1, Statutes of 1984, 2<sup>nd</sup> Extraordinary Session, and Chapter 1118, Statutes of 1987) for the period of July 1, 2002, through June 30, 2007.

The district claimed \$1,203,995 (\$1,213,995 less a \$10,000 penalty for filing a late claim) for the mandated program. Our audit disclosed that \$752,122 is allowable and \$451,873 is unallowable. The costs are unallowable because the district claimed understated services and supplies costs, overstated indirect costs, understated authorized health service fees, and understated offsetting savings/reimbursements. The State paid the district \$273,783. Allowable costs claimed exceed the amount paid by \$478,339.

If you disagree with the audit findings, you may file an Incorrect Reduction Claim (IRC) with the Commission on State Mandates (CSM). The IRC must be filed within three years following the date that we notify you of a claim reduction. You may obtain IRC information at CSM's Web site link at www.csm.ca.gov/docs/IRCForm.pdf.

If you have any questions, please contact Jim L. Spano, Chief, Mandated Cost Audits Bureau, at (916) 323-5849.

Sincerely,

Original signed by

JEFFREY V. BROWNFIELD Chief, Division of Audits

JVB/sk

cc: Teresa Scott, Executive Vice Chancellor
Yosemite Community College District
Kuldeep Kaur, Specialist
Fiscal Planning and Administration
California Community Colleges Chancellor's Office
Jeannie Oropeza, Program Budget Manager
Education Systems Unit
Department of Finance

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## **Audit Report**

### Summary

The State Controller's Office (SCO) audited the costs claimed by Yosemite Community College District for the legislatively mandated Health Fee Elimination Program (Chapter 1, Statutes of 1984, 2<sup>nd</sup> Extraordinary Session, and Chapter 1118, Statutes of 1987) for the period of July 1, 2002, through June 30, 2007.

The district claimed \$1,203,995 (\$1,213,995 less a \$10,000 penalty for filing a late claim) for the mandated program. Our audit disclosed that \$752,122 is allowable and \$451,873 is unallowable. The costs are unallowable because the district claimed understated services and supplies costs, overstated indirect costs, understated authorized health service fees, and understated offsetting savings/reimbursements. The State paid the district \$273,783. Allowable costs claimed exceed the amount paid by \$478,339.

### **Background**

Chapter 1, Statutes of 1984, 2<sup>nd</sup> Extraordinary Session (E.S.) repealed Education Code section 72246, which authorized community college districts to charge a health fee for providing health supervision and services, providing medical and hospitalization services, and operating student health centers. This statute also required that health services for which a community college district charged a fee during fiscal year (FY) 1983-84 had to be maintained at that level in FY 1984-85 and every year thereafter. The provisions of this statute would automatically sunset on December 31, 1987, reinstating the community college districts' authority to charge a health service fee as specified.

Chapter 1118, Statutes of 1987, amended Education Code section 72246 (subsequently renumbered as section 76355 by Chapter 8, Statutes of 1993). The law requires any community college district that provided health services in FY 1986-87 to maintain health services at the level provided during that year for FY 1987-88 and for each fiscal year thereafter.

On November 20, 1986, the Commission on State Mandates (CSM) determined that Chapter 1, Statutes of 1984, 2<sup>nd</sup> Extraordinary Session imposed a "new program" upon community college districts by requiring specified community college districts that provided health services in FY 1983-84 to maintain health services at the level provided during that year for FY 1984-85 and for each fiscal year thereafter. This maintenance-of-effort requirement applied to all community college districts that levied a health service fee in FY 1983-84.

On April 27, 1989, the CSM determined that Chapter 1118, Statutes of 1987, amended this maintenance-of-effort requirement to apply to all community college districts that provided health services in FY 1986-87, requiring them to maintain that level in FY 1987-88 and for each fiscal year thereafter.

The program's parameters and guidelines establish the state mandate and define reimbursement criteria. CSM adopted parameters and guidelines on August 27, 1987, and amended them on May 25, 1989. In compliance with Government Code section 17558, the SCO issues claiming instructions to assist school districts in claiming mandated program reimbursable costs.

# Objective, Scope, and Methodology

We conducted the audit to determine whether costs claimed represent increased costs resulting from the Health Fee Elimination Program for the period of July 1, 2002, through June 30, 2007.

Our audit scope included, but was not limited to, determining whether costs claimed were supported by appropriate source documents, were not funded by another source, and were not unreasonable and/or excessive.

We conducted this performance audit under the authority of Government Code sections 12410, 17558.5, and 17561. We did not audit the district's financial statements. We conducted the audit in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives.

We limited our review of the district's internal controls to gaining an understanding of the transaction flow and claim preparation process as necessary to develop appropriate auditing procedures.

We asked the district's representative to submit a written representation letter regarding the district's accounting procedures, financial records, and mandated cost claiming procedures as recommended by generally accepted government auditing standards. However, the district declined our request.

### Conclusion

Our audit disclosed instances of noncompliance with the requirements outlined above. These instances are described in the accompanying Summary of Program Costs (Schedule 1) and in the Findings and Recommendations section of this report.

For the audit period, Yosemite Community College District claimed \$1,203,995 (\$1,213,995 less a \$10,000 penalty for filing a late claim) for costs of the Health Fee Elimination Program. Our audit disclosed that \$752,122 is allowable and \$451,873 is unallowable.

For the FY 2002-03 claim, the State paid the district \$39,067. Our audit disclosed that the claimed costs are unallowable. The State will offset \$39,067 from other mandated program payments due the district. Alternatively, the district may remit this amount to the State.

For the FY 2003-04 claim, the State made no payment to the district. Our audit disclosed that \$70,158 is allowable. The State will pay that amount, contingent upon available appropriations.

For the FY 2004-05 claim, the State made no payment to the district. Our audit disclosed that \$268,128 is allowable. The State will that amount, contingent upon available appropriations.

For the FY 2005-06 claim, the State made no payment to the district. Our audit disclosed that \$230,962 is allowable. The State will that amount, contingent upon available appropriations.

For the FY 2006-07 claim, the State paid the district \$234,716. Our audit disclosed that \$182,874 is allowable. The State will offset \$51,842 from other mandated program payments due the district. Alternatively, the district may remit this amount to the State.

Views of Responsible Official We issued a draft audit report on March 12, 2009. Teresa Scott, Executive Vice Chancellor, responded by letter dated March 24, 2009 (Attachment), disagreeing with the audit results except for Findings 1 and 3. This final audit report includes the district's response.

### **Restricted Use**

This report is solely for the information and use of Yosemite Community College District, the California Community Colleges Chancellor's Office, the California Department of Finance, and the SCO; it is not intended to be and should not be used by anyone other than these specified parties. This restriction is not intended to limit distribution of this report, which is a matter of public record.

Original signed by

JEFFREY V. BROWNFIELD Chief, Division of Audits

April 30, 2009

## Schedule 1— Summary of Program Costs July 1, 2002, through June 30, 2007

Cost Elements	Actual Costs Claimed	Allowable per Audit	Audit Adjustment	Reference 1
July 1, 2002, through June 30, 2003	•			
Direct costs: Salaries Benefits Services and supplies	\$ 248,395 77,779 70,613	\$ 248,395 77,779 70,613	\$ — — —	
Total direct costs Indirect costs	396,787 95,030	396,787 84,206	(10,824)	Finding 2
Total direct and indirect costs Less authorized health service fees Less offsetting savings/reimbursements	491,817 (446,250) (6,500)	480,993 (490,194) (21,458)	(10,824) (43,944) (14,958)	Finding 4 Finding 5
Subtotal Audit adjustments that exceed costs claimed	39,067	(30,659) 30,659	(69,726) 30,659	
Total program costs Less amount paid by the State	\$ 39,067	(39,067)	\$ (39,067)	
Allowable costs claimed in excess of (less than)	amount paid	\$ (39,067)		
July 1, 2003, through June 30, 2004				
Direct costs: Salaries Benefits Services and supplies	\$ 264,370 116,417 89,423	\$ 264,370 116,417 90,508	\$ — 1,085	Finding 1
Total direct costs Indirect costs	470,210 118,916	471,295 89,621	1,085 (29,295)	Finding 2
Total direct and indirect costs Less authorized health service fees Less offsetting savings/reimbursements	589,126 (431,580) (6,500)	560,916 (442,899) (47,859)	(28,210) (11,319) (41,359)	Findings 3, 4 Finding 5
Total program costs Less amount paid by the State	\$ 151,046	70,158	\$ (80,888)	
Allowable costs claimed in excess of (less than)	amount paid	\$ 70,158		

## Schedule 1 (continued)

			 		<del></del>	
Cost Elements		Actual Costs Claimed	 Allowable per Audit	<u> </u>	Audit Adjustment	Reference
July 1, 2004, through June 30, 2005						
Direct costs: Salaries Benefits Services and supplies	\$	303,647 141,296 73,063	\$ 303,647 141,296 73,237	\$	 174	Finding 1
Total direct costs Indirect costs	_	518,006 180,680	518,180 187,633		174 6,953	Finding 2
Total direct and indirect costs Less authorized health service fees Less offsetting savings/reimbursements		698,686 (411,492) (6,500)	 705,813 (416,184) (21,501)		7,127 (4,692) (15,001)	Finding 4 Finding 5
Total program costs Less amount paid by the State	<u>\$</u>	280,694	268,128	<u>\$</u>	(12,566)	
Allowable costs claimed in excess of (less than)	amou	nt paid	\$ 268,128			
July 1, 2005, through June 30, 2006			 			
Direct costs: Salaries Benefits Services and supplies	\$	344,990 159,108 99,407	\$ 344,990 159,108 107,911	\$	  8,504	Finding 1
Total direct costs Indirect costs		603,505 219,555	612,009 203,371		8,504 (16,184)	Finding 2
Total direct and indirect costs Less authorized health service fees Less offsetting savings/reimbursements		823,060 (402,179) (7,557)	815,380 (554,058) (30,360)		(7,680) (151,879) (22,803)	Finding 4 Finding 5
Total program costs Less amount paid by the State	<u>\$</u>	413,324	230,962	\$	(182,362)	
Allowable costs claimed in excess of (less than)	amou	nt paid	\$ 230,962			
July 1, 2006, through June 30, 2007			 			
Direct costs: Salaries Benefits Services and supplies	\$	453,320 187,474 105,929	\$ 453,320 187,474 105,929	\$	 	
Total direct costs Indirect costs		746,723 306,679	 746,723 259,188		(47,491)	Finding 2
Total direct and indirect costs Less authorized health service fees Less offsetting savings/reimbursements Less late filing penalty <sup>2</sup>		1,053,402 (709,335) (14,203) (10,000)	,005,911 (774,633) (38,889) (9,515)		(47,491) (65,298) (24,686) 485	Finding 4 Finding 5
Total program costs Less amount paid by the State	\$	319,864	182,874 (234,716)	\$ (	136,990)	
Allowable costs claimed in excess of (less than) a	amour	nt paid	\$ (51,842)			

## **Schedule 1 (continued)**

Cost Elements	Actual Costs Claimed	Allowable per Audit	Audit Adjustment	Reference 1
Summary: July 1, 2002, through June 30, 2007				
Direct costs: Salaries Benefits Services and supplies	\$ 1,614,722 682,074 438,435	\$ 1,614,722 682,074 448,198	\$ 	
Total direct costs Indirect costs	2,735,231 920,860	2,744,994 824,019	9,763 (96,841)	
Total direct and indirect costs Less authorized health service fees Less offsetting savings/reimbursements Less late filing penalty <sup>2</sup>	3,656,091 (2,400,836) (41,260) (10,000)	3,569,013 (2,677,968) (160,067) (9,515)	(87,078) (277,132) (118,807) 485	
Subtotal Audit adjustments that exceed costs claimed	1,203,995	721,463 30,659	(482,532) 30,659	
Total program costs Less amount paid by the State	\$ 1,203,995	752,122 (273,783)	\$ (451,873)	
Allowable costs claimed in excess of (less than) ar	\$ 478,339			

See the Findings and Recommendations section.

<sup>&</sup>lt;sup>2</sup> The district incorrectly self-assessed a \$10,000 late claim penalty. The correct penalty amount is \$9,515.

## Findings and Recommendations

FINDING 1— Understated services and supplies The district understated services and supplies by \$9,763 for the audit period. The district accounted for most health services-related revenues and expenses in its Fund 14 accounts. The district claimed costs based on its Fund 14 accounts. However, the district separately accounted for some student fee revenue and related materials and supplies expenses in separate Fund 12 accounts that the district did not include in claimed costs. This finding reports an audit adjustment for the understated services and supplies. We reported an audit adjustment for the associated understated revenue in Finding 5 of our report.

The following table summarizes the audit adjustment.

		riscai i ear		
	2003-04	2004-05	2005-06	Total
Audit adjustment	\$ 1,085	\$ 174	\$ 8,504	\$ 9,763

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The parameters and guidelines state that all costs claimed must be traceable to source documents and/or worksheets that show evidence of the validity of such costs.

### Recommendation

We recommend that the district claim health services costs that its accounting records support.

### District's Response

The District does not dispute this finding.

### SCO's Comment

Our finding and recommendation are unchanged.

### FINDING 2— Overstated indirect costs

The district overstated indirect costs by \$96,841 for the audit period. The district overstated or understated indirect costs for each fiscal year.

For fiscal year (FY) 2002-03 and FY 2003-04, the district claimed indirect costs based on indirect cost rates prepared using the principles of Title 2, Code of Federal Regulations, Part 220 (Office of Management and Budget Circular A-21). The district also had separate federally-approved rates. The district claimed indirect costs using indirect cost rates that did not agree with its federally-approved rate. We calculated allowable indirect costs based on the district's federally-approved rate. We applied the district's federally-approved rate to allowable salaries and wages, which is the direct cost base identified in the federal approval letter.

For FY 2004-05, FY 2005-06, and FY 2006-07, the parameters and guidelines and the SCO's claiming instructions do not provide districts the option of using a federally-approved rate. The district claimed indirect costs based on indirect cost rates it prepared using the FAM-29C methodology allowed by the parameters and guidelines and the SCO's claiming instructions. However, the district did not allocate direct and indirect costs as specified in the claiming instructions. We recalculated the rates and applied the allowable indirect cost rates to allowable direct costs.

The following table summarizes the audit adjustment:

	Fiscal Year					
	2002-03	2003-04	2004-05	2005-06	2006-07	Total
Allowable salaries and wage	s \$ 248,395	\$ 264,370	\$ —	\$ —	<b>\$</b> —	
Allowable direct costs			518,180	612,009	746,723	
Allowable indirect cost rate	× 33.90%	× 33.90%	× 36.21%	× 33.23%	× 34.71%	
Allowable indirect costs	84,206	89,621	187,633	203,371	259,188	
Less indirect costs claimed	_ (95,030)	(118,916)	(180,680)	(219,555)	(306,679)	
Audit adjustment	\$ (10,824)	\$ (29,295)	\$ 6,953	\$ (16,184)	\$ (47,491)	\$ (96,841)

The parameters and guidelines state, "Indirect costs may be claimed in the manner described by the State Controller in his claiming instructions."

For FY 2002-03 and FY 2003-04, the SCO's claiming instructions state:

A college has the option of using a federally approved rate, utilizing the cost accounting principles from Office of Management and Budget Circular A-21 "Cost Principles for Educational Institutions," or the Controller's [FAM-29C] methodology . . . .

For FY 2004-05 forward, the SCO's claiming instructions state:

A CCD [community college district] may claim indirect costs using the Controller's methodology (FAM-29C)... If specifically allowed by a mandated program's [parameters and guidelines], a district may alternately choose to claim indirect costs using either (1) a federally approved rate prepared in accordance with Office of Management and Budget (OMB) Circular A-21, Cost Principles for Educational Institutions; or (2) a flat 7% rate.

Because the Health Fee Elimination Program's parameters and guidelines do not specifically allow for a federally-approved rate, the district's federally-approved rates are irrelevant for FY 2004-05, FY 2005-06, and FY 2006-07.

### Recommendation

We recommend that the district claim indirect costs based on indirect cost rates computed in accordance with the SCO's claiming instructions. For the Health Fee Elimination Program, the district should prepare its indirect cost rate proposals using SCO's FAM-29C methodology.

### District's Response

#### FY 2002-03 and FY 2003-04

Since federally approved rates are an acceptable alternative method, the District does not dispute this audit finding as to FY 2002-03 and FY 2003-04.

#### FY 2004-05 and FY 2005-06

The draft audit report is factually in error when it states that the District prepared indirect cost rate proposals for FY 2004-05 and FY 2005-06 in accordance with OMB A-21. No proposal was made to any state or federal agency for an "approved" indirect cost rate. The District used the same FAM-29C method based on the CCFS-311 as the auditor, but made different allocations of indirect costs. The principal difference is that the District used the capital costs stated in the CCFS-311, whereas the Controller deleted these capital costs and substituted depreciation expense as stated on the District's annual financial statements.

#### FY 2006-07

The District used the same FAM-29C method based on the CCFS-311 as did the auditor.... The remaining difference in the rate claimed by the District in the amended FY 2006-07 claim and the audited rate is a result of differences in how some of the indirect costs were treated.

#### Parameters and Guidelines

The parameters and guidelines for the Health Fee Elimination program (as last amended on May 25, 1989), which are the legally enforceable standards for claiming costs, state that: "Indirect costs may be claimed in the manner described by the Controller in his claiming instructions." (Emphasis added) Therefore, the parameters and guidelines do not require that indirect costs be claimed in the manner described by the Controller.

Since the Controller's claiming instructions were never adopted as rules or regulations, they have no force of law. The burden is on the Controller to show that the indirect cost rate used by the District is excessive or unreasonable, which is the only mandated cost audit standard in statute (Government Code Section 17651(d)(2)). If the Controller wishes to enforce different audit standards for mandated cost reimbursement, the Controller should comply with the Administrative Procedure Act.

### Prior Year CCFS-311

The draft audit report did not disclose that for FY 2004-05, FY 2005-06, and FY 2006-07, the audit used the most recent CCFS-311 information available for the calculation of the indirect cost rate. The District used the prior year CCFS-311. The CCFS-311 is prepared based on annual costs from the prior fiscal year for use in the current budget year. When the audit utilizes a different CCFS-311 than the District, this constitutes an undisclosed audit adjustment. The audit report does not state an enforceable requirement to use the most current CCFS-311.

As a practical example of how unjustifiable the Controller's position is on prior year CCFS-311 reports, note that the federally approved indirect cost rates (such as the federal rate the audit used for FY 2002-03 and FY 2003-04) are approved for periods of two to four years. This means the data from which the rates were calculated can be from three to five years prior to the last year in which the federal rate is used.

### SCO's Comment

We modified our audit finding slightly for clarification. Our audit adjustment and recommendation are unchanged. Our comments to the district's response are as follows:

### FY 2004-05 and FY 2005-06

The district inaccurately states "No proposal was made to any state or federal agency for an 'approved' indirect cost rate." On March 25, 2004, the U.S. Department of Health and Human Services approved the district's indirect cost rate for FY 2004-05 through FY 2007-08. However, the district did not use these federally approved rates to claim mandate-related indirect costs. We modified our audit finding to state that the district submitted indirect cost rate proposals using FAM-29C methodology for FY 2004-05 and FY 2005-06. In its response, the district states that it did not adhere to the SCO's claiming instructions because it "made different allocations of indirect costs." The parameters and guidelines state, "Indirect costs may be claimed in the manner described by the State Controller in his claiming instructions."

### FY 2006-07

The district did not provide its FY 2006-07 ICRP in time for inclusion in the draft report. Therefore, our draft audit report stated that the district did not provide its FY 2006-07 ICRP. We modified our audit finding to state that the district prepared its FY 2006-07 ICRP using FAM-29C methodology.

The district did not allocate direct and indirect costs as specified in the SCO's claiming instructions.

### Parameters and Guidelines

The parameters and guidelines state, "Indirect costs may be claimed in the manner described by the State Controller in his claiming instructions." The district misinterprets the phrase "may be claimed" by concluding that compliance with the claiming instructions is voluntary. The district's assertion is invalid, as it would allow districts to claim indirect costs in whatever manner they choose. Instead, "may be claimed" simply permits the district to claim indirect costs. However, if the district claims indirect costs, then the district must comply with the SCO's claiming instructions.

Neither this district nor any other district requested that the Commission on State Mandates (CSM) review the SCO's claiming instructions pursuant to Title 2, *California Code of Regulations* (CCR), Section 1186. Furthermore, the district may not now request a review of the claiming instructions applicable to the audit period. Title 2 CCR 1186(j)(2) states, "A request for review filed after the initial claiming deadline must be submitted on or before January 15 following a fiscal year in order to establish eligibility for reimbursement for that fiscal year."

The district contends that "The burden is on the Controller to show that the indirect cost rate used by the District is excessive or unreasonable, which is the only mandated cost audit standard in statute..." Government Code section 17558.5 requires the district to file a reimbursement claim for actual mandate-related costs. Government Code section 17561, subdivision (d)(2), allows the SCO to audit the district's records to verify actual mandate-related costs and reduce any claim that the SCO determines is excessive or unreasonable. In addition, Government Code section 12410 states, "The Controller shall audit all claims against the state, and may audit the disbursement of any state money, for correctness, legality, and for sufficient provisions of law for payment." Therefore, the district's contention is without merit.

Nevertheless, the SCO did conclude that the district's FY 2005-06 and FY 2006-07 indirect cost rates were excessive. (The SCO concluded that the district understated its FY 2004-05 indirect cost rate. The district did not explain why it is contesting an audit adjustment in its favor.) "Excessive" is defined as "exceeding what is usual, *proper*, necessary, or normal. . . . Excessive implies an amount or degree too great to be reasonable or acceptable. . [emphasis added]." The SCO calculated indirect cost rates using the alternative methodology identified in the SCO's claiming instructions. The alternative methodology indirect cost rates did not support the rates that the district claimed; thus, the claimed rates were excessive.

<sup>&</sup>lt;sup>1</sup> Merriam-Webster's Collegiate Dictionary, Tenth Edition, © 2001.

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#### **Prior Year CCFS-311**

The district states, "The CCFS-311 is prepared based on annual costs from the prior fiscal year for use in the current budget year." Although this is how the district used its data, there are no mandate-related authoritative criteria supporting this methodology. Government Code section 17558.5 requires the district to file a reimbursement claim for actual mandate-related costs. In addition, the parameters and guidelines require the district to report actual costs. For each fiscal year, "actual costs" are costs of the current fiscal year, not costs from a prior fiscal year.

The parameters and guidelines and the SCO's claiming instructions do not allow districts to claim indirect costs based on federally approved rates in FY 2004-05, FY 2005-06, and FY 2006-07. Therefore, the district's comments regarding federally approved rates are irrelevant.

FINDING 3— Offsetting savings/ reimbursements incorrectly reported as authorized health service fees The district incorrectly reported offsetting savings/reimbursements totaling \$39,090 as authorized health service fees in FY 2003-04. This amount included interest revenue, duplicate staff charges that the district also claimed as offsetting savings/reimbursements, and miscellaneous student fees that the district recognized when it converted from cash to accrual-basis accounting.

The following table summarizes the audit adjustment and the adjusted authorized health service fees claimed:

Interest	\$ 12,625
Staff charges	6,500
Miscellaneous student fees	19,965
Audit adjustment	39,090
Authorized health service fees claimed	(431,580)
Adjusted authorized health service fees claimed	\$ (392,490)

The parameters and guidelines state, "Reimbursement for this mandate received from any source, e.g., federal, state, etc., shall be identified and deducted from this claim." The SCO's claiming instructions direct claimants to separately report authorized health service fees and other reimbursements. Except for the duplicate staff charges, we recognized these revenues in our audit adjustment for understated offsetting savings/reimbursements in Finding 5.

#### Recommendation

We recommend that the district properly claim revenue as offsetting savings/reimbursements when the revenue is unrelated to the authorized student health fee.

# District's Response

The District does not dispute this finding.

#### SCO's Comment

Our finding and recommendation are unchanged.

FINDING 4— Understated authorized health service fees The district understated authorized health service fees by \$316,222 for the audit period. The district understated these fees because it reported actual receipts rather than authorized fees and because it did not charge students the full authorized fee amount in FY 2005-06 and FY 2006-07.

Mandated costs do not include costs that are reimbursable from authorized fees. Government Code section 17514 states that "costs mandated by the state" means any increased costs that a school district is required to incur. To the extent community college districts can charge a fee, they are not required to incur a cost. In addition, Government Code section 17556 states that the Commission on State Mandates shall not find costs mandated by the State if the school district has the authority to levy fees to pay for the mandated program or increased level of service.

For the audit period, Education Code section 76355, subdivision (c), states that health fees are authorized for all students except those who: (1) depend exclusively on prayer for healing; (2) are attending a community college under an approved apprenticeship training program; or (3) demonstrate financial need. The California Community Colleges Chancellor's Office (CCCCO) identified the fees authorized by Education Code section 76355, subdivision (a). For FY 2002-03 and FY 2003-04, the authorized fees were \$12 per semester and \$9 per summer session. For FY 2004-05, the authorized fees were \$13 per semester and \$10 per summer session. For FY 2005-06, the authorized fees were \$14 per semester and \$11 per summer session. For FY 2006-07, the authorized fees were \$15 per semester and \$12 per summer session.

We obtained student enrollment and Board of Governors Grant (BOGG) recipient data from the CCCCO. The CCCCO identified enrollment and BOGG recipient data from its management information system (MIS) based on student data that the district reported. CCCCO identified the district's enrollment based on CCCCO's MIS data element STD7, codes A through G. CCCCO eliminated any duplicate students based on their social security numbers. From the district enrollment, CCCCO identified the number of BOGG recipients based on MIS data element SF21, all codes with first letter of B or F. The district does not have an apprenticeship program and it did not identify any students that it excluded from the health service fee pursuant to Education Code section 76355, subdivision (c)(1).

The following table shows the authorized health service fee calculation and audit adjustment:

		Semester		
	Summer	Fall	Spring	Total
Fiscal Year 2002-03				
Number of enrolled students	10,568	24,587	22,472	
Less number of BOGG recipients	(2,694)	(6,214)	(5,901)	
Subtotal	7,874	18,373	16,571	
Authorized health fee rate	× \$ (9)	× \$(12)	× \$(12)	
Authorized health service fees	\$ (70,866)	\$(220,476)	\$(198,852)	\$(490,194)
Less authorized health service fees claimed				446,250
Audit adjustment				(43,944)
Fiscal Year 2003-04				•
Number of enrolled students	9,580	22,631	22,031	
Less number of BOGG recipients	(2,569)	(6,486)	(6,526)	
Subtotal	7,011	16,145	15,505	
Authorized health fee rate	× \$ (9)	× \$(12)	× \$(12)	
Authorized health service fees	\$ (63,099)	\$(193,740)	\$(186,060)	(442,899)
Less adjusted authorized health service fees claimed (Finding 3)				392,490
Audit adjustment				(50,409)
Fiscal Year 2004-05				
Number of enrolled students	9,865	21,620	20,839	
Less number of BOGG recipients	(3,734)	(7,672)	•	
Subtotal	6,131	13,948	13,350	
Authorized health fee rate	× \$(10)	× \$(13)	× \$(13)	
Authorized health service fees	\$ (61,310)	\$(181,324)	\$(173,550)	(416,184)
Less authorized health service fees claimed				411,492
Audit adjustment				(4,692)
Fiscal Year 2005-06				
Number of enrolled students	10,127	21,763	21,020	
Less number of BOGG recipients	(4,007)	(8,016)	<u> </u>	
Subtotal	6,120	13,747	21,020	
Authorized health fee rate	× \$(11)	× \$(14)	× \$(14)	
Authorized health service fees	\$ (67,320)	\$(192,458)	\$(294,280)	(554,058)
Less authorized health service fees claimed				402,179
Audit adjustment				(151,879)
Fiscal Year 2006-07				
Number of enrolled students	10,579	22,214	20,965	
Authorized health fee rate	× \$(12)	× \$(15)	× \$(15)	
Authorized health service fees	\$(126,948)	\$(333,210)	\$(314,475)	(774,633)
Less authorized health service fees claimed				709,335
Audit adjustment				(65,298)
Total audit adjustment				\$(316,222)

# Recommendation

We recommend that the district deduct authorized health service fees from mandate-related costs claimed. To properly calculate authorized health service fees, we recommend that the district identify the number of enrolled students based on CCCCO data element STD7, codes A through G. The district should eliminate duplicate entries for students who attend more than one of the district's colleges. In addition, we recommend that the district maintain documentation that identifies the number of students excluded from the health service fee based on Education Code section 76355, subdivision (c)(1). If the district denies health services to any portion of its student population, it should maintain contemporaneous documentation of a district policy that excludes those students and documentation identifying the number of students excluded.

# District's Response

The audit utilizes student enrollment information from the State Community College Chancellor's data base. These statistics are not available to districts at the time the claims are prepared nor does the audit report substantiate this source as either uniquely accurate—or superior to enrollment data maintained by the District and independently audited each year. However, since the District did not calculate the fees based on student enrollment, this is not a District annual claim issue, but a Controller's audit adjustment rationale.

# COLLECTIBLE STUDENT HEALTH SERVICE FEES

The District asserts that the "collectible method" of determining the student health service fee revenue offset is not supported by law or fact.

#### "Authorized" Fee Amount

There is no "authorized" rate other than the amounts stated in Education Code Section 76355. The draft audit report alleges that claimants must compute the total student health fees collectible based on the highest authorized rate. The draft audit report does not provide the statutory basis for the calculation of the "authorized" rate, nor the source of the legal right of any state entity to "authorize" student health services rates absent rulemaking or compliance with the Administrative Procedure Act by the "authorizing" state agency.

# Optional Fee

Education Code Section 76355, subdivision (a), states that "[t]he governing board of a district maintaining a community college <u>may require</u> community college students to pay a fee. for health supervision and services. ..." There is no requirement that community colleges levy these fees. The permissive nature of the provision is further illustrated in subdivision (b) which states: "If, pursuant to this section, a fee is required, the governing board of the district shall decide the amount of the fee, <u>if any</u>, that a part-time student is required to pay. <u>The governing board may decide whether the fee shall be mandatory or optional</u>" (Emphasis supplied in both instances). Therefore, districts have the option of charging a fee to some or all of its students.

#### Government Code Section 17514

The draft audit report relies upon Government Code Section 17514 for the conclusion that "[t]o the extent that community college districts can charge a fee, they are not required to incur a cost." First, charging a fee has no relationship to whether costs are incurred to provide the student health services program. Second, Government Code Section 17514, as added by Chapter 1459, Statutes of 1984, actually states:

"Costs mandated by the state" means any increased costs which a local agency or school district is required to incur after July 1, 1980, as a result of any statute enacted on or after January 1, 1975, or any executive order implementing any statute enacted on or after January 1, 1975, which mandates a new program or higher level of service of an existing program within the meaning of Section 6 of Article XIII B of the California Constitution.

The operating cost of the student health service program is not determined by the fees collected. There is nothing in the language of the statute regarding the authority to charge a fee, or any nexus of fee revenue to increased cost, or any language that describes the legal effect of fees collected.

# Government Code Section 17556

The draft audit report relies upon Government Code Section 17556 for the conclusion that "the Commission on State Mandates (CSM) shall not find costs mandated by the State if the school district has the authority to levy fees to pay for the mandated program or increased level of service."

The draft audit report misrepresents the law. Government Code Section 17556 prohibits the Commission on State Mandates from finding costs subject to reimbursement, that is, approving a test claim activity for reimbursement, where the authority exists to levy fees in an amount sufficient to offset the entire mandated costs. Here, the Commission has already approved the test claim and made a finding of a new program or higher level of service for which the claimants do not have the ability to levy a fee in an amount sufficient to offset the entire mandated costs.

#### Parameters and Guidelines

The parameters and guidelines, as last amended on May 25, 1989, state, in relevant part: "Any offsetting savings that the claimant experiences as a direct result of this statute must be deducted from the costs claimed... This shall include the amount of [student fees] as authorized by Education Code Section 72246(a)." The use of the term "any offsetting savings" further illustrates the permissive nature of the fees. Student fees actually collected must be used to offset costs, but not student fees that could have been collected and were not, because uncollected fees are "offsetting savings" that were not "experienced." The parameters and guidelines do not allow the Controller to reduce claimed costs by revenue never received by the claimants and such an offset is contrary to the generally accepted accounting principle that requires revenues and costs to be properly matched.

# SCO's Comment

Our finding and recommendation are unchanged. The district states, "The audit utilizes student enrollment information from the State Community College Chancellor's data base. These statistics are not available to districts at the time the claims are prepared nor does the audit report substantiate this source as either uniquely accurate or superior to enrollment data maintained by the District. . . ." This is the district's own data. In addition, the district implies that the SCO used data that is somehow different from "enrollment data maintained by the District." Our audit used data retrieved from the California Community Colleges Chancellor's Office (CCCCO). The CCCCO data is extracted directly from enrollment information that the district submitted. Districts are required to submit this data to the CCCCO within one month after each term ends; thus, the district has its fiscal year enrollment data available approximately seven months before its mandated program claims are due to the state.

The district also states, "Since the District did not calculate the fees based on student enrollment, this is not a District annual claim issue, but a Controller's audit adjustment rationale." We disagree; this is a district annual claim issue. For its FY 2002-03 claim, the district reported inaccurate student enrollment. For its FY 2003-04 through FY 2006-07 claims, the district failed to follow specific SCO claiming instructions. The district did not report student enrollment and did not calculate the total health fees that could have been collected.

#### "Authorized" Fee Amount

We agree that Education Code section 76355 (specifically, subdivision (a)) authorizes the health service fee rate. The statutory section also provides the basis for calculating the authorized rate applicable to each fiscal year. The statutory section states:

- (1) The governing board of a district maintaining a community college may require community college students to pay a fee in the total amount of not more than ten dollars (\$10) for each semester, seven dollars (\$7) for summer school, seven dollars (\$7) for each intersession of at least four weeks, or seven dollars (\$7) for each quarter for health supervision and services, including direct or indirect medical and hospitalization services, or the operation of a student health center or centers, or both.
- (2) The governing board of each community college district may increase this fee by the same percentage increase as the Implicit Price Deflator for State and Local Government Purchase of Goods and Services. Whenever that calculation produces an increase of one dollar (\$1) above the existing fee, the fee may be increased by one dollar (\$1).

The CCCCO *notifies* districts when the authorized rate increases pursuant to Education Code section 76355, subdivision (a)(2). Therefore, the Administrative Procedures Act is irrelevant.

#### **Optional Fee**

We agree that community college districts may choose not to levy a health service fee or to levy a fee less than the authorized amount. Regardless of the district's decision to levy or not levy the authorized health service fee, Education Code section 76355, subdivision (a), provides districts the *authority* to levy the fee.

#### **Government Code Section 17514**

Government Code section 17514 states, "'Costs mandated by the state' means any increased costs which a local agency or school district is required [emphasis added] to incur. . . ." The district ignores the direct correlation that if the district has authority to collect fees attributable to health service expenses, then it is not required to incur a cost. Therefore, those health service expenses do not meet the statutory definition of mandated costs.

#### **Government Code Section 17556**

The district presents an invalid argument that the statutory language applies only when the fee authority is sufficient to offset the "entire" mandated costs. The CSM recognized that the Health Fee Elimination Program's costs are not uniform between districts. Districts provided different levels of service in FY 1986-87 (the "base year"). Furthermore, districts provided these services at varying costs. As a result, the fee authority may be sufficient to pay for some districts' mandated program costs, while it is insufficient to pay the "entire" cost of other districts. Meanwhile, Education Code section 76355 (formerly section 72246) established a uniform health service fee assessment for students statewide. Therefore, the CSM adopted parameters and guidelines that clearly recognize an available funding source by identifying the health service fees as offsetting reimbursements. To the extent that districts have authority to charge a fee, they are not required to incur a cost.

Two court cases addressed the issue of fee authority.<sup>2</sup> Both cases concluded that "costs" as used in the constitutional provision, exclude "expenses that are recoverable from sources other than taxes." In both cases, the source other than taxes was fee authority.

<sup>&</sup>lt;sup>2</sup> County of Fresno v. California (1991) 53 Cal. 3d 482; Connell v. Santa Margarita (1997) 59 Cal. App. 4th 382.

#### Parameters and Guidelines

The district incorrectly interprets the parameters and guidelines' requirement regarding authorized health service fees. The CSM clearly recognized the *availability* of another funding source by including the fees as offsetting savings in the parameters and guidelines. The CSM's staff analysis of May 25, 1989, states the following regarding the proposed parameters and guidelines amendments that the CSM adopted that day:

Staff amended Item "VIII. Offsetting Savings and Other Reimbursements" to reflect the reinstatement of [the] fee authority.

In response to that amendment, the [Department of Finance (DOF)] has proposed the addition of the following language to Item VIII. to clarify the impact of the fee authority on claimants' reimbursable costs:

"If a claimant does not levy the fee authorized by Education Code Section 72246(a), it shall deduct an amount equal to what it would have received had the fee been levied."

Staff concurs with the DOF proposed language which does not substantively change the scope of Item VIII.

Thus, the CSM concluded that claimants must deduct authorized health service fees from mandate-reimbursable costs claimed. Furthermore, the staff analysis included an attached letter from the CCCCO dated April 3, 1989. In that letter, the CCCCO concurred with the DOF and the CSM regarding authorized health service fees.

The CSM did not revise the proposed parameters and guidelines amendments further, as the CSM's staff concluded that DOF's proposed language did not substantively change the scope of its proposed language. The CSM's meeting minutes of May 25, 1989, show that the CSM adopted the proposed parameters and guidelines on consent, with no additional discussion. Therefore, no community college districts objected and there was no change to the CSM's conclusion regarding authorized health service fees.

The district states that "such an offset is contrary to the generally accepted accounting principle that requires revenues and costs to be properly matched." This statement is presented out of context; generally accepted accounting principles are not controlling criteria in identifying authorized health fee revenues attributable to the Health Fee Elimination mandated program. If a district voluntarily assesses less than the authorized health service fees, or fails to collect fees assessed, it is the district's responsibility to "match" health service expenditures with other district revenue sources.

# FINDING 5— Understated offsetting savings/reimbursements

The district understated offsetting savings/reimbursements by \$118,807 for the audit period.

The district did not report offsetting savings/reimbursements for interest, student fees, and other miscellaneous revenue documented in its accounting records. The district charged students a separate fee for various health services that it provided. In FY 2003-04, the district also recognized miscellaneous revenue as it converted from a cash to accrual basis accounting system.

The following table summarizes the audit adjustment:

			Fiscal Year			
	2002-03	2003-04	2004-05	2005-06	2006-07	Total
Interest	\$ (16,890)	\$ (12,625)	\$ (13,216)	\$ (17,014)	\$ (24,686)	\$ (84,431)
Student fees and other				, , ,		, , ,
miscellaneous revenue	1,932	(28,734)	(1,785)	(5,789)		(34,376)
Audit adjustment	\$ (14,958)	\$ (41,359)	\$ (15,001)	\$ (22,803)	\$ (24,686)	\$(118,807)

The parameters and guidelines state:

Any offsetting savings the claimant experiences as a direct result of this statute must be deducted from the costs claimed. In addition, reimbursement for this mandate received from any source, e.g., federal, state, etc., shall be identified and deducted from this claim.

# Recommendation

We recommend that the district report all offsetting savings/ reimbursements on its mandated cost claims.

# District's Response

Finding 5 offsets \$84,431 of interest income against the claimed cost of the student health services program. . . . The interest income is paid by the Stanislaus County Treasurer where the District deposits its cash in a pooled investment fund. The District allocates the total investment income reported by the County to its various funds.

The draft audit report characterizes the interest income offset as an "offsetting savings/reimbursement". . . .

The parameters and guidelines criteria for offsetting savings and reimbursements do not apply to interest income. First, the interest income is not generated "as a direct result of' Education Code 76355, the statutory basis for the student health services program. Indeed, since the student health service program operates at a loss (the reason for the annual mandate claim for excess costs), the student health service program cannot generate investment principal. Second, the interest income is neither state nor federal reimbursement for providing the student health service program. Third, the interest income is not fees paid by others for services not included in the student health service program.

# SCO's Comment

The parameters and guidelines state, "Any offsetting savings the claimant experiences as a direct result of this statute must be deducted from the costs claimed." In its response, the district confirms that it received pooled investment fund income attributable to its health services fund. The health services fund and its associated revenues exist specifically because of Chapter 1118, Statutes of 1987, which authorized districts to assess a health service fee.

The district states, "Indeed, since the student health service program operates at a loss . . . the student health service program cannot generate investment principal." The district's response fails to consider basic cash flow principles. Each term, districts collect health fee revenue at the beginning of the term. This revenue is available for deposit in the county pooled investment fund and is depleted during the term as the district incurs health service program expenses. The revenue earns interest until such time that it is depleted.

During our exit conference conducted January 23, 2009, the district's consultant stated to district personnel that the district's mistake was that it posted interest revenue to the health services fund. We strongly recommend that the district continue to allocate interest earned on pooled investment funds according to generally accepted accounting principles.

# OTHER ISSUE— FY 2006-07 amounts paid

The district's response included comments regarding FY 2006-07 amounts paid. The district's response and SCO's comment are as follows:

# District's Response

The draft audit report states that the District was paid \$234,716 on the FY 2006-07 annual claim. The last remittance advice (March 12, 2007) received by the District for this fiscal year indicates that the amount paid was \$263,110.

# SCO's Comment

The Summary of Program Costs (Schedule 1) is unchanged. The district is contesting a reported amount that is in its favor. The district's response fails to disclose that the district re-paid the SCO \$28,394, as documented by the SCO's remittance advice dated April 23, 2008. Thus, the net amount that the State paid to the district is \$234,716.

# OTHER ISSUE— FY 2006-07 late claim filing penalty

The district's response included comments regarding the FY 2006-07 late claim penalty. The district's response and SCO's comment are as follows:

#### District's Response

On February 6, 2009, the District submitted an amended FY 2006-07 claim in the amount of \$329,864 that incorporates some of the audit adjustments. presented at the January 23, 2009, exit conference. Since this amended claim is a late claim, it is subject to a late filing penalty of 10% of the amount claimed up to \$10,000. The draft audit report adjusts the late filing penalty to \$9,515 for the audited allowed "total program costs" of \$192,389. Ten percent of \$192,389-is not \$9,515. It appears the late filing penalty should be \$10,000.

# SCO's Comment

The Summary of Program Costs (Schedule 1) is unchanged. Again, the district is contesting an adjustment in its favor. Nevertheless, the district is in error. The district erroneously equates an "amended claim" with a "late claim." When a district amends its claim after the claim filing date established by Government Code section 17560, only the additional claimed costs are subject to the late claim penalty assessment (i.e., the original amount claimed is not late; only the new, additional costs are filed late). The district's amended claim increased total claimed costs by \$95,148, from \$234,716 to \$329,864. The SCO correctly applied a 10% late penalty assessment to the \$95,148 increase pursuant to Government Code section 17568. Allowable costs are irrelevant to the late claim penalty assessment.

# OTHER ISSUE— Statute of limitations

The district's response included comments related to the statute of limitations applicable to the district's FY 2002-03 and FY 2003-04 mandated cost claims. The district's response and SCO's comment are as follows:

# District's Response

Government Code Section 17558.5, as amended effective January 1, 2003, requires the Controller to initiate an audit within three years after a claim is filed. The District's FY 2002-03 claim was filed on January 12, 2004. The District's FY 2003-04 claim was filed on January 10, 2005. The entrance conference date for the audit was March 24, 2008, which is after the three-year period to commence the audit for those two fiscal years had expired.

# SCO's Comment

Our findings and recommendations are unchanged. The district cited only a portion of Government Code section 17558.5, subdivision (a), which actually states:

A reimbursement claim for actual costs filed by a local agency or school district pursuant to this chapter is subject to the initiation of an audit by the Controller no later than three years after the date that the actual reimbursement claim is filed or last amended, whichever is later. However, if no funds are appropriated or no payment is made to a claimant for the program for the fiscal year for which the claim is filed, the time for the Controller to initiate an audit shall commence to run from the date of initial payment of the claim [emphasis added].

For its FY 2002-03 claim, the district received its initial payment on October 25, 2006. Pursuant to Government Code section 17558.5, subdivision (a), the SCO had until October 24, 2009, to initiate an audit of this claim. For its FY 2003-04 claim, the district received no payment. Pursuant to the same statutory language, the time for the SCO to initiate an audit has not yet commenced. Therefore, the SCO properly initiated an audit of these claims within the statutory time allowed.

# OTHER ISSUE— Public records request

The district's response included a public records request. The district's response and SCO's comment are as follows:

# District's Response

The District requests that the Controller provide the District any and all written instructions, memorandums, or other writings in effect and applicable during the claiming period to Finding 1 (indirect cost rate calculation standards) and Finding 2 (calculation of the student health services fees offset).

# SCO's Comment

The SCO provided the district the requested records by separate letter dated April 7, 2009.

# Attachment— District's Response to Draft Audit Report



# Yosemite Community College District

P.O. Box 4065 / Modesto, CA 95352 / 2201 Blue Gum Avenue Phone (209) 575-6530 / FAX (209) 575 6562

March 24, 2009

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

Jim L. Spano, Chief Mandated Costs Audits Bureau Division of Audits, California State Controller P.O. Box 942850 Sacramento, CA 94250-5874

Re:

Chapter 1, Statutes of 1984

Health Fee Elimination

**Yosemite Community College District** 

Fiscal Years: 2002-03, 2003-04, 2004-05, 2005-06, and 2006-07 (amended)

Dear Mr. Spano:

This letter is the response of the Yosemite Community College District to the draft audit report for the above referenced program and fiscal years transmitted by the letter from Jeffrey Brownfield, Chief, Division of Audits, State Controller's Office, dated March 12, 2009, and received by the District on March 13, 2009.

#### Finding 1: Understated services and supplies

This District does not dispute this finding. See Finding 5.

# Finding 2: Overstated indirect costs

	Indirect Co.	st Rates Claimed	i and Audited	
	Λs	Claimed	As	Audit Report
Fiscal Year	<u>Claimed</u>	Source	<u>Audited</u>	Source
2002-03	23.95%	CCFS-311	33.90%	"Federally approved rate"
2003-04	25.29%	CCFS-311	33.90%	"Federally approved rate"
2004-05	34.88%	CCF\$-311	36.21%	CCFS-311 and depreciation
2005-06	36.38%	CCFS-311	33.23%	CCFS-311 and depreciation
2006-07	41.07%	CCFS-311	34.71%	CCFS-311 and depreciation
(amended)		and deprecia	tion	•

The Controller asserts that the indirect cost method used by the District was inappropriate since it was not a cost study specifically approved by the federal government.

#### CHOICE OF METHODS

The draft audit report states that the District prepared its indirect cost rates for the fiscal years 2002-03 through 2005-06 as "proposals" in accordance with OMB A-21 that were not federally approved.

# FY 2002-03 and FY 2003-04

The District had an "approved" federal rate for FY 2002-03 and FY 2003-04 that was used for the audit adjustment. Since federally approved rates are an acceptable alternative method, the District does not dispute this audit finding as to FY 2002-03 and FY 2003-04.

#### FY 2004-05 and FY 2005-06

The draft audit report is factually in error when it states that the District prepared indirect cost rate proposals for FY 2004-05 and FY 2005-06 in accordance with OMB A-21. No proposal was made to any state or federal agency for an "approved" indirect cost rate. The District used the same FAM-29C method based on the CCFS-311 as the auditor, but made different allocations of indirect costs. The principal difference is that the District used the capital costs stated in the CCFS-311, whereas the Controller deleted these capital costs and substituted depreciation expense as stated on the District's annual financial statements.

#### FY 2006-07

On February 6, 2009, the District submitted an amended FY 2006-07 claim. The District used the same FAM-29C method based on the CCFS-311 as did the auditor. The District deleted the capital costs stated in the CCFS-311 and substituted the depreciation expense as reported in the District's annual financial statements. The District was not on notice of this method of treating depreciation costs at the time the FY 2004-05 and FY 2005-06 annual claims were timely filed. The audit report uses this method retroactively to FY 2004-05. The remaining difference in the rate claimed by the District in the amended FY 2006-07 claim and the audited rate is a result of differences in how some of the indirect costs were treated.

# Parameters and Guidelines

The parameters and guidelines for the Health Fee Elimination program (as last amended on May 25, 1989), which are the legally enforceable standards for claiming costs, state that: "Indirect costs may be claimed in the manner described by the Controller in his claiming instructions." (Emphasis added) Therefore, the parameters and guidelines do not require that indirect costs be claimed in the manner described by the Controller.

Since the Controller's claiming instructions were never adopted as rules or regulations, they have no force of law. The burden is on the Controller to show that the indirect cost rate used by the District is excessive or unreasonable, which is the only mandated cost audit standard in statute (Government Code Section 17651(d)(2)). If the Controller wishes to enforce different audit standards for mandated cost reimbursement, the Controller should comply with the Administrative Procedure Act.

#### PRIOR YEAR CCFS-311.

The draft audit report did not disclose that for FY 2004-05, FY 2005-06, and FY 2006-07, the audit used the most recent CCFS-311 information available for the calculation of the indirect cost rate. The District used the prior year CCFS-311. The CCFS-311 is prepared based on annual costs from the prior fiscal year for use in the current budget year. When the audit utilizes a different CCFS-311 than the District, this constitutes an undisclosed audit adjustment. The audit report does not state an enforceable requirement to use the most current CCFS-311.

As a practical example of how unjustifiable the Controller's position is on prior year CCFS-311 reports, note that the federally approved indirect cost rates (such as the federal rate the audit used for FY 2002-03 and FY 2003-04) are approved for periods of two to four years. This means the data from which the rates were calculated can be from three to five years prior to the last year in which the federal rate is used.

Since the draft audit report has stated no legal basis to disallow the indirect cost rate calculation method used by the District, and has not shown a factual basis to reject the rates as unreasonable or excessive, the adjustments should be withdrawn.

# Finding 3: Offsetting savings/reimbursements incorrectly reported as authorized health service fees

This District does not dispute this finding. See Finding 5.

#### Finding 4: Understated authorized health service fees

The draft audit report concludes that the student health service fee revenue offsets were understated for the five-year audit period. The difference between the claimed amount and the audited amount is that the District utilized actual revenues received rather than a calculation of the student health service fees potentially collectible. The auditor calculated "authorized health fee revenues," that is, the student fees collectible based on the highest student health service fee chargeable to all eligible students, rather than the full-time or part-time student health service fee actually charged by the District to the students not exempted by state law or District policy (e.g., BOGG waiver students).

The audit utilizes student enrollment information from the State Community College Chancellor's data base. These statistics are not available to districts at the time the claims are prepared nor does the audit report substantiate this source as either uniquely accurate or superior to enrollment data maintained by the District and independently audited each year. However, since the District did not calculate the fees based on student enrollment, this is not a District annual claim issue, but a Controller's audit adjustment rationale.

#### COLLECTIBLE STUDENT HEALTH SERVICE FEES

The District asserts that the "collectible method" of determining the student health service fee revenue offset is not supported by law or fact.

#### "Authorized" Fee Amount

There is no "authorized" rate other than the amounts stated in Education Code Section 76355. The draft audit report alleges that claimants must compute the total student health fees collectible based on the highest authorized rate. The draft audit report does not provide the statutory basis for the calculation of the "authorized" rate, nor the source of the legal right of any state entity to "authorize" student health services rates absent rulemaking or compliance with the Administrative Procedure Act by the "authorizing" state agency.

#### Optional Fee

Education Code Section 76355, subdivision (a), states that "[t]he governing board of a district maintaining a community college <u>may require</u> community college students to pay a fee... for health supervision and services..." There is no requirement that community colleges levy these fees. The permissive nature of the provision is further illustrated in subdivision (b) which states: "If, pursuant to this section, a fee is required, the governing board of the district shall decide the amount of the fee, if any, that a partime student is required to pay. <u>The governing board may decide whether the fee shall be mandatory or optional</u>." (Emphasis supplied in both instances) Therefore, districts have the option of charging a fee to some or all of its students.

#### Government Code Section 17514

The draft audit report relies upon Government Code Section 17514 for the conclusion that "[t]o the extent that community college districts can charge a fee, they are not required to incur a cost." First, charging a fee has no relationship to whether costs are incurred to provide the student health services program. Second, Government Code Section 17514, as added by Chapter 1459, Statutes of 1984, actually states:

"Costs mandated by the state" means any increased costs which a local agency or school district is required to incur after July 1, 1980, as a result of any statute enacted on or after January 1, 1975, or any executive order implementing any statute enacted on or after January 1, 1975, which mandates a new program or higher level of service of an existing program within the meaning of Section 6 of Article XIII B of the California Constitution.

The operating cost of the student health service program is not determined by the fees collected. There is nothing in the language of the statute regarding the authority to charge a fee, or any nexus of fee revenue to increased cost, or any language that describes the legal effect of fees collected.

# Government Code Section 17556

The draft audit report relies upon Government Code Section 17556 for the conclusion that "the Commission on State Mandates (CSM) shall not find costs mandated by the State if the school district has the authority to levy fees to pay for the mandated program or increased level of service." Government Code Section 17556, as amended by Statutes of 2004, Chapter 895, actually states:

The commission shall not find costs mandated by the state, as defined in Section 17514, in any claim submitted by a local agency or school district, if after a hearing, the commission finds that: ...

(d) The local agency or school district has the authority to levy service charges, fees, or assessments sufficient to pay for the mandated program or increased level of service.

The draft audit report misrepresents the law. Government Code Section 17556 prohibits the Commission on State Mandates from finding costs subject to reimbursement, that is, approving a test claim activity for reimbursement, where the authority exists to levy fees in an amount sufficient to offset the entire mandated costs. Here, the Commission has already approved the test claim and made a finding of a new program or higher level of service for which the claimants do not have the ability to levy a fee in an amount sufficient to offset the entire mandated costs.

# Parameters and Guidelines

The parameters and guidelines, as last amended on May 25, 1989, state, in relevant part: "Any offsetting savings that the claimant experiences as a direct result of this statute must be deducted from the costs claimed... This shall include the amount of [student fees] as authorized by Education Code Section 72246(a)." The use of the term "any offsetting savings" further illustrates the permissive nature of the fees. Student fees actually collected must be used to offset costs, but not student fees that could have been collected and were not, because uncollected fees are "offsetting savings" that were not "experienced." The parameters and guidelines do not allow the Controller to reduce claimed costs by revenue never received by the claimants and such an offset is contrary to the generally accepted accounting principle that requires revenues and costs to be properly matched.

Since the draft audit report has stated no legal basis to disallow actual revenues as the amount of the offsetting revenue, the adjustments should be withdrawn.

#### Finding 5: Understated offsetting savings/reimbursements

Findings 1, 3, and 5 are connected by their content.

"FUND 12"

In accordance with governmental accounting practices, the District separately accounted for some costs and revenues (e.g., clinical services) in a fund (Fund 12) separate from the student health service center fund (Fund 14). Finding 1 merges those costs (\$9,763) and revenue (\$34,376 located in Finding 5) with Fund 14 which is consistent with the cost accounting practice of matching costs and revenues. The District does not dispute Finding 1.

#### **FY 2003-04 CORRECTIONS**

Finding 3 properly reverses \$39,090 in revenue reductions to the FY 2003-04 claimed costs that were either duplicated from Fund 12 or the result-of changes in accruals. The District does not dispute Finding 3.

#### INTEREST INCOME

Finding 5 offsets \$84,431 of interest income against the claimed cost of the student health services program. Of this amount, \$12,625 was properly added back to the program costs in Finding 3 for FY 2003-04. The interest income is paid by the Stanislaus County Treasurer where the District deposits its cash in a pooled investment fund. The District allocates the total investment income reported by the County to its various funds.

The draft audit report characterizes the interest income offset as an "offsetting savings/reimbursement." The draft audit report cites only a portion of the parameters and guidelines for this proposition. The entire relevant citation is:

#### VIII. OFFSETTING SAVINGS AND OTHER REIMBURSEMENTS

Any offsetting savings the claimant experiences as a direct result of this statute must be deducted from the costs claimed. In addition, reimbursement for this mandate received from any source, e.g., federal, state, etc., shall be identified and deducted from this claim. This shall include the amount of \$7.50 per full-time student per semester, \$5.00 per full-time student for summer school, or \$5.00 per full-time student per quarter, as authorized by Education Code Section 72246(a). This shall also include payments (fees) received from individuals other than students who are not covered by Education Code Section 72246 for health services.

The parameters and guidelines criteria for offsetting savings and reimbursements do not apply to interest income. First, the interest income is not generated "as a direct result of"

Education Code 76355, the statutory basis for the student health services program. Indeed, since the student health service program operates at a loss (the reason for the annual mandate claim for excess costs), the student health service program cannot generate investment principal. Second, the interest income is neither state nor federal reimbursement for providing the student health service program. Third, the interest income is not fees paid by others for services not included in the student health service program.

Since interest income does not meet the parameters and guidelines criteria for offsetting savings and reimbursements and the draft audit report has stated no other basis for this finding, the adjustments should be withdrawn.

#### Other Issues

# FY 2006-07 Amounts Paid

The draft audit report states that the District was paid \$234,716 on the FY 2006-07 annual claim. The last remittance advice (March 12, 2007) received by the District for this fiscal year indicates that the amount paid was \$263,110.

#### FY 2006-07 Late Claim Filing Penalty

On February 6, 2009, the District submitted an amended FY 2006-07 claim in the amount of \$329,864 that incorporates some of the audit adjustments presented at the January 23, 2009, exit conference. Since this amended claim is a late claim, it is subject to a late filing penalty of 10% of the amount claimed up to \$10,000. The draft audit report adjusts the late filing penalty to \$9,515 for the audited allowed "total program costs" of \$192,389. Ten percent of \$192,389 is not \$9,515. It appears the late filing penalty should be \$10,000.

#### Statute of Limitations

Fiscal Year	Date Submitted to SCO	SOL to audit expires
FY 2002-03	January 12, 2004	Audit must start by January 12, 2007
FY 2003-04	January 10, 2005	Audit must start by January 10, 2008

Government Code Section 17558.5, as amended effective January 1, 2003, requires the Controller to initiate an audit within three years after a claim is filed. The District's FY 2002-03 claim was filed on January 12, 2004. The District's FY 2003-04 claim was filed on January 10, 2005. The entrance conference date for the audit was March 24, 2008, which is after the three-year period to commence the audit for those two fiscal years had expired.

The audit report should be changed to exclude findings for the FY 2002-03 and FY 2003-04 annual claims.

## **Public Records Request**

The District requests that the Controller provide the District any and all written instructions, memorandums, or other writings in effect and applicable during the claiming period to Finding 1 (indirect cost rate calculation standards) and Finding 2 (calculation of the student health services fees offset).

Government Code section 6253, subdivision (c), requires the state agency that is the subject of the request, within 10 days from receipt of a request for a copy of records, to determine whether the request, in whole or in part, seeks copies of disclosable public records in its possession and to promptly notify the requesting party of that determination and the reasons therefore. Also, as required, when so notifying the District, please state the estimated date and time when the records will be made available.

0 0 0

The District requests that the audit report be changed to comply with the appropriate application of the parameters and guidelines regarding allowable activity costs and the Government Code sections concerning audits of mandate claims.

Sincerely,

Teresa Scott

**Executive Vice Chancellor** 

TMS/KP/cs

State Controller's Office Division of Audits Post Office Box 942850 Sacramento, CA 94250-5874

http://www.sco.ca.gov

# MANDATED COST MANUAL FOR COMMUNITY COLLEGES

# STATE OF CALIFORNIA



STEVE WESTLY STATE CONTROLLER

# **FOREWORD**

The claiming instructions contained in this manual are issued for the sole purpose of assisting claimants with the preparation of claims for submission to the State Controller's Office. These instructions have been prepared based upon interpretation of the State of California statutes, regulations, and parameters and guidelines adopted by the Commission on State Mandates. Therefore, unless otherwise specified, these instructions should not be construed in any manner to be statutes, regulations, or standards.

If you have any questions concerning the enclosed material, write to the address below or call the Local Reimbursements Section at (916) 324-5729, or email to Irsdar@sco.ca.gov.

State Controller's Office Attn: Local Reimbursements Section Division of Accounting and Reporting P.O. Box 942850 Sacramento, CA 94250

Prepared by the State Controller's Office Updated September 30, 2003

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# **SECTION 3** State Mandated Cost Programs

Program Name	Chapter/Statute	Program Number
Absentee Ballots	Ch. 77/78	231
Collective Bargaining	Ch. 961/75	232
Health Benefits for Survivors of Peace Officers and Firefighters	Ch. 1120/96	233
Health Fee Elimination	Ch. 1/84	234
Investment Reports	Ch. 783/95	235
Law Enforcement College Jurisdiction Agreements	Ch. 284/98	212
Law Enforcement Sexual Harassment Training	Ch. 126/93	236
Mandate Reimbursement Process	Ch. 486/75	237
Open Meetings Act /Brown Act Reform	Ch. 641/86	238
Peace Officers Procedural Bill of Rights	Ch. 465/76	239
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# REIMBURSABLE STATE MANDATED COST PROGRAMS

Claims for the following State mandated cost programs may be filed with the SCO. For your convenience, the programs are listed in alphabetical order by program name. An "X" indicates the fiscal year for which a claim may be filed.

2002-03 Reimburse- ment Claims	-			Community College Districts
X	X	Chapter	77/78	Absentee Ballots
X	X	Chapter	961/75	Collective Bargaining
X	X			Health Benefits for Survivors of Peace Officers & Firefighters
×	X	Chapter	1/84	Health Fee Elimination
X	X	Chapter		Investment Reports
X				Law Enforcement College Jurisdiction Agreements
X	X	Chapter	126/93	Law Enforcement Sexual Harassment Training
x		Chapter	486/75	Mandate Reimbursement Process
X	X	Chapter	641/86	Open Meetings Act/Brown Act Reform
X	X	Chapter	465/76	Peace Officers Procedural Bill of Rights
X	X	Chapter	875/85	Photographic Record of Evidence
X	X	Chapter	908/96	Sex Offenders: Disclosure by Law Enforcement Officers
x	X	Chapter	1249/92	Threats Against Peace Officers

# APPROPRIATIONS FOR THE 2003-04 FISCAL YEAR

Sou	rce of Stat	e Mandat	ed Cost Appropriations			
Sch	edule		Program	Amount App	ropri	ated
Cha	pter 379/02	!, Item 61	10-295-0001 <sup>1</sup>			
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) (11) (12)	Chapter Chapter Chapter Chapter Chapter Chapter Chapter Chapter Chapter Chapter Chapter Chapter Chapter	77/78 961/75 1120/96 783/95 284/98 126/93 486/75 641/86 465/76 875/85 908/96 1249/92	Absentee Ballots Collective Bargaining Health Benefits for Survivors of Peace Officers and Fire Investment Reports Law Enforcement College Jurisdiction Agreements Law Enforcement Sexual Harassment Training Mandate Reimbursement Process Open Meetings Act/Brown Act Reform Peace Officers Procedural Bill of Rights Photographic Record of Evidence Sex Offenders: Disclosure by Law Enforcement Officers		\$	0 0 0 0 0 0 0 0 0 0 0 0
(13)	Chapter	1/84	Health Fee Elimination		1.0	000
TOTA	L - Fundin	g for the	2003-04 Fiscal Year		\$1,0	
					Ψ 1,0	, , , ,

<sup>&</sup>lt;sup>1</sup> Pursuant to provision 5, "The Controller shall not make any payment from this item to reimburse community college districts for claimed costs of state-mandated education programs. Reimbursements to community college districts for education mandates shall be paid from the appropriate item within the community colleges budget."

# **FILING A CLAIM**

# 1. Introduction

The law in the State of California, (Government Code Sections 17500 through 17616), provides for the reimbursement of costs incurred by school districts for costs mandated by the State. Costs mandated by the State means any increased costs which a school district is required to incur after July 1, 1980, as a result of any statute enacted after January 1, 1975, or any executive order implementing such statute which mandates a new program or higher level of service of an existing program.

Estimated claims that show costs to be incurred in the current fiscal year and reimbursement claims that detail the costs actually incurred for the prior fiscal year may be filed with the State Controller's Office (SCO). Claims for on-going programs are filed annually by January 15. Claims for new programs are filed within 120 days from the date claiming instructions are issued for the program. A 10 percent penalty, (up to \$1,000 for continuing claims, no limit for initial claims), is assessed for late claims. The SCO may audit the records of any school district to verify the actual amount of mandated costs and may reduce any claim that is excessive or unreasonable.

When a program has been reimbursed for three or more years, the COSM may approve the program for inclusion in the State Mandates Apportionment System (SMAS). For programs included in SMAS, the SCO determines the amount of each claimant's entitlement based on an average of three consecutive fiscal years of actual costs adjusted by any changes in the Implicit Price Deflator (IPD). Claimants with an established entitlement receive an annual apportionment adjusted by any changes in the IPD and, under certain circumstances, by any changes in workload. Claimants with an established entitlement do not file further claims for the program.

The SCO is authorized to make payments for costs of mandated programs from amounts appropriated by the State Budget Act, by the State Mandates Claims Fund, or by specific legislation. In the event the appropriation is insufficient to pay claims in full, claimants will receive prorated payments in proportion to the dollar amount of approved claims for the program. Balances of prorated payments will be made when supplementary funds are made available.

The instructions contained in this manual are intended to provide general guidance for filing a mandated cost claim. Since each mandate is administered separately, it is important to refer to the specific program for information relating to established policies on eligible reimbursable costs.

# 2. Types of Claims

There are three types of claims: Reimbursement, Estimated, and Entitlement. A claimant may file a reimbursement claim for actual mandated costs incurred in the prior fiscal year or may file an estimated claim for mandated costs to be incurred during the current fiscal year. An entitlement claim may be filed for the purpose of establishing a base year entitlement amount for mandated programs included in SMAS. A claimant who has established a base year entitlement for a program would receive an automatic annual payment which is reflective of the current costs for the program.

All claims received by the SCO will be reviewed to verify actual costs. An adjustment of the claim will be made if the amount claimed is determined to be excessive, improper, or unreasonable. The claim must be filed with sufficient documentation to support the costs claimed. The types of documentation required to substantiate a claim are identified in the instructions for the program. The certification of claim, form FAM-27, must be signed and dated by the entity's authorized officer in order for the SCO to make payment on the claim.

#### A. Reimbursement Claim

A reimbursement claim is defined in GC Section 17522 as any claim filed with the SCO by a local agency for reimbursement of costs incurred for which an appropriation is made for the purpose of paying the claim. The claim must include supporting documentation to substantiate the costs claimed.

Initial reimbursement claims are first-time claims for reimbursement of costs for one or more prior fiscal years of a program that was previously unfunded. Claims are due 120 days from the date of issuance of the claiming instructions for the program by the SCO. The first statute that appropriates funds for the mandated program will specify the fiscal years for which costs are eligible for reimbursement.

Annual reimbursement claims must be filed by January 15 following the fiscal year in which costs were incurred for the program. A reimbursement claim must detail the costs actually incurred in the prior fiscal year.

An actual claim for the 2002-03 fiscal year may be filed by January 15, 2004, without a late penalty. Claims filed after the deadline will be reduced by a late penalty of 10%, not to exceed \$1,000. However, initial reimbursement claims will be reduced by a late penalty of 10% with no limitation. In order for a claim to be considered properly filed, it must include any specific supporting documentation requested in the instructions. Claims filed more than one year after the deadline or without the requested supporting documentation will not be accepted.

#### **B.** Estimated Claim

An estimated claim is defined in GC Section 17522 as any claim filed with the SCO, during the fiscal year in which the mandated costs are to be incurred by the local agency, against an appropriation made to the SCO for the purpose of paying those costs.

An estimated claim may be filed in conjunction with an initial reimbursement claim, annual reimbursement claim, or at other times for estimated costs to be incurred during the current fiscal year. Annual estimated claims are due January 15 of the fiscal year in which the costs are to be incurred. Initial estimated claims are due on the date specified in the claiming instructions. Timely filed estimated claims are paid before those filed after the deadline.

After receiving payment for an estimated claim, the claimant must file a reimbursement claim by January 15 following the fiscal year in which costs were incurred. If the claimant fails to file a reimbursement claim, monies received for the estimated claims must be returned to the State.

#### C. Entitlement Claim

An entitlement claim is defined in GC Section 17522 as any claim filed by a local agency with the SCO for the sole purpose of establishing or adjusting a base year entitlement for a mandated program that has been included in SMAS. An entitlement claim should not contain nonrecurring or initial start-up costs. There is no statutory deadline for the filing of entitlement claims. However, entitlement claims and supporting documents should be filed by January 15 to permit an orderly processing of claims. When the claims are approved and a base year entitlement amount is determined, the claimant will receive an apportionment reflective of the program's current year costs. School mandates included in SMAS are listed in Section 2, number 6.

Once a mandate has been included in SMAS and the claimant has established a base year entitlement, the claimant will receive automatic payments from the SCO for the mandate. The automatic apportionment is determined by adjusting the claimant's base year entitlement for changes in the implicit price deflator of costs of goods and services to governmental agencies, as determined by the State Department of Finance. For programs approved by the COSM for inclusion in SMAS on or after January 1, 1988, the payment for each year succeeding the three year base period is adjusted according to any changes by both the deflator and average daily attendance. Annual apportionments for programs included in the system are paid on or before November 30 of each year.

A base year entitlement is determined by computing an average of the claimant's costs for any three consecutive years after the program has been approved for the SMAS process. The amount is first adjusted according to any changes in the deflator. The deflator is applied separately to each year's costs for the three years, which comprise the base year. The SCO will perform this computation for each claimant who has filed claims for three consecutive years. If a claimant has incurred costs for three consecutive years but has not filed a claim in each of those years, the claimant may file an entitlement claim, form FAM-43, to establish a base year entitlement. An entitlement claim does not result in the claimant being reimbursed for the costs incurred, but rather entitles the claimant to receive automatic payments from SMAS.

# 3. Minimum Claim Amount

For initial claims and annual claims filed on or after September 30, 2002, if the total costs for a given year do not exceed \$1,000, no reimbursement shall be allowed except as otherwise allowed by GC Section 17564. The county shall determine if the submission of a combined claim is economically feasible and shall be responsible for disbursing the funds to each special district. Combined claims may be filed only when the county is the fiscal agent for the special districts. A combined claim must show the individual claim costs for each eligible school district. All subsequent claims based upon the same mandate shall only be filed in the combined form unless a special district, provides to the county and to the Controller, at least 180 days prior to the deadline for filing the claim, a written notice of its intent to file a separate claim.

GC Section 17564(a) provides that no claim shall be filed pursuant to Sections 17551 and 17561, unless such a claim exceeds one thousand dollars (\$1,000), provided that a county superintendent of schools may submit a combined claim on behalf of school districts within their county if the combined claim exceeds \$1,000, even if the individual school district's claim does not each exceed \$1,000. The county superintendent of schools shall determine if the submission of the combined claim is economically feasible and shall be responsible for disbursing the funds to each school district. These combined claims may be filed only when the county superintendent of schools is the fiscal agent for the districts. A combined claim must show the individual claim costs for each eligible district. All subsequent claims based upon the same mandate shall only be filed in the combined form unless a school district provides a written notice of its intent to file a separate claim to the county superintendent of schools and to the SCO at least 180 days prior to the deadline for filling the claim.

# 4. Filing Deadline for Claims

Initial reimbursement claims (first-time claims) for reimbursement of costs of a previously unfunded mandated program must be filed within 120 days from the date of issuance of the program's claiming instructions by the SCO. If the initial reimbursement claim is filed after the deadline, but within one year of the deadline, the approved claim must be reduced by a 10% penalty. A claim filed more than one year after the deadline cannot be accepted for reimbursement.

Annual reimbursement claims for costs incurred during the previous fiscal year and estimated claims for costs to be incurred during the current fiscal year must be filed with the SCO and postmarked on or before January 15. If the annual or estimated reimbursement claim is filed after the deadline, but within one year of the deadline, the approved claim must be reduced by a 10% late penalty, not to exceed \$1,000. Claims must include supporting data to show how the amount claimed was derived. Without this information, the claim cannot be accepted.

Entitlement claims do not have a filing deadline. However, entitlement claims and supporting documents should be filed by January 15 to permit an orderly processing of claims. Entitlement claims are used to establish a base year entitlement amount for calculating automatic annual payments. Entitlement does not result in the claimant being reimbursed for costs incurred, but rather entitles the claimant to receive automatic payments from SMAS.

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# 5. Payment of Claims

In order for the SCO to authorize payment of a claim, the Certification of Claim, form FAM-27, must be properly filled out, signed, and dated by the entity's authorized officer.

Reimbursement and estimated claims are paid within 60 days of the filing deadline for the claim. A claimant is entitled to receive accrued interest at the pooled money investment account rate if the payment was made more than 60 days after the claim filing deadline or the actual date of claim receipt, whichever is later. For an initial claim, interest begins to accrue when the payment is made more than 365 days after the adoption of the program's statewide cost estimate. The SCO may withhold up to 20 percent of the amount of an initial claim until the claim is audited to verify the actual amount of the mandated costs. The 20 percent withheld is not subject to accrued interest.

In the event the amount appropriated by the Legislature is insufficient to pay the approved amount in full for a program, claimants will receive a prorated payment in proportion to the amount of approved claims timely filed and on hand at the time of proration.

The SCO reports the amounts of insufficient appropriations to the State Department of Finance, the Chairperson of the Joint Legislative Budget Committee, and the Chairperson of the respective committee in each house of the Legislature which considers appropriations in order to assure appropriation of these funds in the Budget Act. If these funds cannot be appropriated on a timely basis in the Budget Act, this information is transmitted to the COSM which will include these amounts in its report to assure that an appropriation sufficient to pay the claims is included in the next local government claims bill or other appropriation bills. When the supplementary funds are made available, the balance of the claims will be paid.

Unless specified in the statutes, regulations, or parameters and guidelines, the determination of allowable and unallowable costs for mandates is based on the Parameters and Guidelines adopted by the COSM. The determination of allowable reimbursable mandated costs for unfunded mandates is made by the COSM. The SCO determines allowable reimbursable costs, subject to amendment by the COSM, for mandates funded by special legislation. Unless specified, allowable costs are those direct and indirect costs, less applicable credits, considered to be eligible for reimbursement. In order for costs to be allowable and thus eligible for reimbursement, the costs must meet the following general criteria:

- 1. The cost is necessary and reasonable for proper and efficient administration of the mandate and not a general expense required to carry out the overall responsibilities of government.
- 2. The cost is allocable to a particular cost objective identified in the Parameters and Guidelines.
- The cost is net of any applicable credits that offset or reduce expenses of items allocable to the mandate.

The SCO has identified certain costs that, for the purpose of claiming mandated costs, are unallowable and should not be claimed on the claim forms unless specified as reimbursable under the program. These expenses include, but are not limited to, subscriptions, depreciation, memberships, conferences, workshops general education, and travel costs.

# 6. State Mandates Apportionment System (SMAS)

Chapter 1534, Statutes of 1985, established SMAS, a method of paying certain mandated programs as apportionments. This method is utilized whenever a program has been approved for inclusion in SMAS by the COSM.

When a mandated program has been included in SMAS, the SCO will determine a base year entitlement amount for each school district that has submitted reimbursement claims, (or entitlement claims), for three consecutive fiscal years. A base year entitlement amount is determined by averaging the approved reimbursement claims, (or entitlement claims), for 1982-83, 1983-84, and 1984-85 years or any three consecutive fiscal years thereafter. The amounts are first adjusted by any change in IPD, which is applied separately to each year's costs for the three years

that comprise the base period. The base period means the three fiscal years immediately succeeding the COSM's approval.

Each school district with an established base year entitlement for the program will receive automatic annual payments from the SCO reflective of the program's current year costs. The amount of apportionment is adjusted annually for any change in the IPD. If the mandated program was included in SMAS after January 1, 1988, the annual apportionment is adjusted for any change in both the IPD and workload.

In the event a school district has incurred costs for three consecutive fiscal years but did not file a reimbursement claim in one or more of those fiscal years, the school district may file an entitlement claim for each of those missed years to establish a base year entitlement. An "entitlement claim" means any claim filed by a county with the SCO for the sole purpose of establishing a base year entitlement. A base year entitlement shall not include any nonrecurring or initial start-up costs.

Initial apportionments are made on an individual program basis. After the initial year, all apportionments are made by November 30. The amount to be apportioned is the base year entitlement adjusted by annual changes in the IPD for the cost of goods and services to governmental agencies as determined by the State Department of Finance.

In the event the county determines that the amount of apportionment does not accurately reflect costs incurred to comply with a mandate, the process of adjusting an established base year entitlement upon which the apportionment is based, is set forth in GC Section 17615.8 and requires the approval of the COSM.

School Mandates Included In SMAS

Program Name	Chapter/Statute	Program Number	
Immunization Records	Ch. 1176/77	32	

Pupil Expulsion Transcripts, program #91, Chapter 1253/75 was removed from SMAS for the 2002-03 fiscal year. This program was consolidated with other mandate programs that are included in Pupil Suspension, Expulsions, and Expulsion Appeals, program #176.

#### 7. Direct Costs

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A direct cost is a cost that can be identified specifically with a particular program or activity. Each claimed reimbursable cost must be supported by documentation as described in Section 12. Costs that are typically classified as direct costs are:

# (1) Employee Wages, Salaries, and Fringe Benefits

For each of the mandated activities performed, the claimant must list the names of the employees who worked on the mandate, their job classification, hours worked on the mandate, and rate of pay. The claimant may, in-lieu of reporting actual compensation and fringe benefits, use a productive hourly rate:

# (a) Productive Hourly Rate Options

A local agency may use one of the following methods to compute productive hourly rates:

- Actual annual productive hours for each employee
- The weighted-average annual productive hours for each job title, or
- 1,800\* annual productive hours for all employees

If actual annual productive hours or weighted-average annual productive hours for each job title is chosen, the claim must include a computation of how these hours were computed.

- \* 1,800 annual productive hours excludes the following employee time:
- Paid holidays
- Vacation earned
- Sick leave taken
- o Informal time off
- o Jury duty
- Military leave taken.

# (b) Compute a Productive Hourly Rate

Compute a productive hourly rate for salaried employees to include actual fringe benefit
costs. The methodology for converting a salary to a productive hourly rate is to
compute the employee's annual salary and fringe benefits and divide by the annual
productive hours.

Table 1 Productive Hourly Rate, Annual Salary + Benefits Method

Formula:	Description:
[(EAS + Benefits) + APH] = PHR	EAS = Employee's Annual Salary
	APH = Annual Productive Hours
[(\$26,000 + \$8,099)] + 1,800 hrs = 18.94	PHR = Productive Hourly Rate

- As illustrated in Table 1, if you assume an employee's compensation was \$26,000 and \$8,099 for annual salary and fringe benefits, respectively, using the "Salary + Benefits Method," the productive hourly rate would be \$18.94. To convert a biweekly salary to EAS, multiply the biweekly salary by 26. To convert a monthly salary to EAS, multiply the monthly salary by 12. Use the same methodology to convert other salary periods.
- 2. A claimant may also compute the productive hourly rate by using the "Percent of Salary Method."

Table 2 Productive Hourly Rate, Percent of Salary Method

Example:	-		
Step 1: Fringe Benefits as a Percent of Salary		Step 2: Productive Hourly Rate	
Retirement	15.00 %	Formula:	
Social Security & Medicare	7.65	[(EAS x (1 + FBR)) + APH] = PHR	
Health & Dental Insurance	5.25		
Workers Compensation	3.25	$[(\$26,000 \times (1.3115)) + 1,800] = \$18.94$	
Total	31.15 %		
Description:			
EAS = Employee's Annual Salary		APH = Annual Productive Hours	
FBR = Fringe Benefit Rate		PHR = Productive Hourly Rate	

As illustrated in Table 3, both methods produce the same productive hourly rate.

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Reimbursement for personnel services includes, but is not limited to, compensation paid for salaries, wages and employee fringe benefits. Employee fringe benefits include employer's contributions for social security, pension plans, insurance, workmen's compensation insurance and similar payments. These benefits are eligible for reimbursement as long as they are distributed equitably to all activities. Whether these costs are allowable is based on the following presumptions:

- The amount of compensation is reasonable for the service rendered.
- The compensation paid and benefits received are appropriately authorized by the governing board.
- Amounts charged for personnel services are based on payroll documents that are supported by time and attendance or equivalent records for individual employees.
- The methods used to distribute personnel services should produce an equitable distribution of direct and indirect allowable costs.

For each of the employees included in the claim, the claimant must use reasonable rates and hours in computing the wage cost. If a person of a higher-level job position performs an activity which normally would be performed by a lower-level position, reimbursement for time spent is allowable at the average salary range for the lower-level position. The salary rate of the person at the higher level position may be claimed if it can be shown that it was more cost effective in comparison to the performance by a person at the lower-level position under normal circumstances and conditions. The number of hours charged to an activity should reflect the time expected to complete the activity under normal circumstances and conditions. The numbers of hours in excess of normal expected hours are not reimbursable.

# (c) Calculating an Average Productive Hourly Rate

In those instances where the claiming instructions allow a unit as a basis of claiming costs, the direct labor component of the unit cost should be expressed as an average productive hourly rate and can be determined as follows:

Table 4 Calculating an Average Productive Hourly Rate					
	<u>Time</u> Spent	Productive Hourly Rate	Total Cost by Employee		
Employee A	1.25 hrs	\$6.00	\$7.50		
Employee B	0.75 hrs	4.50	3.38		
Employee C	3.50 hrs	10.00	35.00		
Total	5.50 hrs		\$45.88		
·,-,-	tive Hourly Rate is	\$45.88/5.50 hrs. = \$8.34	·		

#### (d) Employer's Fringe Benefits Contribution

A local agency has the option of claiming actual employer's fringe benefit contributions or may compute an average fringe benefit cost for the employee's job classification and claim it as a percentage of direct labor. The same time base should be used for both salary and fringe benefits when computing a percentage. For example, if health and dental insurance payments are made annually, use an annual salary. After the percentage of salary for each fringe benefit is computed, total them.

For example:

Employer's Contribution	% of Salary
Retirement	15.00%
Social Security	7.65%
Health and Dental	E 0E0/
Insurance	5.25%
Worker's Compensation	0.75%
Total	28.65%

#### (e) Materials and Supplies

Only actual expenses can be claimed for materials and supplies, which were acquired and consumed specifically for the purpose of a mandated program. The claimant must list the materials and supplies that were used to perform the mandated activity, the number of units consumed, the cost per unit, and the total dollar amount claimed. Materials and supplies purchased to perform a particular mandated activity are expected to be reasonable in quality, quantity and cost. Purchases in excess of reasonable quality, quantity and cost are not reimbursable. Materials and supplies withdrawn from inventory and charged to the mandated activity must be based on a recognized method of pricing, consistently applied. Purchases shall be claimed at the actual price after deducting discounts, rebates and allowances received by local agencies.

#### (f) Calculating a Unit Cost for Materials and Supplies

In those instances where the claiming instructions suggest that a unit cost be developed for use as a basis of claiming costs mandated by the State, the materials and supplies component of the unit cost should be expressed as a unit cost of materials and supplies as shown in Table 1 or Table 2:

Table 1 Calculating A Unit Cost for Materials and Supplies

Supplies	Cost Per Unit	Amount of Supplies Used Per <u>Activity</u>	Unit Cost of Supplies Per Activity
Paper	0.02	4	\$0.08
Files	0.10	1	0.10
Envelopes	0.03	2	0.06
Photocopies	0.10	4	<u>0.40</u>
			<u>\$0.64</u>

Table 2 Calculating a Unit Cost for Materials and Supplies

Supplies	Supplies <u>Used</u>	Unit Cost of Supplies Per Activity
Paper (\$10.00 for 500 sheet ream)	250 Sheets	\$5.00
Files (\$2.50 for box of 25)	10 Folders	1.00
Envelopes (\$3.00 for box of 100)	50 Envelopes	1.50
Photocopies (\$0.05 per copy)	40 Copies	2.00
		\$9.50

If the number of reimbursable instances, is 25, then the unit cost of supplies is \$0.38 per reimbursable instance (\$9.50 / 25).

#### (g) Contract Services

The cost of contract services is allowable if the local agency lacks the staff resources or necessary expertise, or it is economically feasible to hire a contractor to perform the mandated activity. The claimant must give the name of the contractor; explain the reason for having to hire a contractor; describe the mandated activities performed; give the dates when the activities were performed, the number of hours spent performing the mandate, the hourly billing rate, and the total cost. The hourly billing rate shall not exceed the rate specified in the claiming instructions for the mandated program. The contractor's invoice, or statement, which includes an itemized list of costs for activities performed, must accompany the claim.

#### (h) Equipment Rental Costs

Equipment purchases and leases (with an option to purchase) are not reimbursable as a direct cost unless specifically allowed by the claiming instructions for the particular mandate. Equipment rentals used solely for the mandate are reimbursable to the extent such costs do not exceed the retail purchase price of the equipment plus a finance charge. The claimant must explain the purpose and use for the equipment, the time period for which the equipment was rented and the total cost of the rental. If the equipment is used for purposes other than reimbursable activities, only the prorata portion of the rental costs can be claimed.

#### (i) Capital Outlay

Capital outlays for land, buildings, equipment, furniture and fixtures may be claimed if the claiming instructions specify them as allowable. If they are allowable, the claiming instructions for the program will specify a basis for the reimbursement. If the fixed asset or equipment is also used for purposes other than reimbursable activities for a specific mandate, only the prorata portion of the purchase price used to implement the reimbursable activities can be claimed.

#### (i) Travel Expenses

Travel expenses are normally reimbursable in accordance with travel rules and regulations of the local jurisdiction. For some programs, however, the claiming instructions may specify certain limitations on expenses, or that expenses can only be reimbursed in accordance with the State Board of Control travel standards. When claiming travel expenses, the claimant must explain the purpose of the trip, identify the name and address of the persons incurring the expense, the date and time of departure and return for the trip, description of each expense claimed, the cost of transportation,

number of private auto mileage traveled, and the cost of tolls and parking with receipts required for charges over \$10.00.

#### (k) Documentation

It is the responsibility of the claimant to make available to the SCO, upon request, documentation in the form of general and subsidiary ledgers, purchase orders, invoices, contracts, canceled warrants, equipment usage records, land deeds, receipts, employee time sheets, agency travel guidelines, inventory records, and other relevant documents to support claimed costs. The type of documentation necessary for each claim may differ with the type of mandate.

#### 8. Indirect Costs

Indirect costs are: (a) Incurred for a common or joint purpose benefiting more than one cost objective, and (b) not readily assignable to the cost objectives specifically benefited, without effort disproportionate to the results achieved. Indirect costs can originate in the department performing the mandate or in departments that supply the department performing the mandate with goods, services and facilities. As noted previously, in order for a cost to be allowable, it must be allocable to a particular cost objective. With respect to indirect costs, this requires that the cost be distributed to benefiting cost objectives on bases, which produce an equitable result in relation to the benefits derived by the mandate.

A college has the option of using a federally approved rate, utilizing the cost accounting principles from Office of Management and Budget Circular A-21 "Cost Principles for Educational Institutions," or the Controller's methodology outlined in the following paragraphs. If the federal rate is used, it must be from the same fiscal year in which the costs were incurred.

The Controller allows the following methodology for use by community colleges in computing an indirect cost rate for state mandates. The objective of this computation is to determine an equitable rate for use in allocating administrative support to personnel that performed the mandated cost activities claimed by the community college. This methodology assumes that administrative services are provided to all activities of the institution in relation to the direct costs incurred in the performance of those activities. Form FAM-29C has been developed to assist the community college in computing an indirect cost rate for state mandates. Completion of this form consists of three main steps:

- 1. The elimination of unallowable costs from the expenses reported on the financial statements.
- 2. The segregation of the adjusted expenses between those incurred for direct and indirect activities.
- 3. The development of a ratio between the total indirect expenses and the total direct expenses incurred by the community college.

The computation is based on total expenditures as reported in "California Community Colleges Annual Financial and Budget Report, Expenditures by Activity (CCFS-311)." Expenditures classified by activity are segregated by the function they serve. Each function may include expenses for salaries, fringe benefits, supplies, and capital outlay. OMB Circular A-21 requires expenditures for capital outlays to be excluded from the indirect cost rate computation.

Generally, a direct cost is one incurred specifically for one activity, while indirect costs are of a more general nature and are incurred for the benefit of several activities. As previously noted, the objective of this computation is to equitably allocate administrative support costs to personnel that perform mandated cost activities claimed by the college. For the purpose of this computation we have defined indirect costs to be those costs which provide administrative support to personnel who perform mandated cost activities. We have defined direct costs to be those costs that do not provide administrative support to personnel who perform mandated cost activities and those costs that are directly related to instructional activities of the college. Accounts that should be classified

as indirect costs are: Planning, Policy Making and Coordination, Fiscal Operations, Human Resources Management, Management Information Systems, Other General Institutional Support Services, and Logistical Services. If any costs included in these accounts are claimed as a mandated cost, i.e., salaries of employees performing mandated cost activities, the cost should be reclassified as a direct cost. Accounts in the following groups of accounts should be classified as direct costs: Instruction, Instructional Administration, Instructional Support Services, Admissions and Records, Counseling and Guidance, Other Student Services, Operation and Maintenance of Plant, Community Relations, Staff Development, Staff Diversity, Non-instructional Staff-Retirees' Benefits and Retirement Incentives, Community Services, Ancillary Services and Auxiliary Operations. A college may classify a portion of the expenses reported in the account Operation and Maintenance of Plant as indirect. The claimant has the option of using a 7% or a higher indirect cost percentage if the college can support its allocation basis.

The indirect cost rate, derived by determining the ratio of total indirect expenses to total direct expenses when applied to the direct costs claimed, will result in an equitable distribution of the college's mandate related indirect costs. An example of the methodology used to compute an indirect cost rate is presented in Table 4.

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant				(02) Period of	Claim	
(03) Expenditures by Activity			.,	(04) Allowable	Costs	
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	\$19,590,357	\$1,339,059	\$18,251,298	\$	0 \$18,251,298
Instructional Administration and Instructional Governance	6000	)				
Academic Administration	6010	2,941,386	105,348	2,836,038		2,836,038
Course and Curriculum Develop.	6020	21,595	0	21,595	(	21,595
Academic/Faculty Senate	6030					
Other Instructional Administration & Instructional Governance	6090					
Instructional Support Services	6100					
Learning Center	6110	22,737	863	21,874	(	21,874
Library	6120	518,220	2,591	515,629	(	515,629
Media	6130	522,530	115,710	406,820	(	406,820
Museums and Galleries	6140	0	0	0	C	0
Academic Information Systems and Tech.	6150	-				
Other Instructional Support Services	6190					
Admissions and Records	6200	584,939	12,952	571,987	0	571,987
Counseling and Guidance	6300					
Counseling and Guidance	6310					
Matriculation and Student Assessment	6320					
Transfer Programs	6330					
Career Guidance	6340					
Other Student Counseling and Guidance	6390					
Other Student Services	6400					
Disabled Students Programs & Services	6420					
subtotal		\$24,201,764	\$1,576,523	\$22,625,241	\$0	\$22,625,241

Table 4 Indirect Cost Rate for Community Colleges (continued)

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant				(02) Period of Claim		
(03) Expenditures by Activity				(04) Allowab	le Costs	
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	643	0				
Health Services	644	0 0	0			0 0
Student Personnel Admin.	645	0 289,926	12,953	276,973	3	0 276,973
Financial Aid Administration	646	0 391,459	20,724	370,735		0 370,735
Job Placement Services	647	0 83,663	0	83,663		0 83,663
Veterans Services	648	0 25,427	0	25,427		0 25,427
Miscellaneous Student Services	649	0	0	0		0 0
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	1,079,260	44,039	1,035,221	(	1,035,221
Custodial Services	6530	1,227,668	33,677	1,193,991	(	1,193,991
Grounds Maintenance and Repairs	6550	596,257	70,807	525,450	(	525,450
Utilities	6570	1,236,305	0	1,236,305	C	1,236,305
Other	6590	3,454	3,454	0	C	0
Planning, Policy Making, and Coordination	6600	587,817	22,451	565,366	565,366	0
General Inst. Support Services	6700					
Community Relations	6710	0	0	0	0	0
Fiscal Operations	6720	634,605	17,270	617,335	553,184	(a) 64,151
Human Resources Management	6730					
Noninstructional Staff Benefits & Incentives	6740					
Staff Development	6750					
Staff Diversity	6760				·	
Logistical Services	6770					
Management Information Systems	6780					
Subtotal		\$30,357,605	\$1,801,898	28,555,707	\$1,118,550	\$27,437,157

Table 4 Indirect Cost Rate for Community Colleges (continued)

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant				(02) Period of	Claim	· · · · · · · · · · · · · · · · · · ·
(03) Expenditures by Activity				(04) Allowable	e Costs	
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700			-		
Other General Institutional Support Services	6790					
Community Services	6800		<u> </u>			
Community Recreation	6810	703,858	20,509	683,349	(	683,349
Community Service Classes	6820	423,188	24,826	398,362	(	398,362
Community Use of Facilities	6830	89,877	10,096	79,781	(	79,781
Economic Development	6840					
Other Community Svcs. & Economic Development	6890					
Ancillary Services	6900					
Bookstores	6910	0	0	0	0	0
Child Development Center	6920	89,051	1,206	87,845	0	87,845
Farm Operations	6930	0	0	0	0	0
Food Services	6940	0	0	0	0	0
Parking	6950	420,274	6,857	413,417	0	413,417
Student Activities	6960	0	0	0	0	0
Student Housing	6970	0	0	0	0	0
Other	6990	0	. 0	0	0	0
Auxillary Operations	7000					
Auxiliary Classes	7010	1,124,557	12,401	1,112,156	0	1,112,156
Other Auxiliary Operations	7090	0	0	0	0	0
Physical Property Acquisitions	7100	814,318	814,318	0	0	0
(05) Total \$34,022,728 \$2,692,111 \$31,330,617 \$1,118,550 \$30,212,0					\$30,212,067	
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost) 3,70233%						
(07) Notes						
(a) Mandated Cost activities design	nated as c	lirect costs per	claim instructio	ns.		1

#### 9. Offset Against Mandated Claims

As noted previously, allowable costs are defined as those direct and indirect costs, less applicable credits, considered to be eligible for reimbursement. When all or part of the costs of a mandated program are specifically reimbursable from local assistance revenue sources (e.g., state, federal, foundation, etc.), only that portion of any increased costs payable from school district funds is eligible for reimbursement under the provisions of GC Section 17561.

#### Example 1:

As illustrated in Table 5, this example shows how the "Offset against State Mandated Claims" is determined for school districts receiving block grant revenues not based on a formula allocation. Program costs for each of the situations equals \$100,000.

Table 5 Offset Against State Mandates, Example 1

	Program Costs	Actual Local Assistance Revenues	State Mandated Costs	Offset Against State Mandated Claims	Claimable Mandated Costs
1.	\$100,000	\$95,000	\$2,500	\$-0-	\$2,500
2.	100,000	97,000	2,500	-0-	2,500
3.	100,000	98,000	2,500	500	2,000
4.	100,000	100,000	2,500	2,500	-0-
5.	100,000 *	50,000	2,500	1,250	1,250
6.	100,000 *	49,000	2,500	250	2,250

<sup>\*</sup> School district share is \$50,000 of the program cost.

Numbers (1) through (4), in Table 5, show intended funding at 100% from local assistance revenue sources. Numbers (5) and (6) show cost sharing on a 50/50 basis with the district. In numbers (1) through (6), included in the program costs of \$100,000 are state mandated costs of \$2,500. The offset against state mandated claims is the amount of actual local assistance revenues which exceeds the difference between program costs and state mandated costs. This offset cannot exceed the amount of state mandated costs.

- In (1), local assistance revenues were less than expected. Local assistance funding was not in excess of the difference between program costs and state mandated costs. As a result, the offset against state mandated claims is zero and \$2,500 is claimable as mandated costs.
- In (4), local assistance revenues were fully realized to cover the entire cost of the program, including the state mandate activity; therefore, the offset against state mandated claims is \$2,500, and claimable costs are \$0..
- In (5), the district is sharing 50% of the project cost. Since local assistance revenues of \$50,000 were fully realized, the offset against state mandated claims is \$1,250.
- In (6), local assistance revenues were less than the amount expended and the offset against state mandated claims is \$250. Therefore, the claimable mandated costs are \$2,250.

#### Example 2:

As illustrated in Table 6, this example shows how the offset against state mandated claims is determined for school districts receiving special project funds based on approved actual costs. Local assistance revenues for special projects must be applied proportionately to approved costs.

	Program Costs	Actual Local Assistance Revenues	State Mandated Costs	Offset Against State Mandated Claims	Claimable Mandated Costs
1.	\$100,000	\$100,000	\$2,500	\$2,500	\$-0-
2.	100,000 **	75,000	2,500	1,875	625
3.	100,000 **	45,000	1,500	1,125	375

Table 6 Offset Against State Mandates, Example 2

In (2), the entire program cost was approved. Since the local assistance revenue source covers 75% of the program cost, it also proportionately covered 75% of the \$2,500 state mandated costs, or \$1,875.

If in (3) local assistance revenues are less than the amount expected because only \$60,000 of the \$100,000 program costs were determined to be valid by the contracting agency, then a proportionate share of state mandated costs is likewise reduced to \$1,500. The offset against state mandated claims is \$1,125. Therefore, the claimable mandated costs are \$375.

#### Federal and State Funding Sources

The listing in Appendix C is not inclusive of all funding sources that should be offset against mandated claims but contains some of the more common ones. State school fund apportionments and federal aid for education, which are based on average daily attendance and are part of the general system of financing public schools as well as block grants which do not provide for specific reimbursement of costs (i.e., allocation formulas not tied to expenditures), should not be included as reimbursements from local assistance revenue sources.

#### **Governing Authority**

The costs of salaries and expenses of the governing authority, such as the school superintendent and governing board, are not reimbursable. These are costs of general government as described in the Office of Management and Budget Circular A-87, "Cost Principles for State, Local and Indian Tribal Governments".

#### 10. Notice of Claim Adjustment

All claims submitted to the SCO are reviewed to determine if the claim was prepared in accordance with the claiming instructions. If any adjustments are made to a claim, the claimant will receive a "Notice of Claim Adjustments" detailing adjustments made by the SCO.

#### 11. Audit of Costs

All claims submitted to the State Controller's Office (SCO) are reviewed to determine if costs are related to the mandate, are reasonable and not excessive, and the claim was prepared in accordance with the SCO's claiming instructions and the Parameters and Guidelines (P's & G's) adopted by the Commission on State Mandates (COSM). If any adjustments are made to a claim, a "Notice of Claim Adjustment" specifying the claim component adjusted, the amount adjusted, and the reason for the adjustment, will be mailed within 30 days after payment of the claim.

Pursuant to Government Code (GC) Section 17558.5, subdivision (a), a reimbursement claim for actual costs filed by a local agency or school district pursuant to this chapter is subject to the initiation of an audit by the Controller no later than three years after the date that the actual reimbursement claim is filed or last amended, whichever is later. However, if no funds are appropriated or no payment is made to a claimant for the program for the fiscal year for which the claim is filed, the time for the Controller to initiate an audit shall commence to run from the date of initial payment of the claim. All documents used to support the reimbursable activities, must be

<sup>\*\*</sup> School district share is \$25,000 of the program cost.

retained during the period subject to audit, if an audit has been initiated by the Controller during the period subject to audit, the retention period is extended until the ultimate resolution of any audit findings.

On-site audits will be conducted by the SCO as deemed necessary. Accordingly, all documentation to support actual costs claimed must be retained for a period of three years after the end of the calendar year in which the reimbursement claim was filed or amended regardless of the year of costs incurred. When no funds are appropriated for initial claims at the time the claim is filed, supporting documents must be retained for three years from the date of initial payment of the claim. Claim documentation shall be made available to the SCO on request.

#### 12. Source Documents

To be eligible for mandated cost reimbursement for any fiscal year, only actual costs may be claimed. Actual costs are those costs actually incurred to implement the mandated activities. Actual costs must be traceable and supported by source documents that show the validity of such costs, when they were incurred, and their relationship to the reimbursable activities. A source document is a document created at or near the same time the actual cost was incurred for the event or activity in question. Source documents-may include, but are not limited to, employee time records or time logs, sign-in sheets, invoices, and receipts.

Evidence corroborating the source documents may include, but is not limited to, worksheets, cost allocation reports (system generated), purchase orders, contracts, agendas, training packets, and declarations. Declarations must include a certification or declaration stating, "I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct based upon personal knowledge." Evidence corroborating the source documents may include data relevant to the reimbursable activities otherwise in compliance with local, state, and federal government requirements. However, corroborating documents cannot be substituted for source documents.

#### 13. Claim Forms and Instructions

A claimant may submit a computer generated report in substitution for Form-1 and Form-2, provided the format of the report and data fields contained within the report are identical to the claim forms included with these instructions. The claim forms provided with these instructions should be duplicated and used by the claimant to file an estimated or reimbursement claim. The SCO will revise the manual and claim forms as necessary.

#### A. Form-2, Component/Activity Cost Detail

This form is used to segregate the detail costs by claim component. In some mandates, specific reimbursable activities have been identified for each component. The expenses reported on this form must be supported by the official financial records of the claimant and copies of supporting documentation, as specified in the claiming instructions, must be submitted with the claims. All supporting documents must be retained for a period of not less than three years after the reimbursement claim was filed or last amended.

#### B. Form-1, Claim Summary

This form is used to summarize direct costs by component and compute allowable indirect costs for the mandate. The direct costs summarized on this form are derived from Form-2 and are carried forward to form FAM-27.

Community colleges have the option of using a federally approved rate (i.e., utilizing the cost accounting principles from the Office of Management and Budget Circular A-21) or form FAM-29C.

#### C. Form FAM-27, Claim for Payment

This form contains a certification that must be signed by an authorized officer of the county. All applicable information from Form-1 must be carried forward onto this form in order for the SCO to process the claim for payment. An original and one copy of the FAM-27 is required.

Claims should be rounded to the nearest dollar. Submit a signed original and one copy of form FAM-27, Claim for Payment, and all other forms and supporting documents (To expedite the payment process, please sign the form FAM-27 with blue ink, and attach a copy of the form FAM-27 to the top of the claim package.) Use the following mailing addresses:

If delivered by U.S. Postal Service:

If delivered by Other delivery services:

Office of the State Controller Attn: Local Reimbursements Section Division of Accounting and Reporting P.O. Box 942850 Sacramento, CA 94250

Office of the State Controller Attn: Local Reimbursements Section Division of Accounting and Reporting 3301 C Street, Suite 500 Sacramento, CA 95816

#### 14. RETENTION OF CLAIMING INSTRUCTIONS

For your convenience, the revised claiming instructions in this package have been arranged in alphabetical order by program name. These revisions should be inserted in the School Mandated Cost Manual and the old forms they replace should be removed. The instructions should then be retained permanently for future reference, and the forms should be duplicated to meet your filing requirements. Annually, updated forms and any other information or instructions claimants may need to file claims, as well as instructions and forms for all new programs released throughout the year will be placed on the SCO's web site at www.sco.ca.gov/ard/local/locreim/index/shtml.

If you have any questions concerning mandated cost reimbursements, please write to us at the address listed for filing claims, send e-mail to Irsdar@sco.ca.gov, or call the Local Reimbursements Section at (916) 324-5729.

All claims submitted to the SCO are reviewed to determine if costs are related to the mandate, are reasonable and not excessive, and the claim was prepared in accordance with the SCO's claiming instructions and the COSM's P's and G's. If any adjustments are made to a claim, a "Notice of Claim Adjustment" specifying the claim component adjusted, the amount adjusted, and the reason for the adjustment, will be mailed within 30 days after payment of the claim.

On-site audits will be conducted by the SCO as deemed necessary. Pursuant to GC Section 17558.5, subdivision (a), a reimbursement claim for actual costs filed by a school district is subject to audit by the State Controller no later than three years after the date the actual reimbursement claim was filed or last amended, whichever is later. However, if no funds were appropriated or no payment was made to a claimant for the program for the fiscal year for which the claim was filed, the time for the Controller to initiate an audit shall commence to run from the date of initial payment of the claim. Therefore, all documentation to support actual costs claimed must be retained for the same period, and shall be made available to the SCO on request.

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San Francisco Taxpayers Assn. v. Board of Supervisors (1992) 2 Cal.4th 571, 7 Cal.Rptr.2d 245; 828 P.2d 147

[No. S018200. May 4, 1992.]

SAN FRANCISCO TAXPAYERS ASSOCIATION, Plaintiff and Respondent, v. BOARD OF SUPERVISORS OF THE CITY AND COUNTY OF SAN FRANCISCO, Defendant and Appellant.

(Superior Court of the City and County of San Francisco, No. 901018, Raymond J. Arata, Jr., Judge.)

(Opinion by Panelli, J., with Lucas, C. J., Arabian, Baxter and George, JJ., concurring. Separate dissenting opinions by Mosk and Kennard, JJ.)

#### COUNSEL

Louise H. Renne, City Attorney, Burke E. DeLeventhal and Thomas J. Owen, Deputy City Attorneys, for Defendant and Appellant.

Ronald A. Zumbrun, Anthony T. Caso and Jonathan M. Coupal for Plaintiff and Respondent,

#### **OPINION**

PANELLI, J.

California's voters, by adopting Proposition 4, placed a constitutional spending limit on appropriations by the state and local governments. (See Cal. Const., art. XIII B, § 1, added by initiative measure in [2 Cal.4th 574] Special Statewide Elec. (Nov. 6, 1979).) The measure sets out, for the purpose of calculating each governmental entity's spending limit, those categories of appropriations that are and are not subject to limitation. We granted review to decide which of the measure's provisions determines the treatment of a city's contributions to employee retirement funds that were established before Proposition 4 took effect. Section 5 fn. 1 provides that appropriations to "retirement" funds are "subject to limitation." Section 9 provides that appropriations for "debt service" are not. In accordance with the plain language of section 5, the more specific provision, we hold that retirement contributions are subject to limitation.

#### Background

The electorate approved Proposition 4 in 1979, thus adding article XIII B to the state Constitution. While the earlier Proposition 13 limited the state and local governments' power to increase taxes (see Cal. Const., art. XIII A, added by initiative measure in Primary Elec. (June 6, 1978)), Proposition 4, the so-called "Spirit of 13," imposed a complementary limit on the rate of growth in governmental spending. Article XIII B operates by subjecting each state and local governmental entity's appropriations to a limit equal to the entity's appropriations in the prior year, adjusted for changes in population and the cost of living. (§§ 1, 8, subds. (e), (f).)

Not all appropriations are subject to the constitutional spending limit. In general, "'[a]ppropriations subject to limitation' "include "any authorization to expend during a fiscal year the proceeds of taxes levied by or for that entity and the proceeds of state subventions to that entity ...." (§ 8, subd. (b) [applicable to local governments].) However, the voters specifically excluded some categories of appropriations from the spending limit. Section 9, for example, permits appropriations beyond the limit for "[d]ebt service" and to "comply[] with mandates of the courts or the federal government ... "(§ 9, subds. (a), (b).) Conversely, the voters specifically determined that the spending limit would apply to other types of appropriations. The provision at issue in this case, section 5, declares that contributions to a "retirement" fund are "subject to limitation."

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Article XIII B took effect during the 1980-1981 fiscal year. Pursuant to its provisions, defendant and appellant Board of Supervisors (Board) of the City [2 Cal.4th 575] and County of San Francisco (City) established an appropriations limit that included the City's contributions to retirement funds. The Board continued to treat such contributions as subject to the spending limit for six consecutive fiscal years.

The Board changed its historical position in 1986. That year, the City Attorney advised the Board that appropriations for certain "mandatory employee benefits," including retirement contributions, were exempt from the spending limit as "debt service" under section 9. fin. 2 Adopting that position, the Board revised the City's base-year spending limit by subtracting \$59,388,698, which represented the amount of the City's appropriations for such benefits in the year the voters approved Proposition 4. The Board derived the 1986-1987 spending limit by adjusting the revised base-year limit to reflect intervening increases in population and the cost of living, (See § 1.) Each subsequent fiscal year's spending limit has excluded retirement contributions.

In September 1987, a decision of the Court of Appeal cast doubt on the City Attorney's interpretation of article XIII B. The County of Santa Barbara, like the City of San Francisco, had decided several years after Proposition 4 to exclude retirement contributions from its spending limit as "debt service." The Second District Court of Appeal rejected the county's position, holding that "the plain language of section 5 requires the inclusion of such contributions as appropriations subject to the appropriations limit" and that the more specific language of section 5 takes precedence over section 9, the more general provision governing debt service. (Santa Barbara County Taxpayers Assn. v. County of Santa Barbara (1987) 194 Cal.App.3d 674, 678 [239 Cal.Rptr. 769] [hereafter Santa Barbara Taxpayers].) We denied a petition for review in that case on November 18, 1987.

In calculating the City's spending limit for the 1988-1989 fiscal year, the Board recognized that its exclusion of retirement contributions was inconsistent with the Santa Barbara Taxpayers decision. Even without the benefit of the exclusion, the City's projected "appropriations subject to limitation" did not exceed its annual spending limit. However, based on the City Attorney's advice that the Court of Appeal's opinion was "wrongly decided" the Board determined to continue to exclude retirement contributions, [2 Cal.4th 576]

The consequence of the Board's decision was to increase by \$40,336,171 the total amount (\$97,640,070) by which the City's spending limit exceeded its appropriations subject to limitation in the 1988-1989 fiscal year. In. 3 However, based on the City Attorney's opinion that the decision would "entail time consuming and difficult litigation," the City Controller recommended that the Board not "collect or appropriate revenues based upon [the \$40 million] spread until the impact of the Santa Barbara [Taxpayers] decision on the City of San Francisco has been clarified."

In December 1988, plaintiff and respondent San Francisco Taxpayers Association (hereafter Taxpayers) initiated this action to challenge the Board's exclusion of retirement contributions from the City's spending limit. Taxpayers alleged that the Board's action violated section 5, which provides that "contributions" to "retirement" funds are "subject to limitation." Following the Second District's decision in Santa Barbara Taxpayers (supra, 194 Cal.App.3d 674), the superior court granted Taxpayers' motion for summary judgment and entered judgment against the Board. In its judgment, the court declared the Board's action invalid and ordered the Board, by injunction and writ of mandate, to revise the City's appropriations limit to include retirement contributions. On appeal, the First District declined to follow Santa Barbara Taxpayers and reversed the judgment. We granted review to resolve the conflict.

#### Discussion

[1a] The question before us is whether section 5 or section 9 governs the treatment of retirement contributions for the purpose of calculating the City's spending limit. Section 5 expressly provides that a governmental entity's contributions to "retirement" funds are "subject to limitation." fn. 4 [2 Cal.4th 577] Section 9, which does not mention retirement contributions, provides that appropriations for "debt service" are not subject to limitation. fn. 5

Ordinary principles of interpretation point to the conclusion that section 5, the more specific provision, governs. [2] "It is well settled ... that a general provision is controlled by one that is special, the latter being treated as an exception to the former. A specific provision relating to a particular subject will govern in respect to that subject, as against a general provision, although the latter, standing alone, would be broad enough to include the subject to which the more particular provision relates." (Rose v. State of California (1942) 19 Cal.2d 713, 723-724 [123 P.2d 505].) [1b] Thus, even if we were to assume for argument's sake that the term "debt service" (§8 8(g), 9(a)) might be broad enough to include retirement contributions, the treatment of such contributions is nevertheless governed by the voters' specific declaration that they are "subject to limitation." (§ 5.) This was the correct conclusion of the Court of Appeal in Santa Barbara Taxpayers (supra, 194 Cal.App.3d at pp. 681-682). In. 6

The Board does not view this case as an example of a specific provision taking precedence over a general provision. Instead, the Board argues that sections 5 and 9(a) conflict and that we should "harmonize" them by giving effect to both so far as possible. (Cf. Lungren v. Deukmejian (1988) 45 Cal.3d 727, 735 [248 Cal.Rptr. 115, 755 P.2d 299]; Dyna-Med, Inc. v. Fair Employment & Housing Com. (1987) 43 Cal.3d 1379, 1387 [241 Cal.Rptr. 67, 743 P.2d 1323].) The Board would achieve harmony by distinguishing between payments required

by pension contracts, on one hand, and discretionary payments to reserve funds, on the other. As the Board would interpret the law, required payments constitute debt service while discretionary payments do not.

Two flaws render the Board's argument untenable. First, there is no conflict between sections 5 and 9(a) unless one assumes that the voters did not mean what they said in section 5-that "retirement" contributions are "subject to limitation." Read according to its plain meaning, section 5 creates an exception to section 9(a) rather than a conflict. [2 Cal.4th 578]

Second, the Board's argument would permit the City to evade section 5 completely, simply by satisfying its contractual obligations. According to the Board, so long as the City does not employ reserve funds for its own convenience its retirement contributions will never become subject to limitation. The voters could not reasonably have intended such a result, which would in effect nullify their express declaration that retirement contributions are subject to limitation. Such an interpretation is obviously to be avoided. (See, e.g., Lungren v. Deukmejian, supra, 45 Cal.3d at p. 735; People v. Craft (1986) 41 Cal.3d 554, 561 [224 Cal.Rptr. 626, 715 P.2d 585].) In contrast, to give full effect to section 5 does not nullify section 9(a), which continues to apply to a wide variety of other obligations.

The Board offers several additional arguments against this conclusion. None is persuasive.

First, the Board argues that retirement contributions must be treated as debt service in order to achieve consistency with article XIII A. Article XIII A limits the maximum rate of ad valorem taxes on real property but permits taxes in excess of that rate to repay certain voter-approved indebtedness. fn. 7 In Carman v. Alvord (1982) 31 Cal.3d 318, 324-333 [182 Cal.Rptr. 506, 644 P.2d 192] (Carman), we held that article XIII A's exemption for "indebtedness" was broad enough to include a city's retirement obligations. Thus, a city may levy taxes in excess of the maximum rate to satisfy such obligations. (Ibid.)

Because articles XIII A and XIII B address the treatment of indebtedness in similar language, the Board argues that retirement contributions cannot be debt service under the former (see Carman, supra, 31 Cal.3d 318) but not under the latter. The argument, however, ignores both the reasoning of Carman and the language of article XIII B. Our conclusion in Carman that retirement obligations constituted "indebtedness" was expressly based on article XIII A's failure to articulate a distinction for retirement contributions. (Carman, supra, 31 Cal.3d at p. 330.) In contrast, article XIII B does articulate a distinction between retirement contributions and other obligations. (§ 5.) Article XIII B also provides that its definition of "debt service" applies only in the context of that article and is subject to exceptions as "expressly provided" therein. (§ 8.) As already discussed, the specific provision governing retirement contributions (§ 5) must be viewed as an [2 Cal.4th 579] exception to the more general provisions governing debt service (§§ 8(g), 9(a)).

The Board's argument for "consistent" interpretations of articles XIII A and XIII B is not based solely on similarities in language. It would also be "meaningless," according to the Board, to permit the City to raise taxes to satisfy retirement obligations while denying it the power to spend the resulting revenues. However, the argument misconceives the purpose of subjecting retirement contributions to the overall spending limit. The purpose is not to prevent the City from satisfying its contractual obligations but simply to control the overall rate of growth in appropriations, if necessary by reducing other spending. Indeed, each year's spending limit reflects the fact that the City made retirement contributions in the prior year and the assumption that it will continue to do so. (See §§ 1, 5.) In contrast, to exclude a category of appropriations from the spending limit would in effect remove that category from the budget, permitting both it and overall spending to increase faster than the rate that the voters adopted as the measure of acceptable growth. (§ 1.)

The relationship between the Carman rule and the treatment of retirement contributions under article XIII B must be understood in this light. Carman permits the City to pass through directly to the voters the cost of any retirement contributions, regardless of the maximum tax rate set out in article XIII A. Unless such contributions are subject to the spending limit set out in article XIII B, as the voters expressly provided (§ 5), one of the largest categories of local governmental spending in. 8 would be completely insulated from fiscal control. The result would be a material impairment of article XIII B's effectiveness in limiting the overall growth of appropriations.

The Board finds support for its contrary interpretation of article XIII B in a remark by the Legislative Analyst. In his report on the proposed measure, the Legislative Analyst concluded that "a local government with an unfunded liability in its retirement system could appropriate its excess revenues to reduce the liability, as such an appropriation would be considered a payment toward a legal 'indebtedness' under this ballot measure." (Ballot Pamp., Special Statewide Elec. (Nov. 6, 1979) p. 20.) [3a] In this case, as always, we consider the Legislative Analyst's views because we assume the voters considered them along with the other materials in the ballot pamphlet. (See, e.g., Raven v. Deukmejian (1990) 52 Cal.3d 336, 349 [276 Cal.Rptr. 326, 801 P.2d 1077].) [2 Cal.4th 580]

Nevertheless, a nonjudicial interpretation of the Constitution is entitled only to as much deference as its logic and persuasiveness demand. [1c] In this case, the Legislative Analyst's views are not persuasive because there is no indication that they take into account the most directly relevant provision, section 5.

[3b] The Legislative Analyst's comment regarding the treatment of retirement contributions is based on a memorandum to him from the Legislative Counsel dated June 15, 1979. In the memorandum, the Legislative Counsel concludes that "any legally binding obligation existing or legally authorized as of January 1, 1979, would be considered as 'indebtedness' for purposes of subdivision (g) of Section 8" and that "such a legally binding obligation would include the unfunded liability of a public employee retirement system." However, the memorandum does not mention or consider the effect of section 5, which expressly contradicts the memorandum's conclusion. In the Ballot Pamphlet, the Legislative Analyst merely repeated the Legislative Counsel's conclusion, again without any consideration of section 5.

The Legislative Analyst's comments, like other materials presented to the voters, "may be helpful but are not conclusive in determining the probable meaning of initiative language." (Carman, supra, 31 Cal.3d at p. 330.) Thus, when other statements in the election materials contradict the Legislative Analyst's comments we do not automatically assume that the latter accurately reflects the voters' understanding. (Id., at pp. 330-331.) In Carman, for example, the official title and summary of Proposition 13 led us to reject the Legislative Analyst's conclusion that the measure's exemption from the maximum tax rate for voter-approved indebtedness applied only to bonded debt. (Ibid.) [1d] The case for rejecting the Legislative Analyst's views is even more compelling here, where the contradiction is in the language of the initiative. (§ 5.) Under circumstances such as these, to prefer an "extrinsic source" over "a clear statement in the Constitution itself" would be "a strained approach to constitutional analysis." (Cf. Delaney v. Superior Court (1990) 50 Cal.3d 785, 802-803 [268 Cal.Rptr. 753, 789 P.2d 934] [rejecting, as contrary to the language of the proposed measure, the Legislative Analyst's inference that the newsperson's shield law would apply only to confidential information].)

[4a] The Board's final argument for interpreting article XIII B to exclude retirement contributions is that such an interpretation will "eliminate doubts" as to the measure's constitutionality. According to the Board, to restrict the City's spending power impairs the security of its pension obligations and, thus, constitutes a "potential" violation of the contract clause of [2 Cal.4th 581] the federal Constitution. fn. 9 The Board expressly disclaims any intent to assert a cause of action or to raise an affirmative defense under the clause. "Rather," to quote the Board's brief, "the City has raised the potential impairment of contracts to explain and support its choice among competing interpretations of Article XIII B."

Taxpayers contend that the Board lacks standing to make the constitutional argument for two reasons. First, as a creation of the state, the City may not invoke the contract clause "in opposition to the will of [its] creator." (Coleman v. Miller (1939) 307 U.S. 433, 441 [83 L.Ed. 1385, 1390, 59 S.Ct. 972, 122 A.L.R. 695]; see also Williams v. Mayor (1933) 289 U.S. 36, 40 [77 L.Ed. 1015, 1020, 53 S.Ct. 431]; State of California v. Marin Mun. W. Dist. (1941) 17 Cal.2d 699, 705 [111 P.2d 651]; Cox Cable San Diego, Inc. v. City of San Diego (1987) 188 Cal.App.3d 952, 967 [233 Cal.Rptr. 735].) Second, any impairment of the City's retirement obligations would cause actual harm only to those persons entitled to receive retirement benefits. (See Amador Valley Joint Union High Sch. Dist. v. State Bd. of Equalization (1978) 22 Cal.3d 208, 242 [149 Cal.Rptr. 239, 583 P.2d 1281] [in dictum].)

These arguments about the Board's standing are irrelevant because the Board is not challenging article XIII B's validity under the contract clause. Instead, we are called upon to decide what the article means. [5] In doing so, we assume that the voters intended the measure to be valid and construe it to avoid "serious" doubts as to its constitutionality if that can be done "without doing violence to the reasonable meaning of the language." (Miller v. Municipal Court (1943) 22 Cal.2d 818, 828 [142 P.2d 297]; see also Gollust v. Mendell (1991) \_\_\_\_\_\_ U.S. \_\_\_\_ [115 L.Ed.2d 109, 111 S.Ct. 2173, 2181]; Crowell v. Benson (1932) 285 U.S. 22, 62 [76 L.Ed. 598, 619, 52 S.Ct. 285].) [4b] These well established rules provide us with ample warrant to consider the Board's argument about how the contract clause should affect our interpretation of article XIII B.

We turn, then, to the argument's merits. In essence, the Board contends that the City's power to spend is the security for its pension obligations and that any restriction of the power ipso facto reduces the value of its employees' pension rights. This reduction in value, according to the Board, constitutes a "potential" impairment of the City's contractual obligations.

To establish this point on summary judgment, the Board submitted declarations in which experts applied techniques of financial analysis to predict [2 Cal.4th 582] the effect of a spending limit on the hypothetical market value of an employee's interest in retirement benefits. The trial court sustained objections to these declarations on relevance grounds. Even without such declarations, however, we may assume for argument's sake, as do the parties, that a spending limit has at least a theoretical effect on the security of the City's retirement obligations. In the Board's view, "an impairment occurs when the State changes the law so as to erode the ability of the City to perform, whether a breach necessarily follows or not." fn. 10

The Board relies, by analogy, on cases in which the high court refused to enforce state laws that purported to disable cities from levying taxes to repay municipal bonds. (See, e.g., Wolff v. New Orleans (1881) 103 U.S. 358, 365-369 [26 L.Ed. 395, 398-399]; Von Hoffman v. City of Quincy (1867) 71 U.S. 535, 554-555 [18 L.Ed. 403, 410].) These cases stand for the proposition that a state may not authorize a city to contract and then restrict its taxing power so that it cannot fulfill its obligations. fn. 11 (Wolff v. New Orleans, supra, 103 U.S. at pp. 367-369 [26 L.Ed. at pp. 399-400]; Von Hoffman v. City of Quincy, supra, 71 U.S. at pp. 554-555 [18 L.Ed. at p.

410]; cf. United States Trust Co. v. New Jersey (1977) 431 U.S. 1, 24, fn. 22 [52 L.Ed.2d 92, 111, 97 S.Ct. 1505].) Underlying such decisions, at least implicitly, is the idea that "[t]he principal asset of a municipality is its taxing power" and that "[a]n unsecured municipal security is therefore merely a draft on the good faith of a municipality in exercising its taxing power." (Faitoute Co. v. Asbury Park (1942) 316 U.S. 502, 509 [86 L.Ed. 1629, 1635, 62 S.Ct. 1129]; cf. Von Hoffman v. City of Quincy, supra, 71 U.S. at p. 555 [18 L.Ed. at p. 410].)

By analogy to these cases, the Board argues that the contract clause would also invalidate a state law purporting to disable a municipality from spending money to satisfy its contractual obligations. While there is support for the proposition, the relevant cases involve statutes specifically enacted for the purpose of repudiating particular contractual duties rather than laws imposing budgetary restrictions. In United States Trust Co. v. New Jersey (supra, 431 U.S. 1, 17-28 [52 L.Ed.2d 92, 106-113]) the high court declared unenforceable a statute intended to abrogate a port authority's express covenant to its bondholders not to make unauthorized expenditures out of revenues designated for repayment of the bonds. Similarly, in Valdes v. Cory ((1983) 139 Cal.App.3d 773, 789-791 [189 Cal.Rptr. 212]), the Court of Appeal ordered the state Controller and other public employers to make [2 Cal.4th 583] periodic payments to the Public Employees' Retirement Fund despite legislation intended to abrogate the underlying contractual and statutory duties.

Unlike the laws at issue in the cited cases, article XIII B does not repudiate, or even modify, any contractual right or obligation. In. 12 Article XIII B can more accurately be said to bring retirement obligations under the umbrella of an overall spending limit, but even this limited statement is an oversimplification. In fact, other provisions of the law provide substantial protection for retirement obligations, even in the face of budgetary competition. Specifically, the City has mandatory duties to make periodic payments to its retirement funds in amounts sufficient to keep the funds actuarially sound (Gov. Code, §§ 20741 et seq. [contributions to Public Employees' Retirement Fund], 45341 et seq. [contributions to single-employer plans]; see generally Valdes v. Cory, supra, 139 Cal.App.3d 773); and article XIII A permits the City to recover the cost of such contributions without regard to the constitutional maximum tax rate. (See Carman, supra, 31 Cal.3d 318.)

Nor does article XIII B provide a strong incentive for a governmental entity to attempt to avoid its retirement obligations. This is because each year's spending limit reflects the prior year's retirement contributions and other appropriations, adjusted to account for the change in population and the cost of living. In. 13 (§§ 1, 5.) Thus, the City's high retirement costs in the base year have been reflected in subsequent years by higher and higher adjusted spending limits. Under section 11, this court's determination that retirement contributions are subject to limitation will entail a corresponding increase in the City's base-year and current spending limits. Moreover, if the voters wish to increase discretionary spending in other areas they may do so by the vote of a simple majority. (§ 4.) We note that as of March 1990, voters in 117 jurisdictions had considered proposals to increase spending limits to permit the appropriation of revenues already collected. Of these proposals, 106 were approved. (Cal. Leg., 1990 Revenue and Taxation Reference Book, at p. 196 (1990).)

While it can be argued that any budget entails a theoretical reduction in the security of the budgeted obligations, more is required to establish a serious doubt as to a law's validity under the contract clause. Particularly in [2 Cal.4th 584] this area, "'[t]he Constitution is "intended to preserve practical and substantial rights, not to maintain theories" [citation].'" (City of El Paso v. Simmon (1965) 379 U.S. 497, 515 [13 L.Ed.2d 446, 458, 85 S.Ct. 577], quoting Faitoute Co. v. City of Asbury Park, supra, 316 U.S. at p. 514 [86 L.Ed. at p. 1637].) While the contract clause "appears literally to proscribe 'any' impairment ... 'the prohibition is not an absolute one and is not to be read with literal exactness like a mathematical formula.' " (United States Trust Co. v. New Jersey, supra, 431 U.S. at p. 21 [52 L.Ed. 2d at p. 109], quoting Home Building & Loan Assn. v. Blaisdell (1934) 290 U.S. 398, 428 [78 L.Ed. 413, 423, 54 S.Ct. 231, 88 A.L.R. 1481].)

The threshold inquiry under the contract clause is "whether the state law has, in fact, operated as a substantial impairment of a contractual relationship." (Allied Structural Steel Co. v. Spannaus (1978) 438 U.S. 234, 2441 [57 L.Ed.2d 727, 736, 98 S.Ct. 2716].) Viewing article XIII B with reference to the whole system of law of which it is a part (cf. Bowland v. Municipal Court (1976) 18 Cal.3d 479, 489 [134 Cal.Rptr. 630, 556 P.2d 1081]), it cannot fairly be said that article XIII B has operated as a substantial impairment. Its effect, rather, has been to require governmental entities to reduce the overall growth in appropriations by reducing expenditures not required by law, except where the voters have chosen to increase the spending limit. A governmental entity that decided to make discretionary appropriations in other areas rather than legally required contributions to retirement funds might well thereby violate the contract clause (Valdes v. Cory, supra, 139 Cal.App.3d 773), but it would not be acting under the aegis or compulsion of article XIII B.

While we must construe a provision to avoid serious doubts as to its constitutionality, the "avoidance of a difficulty will not be pressed to the point of disingenuous evasion." (Moore Ice Cream Co. v. Rose (1933) 289 U.S. 373, 379 [77 L.Ed. 1265, 1270, 53 S.Ct. 620].) The manifest purpose of Proposition 4 was to limit the overall growth of governmental appropriations. To remove from the spending limit such a large category of appropriations as retirement contributions would do violence to that goal. Under these circumstances, the Board's constitutional arguments do not justify a departure from the plain statement that contributions to retirement funds are subject to limitation.

The decision of the Court of Appeal is reversed.

Lucas, C. J., Arabian, J., Baxter, J., and George, J., concurred. [2 Cal.4th 585]

MOSK, J.

I dissent. The majority's holding that retirement contributions are subject to the limitation of section 1 of article XIII B of the California Constitution is based entirely on a literal reading of the language of section 5 of article XIII B (hereafter section 5) and the rule of statutory construction that a specific provision relating to a particular subject will govern over a more general provision relating to the same subject. That is, even though retirement contributions may be classified as an indebtedness under subdivision (a) of section 9 of article XIII B (hereafter section 9(a)), the majority conclude that section 5 must prevail because it refers specifically to contributions to retirement funds. In the view of the majority, the section 5 inclusion of retirement fund contributions is an exception to the general provision of section 9(a).

This holding is not only in violation of well-established rules of statutory construction, but is contrary to the intent of the voters in adopting article XIII B of the state Constitution (hereafter article XIII B). It is clear from the legislative history of that provision that the voters intended to exclude retirement contributions as an indebtedness under section 9(a). They were specifically told in the ballot pamphlet analysis by the Legislative Analyst that the government's liability to make payments into a retirement fund was an "indebtedness" under article XIII B. This statement is a persuasive indication of the intent of the voters since, as the majority recognize, it must be assumed that they considered it in voting on the measure.

The majority reject the conclusion that logically follows from the Legislative Analyst's statement. They east doubt on its correctness because it is a "nonjudicial interpretation" of the language of article XIII B. But this may be said of any statement in the ballot pamphlet. In attempting to discern the intent of the voters, the legal persuasiveness of the analysis is not the standard; the purpose of consulting the ballot pamphlet is to determine what the voters intended, assuming, as we must, that they considered the statements made therein. The majority find the Legislative Analyst's conclusion to be unpersuasive because "there is no indication" that he considered the language of section 5 in making his analysis. But there is no reason to suppose that he informed the voters that pension contributions are an indebtedness under article XIII B without considering the other provisions of the article, including section 5. The issue is not whether he was correct in his analysis of the measure in the hindsight of a court considering the issue more than a decade after it was adopted, but the understanding of the voters as to the meaning of these provisions.

Another reason given by the majority for rejecting the Legislative Analyst's conclusion is that it contradicts section 5. But this is circular reasoning, for it assumes the answer to the question at issue. The problem posed by [2 Cal.4th 586] this case is whether pension contributions are excluded from the spending limitation as an indebtedness under section 9(a), or whether they are included in view of the language of section 5. To conclude, as do the majority, that contributions are not an indebtedness because such a determination would be contrary to the meaning of section 5, presupposes that section 5 prevails over section 9(a). That, of course, is the very issue under consideration.

In sum, there is no escaping the fact that the voters were expressly told by the Legislative Analyst that pension contributions were exempt from the spending limitation under article XIII B. The majority, instead of accepting the fact that this was the voters' understanding and attempting to harmonize sections 5 and 9(a) in accordance with that understanding, hold that section 5 dominates, thereby disregarding the intent of the electorate.

The result reached by the majority is particularly inappropriate in the present case because sections 5 and 9(a) may be harmonized so as to give effect to both provisions. The majority disregard a rule of construction critical in the present context, i.e., that a court must attempt to reconcile provisions relating to the same subject matter to the extent possible, so as to avoid substantially nullifying the effect of any part of an enactment. (Lungren v. Deukmejian (1988) 45 Cal.3d 727, 735 [248 Cal.Rptr. 115, 755 P.2d 299]; County of Los Angeles v. State of California (1987) 43 Cal.3d 46, 58 [233 Cal.Rptr. 38, 729 P.2d 202]; People v. Craft (1986) 41 Cal.3d 554, 560 [224 Cal.Rptr. 626, 715 P.2d 585].) The holding that section 5 is an exception to section 9(a) results in practically nullifying the effect of the latter provision. According to the majority's own analysis, retirement contributions constitute "one of the largest categories of local governmental spending." Such contributions are undoubtedly indebtedness of the city, a proposition the majority accept, at least for the sake of argument. To assume that the electorate chose in section 9(a) to except all indebtedness existing on January 1, 1979, from the spending limitation, fin. 1 but not to include within such indebtedness "one of the largest categories of governmental spending," results in a significant abrogation of section 9(a).

This consequence is particularly unwarranted in the present case because sections 5 and 9(a) may be reconciled so as to give effect to both provisions. That is, section 5 may be construed as referring to pension funds established [2 Cal.4th 587] after January 1, 1979. Section 9(a), on the other hand, applies to funds established prior to that date to fulfill the city's obligations to meet an "indebtedness." This construction is consistent with both the language of section 5-it provides that a government entity "may establish" such funds

as it "shall deem reasonable and proper," implying establishment of funds at a future time-and the general rule that constitutional provisions are applied prospectively. (In re Marriage of Bouquet (1976) 16 Cal.3d 583, 587 [128 Cal.Rptr. 427, 546 P.2d 1371]; Mannheim v. Superior Court (1970) 3 Cal.3d 678, 686 [91 Cal.Rptr. 585, 478 P.2d 17].)

The majority reject an alternate means offered by the Board of Supervisors for the City and County of San Francisco (board) to harmonize the two sections. The board asserts that if the government is required by contract to satisfy its obligation to pay pensions by making appropriations to a fund for that purpose, this constitutes a debt, not subject to the spending limitation under section 9(a). But if no such contractual requirement exists, and the government chooses as a matter of discretion to establish a pension fund as a means of accruing a reserve for the payment of pensions, then this is not an indebtedness, and the contributions to such a fund would be subject to the limitation.

The majority respond to this suggested means of harmonizing the two sections by asserting that section 5 creates an exception to section 9(a), and therefore there is no reason to attempt to harmonize the two sections. As discussed above, however, the view that section 5 is an exception to section 9(a) is untenable because it results in practically negating the effect of the latter provision.

The second answer to the board's theory offered by the majority is that the city could evade section 5 by "satisfying its contractual obligations." But this is exactly what section 9(a) requires, if such obligations are indebtedness incurred before January 1, 1979. Contrary to the majority, the board's suggestion would not nullify the express declaration in section 5 that retirement contributions are subject to limitation, for contributions to a pension fund not required to be established by contract would be included in the limitation.

Finally, in my view Carman v. Alvord (1982) 31 Cal.3d 318 [182 Cal.Rptr, 506, 644 P.2d 192] (Carman), supports the conclusion that retirement contributions are an indebtedness under section 9(a). Carman involved the construction of article XIII A of the California Constitution (hereafter article XIII A). Subdivision (b) of section 1 of article XIII A (hereafter subdivision [2 Cal.4th 588] (b)) exempts from the 1 percent limit on ad valorem taxes on real property imposed by section 1, subdivision (a) of the article "taxes to pay the interest and redemption charges on ... any indebtedness approved by the voters prior to January 1, 1978 ...."

The voters of the City of San Gabriel had, many years prior to 1978, approved a measure authorizing the city to levy a tax to fund the city's employee retirement system. After article XIII A became effective, the city levied a special tax for that purpose. The plaintiff filed an action alleging that the tax was unconstitutional because it exceeded the 1 percent limit on ad valorem real property taxes.

We held that an employer's duty to pay pensions promised and earned on terms substantially equivalent to those offered when the employee entered public service was a vested contractual right. Our opinion reasoned that the term "any indebtedness," as used in subdivision (b), includes obligations arising out of a city's pension plan, and the term "interest and redemption charges" refers to "the sums ... necessary to avoid default on obligations to pay money, including those for pensions." (Carman, supra, 31 Cal.3d at p. 328; accord, City of Fresno v. Superior Court (1984) 156 Cal.App.3d 1137, 1145-1146 [202 Cal.Rptr. 313]; City of Watsonville v. Merrill (1982) 137 Cal.App.3d 185, 193 [186 Cal.Rptr. 857].)

The language of subdivision (b) is similar to that of sections 9(a) and 8(g) of article XIII B. Unless there is some persuasive reason to interpret the provisions in the two articles differently, they should be construed as having the same meaning. Nevertheless the majority assert that the term "indebtedness" has a different meaning in the two provisions because article XIII A does not have a provision similar to section 5, making contributions to retirement funds subject to the spending limitation.

But the majority fail to point to any substantive difference in a city's obligations under article XIII A and article XIII B which would justify the conclusion that the duty to pay pensions or to fund a pension system for that purpose constitutes an "indebtedness" under one but not the other. Even if the meaning of the term "indebtedness" may vary, depending on the context in which it is used, the meaning attributed to it must relate to the nature of the obligation involved. Carman points out that the term "indebtedness" encompasses " 'obligations which are yet to become due as [well as] those which are already matured' " (31 Cal.3d at p. 327), and in support of its conclusion it relies on a case holding that the term "indebtedness" means "a complete and absolute liability to the extent that payment must ultimately be made ...." (County of Shasta v. County of Trinity (1980) 106 Cal.App.3d 30, 38 [165 Cal.Rptr. 18].) There can be no question that the obligation to [2 Cal.4th 589] pay pensions comes within these definitions. It is, therefore, an indebtedness, and is exempt from the spending limitation.

Moreover, as the Court of Appeal noted, articles XIII A and XIII B "are complementary fiscal measures designed to limit the government's ability to raise and spend tax revenues." This view is subscribed to by this court. (City of Sacramento v. State of California (1990) 50 Cal.3d 51, 59, fn. 1 [266 Cal.Rptr. 139, 785 P.2d 522].) Since, as we held in Carman, a government entity may impose a tax to fund pension payments without regard to the tax limitation of article XIII A, it is anomalous to hold, as do the majority, that the voters intended to prohibit the use of the funds generated for this purpose without a compensating reduction in other government expenditures.

I would affirm the judgment of the Court of Appeal.

KENNARD, J.

I dissent. Article XIII B of the California Constitution (hereafter article XIII B) limits state and local governments' ability to spend tax revenues. In general, a public entity can spend no more than it spent the year before, adjusted for changes in population and the cost of living. This limitation does not apply to all government spending, but only to spending falling within the constitutional definition of "appropriations subject to limitation." (Art. XIII B, § 1.) The majority holds that all contributions that a public entity makes to a retirement fund for its employees are "appropriations subject to limitation" and therefore subject to the article XIII B limit. This holding is based on a superficial analysis of the relevant constitutional provisions. A more complete analysis reveals that contributions to employee retirement funds are exempt from the article XIII B limit when the public entity makes them under an obligation that existed on January 1, 1979.

A provision of article XIII B exempts all "debt service" appropriations from the spending limit. (Art. XIII B, § 9, subd. (a).) In this context, "debt service" is defined as "appropriations required to pay the cost of interest and redemption charges, including the funding of any reserve or sinking fund required in connection therewith, on indebtedness existing or legally authorized as of January 1, 1979, or on bonded indebtedness thereafter approved according to law by a vote of the electors of the issuing entity voting in an election for that purpose." (Id., § 8, subd. (g).)

A public entity's mandatory contributions to an employee retirement fund constitute debt service. This court so held in Carman v. Alvord (1982) 31 Cal.3d 318, 327-328 [182 Cal.Rptr. 506, 644 P.2d 192]. Although in that case we construed a provision of article XIII A of the California Constitution, rather than the "debt service" provisions of article XIII B, these two articles [2 Cal.4th 590] are closely related and the language of the relevant provisions is virtually identical. In. 1 There is no sound reason to conclude that the electorate intended to give the same words different meanings in these related and complementary parts of the state Constitution. Accordingly, mandatory contributions to an employee retirement fund are exempt from the article XIII B spending limit as "debt service" if the contributions are made under an obligation existing on January 1, 1979.

The conclusion that mandatory payments to pre-1979 retirement funds are exempt as debt service is fortified by the analysis of the Legislative Analyst included in the voter pamphlet for the election at which article XIII B was enacted. In relevant part, it read: "[A] local government with an unfunded liability in its retirement system could appropriate its excess revenues to reduce the liability, as such an appropriation would be considered a payment toward a legal 'indebtedness' under this ballot measure." (Ballot Pamp., Proposed Amends. to Cal. Const. with arguments to voters, Special Statewide Elec. (Nov. 6, 1979) p. 20, italics added.) Stated more simply, payments to existing employee retirement funds will be exempt from the article XIII B spending limit as debt service. The majority concedes this is what the Legislative Analyst's words mean, but it asserts that the Legislative Analyst was mistaken. On the contrary, the Legislative Analyst's conclusion is the most reasonable interpretation of article XIII B's language. Moreover, the Legislative Analyst's words are persuasive evidence of the voters' intent in enacting article XIII B because the voters had those words before them, as part of the voters' pamphlet, when they were deciding how to vote, and none of the other statements in the pamphlet disputed this interpretation.

The majority relies on a provision of article XIII B that expressly refers to employee retirement contributions. It states: "Each entity of government may establish such contingency, emergency, unemployment, reserve, retirement, sinking fund, trust, or similar funds as it shall deem reasonable and proper. Contributions to any such fund, to the extent that such contributions are derived from the proceeds of taxes, shall for purposes of this Article constitute appropriations subject to limitation in the year of contribution. Neither withdrawals from any such fund, nor expenditures of ... such withdrawals, nor transfers between or among such funds, shall for purposes of this Article constitute appropriations subject to limitation." (Art. XIII B, § 5, italics added.)

To be sure, this provision (hereafter section 5) necessarily contemplates that some contributions to employee retirement funds are subject to the **[2 Cal.4th 591]** article XIII B spending limit. But the majority reads it more expansively. The majority concludes that under section 5 all contributions to employee retirement funds are subject to the article XIII B spending limit, and that the debt service provisions, to the extent they provide a basis for exempting such retirement contributions from the article XIII B spending limit, must be disregarded because they fail to mention retirement fund contributions by name. This reasoning does not withstand scrutiny.

Putting aside retirement contributions, there is a need to reconcile section 5 with article XIII B's "debt service" provisions because both refer expressly to reserve and sinking funds. Section 5 includes payments to reserve and sinking funds with retirement contributions as appropriations subject to the article XIII B spending limit, whereas the "debt service" provisions state that payments to reserve and sinking funds may qualify as debt service that is exempt from the article XIII B limit. The only way to give effect to both provisions, as required by accepted rules of statutory and constitutional construction (see, e.g., County of Los Angeles v. State of California (1987) 43 Cal.3d 46, 58 [233 Cal.Rptr. 38, 729 P.2d 202]), is to divide reserve and sinking funds into

two categories, so that some of the funds are subject to limitation under section 5 while others are exempt from limitation under the "debt service" provisions. This is easily done.

Section 5 speaks prospectively ("Each entity ... may establish such [reserve and sinking] ... funds ....") and therefore it is reasonably interpreted to apply only to reserve or sinking funds established after article XIII B appeared on the legal horizon. The "debt service" provisions, by contrast, look generally to the past. They provide an exemption for "indebtedness existing or legally authorized as of January 1, 1979." All payments made to reserve or sinking funds in existence on that date, and which otherwise meet the constitutional definition of "debt service," are exempt.

Thus, a fair reading of article XIII B compels the conclusion that payments to reserve and sinking funds can and must be divided between those made to funds established on or before January 1, 1979 (and therefore exempt) and those made to funds established afterward (and so not exempt). If payments to reserve and sinking funds can and must be so divided, then should not contributions to retirement funds (which are a kind of reserve fund) be divided in the same manner? The majority gives no satisfactory answer to this question.

Had section 5 been intended to establish an exception to the "debt service" exemption, as the majority concludes, it would have been logical to place [2 Cal.4th 592] section 5 with the "debt service" provisions, or at least to include within section 5 a reference to those provisions. Section 5's location distinctly apart from the "debt service" provisions, and the absence of any cross-reference to those provisions, suggests that section 5 was intended to serve a different purpose. That purpose is not difficult to discern. Rather than specifying whether particular funds are or are not exempt from the article XIII B limit, the primary purpose of section 5 is to explain how the article XIII B limit works when applied to those funds that are not exempt. The main point of section 5 is that in the case of various kinds of nonexempt reserve funds maintained by public entities, the article XIII B limit applies when the government makes payments into the fund, and not when payments are made out of the fund. This overriding purpose is in no way frustrated by a conclusion that certain fund payments (that is, those to service preexisting debt) are not subject to the article XIII B limit at all.

The majority relies on the rule of statutory and constitutional construction that a specific provision prevails over a general provision. But this rule applies only when the provisions at issue are inconsistent. (See Code Civ. Proc., § 1859 ["[W]hen a general and particular provision are inconsistent, the latter is paramount to the former."]; International Assn. of Fire Fighters Union v. City of Pleasanton (1976) 56 Cal.App.3d 959, 976 [129 Cal.Rptr. 68].) "Two statutes dealing with the same subject are given concurrent effect if they can be harmonized, even though one, is specific and the other general." (People v. Price (1991) 1 Cal.4th 324, 385 [3 Cal.Rptr. 106, 821 P.2d 610].) Properly read, section 5 is not inconsistent with the "debt service" provisions of article XIII B; these provisions can and should be harmonized. Under the "debt service" provisions, a public entity's contributions to an employee retirement fund are exempt from the article XIII B limit if they are made to discharge an obligation that existed on January 1, 1979; all other contributions to employee retirement funds are subject to that limit. I would so hold.

FN 1. All further references to section numbers, unless otherwise noted, are to sections of article XIII B of the California Constitution.

 $FN\ 2$ . The Board also excluded appropriations for certain other employee benefits, including contributions to the health service and social security systems. Only the treatment of retirement contributions is at issue in this case.

FN 3. The \$40,336,171 amount represents the effect of excluding "mandatory employee benefits" (see fn. 2, ante), which include retirement contributions, from both the base-year limit and the 1988-1989 limit. In other words, \$40,336,171 is the amount by which the City's appropriations for "mandatory employee benefits" grew, between the base year and 1988-1989, in excess of the permissible rate of growth set out article XIII B.

FN 4. Section 5 provides: "Each entity of government may establish such contingency, emergency, unemployment, reserve, retirement, sinking fund, trust, or similar funds as it shall deem reasonable and proper. Contributions to any such fund, to the extent that such contributions are derived from the proceeds of taxes, shall for purposes of this Article constitute appropriations subject to limitation in the year of contribution. Neither withdrawals from any such fund, nor expenditures of (or authorizations to expend) such withdrawals, nor transfers between or among such funds, shall for purposes of this Article constitute appropriations subject to limitation." (Italics added.)

FN 5. Section 9, subdivision (a) (hereafter section 9(a)), provides: "'Appropriations subject to limitation' ... do not include ... Appropriations for debt service." (Italics added.)

Section 8, subdivision (g) (hereafter section 8(g)), provides: "'Debt service' means appropriations required to pay the cost of interest and redemption charges, including the funding of any reserve or sinking fund required in connection therewith, on indebtedness existing or legally authorized as of January 1, 1979, or on bonded indebtedness thereafter approved according to law by a vote of the electors of the issuing entity voting in an election for that purpose." (Italics added.)

FN 6. The Legislature has similarly concluded that the state's retirement contributions are subject to limitation. (See 1991-1992 Budget, Stats. 1991, ch. 118,  $\S$  3.60, subd. (c).)

FN 7. Specifically, the maximum tax rate does not apply "to ad valorem taxes or special assessments to pay the interest and redemption charges on (1) any indebtedness approved by the voters prior to July 1, 1978, or (2) any bonded indebtedness for the acquisition or improvement of real property approved on or after July 1, 1978, by two-thirds of the votes cast by the voters voting on the proposition." (Cal. Const., art. XIII A, § 1, subd. (b).)

FN 8. The City, in its Comprehensive Annual Financial Report for the year ended June 30, 1988, reported retirement contributions of approximately \$240 million. The City's appropriations limit for that year, which excluded retirement contributions, was approximately \$700 million.

FN 9. "No state shall ... pass any ... law impairing the obligation of contracts ...." (U.S. Const., art. I, § 10, cl. 1.)

FN 10. Because the Board's argument is so broad, and because the Board expressly disclaims any intent to assert a cause of action or defense under the contract clause, there is no need to remand for additional evidentiary proceedings.

FN 11. We rejected a similar challenge to article XIII A as premature in Amador Valley Joint Union High Sch. Dist. v. State Bd. of Equalization, supra, 22 Cal.3d at pages 238-242.

FN 12. For this reason, the rule that "'alterations of employees' pension rights must bear some material relation to the theory of a pension system and its successful operation'" (Miller v. State of California (1977) 18 Cal.3d 808, 816 [135 Cal.Rptr. 386, 557 P.2d 970], quoting Allen v. City of Long Beach (1955) 45 Cal.2d 128, 131 [287 P.2d 765]), has no bearing on this case.

FN 13. Proposition 111 liberalized the definition of "cost of living," thus permitting greater annual increases to the spending limit. (See § 8, subd. (e)(2), added by initiative measure in Primary Elec. (June 5, 1990).)

FN 1. Under subdivision (g) of section 8 of article XIII B (hereafter section 8(g)), "debt service" is defined as "appropriations required to pay the cost of interest and redemption charges, including the funding of any reserve or sinking fund required in connection therewith, on indebtedness existing or legally authorized as of January 1, 1979."

FN 1. Article XIII A limits real property taxes, but it exempts from this limit real property taxes imposed "to pay the interest and redemption charges on ... any indebtedness approved by the voters" before article XIII A was enacted. (Cal. Const., art. XIII A, § 1, subd. (b).)

Return to Top

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# F-7 2002 23

AS OF DATE: OCTOBER 14, 2003			
	YOSEMITE COMMUNITY COLLEGE DISTRICT I N C O M E .L E D G F R	RUN DATE:	OCTOBER 14, 2003
	RESPONSIBILITY BUDGET	EY 03	2 2211
AGCOUNT NUMBER DESCRIPTION	77.07.7		IMPAT TETAL
HEALTH FEES -	SUMMER	TZED	BALANC
2,03-SUMMR HEAL	C0416	9.00	
7000 7000 7000		77.00-	e an armine de la companya de la com
A27562 11/02-SUMMR HEAL FEE A27562 10/02-SIMMP HEAL FEE	The state of the s	9.00-	
1	C1126 C1017	1.501	
562 07/02-SUMMR HEAL	008280	2.50	
DEFERRAL-5702 MOC XFR	4X003		
4-1101-8876-10	0000-000 * TOTAL * 53.890	5.00	и С
	TOTAL RESPONSIBILITY: 01 53,896.50	5.50	53.896.50-
	The second of th		
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Py 2612-23

RUN DATE: OCTOBER 14, 2003.

FY 03

YOSEMITE COMMUNITY COLLEGE DISTRICT INCOME

AS OF DATE: OCTOBER 14, 2003 REPORT ID: APPLDG-RESBGT

LEDGER

RESPONSIBILITY BUDGET	والمستونة والمست
ACCOUNT NUMBER TITLE CD NATE ANTICIPATED	UNREALIZED
4-102-8876-0000-000 ALTHERNATE ACCT # 000-000 HEALTH FEES - FALL	A STATE OF THE STA
EALTH 1/R 56.30,003 MJC RV+ JV163	3.512.00
/30/03	12.00
A27572	00.081
/03 A27572 02/03-FALL HEAL FEE RI C0319	210.00
2 UZ/OZ-FALD HEAL FEE KI COZI9 2 12/OZ-FALD HEAL FEE RI COI16	788,501
7,02 <u>— 827572 11/02-FAII, HEAL FEF</u> RT C1217	1.090.09
572 10/02+FALL HEAL PEE	1,139,00
A27572 08/02-FALL HEAL FEE RT C0920 A27572 07702-FALL HEAL FEE	841-1007-100-100-100-100-100-100-100-100-1
000 * TOTAL *	168,719.50
*** TOTAL RESPONSIBILITY, 02	168,719.50

[7 2602 m3

RUN DATE:

YOSEMITE COMMUNITY COLLEGE DISTRICT INCOME AS OF DATE: OCTOBER 14, 2003 REPORT ID: APPLDG-RESBGT

OCTOBER 14, 2003 PAGE 4 158,652,00-158,652,00-UNREALIZF FY 03 4,023.50 54,939.50 68,168.00 22,670.00 158,652.00 REALIZED 158,652.00 ANTICIPATED RESPONSIBILITY BUDGET LEDGER \*\*\* TOTAL RESPONSIBILITY. 03 \* TOTAL MTR HEALTH FEES - SPRING EE ACCOUNT NUMBER TETLE DATE DESCRIPTION

State of California	t	·		nool Mandated Cost Manual
	CLAIM FOR PAYMI nt to Government Code HEALTH FEE ELIMINA	Section 17561	For State Controller Use (19) Program Number (20) Date File// (21) LRS Input/	00029
(01) Claimant Identific S50150	cation Number:		Reimburse	ment Claim Data
(02) Mailing Address:	:		(22) HFE - 1.0, (04)(b)	\$ 39,067
Claimant Name			(23)	
Yosemite Community County of Location	College District		(24)	
Stanislaus Street Address			(25)	
P. O. Box 4065 City	State	Zip Code	(26)	
Modesto	CA	95352		
Type of Claim	Estimated Claim	Reimbursement Claim	(27)	
	(03) Estimated X	(09) Reimbursement	(28)	
	(04) Combined	(10) Combined	(29)	
	(05) Amended	(11) Amended	(30)	
Fiscal Year of	(06)	(12)	(31)	
Cost Total Claimed	2003-2004	2002-2003	(32)	
Amount	\$ 40,000	\$ 39,067	7	
Less: 10% Late Penalty	y, but not to exceed	(14)	(33)	
: Estimate Claim F	Payment Received	(15) \$ -	. (34)	
Net Claimed Amount		(16) \$ 39,067	(35)	
Due from State	(08) \$ 40,000	(17) \$ 39,067	(36)	
Due to State	φ 40,000	(18) \$ -	(37)	
(38) CERTIFICATION		φ	<u> </u>	
In accordance with the prov California for costs mandate	visions of Government Code &	17561, I certify that I am the officer 984, and Chapter 1118, Statutes of to 1096, inclusive.	authorized by the local agency t 1987, and certify under penalty o	o file claims with the State of of perjury that I have not violated
I further certify that there w such costs are for a new pr 1987.	as no application other than fr rogram or increased level of se	om the claimant, nor any grant or pa ervices of an existing program mand	nyment received, for reimbursem ated by Chapter 1, Statutes of 1	ent of costs claimed herein; and 984, and Chapter 1118, Statutes of
The amounts for Estimated mandated program of Chap	I Claim and/or Reimbursement oter 1, Statutes of 1984, and C	i Claim are hereby claimed from the hapter 1118, Statutes of 1987, set f	State for payment of estimated orth on the attached statements	and/or actual costs for the
Signature of Authoria	zed Officer	Da		
Juga M.	Dealt	. —	1/08/04	·
Teresa Scott	<u>.</u>	<del></del>	e Chancellor, Fiscal Servi	ces
or Print Name Name of Contac	t Parson or Claim	Tit		
Name of Contac	CI GISON OF CIAIIII	Telephone Numbe	er <u>(858) 514-8605</u>	5
SixTen and	Associates	E-Mail Addres	ss kbpsixten@aol.com	1



# MANDATED COSTS HEALTH FEE ELIMINATION CLAIM SUMMARY

FORM HFE-1.0

		Fiscal Year
(02) Type of Claim: Reimbursement	X	1 Jour Tour
Estimated		2002-2003
	Reimbursement	Reimbursement X

(03) List all the colleges of the community college district identified in form HFE-1.1, line (03)

(a) Name of College		(b) Claimed Amount			
. Modesto Junior College		29,489.03			
2. Columbia College	\$	9,578.46			
3.	\$	· -			
	\$	-			
4.	\$	<u></u>			
5.	\$				
6.	\$	<u> </u>			
8.	\$	<u>-</u>			
9.	\$	-			
10.	\$				
11.	\$				
12.	\$	-			
13.	\$	-			
14.	\$				
15.	\$				
16.	\$	*			
17.	\$	-			
18.	\$	-			
19.	\$	-			
20	\$	-			
	\$	-			
(04) Total Amount Claimed [Line (3.1b) + line (3.2b) + line (3.3b) +line (3.21b)]	\$	39,067			

[Line (10) - {line (11) + line (12)}]

\$

\$

34,989

<u>5,</u>500

29,489

Cost Reduction

(13) Total Amount Claimed

11) Less: Offsetting Savings, if applicable

(12) Less: Other Reimbursements, if applicable

State Controller's Office School Mandated Cost Manual

# Programs.

# MANDATED COSTS HEALTH FEE ELIMINATION

FORM HFE-1.2

	(	CLAIM S	UM	MARY						L_		
(01) Claimant:		1		Type of						Fis	cal Y	'ear
		[	Reim	burseme	∍nt	X						
Yosemite Community College			Estin	nated							20	02-2003
(03) Name of College		lumbia Co										
(04) Indicate with a check mark, the level at which h year. If the "Less" box is checked, STOP, do not com	ealth service	es were provi	ded d	luring the fi	scal ved.	year of re	imb	ursement in	comp	arison to the	1986	/87 fiscal
year. If the "Less" box is checked, STOP, do not com			SAM			RE						
			Х	— r								
								rect Cost	Indire	ct Cost of:		Total
							U	1001 0031		23.95%		
(05) Cost of Health Services for the Fiscal	year of C	laim					\$	69,718	\$	16,697	\$	86,415
(06) Cost of providing current fiscal year h	ealth serv	ices which	are	in exces	s o	f the			\$	-	\$	-
(07) Cost of providing current fiscal year h	ealth serv	rices at the	198	36/87 lev	el		\$	69,718	\$	16,697	\$	86,415
[Line (05) - line (06)]  (08) Complete Columns (a) through	 h (g) to p	orovide d	letai	il data f	or	——— health	fee	es	<b></b>		<u> </u>	
	(a)	(b)		(c)		(d)		(e)		(f)		(g)
Period for which health fees were collected	Number of Full-time Students		F Stu Edi	t Cost for ull-time ident per uc. Code 76355	He	ull-time Student alth Fees a) x (c)	s	nit Cost for Part-time tudent per uc. Code 76355	В	Part-time Student ealth Fees (b) x (e)	Fees Hi	dent Health That Could ave Been collected (d) + (f)
	697	2,310	\$	12.00	\$	8,364	\$	12.00	\$	27,720	\$	36,084
1. Per fall semester	004	1.056	\$	12.00	- t	7,488	\$	12.00	\$	23,472	\$	30,960
2. Per spring semester	624	1,956	Φ		۳		Ι	12.00	⁺		-	
	6	971	\$	9.00	\$	54	\$	9.00	\$	8,739	\$	8,793
3. Per summer session	<del> </del>				\$		<u> </u>		\$		\$	· _
4. Per first quarter			ļ		Ψ		L		+-		+-	
5 Paragond quarter					\$	-			\$	-	\$	
5. Per second quarter	<del> </del>				\$		T		\$		\$	-
6. Per third quarter	l		<u> </u>		L	<u> </u>					-	
(09) Total health fee that could have been	n collecte	d		[Line	(8.1	g) + (8.2g)	) + <i>-</i>	(8.6g)	]		\$	75,837
(10) Sub-total		<u> </u>		[Lin	ө (0	7) - line (0	9)]				\$	10,578
Cost Reduction											1	
(11) Less: Offsetting Savings, if applicable						\$	1,000					
(12) Less: Other Reimbursements, if app	DIICADIE				- "	0) (" '		L line (19)11			T*	.,
(13) Total Amount Claimed				(Lin	ie (1	υ) - (IIne (	11)	+ line (12)}}			\$	9,578

#### YOSEMITE COMMUNITY COLLEGE DISTRICT CALCULATION OF INDIRECT COST RATE, FISCAL YEAR 2001-2002

REFERENCE	DESCRIPTION	2001-2002
(CCFS 311)		
INSTRUCTIONAL ACTIVITY		
	Instructional Costs	
	Instructional Salaries and Benefits	32,859,663
	Instructional Operating Expenses	6,948,542
	Instructional Support Instructional Salaries and Benefits	70,327
	Auxiliary Operations Instructional Salaries and Benefits	
	TOTAL INSTRUCTIONAL COSTS 1	39,878,53
	Non-Instructional Costs	
	Non-Instructional Salaries and Benefits	6,175,022
	Instructional Admin. Salaries and Benefits	5,233,517
	Instructional Admin. Operating Expenses	1,652,662
	Auxiliary Classes Non-Inst. Salaries and Benefits	91,404
	Auxiliary Classes Operating Expenses	3,570
	TOTAL NON-INSTRUCTIONAL COSTS 2	13,156,17
· · · · · · · · · · · · · · · · · · ·		
	TOTAL INSTRUCTIONAL ACTIVITY COSTS 3 (1 + 2)	53,034,70
DIRECT SUPPORT ACTIVITY		
	Direct Support Costs	
	Instructional Support ServicesNon Inst. Salaries and Benefits	2,999,718
	Instructiona Support Services Operating Expeenses	
	Admissions and Records	552,218 1,031,544
	Counselling and Guidance	2,951,188
	Other Student Services	5,279,661
		3,279,001
	TOTAL DIRECT SUPPORT COSTS 4	12,814,329
TOTAL VINCENTIAL CONTRACTOR OF THE CONTRACTOR OF		
TOTAL INSTRUCTIONAL ACTIVITY COSTS		
AND DIRECT SUPPORT COSTS 5 (3+4)		65,849,036
· · · · · · · · · · · · · · · · · · ·		
	Indirect Support Costs	
	Operation and Maintenance of Plant	5,673,425
	Planning and Policy Making	2,793,925
	General Instructional Support Services	7,303,595
	TOTAL INDIRECT SUPPORT COSTS 6	
	ZOME DOME COSTS O	15,770,945
COTAL INSTRUCTIONAL ACTIVITY COSTS AND	DIRECT	
SUPPORT COSTS, AND TOTAL INDIRECT SUPP		
S + 6) = TOTAL COSTS		81,619,981
SUPPORT CO	OSTS ALLOCATION RATES	
ndirect Support Costs Allocation Rate =		
= 818 HOUSTON COOK COOK THE MARKET	Total Indirect Supports Costs (6)	
	Total Instructional Activity Costs	23.95%
	and Direct Support Costs (5)	
	and Short Support Costs (3)	
rect Support Costs Allocation Rate =		
J	Total Direct Support Costs (4)	24.16%
	Total Instructional Activity Costs (3)	
otal Compat Cont d'Il and		
otal Support Cost Allocation		48.11%

State of California

## MANDATED COSTS

FORM

HEALTH FEE ELIMINATION COMPONENT/ACTIVITY COST DETAIL	HF	E-2.1
(01) Claimant	Fiscal	Year
Yosemite Community College	2002-	-2003
(03) Place an "X" in column (a) and/or (b), as applicable, to indicate which health Service was provided by student health service fees for the indicated fiscal year.	(a) FY 1986/87	(b) FY of Claim X
Accident Reports	X	^
Appointments College Physician, surgeon Dermatology, Family practice Internal Medicine Outside Physician	X X X	X X X
Dental Services Outside Labs, (X-ray, etc.,) Psychologist, full services Cancel/Change Appointments Registered Nurse Check Appointments	X X X	X X X X
Assessment, Intervention and Counseling Birth Control Lab Reports Nutrition Test Results, office Venereal Disease Communicable Disease Upper Respiratory Infection Eyes, Nose and Throat Eye/Vision Dermatology/Allergy Gynecology/Pregnancy Service Neuralgic Orthopedic Genito/Urinary Dental Gastro-Intestinal Stress Counseling Crisis Intervention Child Abuse Reporting and Counseling Substance Abuse Identification and Counseling Eating Disorders Weight Control Personal Hygiene Burnout Other Medical Problems, list	X X X X X X X X X X X X X X X X X X X	× × × × × × × × × × × × × × × × × × ×
Examinations, minor illnesses Recheck Minor Injury	×	X
Health Talks or Fairs, Information Sexually Transmitted Disease Drugs Acquired Immune Deficiency Syndrome Child Abuse	X X X	X X X

State of California (C

## MANDATED COSTS

**FORM** 

<b>A2</b> 9	HEALTH FEE ELIMINATION COMPONENT/ACTIVITY COST DETAIL	HF	≣-2.1
(01) Claimant		Fiscal	Year
Yosemite Community Coll	lege District	2002-	2003
(03) Place an "X" in colum Service was provided	nn (a) and/or (b), as applicable, to indicate which health d by student health service fees for the indicated fiscal year.	(a) FY 1986/87	(b) FY of Claim
Birth Control/Fan Stop Smoking Library, Videos a		X X X	X X X
First Aid, Minor Eme First Aid Kits, Filled, Golf Carts for emerg	available for purchase/rent	X X	X X X
Immunizations Diphtheria/Tetan Measles/Rubella Influenza Information		X X X	X X X
Insurance On Campus Acci Voluntary Insurance Inquiry	ident y/Claim Administration	X X X	X X X
Laboratory Tests Do Inquiry/Interpreta Pap Smears		Х	x
Physical Examinatio Employees Students Athletes	ns	X X	X X
Medications Antacids Antidiarrheal Aspirin, Tylenol, Skin Rash Prepa Eye Drops Ear Drops		X X X X	X X X X
Toothache, oil cl Stingkill Midol, Menstrual Other, list		X X X	X X X
Parking Cards/Eleva Tokens Return Card/Key Parking Inquiry Elevator Passes Temporary Hand	<b>,</b>	× × ×	X X X

State of California

State of California Sc. 31 Mandaled Cost Mandale						
- Program 	MANDATED COSTS HEALTH FEE ELIMINATION COMPONENT/ACTIVITY COST DETAIL		PRM E-2.1			
01) Claimant		Fisca	l Year			
′osemite Community College		2002	-2003			
03) Place an "X" in column (a Service was provided by	a) and/or (b), as applicable, to indicate which health student health service fees for the indicated fiscal year.	(a) FY 1986/87	(b) FY of Claim			
Referrals to Outside Age Private Medical Doct Health Department Clinic Dental Counseling Centers Crisis Centers Transitional Living Family Planning Fac	acilities, battered/homeless women ilities	X X X X X X	X X X X X X			
Tests Blood Pressure Hearing Tuberculosis Reading Information Vision Glucometer Urinalysis Hemoglobin EKG		X X X X X X	X X X X X X			
Strep A Testing PG Testing Monospot Hemacult Others, list STD		X	X			
Miscellaneous Absence Excuses/P Allergy Injections Bandaids Booklets/Pamphlets Dressing Change Rest Suture Removal Temperature Weigh Information Report/Form Wart Removal Others, list:		X X X X X X X X	X X X X X X X X X			
Committees Wellness Environmental Disaster Planning Student Services Co	puncil	X X X	X X X X			

Academic Senate

#### YOSEMITE COMMUNITY COLLEGE DISTRICT CALCULATION OF INDIRECT COST RATE, FISCAL YEAR 2001-2002

For 02-03 claims

REFERENCE	DESCRIPTION	2001-2002
(CCFS 311)		2002.2002
INSTRUCTIONAL ACTIVITY		
	Instructional Costs	
	Instructional Salaries and Benefits	32,859,66
	Instructional Operating Expenses	6,948,54
	Instructional Support Instructional Salaries and Benefits	70,32
	Auxiliary Operations Instructional Salaries and Benefits	
	TOTAL INSTRUCTIONAL COSTS 1	39,878,53
	Non-Instructional Costs	
	Non-Instructional Salaries and Benefits	6,175,02
	Instructional Admin. Salaries and Benefits	5,233,51
	Instructional Admin. Operating Expenses	1,652,669
	Auxiliary Classes Non-Inst. Salaries and Benefits	91,40
	Auxiliary Classes Operating Expenses	3,570
	TOTAL NON-INSTRUCTIONAL COSTS 2	13,156,17
	TOTAL INSTRUCTIONAL ACTIVITY COSTS 3 (1 + 2)	53,034,70
DIRECT SUPPORT ACTIVITY		
OULLOAL ACTIVILI		
	Direct Support Costs	
	Instructional Support Services Non Inst. Salaries and Benefits	2,999,718
	Instructiona Support Services Operating Expeenses	552,218
	Admissions and Records	1,031,544
	Counselling and Guidance	2,951,188
	Other Student Services	5,279,661
·	TOTAL DIRECT SUPPORT COSTS 4	12,814,32
		12,014,32
OTAL INSTRUCTIONAL ACTIVITY COSTS		
ND DIRECT SUPPORT COSTS 5 (3 +4)		65,849,03
		05,045,05
	Indirect Support Costs	
	Operation and Maintenance of Plant	5,673,425
	Planning and Policy Making	2,793,925
	General Instructional Support Services	7,303,595
	TOTAL INDIRECT SUPPORT COSTS 6	15 770 04
<u> </u>		15,770,94
OTAL INSTRUCTIONAL ACTIVITY COSTS AND	DIRECT	
UPPORT COSTS, AND TOTAL INDIRECT SUPPO	ORT COSTS	<del></del>
+ 6) = TOTAL COSTS		P1 (10 00:
<u>·</u>		81,619,98
SUPPORT CO	STS ALLOCATION RATES	<del></del>
·		
direct Support Costs Allocation Rate =		
	Total Indirect Supports Costs (6)	
	Total Instructional Activity Costs	23.95%
	and Direct Support Costs (5)	
	(J)	
Support Costs Allocation Rate =		
	Total Direct Support Costs (4)	
	Total Instructional Activity Costs (3)	24.16%
	Total Instructional Activity Costs (3)	·
tal Support Cost Allocation		

### 1/84 Health Fee Elimination COLLEGE STUDENT HEALTH FEES

Yosemite	<u> </u>		····································	2002-0				
District	College	1,190	3.838	Fiscal Yea	ir <u>3,38/</u>	=		
Use a separate form 1.8	for each college campus v	vith stude	nt health	services.	0 1	=		
CALCULATION OF "	COLLECTIBLE FEES"	Summer or 1 <sup>st</sup> Qtr	Fall or 2nd Qtr	Winter/ 3" Otr	Spring/ 4th Qtr	٠		
1 A. Total FULL-TIME stu	udent enrollment	7	889		818			
B. Number of BOGG/w	aiver FULL-TIME students	./	192		194			
C. A subtract B (FULL-	TIME fee students)	6_	697		624			
D. FULL-TIME fee (e.g.	\$12.00/semester)	\$ 9	\$ 12	\$	\$ 12			
E. Line 1 C multiplied	by Line 1 D	\$ 54	\$ 8,364	\$\	\$7,488			
2 A. Total PART-TIME stu	udent enrollment	1,183	2,949		2563			
B. Number of BOGG/wa	aiver PART-TIME students	212	639		607	i I		
C. A subtract B ( PART	-TIME fee students)	971	2.310		1,956			
D. PART-TIME fee (e.g	. \$9.00/semester)	\$ 9	\$ 12	\$ /	\$ 12			
E. Line 2 C multiplied	by Line 2 D	\$ 8,739	\$27,720	\$ /	\$13,472	1/1/2		
3. Total collectible fees	: Add lines 1 E and 2 E	\$ 8,793.	\$36.084	\$	\$30,960	15,831		
ACTUAL STU	IDENT HEALTH SERVICES REV	ENUES		Am	ount	` ·		
4. A Total Student Heal	h Service Income per gene	ral ledger		\$ 8	81,833	<u> </u>		
B Less: Clinical Ser	vice Fees collected from st	udents _	In T	\$ 62	2537)			
C. Less: Service Fe	es collected for employee s	ervices		\$ //	,000>	-		
D. Less: Other prog	ram income (e.g. Medi-Cal)			\$	2.96	1		
5. TOTAL STUDENT FEES COLLECTED (LINE 4 A subtract B, C, D) \$ 80, 833								
state mandates in order for the discreported actual data or have provided based on your personal knowledge Employee Signature:	se State of California requires that so strict to receive reimbursement. You ded a good faith estimate which you e or information." This information is the strict of the	"certify under sused for cos	r penalty of post accounting  Date  Trace  or Title	erimes that yerjury to be trepurposes onle	ue and corre	ct ·		
If you have any questions, please	contact; TO _							
LEEWOE OCHMIL ILIIO IM OLIM								

### 1/84 Health Fee Elimination COLLEGE STUDENT HEALTH FEES

Vosemites	MIC			2002-		
District	College	8,384	- 19,402	iscal Yea	ar <i>17,915</i>	<i>.</i> :
Use a separate fo	orm 1.8 for each college campus w	vith stude	nt health s	services.		=
	TION OF "COLLECTIBLE FEES"	Summer or 1 <sup>st</sup> Qtr	Fall or 2 <sup>nd</sup> Qtr	Winter/ 3rd Otr	Spring/ 4th Qtr	
1 A. Total FULL-	TIME student enrollment	175	5.878	. (	5,754	
B. Number of E	BOGG/waiver FULL-TIME students	53	1,675		1,699	
C. A subtract E	3 (FULL-TIME fee students)	122	4,203		4,055	
D. FULL-TIME	fee (e.g. \$12.00/semester)	\$ 9	\$ /2	\$	\$ /2	i·
E. Line 1 C m	ultiplied by Line 1 D	\$ 4098	\$ 50,436	\$	\$ 48,660	
2 A. Total PART-	TIME student enrollment	8,209	13.524		12,161	
B. Number of E	OGG/waiver PART-TIME students	2,502	3,855		3,592	ł
C. A subtract E	3(PART-TIME fee students)	5.707	9,669	-\	8.569	
D. PART-TIME	fee (e.g. \$9.00/semester)	\$ 9	\$ 12	\$ \	\$ 12	4
E. Line 2 C m	ultiplied by Line 2 D	\$ 51,363	\$ 116028	\$	\$102,828	,
3. Total collect	fible fees: Add lines 1 E and 2 E	\$ 52.46	\$166,464	\$	\$151,488	1210143
AC	CTUAL STUDENT HEALTH SERVICES REV	ENUES		Am	ount	]
4. A Total Stud	ent Health Service Income per gene	ral ledger		\$ 398.	253	_
B Less: Cl	inical Service Fees collected from st	udents In	TENSST.	\$ /14	3577	
C. Less: Se	ervice Fees collected for employee s	ervices		\$ 15	500>	1
D. Less: Of	ther program income (e.g. Medi-Cal)	).		\$		_
5. TOTAL STUI	DENT FEES COLLECTED (LINE 4 A	subtract	B, C, D)	\$ 378	139F L. 753	
state mandates in ord reported actual data o	CATION: The State of California requires that some for the district to receive reimbursement. Your have provided a good faith estimate which you alknowledge or information." This information	u "certify under is used for co	r penalty of p st accounting	erjury to be t purposes on	rue and corre	== ect
Employee Signature:	Medand X. Canglese	Positio	Dat hollen n or Title	e <u>10   14</u>	103	
If you have any guest	ions, please contact		, at			
PLEASE SUBMIT TH	IS INFORMATION BY; TO				<del></del> ,	
	A A A A A A A A A A A A A A A A A A A		•		/ISED August 2	2003

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### 1/84 Health Fee Elimination DISTRICT / COLLEGE COST OF SERVICES RECAP

<u>Josemite</u> District	2002-	<del></del> ·		
Use this form to summarize data for each or you need to provide supporting document				
	MUC	CC		
General Ledger Expense Data	College 1	College 2	College 3	District Total
General Ledger total direct expenses for Student Health Services	327,069	64.718	_	396,787
2. Add: Other G/L Accounts: Counseling, Instructional materials, student health insurance costs, etc.	<del>0</del> -	<b>o</b> -	'/ <sub>'</sub>	Đ.
3. Reverse (add) any revenue offsets or cost abatements which reduce general ledger expense accounts (e.g. lab fees)	(14.25)	· (2,534)	. —	216.891°
4. Delete (subtract) unallowable costs for sabbaticals, athletic program expenses, etc. in student health services ledger accounts	D	<i>\P</i> -	. —	6
TOTAL: STUDENT SERVICE EXPENSES Line 1 + Line 2 + Line 3 - Line 4.	312,712	67.184	-	379,896
Less: Cost of activities in excess of 1986-87 level of student services	b	0	_	<del>- b</del>
TOTAL CLAIMABLE STUDENT SERVICES EXPENSES FROM ALL SOURCES	312,712	67.184		379.896
EMPLOYEE CERTIFICATION: The State of California requistate mandates in order for the district to receive reimburse reported actual data or have provided a good faith estimate based on your personal knowledge or information." This interpolates Signature:	ment. Your sig which you "cert	mature on this f ify under penalt	orm certifies the	at you have e true and correc only.
Employee Signature:  Lander Campbell  Employee Name: (print)		Position or Title	1/0-	·
If you have any questions, please contact				
PLEASE SUBMIT THIS INFORMATION BY	; TO _			·

**Community College Mandated Cost Manual** State Controller's Office For State Controller Use only Program **CLAIM FOR PAYMENT** (19) Program Number 00234 Pursuant to Government Code Section 17561 (20) Date Filed \_ **HEALTH FEE ELIMINATION** (21) LRS Input \_\_\_ (01) Claimant Identification Number: CC50150 Reimbursement Claim Data A B (02) Claimant Name (22) HFE-1.0, (04)(b) Yosemite Community College District 151,046 County of Location (23)Stanislaus Street Address (24)P. O. Box 4065 R City State Zip Code E (25)95352 Modesto CA Type of Claim **Estimated Claim** Reimbursement Claim (26)X (03) Estimated (09) Reimbursement X (27)(04) Combined (10) Combined (28)(05) Amended (11) Amended (29)(06)(12)(30)Fiscal Year of Cost 2003-2004 2003-2004 (07)(13)(31)Total Claimed Amount 166,000 151,046 (14)(32)Less: 10% Late Penalty (15)(33)\_ಲss : Prior Claim Payment Received (16)(34)Net Claimed Amount \$ 151.046 (80)(17)(35)Due from State 166,000 151,046 (18)(36)Due to State (37) CERTIFICATION OF CLAIM In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive. I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant. The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct. Signature of Authorized Officer (USE BLUE INK) Date Teresa Scott Vice Chancellor, Fiscal Services Type or Print Name Name of Contact Person for Claim Telephone Number: (858) 514-8605 SixTen and Associates kbpsixten@aol.com E-mail Address:

State Controller's Office	Community College Mar	ndated Cost Manua				
MANDATED COSTS HEALTH FEE ELIMINATION CLAIM SUMMARY						
(01) Claimant:	(02) Type of Claim: Reimbursement	Fiscal Year				
Yosemite Community College District	Estimated	2003-2004				
(03) List all the colleges of the commu	unity college district identified in form HFE-1.1, I	ine (03)				
N	(a) Name of College	(b) Claimed Amount				
Modesto Junior College		\$110,535.61				
2. Columbia College		\$ 40,510.49				
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.	·					
11.						
12.						
13.						
14.						
15.	-					
16.						
17.						
18.	<del></del>					
9.						
20.						
1.	<del></del>					
04) Total Amount Claimed	[Line (3.1b) + line (3.2b) + line (3.3b) +line (3.21b)]	\$ 151,046				

#### YOSEMITE COMMUNITY COLLEGE DISTRICT CALCULATION OF INDIRECT COST RATE, FISCAL YEAR 2002-2003

FIR 03/04 CLMMS

REFERENCE	DESCRIPTION	2002-2003
(CCFS 311) INSTRUCTIONAL ACTIVITY		
MASI RUCITONAL ACTIVITY		
	Instructional Costs	
	Instructional Salaries and Benefits	35,192,2
	Instructional Operating Expenses Instructional Support Instructional Salaries and Benefits	7,634,4
	Auxiliary Operations Instructional Salaries and Benefits	74,5
	TOTAL INSTRUCTIONAL COSTS 1	
	TOTAL INSTRUCTIONAL COSTS I	42,901,2
	Non-Instructional Costs	<del></del>
	Non-Instructional Salaries and Benefits	
	Instructional Admin. Salaries and Benefits	6,493,04
·	Instructional Admin. Operating Expenses	4,988,59
	Auxiliary Classes Non-Inst. Salaries and Benefits	1,002,90
	Auxiliary Classes Operating Expenses	118,64
	TOTAL NON-INSTRUCTIONAL COSTS 2	10.00.10
	The state of the s	12,603,19
	TOTAL INSTRUCTIONAL ACTIVITY COSTS 3 (1 + 2)	55,504,45
DIRECT SUPPORT ACTIVITY		
	Direct Support Costs	
	Instructional Support ServicesNon Inst. Salaries and Benefits	2 512 00
	Instructiona Support Services Operating Expeenses	3,513,084
	Admissions and Records	409,262
	Counselling and Guidance	967,567
	Other Student Services	2,729,746
		5,015,573
	TOTAL DIRECT SUPPORT COSTS 4	12,635,232
OTAL INSTRUCTIONAL ACTIVITY COSTS		
ND DIRECT SUPPORT COSTS 5 (3 + 4)		
		68,139,685
	Indirect Support Costs	<del> </del>
	Operation and Maintenance of Plant	6 200 700
<u> </u>	Planning and Policy Making	6,209,728
	General Instructional Support Services	2,641,704 8,381,770
		0,361,770
	TOTAL INDIRECT SUPPORT COSTS 6	17,233,202
TAL INSTRUCTIONAL ACTIVITY COSTS AND	DYDDOM	
PPORT COSTS, AND TOTAL INDIRECT SUPPO	DIRECT_	
6) = TOTAL COSTS	081 (0313	
		85,372,887
SUPPORT CO	STS ALLOCATION RATES	
· · · · · · · · · · · · · · · · · · ·		
rect Support Costs Allocation Rate =	Table V. of	
	Total Indirect Supports Costs (6)	25.29%
	Total Instructional Activity Costs	
	and Direct Support Costs (5)	
et Support Costs Allocation Rate =		
	Total Direct Support Costs (4)	22.76%
	Total Instructional Activity Costs (3)	22.10%
Support Cost Allocation		
Support Cost Witerstiell	<u></u>	48.06%

State Controller's Office	<u> </u>					C	ommunity	Colle	ge Manda	ted (	Cost Manu
PROGRAM		MAND	ATED COST	S	-					T	
<b>1</b>	HEALTH FEE ELIMINATION							FORM HFE-1.1			
		CLAIN	N SUMMARY								ULC-1.1
(01) Claimant:			(02) Type of	Claim:						i j	iscal Year
Yosemite	Community College District		Reim	bursem	ent					,	2003-2004
			Estim	ated							
03) Name of College:	Modesto Junio	or College									
04) Indicate with a che comparison to the 1986 allowed.	eck mark, the level at whi i/87 fiscal year. If the "Le	ch health ser ss" box is ch	vices were pi ecked, STOF	rovide P, do n	d during ot comp	the elete	fiscal yea the form.	r of re No r	eimburse eimburse	 me eme	nt in ent is
	LESS	S	AME X			MC	RE				
							Direct Cost	1	ect Cost of: 25.29%		Total
05) Cost of Health Services	for the Fiscal year of Claim					\$	383,229	\$	96,919	\$	480,148
36) Cost of providing current	nt fiscal year health services in	excess of 1986	/87				-	\$	-	\$	-
Cost of providing curren [Line (05) - line (06)]	nt fiscal year health services at	1986/87 level				\$	383,229	\$	96,919	\$	480,148
)8) Complete Columns (a) t	hrough (g) to provide detail da	ta for health fee	S		-			!			-
ection Period	(a) Number of Full-time Students	(b) Number of Part-time Students	(C) Unit Cost for Full-time Student per Educ. Code §76355	Hea	(d) full-time Student alth Fees a) x (c)	S	(e) nit Cost for Part-time tudent per duc. Code §76355	S Hea	(f) art-time student alth Fees o) x (e)	Fee H	(g) udent Health is That Could fave Been Collected (d) + (f)
Per Fall Semester				\$	-		·	\$	-	\$	
Per Spring Semester				\$				\$	_	\$	
Per Summer Session				\$				\$		\$	·
Per First Quarter				+-		-					
Per Second Quarter				\$	•			\$ 		\$	<del>-</del>
Per Third Quarter		·	-	\$				\$	-	\$	-
) Takal basella ( , , , , , , , , , , , , , , , , , ,		·		\$	-			\$ 		\$	
7) Total health fee that could	I have been collected:		The sum	of (Lin	ie (08)(1)	(c) thr	ough line (0	8)(6)( ———	c)	\$	364,112
)) Subtotal		<del>-</del>		[]	Line (07)	- line	(09)]			\$	116,036
st Reduction											
3: Offsetting Savings	s, if applicable										
) Less: Other Reimburser	nents, if applicable									\$	5,500.00
Total Amount Claimed				Line (1	0) - {line	(11) +	line (12)}]				
/ised 09/03			<del></del>					<del></del>		\$	110,536

State Controller's Office						C	ommunity	Colle	ge Manda	ted C	ost Manua
PROGRAM		MANDA	ATED COST	S				-		T	
<b>1</b>	1 HEALTH FEE ELIMINATION									FORM HFE-1.2	
<b>T</b>		CLAIN	SUMMARY							'	71.4
(01) Claimant:		· · · · · · · · · · · · · · · · · · ·	(02) Type of	Claim:			·			F	iscal Year
Yosemite C	Community College District		Reim	burser	ment		X			2	003-2004
		<u>-</u>	Estim	ated							
03) Name of College:	Columbia Colle	ege									
04) Indicate with a chec comparison to the 1986/8 illowed.	k mark, the level at which the level at which the level at which the level at the l	ch health sen ss" box is che	vices were pi ecked, STOF	rovide P, do	ed during not comp	the to	iscal yea he form.	r of r No i	eimburse reimburse	eme	nt in nt is
	LESS		AME X			MO	RE	•			
							Direct Cost	J	rect Cost of: 25.29%		Total
)5) Cost of Health Services fo	or the Fiscal year of Claim	· 				\$	86,981	\$	21,997	\$	108,978
(16) Cost of providing current f	iscal year health services in	excess of 1986/	87			\$	-	\$	-	\$	-
Cost of providing current ff [Line (05) - line (06)]	iscal year health services at	1986/87 level				\$	86,981	\$	21,997	\$	108,978
)8) Complete Columns (a) thre	ough (g) to provide detail dat	ta for health fee	S					·		٠.	
ection Period	(a) Number of Full-time Students	(b) Number of Part-time Students	(c) Unit Cost for Full-time Student per Educ. Code §76355	Н	(d) Full-time Student ealth Fees (a) x (c)	SI Ed	(e) iit Cost for Part-time udent per luc. Code §76355	He	(f) Part-time Student alth Fees b) x (e)	Fees H	(g) Ident Health That Could ave Been Collected (d) + (f)
Per Fall Semester				\$	-			\$	-	\$	-
Per Spring Semester				\$	-			\$	-	\$	-
Per Summer Session				\$	-			\$	_	\$	
Per First Quarter				\$				\$		\$	
Per Second Quarter				\$				-			
Per Third Quarter				\$				\$		\$ .	-
) Total health fee that could h	nave been collected:		The sun	<u> </u>	ine (08)(1)	(c) thre	ough line (0	\$ 08)(6)	(c)	\$	
)) Subtotal		·			[Line (07)			-/(-/	( )	\$ ¢	67,468
st Reduction										Ψ	41,510
s: Offsetting Savings,	if applicable		,								
) Less: Other Reimburseme	ents, if applicable									\$	1,000.00
Total Amount Claimed				[Line (	10) - {line	(11) +	line (12)}]			\$	40,510
ricod 00/02									L <u>`</u>	<del>-</del>	

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#### MANDATED COSTS 1/84 HEALTH FEE ELIMINATION COMPONENT/ACTIVITY COST DETAIL

(01) Claimant Yosemite Community College District  (02) Piace an "X" in column (a) and/or (b), as applicable, to indicate which health Service was provided by student health service fees for the indicated fiscal year.  Accident Reports  Accident Reports  Applintments  College Physician, surgeon Dermatology, Family practice Internal Medicine Outside Physician Dental Services Outside Labs, (X-ray, etc.,) Psychologist, full services Cancel/Change Appointments  Assessment, Intervention and Counseling Birth Control Lab Reports  Assessment, Intervention and Counseling Birth Control Lab Reports  Venereal Disease Upper Respiratory Infection Eyes, Nose and Throat Eye/Vision Dermatology/Allergy Gynecology/Pregnancy Service Neuralgic Orthopedic Genito/Urinary Dental Stress Counseling Stress Counseling Stress Counseling Stress Counseling Stress Counseling Stress Counseling Stress Counseling Stress Counseling Stress Counseling Stress Counseling Stress Counseling Stress Counseling Stress Counseling Stress Counseling Crisis Intervention Stress Counseling Stress Counseling Crisis Intervention Stress Counseling Stress Counseling Crisis Intervention Stress Counseling Stress Counseling Crisis Intervention Ax X X X X X X X X X X X X X X X X X X X			<u> </u>	
(03) Place an "X" in column (a) and/or (b), as applicable, to indicate which health Service was provided by student health service fees for the indicated fiscal year.  Accident Reports  Accident Reports  Appointments  College Physician, surgeon  Dermatology, Family practice Internal Medicine Outside Physician  Dental Services Outside Labs, (X-ray, etc.,) Psychologist, full services Cancel/Change Appointments  Registered Nurse Check Appointments  Assessment, intervention and Counseling Birth Control  Lab Reports  Nutrition Test Results, office Veneraal Disease Communicable Disease Upper Respiratory Infection Eyes, Nose and Throat Eyer/Nision Dermatology/Rilergy Gynecology/Pregnancy Service Neuralgic Orthopedic Genito/Uninary Dental Gastro-Intestinal Stress Counseling String Co	(01) Claimant	(02) Fiscal Year costs were incur	red:	
Service was provided by student health service fees for the indicated fiscal year.   1986/87 of Claim	Yosemite Community College District		2003	3-2004
Service was provided by student health service fees for the indicated fiscal year.   1986/87 of Claim	(03) Place an "X" in column (a) and/or (b), as applic	cable, to indicate which health	(a)	(h)
Accident Reports	Service was provided by student health service	e fees for the indicated fiscal year		
Appointments College Physician, surgeon Dermatology, Family practice Internal Medicine Outside Physician Dertal Services Outside Labs, (X-ray, etc.,) Psychologist, full services Cancel/Change Appointments Registered Nurse Check Appointments X X X  Assessment, Intervention and Counseling Birth Control Lab Reports Nutrition Test Results, office Venereal Disease Communicable Disease Upper Respiratory Infection Eyes, Nose and Throat Eyes/Vision Dermatology/Allergy Gynecology/Pregnancy Service Neuralgic Orthopedic Genito/Urinary Dental Gastro-Intestinal Stress Counselling Substance Abuse Identification and Counseling Substance Abuse Identification and Counseling Eating Disorders Weight Control X X X X X X X X X X X X X X X X X X X	,	- receiver the managed model year.	ı	
Appointments College Physician, surgeon Dermatology, Family practice Internal Medicine Outside Physician Dental Services Outside Physician Dental Services Cancel/Change Appointments Registered Nurse Check Appointments  Assessment, Intervention and Counseling Birth Control Lab Reports Nutrition Test Results, office Venereal Disease Communicable Disease Upper Respiratory Infection Eyes, Nose and Throat Eyes/Nosion Dermatology/Pregnancy Service Neuralgic Orthopedic Genitor/Urinary Dental Gastro-Intestinal Stress Counseling Substance Abuse Identification and Counseling Substance Abuse Identification and Counseling Substance Abuse Identification and Counseling Substance Abuse Identification and Counseling Substance Abuse Identification and Counseling Substance Abuse Identification and Counseling Substance Abuse Identification and Counseling Substance Abuse Identification and Counseling Examinations, minor Illnesses Recheck Minor Injury  Health Talks or Fairs, Information Sexually Transmitted Disease Drugs Drugs Drugs Drugs Drugs Lating Immune Deficiency Syndrome X X X X X X X X X X X X X X X X X X X	Accident Reports			
College Physician, surgeon	·			, ,
College Physician, surgeon	Appointments		X	X
Internal Medicine		•	X	X
Internal Medicine			X	X
Dental Services Outside Labs, (X-ray, etc.,) Psychologist, full services Cancel/Change Appointments Registered Nurse Check Appointments  Assessment, Intervention and Counseling Birth Control Lab Reports Nutrition Test Results, office Venereal Disease Upper Respiratory Infection Eyes, Nose and Throat Eyes, Nose and Throat Eyes, Nose and Throat Eyer, N			X	X
Outside Labs, (X-ray, etc.,)         X         X           Psychologist, full services         X         X           Cancel/Change Appointments         X         X           Registered Nurse         X         X           Check Appointments         X         X           Assessment, Intervention and Counseling         Birth Control         X           Lab Reports         X         X           Nutrition         X         X           Test Results, office         X         X           Venereal Disease         X         X           Communicable Disease         X         X           Upper Respiratory Infection         X         X           Eyes, Nose and Throat         X         X           Eyer/Vision         X         X           Dermatology/Allergy         X         X           Gynecology/Pregnancy Service         X         X           Neuralgic         X         X           Orthopedic         X         X           Genito/Urinary         X         X           Dental         X         X           Gastro-Intestinal         X         X           Stress Counseling         X	•		1	
Psychologist, full services Cancel/Change Appointments Registered Nurse Check Appointments X X X X  Assessment, Intervention and Counseling Birth Control Lab Reports Nutrition X X X X X X  X X X X X X X X X X X X				-
Cancel/Change Appointments Registered Nurse Check Appointments  Assessment, Intervention and Counseling Birth Control Lab Reports Nutrition Test Results, office Venereal Disease Communicable Disease Upper Respiratory Infection Eyes, Nose and Throat Eye, Nose and Throat Eye, Nose and Throat  Eye, Nose and Throat  Control Counseling Eyenecology/Pregnancy Service Neuralgic Orthopedic Genito/Urinary Dental Gastro-Intestinal Stress Counseling Crisis Intervention Child Abuse Reporting and Counseling Eating Disorders Weight Control Personal Hygiene Burnout Other Medical Problems, list  Examinations, minor illnesses Recheck Minor Injury Health Talks or Fairs, Information Sexually Transmitted Disease Drugs Acquired Immune Deficiency Syndrome			X	X
Registered Nurse Check Appointments  Assessment, Intervention and Counseling Birth Control Lab Reports Nutrition Test Results, office Venereal Disease Communicable Disease Communicable Disease Upper Respiratory Infection Eyes, Nose and Throat Eye/Nision Dermatology/Allergy Gynecology/Pregnancy Service Neuralgic Orthopedic Genito/Urinary Dental Gastro-Intestinal Stress Counseling Crisis Intervention Child Abuse Reporting and Counseling Eating Disorders Weight Control Personal Hygiene Burnout Other Medical Problems, list  Examinations, minor illnesses Recheck Minor Injury Health Talks or Fairs, Information Sexually Transmitted Disease Drugs Acquired Immune Deficiency Syndrome X				
Check Appointments  Assessment, Intervention and Counseling Birth Control Lab Reports Nutrition X X X Yenereal Disease Communicable Disease Upper Respiratory Infection Eyes, Nose and Throat Eyes, Nose and Throat Eyes, Nose and Throat Control Cont				X
Assessment, Intervention and Counseling Birth Control Lab Reports Nutrition Test Results, office Venereal Disease Communicable Disease Upper Respiratory Infection Eyes, Nose and Throat Eyes, Nose and Throat Eyes, Nose and Throat Eyer/Vision Dermatology/Allergy Gynecology/Pregnancy Service Neuralgic Orthopedic Genito/Urinary Dental Gastro-Intestinal Stress Counseling Crisis Intervention Crisis Intervention Child Abuse Reporting and Counseling Eating Disorders Weight Control Personal Hygiene Burnout Other Medical Problems, list  Examinations, minor Illnesses Recheck Minor Injury  Health Talks or Fairs, Information Sexually Transmitted Disease Drugs Acquired Immune Deficiency Syndrome X X X X X X X X X X X X X X X X X X X				
Birth Control   Lab Reports	Check Appointments		X	X
Birth Control   Lab Reports	Assessment Intervention 10			
Lab Reports         X         X           Nutrition         X         X           Test Results, office         X         X           Venereal Disease         X         X           Communicable Disease         X         X           Upper Respiratory Infection         X         X           Eyes, Nose and Throat         X         X           Eyes/Vision         X         X           Dermatology/Allergy         X         X           Gynecology/Pregnancy Service         X         X           Neuralgic         X         X           Orthopedic         X         X           Genito/Urinary         X         X           Dental         X         X           Gastro-Intestinal         X         X           Stress Counseling         X         X           Crisis Intervention         X         X           Child Abuse Reporting and Counseling         X         X           Eating Disorders         X         X           Weight Control         X         X           Personal Hygiene         X         X           Burnout         X         X           Other Medi				
Nutrition         X         X           Test Results, office         X         X           Venereal Disease         X         X           Communicable Disease         X         X           Upper Respiratory Infection         X         X           Eyes, Nose and Throat         X         X           Eyer/Vision         X         X           Dermatology/Allergy         X         X           Gynecology/Pregnancy Service         X         X           Neuralgic         X         X           Orthopedic         X         X           Genito/Urinary         X         X           Dental         X         X           Gastro-Intestinal         X         X           Stress Counseling         X         X           Crisis Intervention         X         X           Child Abuse Reporting and Counseling         X         X           Substance Abuse Identification and Counseling         X         X           Eating Disorders         X         X           Weight Control         X         X           Personal Hygiene         X         X           Burnout         X         X <td></td> <td></td> <td>1</td> <td></td>			1	
Test Results, office         X         X           Venereal Disease         X         X           Communicable Disease         X         X           Upper Respiratory Infection         X         X           Eyes, Nose and Throat         X         X           Eyer/Vision         X         X           Dermatology/Allergy         X         X           Gynecology/Pregnancy Service         X         X           Neuralgic         X         X           Orthopedic         X         X           Genito/Urinary         X         X           Dental         X         X           Gastro-Intestinal         X         X           Stress Counseling         X         X           Crisis Intervention         X         X           Child Abuse Reporting and Counseling         X         X           Substance Abuse Identification and Counseling         X         X           Eating Disorders         X         X           Weight Control         X         X           Personal Hygiene         X         X           Burnout         X         X           Other Medical Problems, list         X <td>· ·</td> <td></td> <td>1</td> <td>l .</td>	· ·		1	l .
Venereal Disease         X         X           Communicable Disease         X         X           Upper Respiratory Infection         X         X           Eyes, Nose and Throat         X         X           Eye/Vision         X         X           Dermatology/Allergy         X         X           Gynecology/Pregnancy Service         X         X           Neuralgic         X         X           Orthopedic         X         X           Stress Counseling         X         X           X         X         X           X         X         X           X         X         X           X         X         X           X         X         X           X         X <t< td=""><td></td><td></td><td>ľ</td><td></td></t<>			ľ	
Communicable Disease         X         X           Upper Respiratory Infection         X         X           Eyes, Nose and Throat         X         X           Eye/Vision         X         X           Dermatology/Allergy         X         X           Gynecology/Pregnancy Service         X         X           Neuralgic         X         X           Orthopedic         X         X           Genito/Urinary         X         X           Dental         X         X           Gastro-Intestinal         X         X           Stress Counseling         X         X           Crisis Intervention         X         X           Crisis Intervention         X         X           Child Abuse Reporting and Counseling         X         X           Eating Disorders         X         X           Weight Control         X         X           Personal Hygiene         X         X           Burnout         X         X           Other Medical Problems, list         X           Examinations, minor illnesses         X         X           Recheck Minor Injury         X         X				
Upper Respiratory Infection         X         X           Eyes, Nose and Throat         X         X           Eye/Vision         X         X           Dermatology/Allergy         X         X           Gynecology/Pregnancy Service         X         X           Neuralgic         X         X           Orthopedic         X         X           Genito/Urinary         X         X           Dental         X         X           Gastro-Intestinal         X         X           Stress Counseling         X         X           Crisis Intervention         X         X           Child Abuse Reporting and Counseling         X         X           Substance Abuse Identification and Counseling         X         X           Eating Disorders         X         X           Weight Control         X         X           Personal Hygiene         X         X           Burnout         X         X           Other Medical Problems, list         X           Examinations, minor illnesses         X         X           Recheck Minor Injury         X         X           Health Talks or Fairs, Information         X				
Eyes, Nose and Throat         X         X           Eye/Vision         X         X           Dermatology/Allergy         X         X           Gynecology/Pregnancy Service         X         X           Neuralgic         X         X           Orthopedic         X         X           Genito/Urinary         X         X           Dental         X         X           Gastro-Intestinal         X         X           Stress Counseling         X         X           Crisis Intervention         X         X           Child Abuse Reporting and Counseling         X         X           Substance Abuse Identification and Counseling         X         X           Eating Disorders         X         X           Weight Control         X         X           Personal Hygiene         X         X           Burnout         X         X           Other Medical Problems, list         X           Examinations, minor illnesses         X         X           Recheck Minor Injury         X         X           Health Talks or Fairs, Information         X         X           Sexually Transmitted Disease         X			l l	l .
Eye/Vision         X         X           Dermatology/Allergy         X         X           Gynecology/Pregnancy Service         X         X           Neuralgic         X         X           Orthopedic         X         X           Genito/Urinary         X         X           Dental         X         X           Gastro-Intestinal         X         X           Stress Counseling         X         X           Crisis Intervention         X         X           Child Abuse Reporting and Counseling         X         X           Substance Abuse Identification and Counseling         X         X           Eating Disorders         X         X           Weight Control         X         X           Personal Hygiene         X         X           Burnout         X         X           Other Medical Problems, list         X         X           Examinations, minor illnesses         X         X           Recheck Minor Injury         X         X           Examinations, minor illnesses         X         X           Recheck Minor Injury         X         X           Health Talks or Fairs, Information				
Dermatology/Allergy			l l	ľ
Gynecology/Pregnancy Service         X         X           Neuralgic         X         X           Orthopedic         X         X           Genito/Urinary         X         X           Dental         X         X           Gastro-Intestinal         X         X           Stress Counseling         X         X           Crisis Intervention         X         X           Child Abuse Reporting and Counseling         X         X           Substance Abuse Identification and Counseling         X         X           Eating Disorders         X         X           Weight Control         X         X           Personal Hygiene         X         X           Burnout         X         X           Other Medical Problems, list         X         X           Examinations, minor illnesses         X         X           Recheck Minor Injury         X         X           Health Talks or Fairs, Information         X         X           Sexually Transmitted Disease         X         X           Drugs         X         X           Acquired Immune Deficiency Syndrome         X         X				
Neuralgic Orthopedic Orthopedic Genito/Urinary Dental Stress Counseling Crisis Intervention Child Abuse Reporting and Counseling Substance Abuse Identification and Counseling Eating Disorders Weight Control Personal Hygiene Burnout Other Medical Problems, list  Examinations, minor illnesses Recheck Minor Injury  Health Talks or Fairs, Information Sexually Transmitted Disease Drugs Acquired Immune Deficiency Syndrome				
Orthopedic         X         X           Genito/Urinary         X         X           Dental         X         X           Gastro-Intestinal         X         X           Stress Counseling         X         X           Crisis Intervention         X         X           Child Abuse Reporting and Counseling         X         X           Substance Abuse Identification and Counseling         X         X           Eating Disorders         X         X           Weight Control         X         X           Personal Hygiene         X         X           Burnout         X         X           Other Medical Problems, list         X         X           Examinations, minor illnesses         X         X           Recheck Minor Injury         X         X           Health Talks or Fairs, Information         X         X           Sexually Transmitted Disease         X         X           Drugs         X         X           Acquired Immune Deficiency Syndrome         X         X				
Genito/Urinary Dental  Castro-Intestinal  Stress Counseling  Crisis Intervention  Child Abuse Reporting and Counseling  Substance Abuse Identification and Counseling  Eating Disorders  Weight Control  Personal Hygiene  Burnout  Other Medical Problems, list  Examinations, minor illnesses  Recheck Minor Injury  Health Talks or Fairs, Information  Sexually Transmitted Disease  Drugs  Acquired Immune Deficiency Syndrome				
Dental Gastro-Intestinal Stress Counseling Crisis Intervention Child Abuse Reporting and Counseling Substance Abuse Identification and Counseling Eating Disorders Weight Control Personal Hygiene Burnout Other Medical Problems, list  Examinations, minor illnesses Recheck Minor Injury  Health Talks or Fairs, Information Sexually Transmitted Disease Drugs Acquired Immune Deficiency Syndrome  X X X X X X X X X X X X X X X X X X X				
Gastro-Intestinal X X X Stress Counseling X X X Crisis Intervention X X X Child Abuse Reporting and Counseling X X X Substance Abuse Identification and Counseling X X X Eating Disorders X X X Weight Control X X X Personal Hygiene X X X Burnout X X X Other Medical Problems, list  Examinations, minor illnesses Recheck Minor Injury X X X Health Talks or Fairs, Information Sexually Transmitted Disease X X X Drugs X X Acquired Immune Deficiency Syndrome X X				
Stress Counseling Crisis Intervention Child Abuse Reporting and Counseling Substance Abuse Identification and Counseling Eating Disorders Weight Control Personal Hygiene Burnout Other Medical Problems, list  Examinations, minor illnesses Recheck Minor Injury  Health Talks or Fairs, Information Sexually Transmitted Disease Drugs Acquired Immune Deficiency Syndrome				
Crisis Intervention Child Abuse Reporting and Counseling Substance Abuse Identification and Counseling Eating Disorders Weight Control Personal Hygiene Burnout Other Medical Problems, list  Examinations, minor illnesses Recheck Minor Injury  X X  Health Talks or Fairs, Information Sexually Transmitted Disease Drugs Acquired Immune Deficiency Syndrome  X X  X X  X X  X X  X X  X X  X X  X				
Child Abuse Reporting and Counseling Substance Abuse Identification and Counseling Eating Disorders Weight Control Personal Hygiene Burnout Other Medical Problems, list  Examinations, minor illnesses Recheck Minor Injury  Health Talks or Fairs, Information Sexually Transmitted Disease Drugs Acquired Immune Deficiency Syndrome				
Substance Abuse Identification and Counseling Eating Disorders Weight Control Personal Hygiene Burnout Other Medical Problems, list  Examinations, minor illnesses Recheck Minor Injury  Health Talks or Fairs, Information Sexually Transmitted Disease Drugs Acquired Immune Deficiency Syndrome				
Eating Disorders  Weight Control  Personal Hygiene  Burnout  Other Medical Problems, list  Examinations, minor illnesses  Recheck Minor Injury  X  X  X  X  X  X  X  X  X  X  X  X  X		elina		
Weight Control Personal Hygiene Burnout Other Medical Problems, list  Examinations, minor illnesses Recheck Minor Injury  Health Talks or Fairs, Information Sexually Transmitted Disease Drugs Acquired Immune Deficiency Syndrome		9		
Personal Hygiene Burnout Other Medical Problems, list  Examinations, minor illnesses Recheck Minor Injury  Health Talks or Fairs, Information Sexually Transmitted Disease Drugs Acquired Immune Deficiency Syndrome				
Burnout Other Medical Problems, list  Examinations, minor illnesses Recheck Minor Injury  Health Talks or Fairs, Information Sexually Transmitted Disease Drugs Acquired Immune Deficiency Syndrome				
Other Medical Problems, list  Examinations, minor illnesses Recheck Minor Injury  Health Talks or Fairs, Information Sexually Transmitted Disease Drugs Acquired Immune Deficiency Syndrome  X X X				
Recheck Minor Injury X X  Health Talks or Fairs, Information Sexually Transmitted Disease X X X  Drugs X X X  Acquired Immune Deficiency Syndrome X X X	Other Medical Problems, list			, l
Recheck Minor Injury X X  Health Talks or Fairs, Information Sexually Transmitted Disease X X X  Drugs X X X  Acquired Immune Deficiency Syndrome X X X	Francis aliana contra a W			
Health Talks or Fairs, Information Sexually Transmitted Disease Drugs Acquired Immune Deficiency Syndrome  X X X X				
Sexually Transmitted Disease X X X X X X X X X X X X X X X X X X X	recheck wilhor injury		X	Х
Sexually Transmitted Disease X X X X X X X X X X X X X X X X X X X	Health Talks or Fairs, Information		1	
Drugs Acquired Immune Deficiency Syndrome  X X X				,
Acquired Immune Deficiency Syndrome X X	<del>-</del>			
			1	
				1
			^	^

## MANDATED COSTS 1/84 HEALTH FEE ELIMINATION COMPONENT/ACTIVITY COST DETAIL

01) Claimant	(02) Fiscal Year costs were incur		
osemite Community College District		2003	-2004
03) Place an "X" in column (a) and/or (b), as applic		(a)	(b)
Service was provided by student health service	ce fees for the indicated fiscal year.	FY	FY
	· · · · · · · · · · · · · · · · · · ·	1986/87	of Claim
Birth Control/Family Planning		X	×
Stop Smoking		l x	X
Library, Videos and Cassettes		x	x
Elbrary, viacob ana cassones			
First Aid, Major Emergencies		x	X
First Aid, Minor Emergencies		X	X
First Aid Kits, Filled, available for purchase/rer	nt		X
Golf Carts for emergency response time			Х
Immunizations		i	
Diphtheria/Tetanus		X	X
Measles/Rubella		X	X
Influenza		,,	Х
Information		X	Х
Insurance			
On Campus Accident		X	Х
Voluntary		X	Х
Insurance Inquiry/Claim Administration	•	X	Х
Laboratory Tests Done			
Inquiry/Interpretation		X	Х
Pap Smears			
Physical Examinations			
Employees		1	
Students	• •	X	Х
Athletes		X	X
Medications			
Antacids	•	X	Х
Antidiarrheal		l x	X
Aspirin, Tylenol, etc.,		$ \hat{x} $	X
Skin Rash Preparations		$\hat{\mathbf{x}}$	X
Eye Drops		1 x	Χ
Ear Drops			
Toothache, oil cloves		x	Χ
Stingkill		X	Х
Midol, Menstrual Cramps		X	Χ
Other, list> Hydrocortisone, antihistamin oxygen, cool jel, epi		X	Х
Parking Cards/Elevator Keys	· - Nebuilt	x	Х
Tokens			
Return Card/Key			
Parking Inquiry		X	Χ
Elevator Passes		X	X
Temporary Handicapped Parking Permits		X	Х
	· ·		

State of California

School.

hdated Cost Manual

Program 029

#### MANDATED COSTS 1/84 HEALTH FEE ELIMINATION COMPONENT/ACTIVITY COST DETAIL

)		, cool belale	1 "	L- <i>L</i>
(01) Claimant		(02) Fiscal Year costs were incurr	ed:	
Yosemite Community College Distric	t	(,		-2004
(03) Place an "X" in column (a) and/o	or (b) as applicable t	o indicate which health	(a)	(b)
Service was provided by studen	it health service fees	for the indicated fiscal year	FY (a)	FY
Tomas mae promueu zij etaden	100 100 1000 1000	io ne maioatea nocal year.	1986/87	of Claim
			1000/01	Or Graini
Referrals to Outside Agencies				
Private Medical Doctor			X	×
Health Department			X	×
Clinic			X	×
Dental			X	X
Counseling Centers			X	×
Crisis Centers		•	X	×
Transitional Living Facilities,	battered/homeless v	vomen	X	X
Family Planning Facilities			X	X
Other Health Agencies			X	X
Tests				
Blood Pressure				V
Hearing			X	X
Tuberculosis			XX	· •
Reading			x	X X X
Information			^	x
Vision			x	x
Glucometer			x	x
Urinalysis			Î	x
Hemoglobin			$ \hat{x} $	x
EKG			1	
Strep A Testing			x	x
PG Testing			1 1	
Monospot			j j	ļ
Hemacult			Ì	-
Others, list: STD				Х
Miscellaneous	•			
Absence Excuses/PE Waiver			x	x ·
Allergy Injections			$\hat{\mathbf{x}}$	x
Bandaids			x	X
Booklets/Pamphlets			X	X
Dressing Change			x	Х
Rest			X	
Suture Removal		·	Х	X X X
Temperature			X	X
Weigh			Х	X
Information			Х	X
Report/Form			X	Х
Wart Removal			Х	X
Others, list:				İ
Committees				
Safety		·	х	X
Environmental			x	x
Disaster Planning			X	x
Student Services Council		1	Х	X
Academic Senate			x	X

Community College Mandated Cost Manual State Controller's Office For State Controller Use only Program **CLAIM FOR PAYMENT** (19) Program Number 00234 Pursuant to Government Code Section 17561 (20) Date Filed **HEALTH FEE ELIMINATION** (21) LRS Input (01) Claimant Identification Number: Reimbursement Claim Data CC 50150 (02) Claimant Name (22) HFE-1.0, (04)(b) 280.694 Yosemite Community College District Ε (23)County of Location Stanislaus (24)Street Address P. O. Box 4065 R City State Zip Code (25)95352 Modesto Reimbursement Claim (26)Type of Claim **Estimated Claim** (27)(03) Estimated (09) Reimbursement (04) Combined (10) Combined (28)(11) Amended (29)(05) Amended (12)(30)(06)Fiscal Year of Cost 2004-2005 2005-2006 (07)(13)(31)Total Claimed Amount 308,000 280,694 (32)(14)ess: 10% Late Penalty (33)(15)Less: Prior Claim Payment Received (34)(16)**Net Claimed Amount** 280,694 (08)(35)Due from State \$ 308,000 280,694 (36)(18)Due to State (37) CERTIFICATION OF CLAIM In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive. I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant. The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct. Signature of Authorized Officer (USE BLUE INK) Date

Vice Chancellor, Fiscal Services

(858) 514-8605

kbpsixten@aol.com

Title

Telephone Number:

E-mail Address:

SixTen and Associates
Form FAM-27 (Revised 09/03)

(38) Name of Contact Person for Claim

Teresa Scott

pe or Print Name

HEALTH FE	TED COSTS E ELIMINATION SUMMARY	FORM HFE-1.0
(01) Claimant:	(02) Type of Claim:	Fiscal Year
Yosemite Community College District	Reimbursement >	2004-2005
(03) List all the colleges of the community of	college district identified in form HFE-1.1, line	(03)
, ·	(a) of College	(b) Claimed Amount
Modesto Junior College		\$231,469.38
2. Columbia College		\$ 49,225.11
3.		
4.		
5.		
6.		
7		
8.	<u>.</u>	
9.		
10.		
11.		
12.		
13.		
14.	······································	
15.		
16.		
17.		
18.		
19.		
20.		
21.		
	ine (3.1b) + line (3.2b) + line (3.3b) +line (3.21b)]	\$ 280,694

(09) Total health fee that could have been collected:

The sum of (Line (08)(1)(c) through line (08)(6)(c)

[Line (07) - line (09)]

[Line (10) - {line (11) + line (12)}]

\$ 343,426

236,969

231,469

Cost Reduction

(13) Total Amount Claimed

(10) Subtotal

(1 ess:	Offsetting Savings, if applicable	\$ <u>-</u>	
(12) Less:	Other Reimbursements, if applicable	\$ 5,500.0	0

[Line (10) - {line (11) + line (12)}]

49,225

Total Amount Claimed

#### MANDATED COSTS 1/84 HEALTH FEE ELIMINATION COMPONENT/ACTIVITY COST DETAIL

emite Community College District	2004 	-2005
Place an "X" in column (a) and/or (b), as applicable, to indicate which health	(a)	(b)
Service was provided by student health service fees for the indicated fiscal year.	FY	FY
	1986/87	of Cla
Accident Reports	X	X
Appointments	X	X
College Physician, surgeon	X	x
Dermatology, Family practice	X	x
Internal Medicine	l x	l x
Outside Physician		
Dental Services		}
Outside Labs, (X-ray, etc.,)	l x	l x
Psychologist, full services		
Cancel/Change Appointments	l x	X
	l $\hat{x}$	X
Registered Nurse	\ x	l â
Check Appointments	^	^
Assessment, Intervention and Counseling		
Birth Control	X	X
Lab Reports	X	X
Nutrition	X	X
Test Results, office	X	X
Venereal Disease	X	X
Communicable Disease	X	X
Upper Respiratory Infection	X	X
Eyes, Nose and Throat	X	X
Eye/Vision	X	X
Dermatology/Allergy	· X	X
Gynecology/Pregnancy Service	X	X
Neuralgic	X	X
Orthopedic	. X	x
Genito/Urinary	X	l x
Dental	X	l x
Gastro-Intestinal	X	l x
Stress Counseling	l x	l x
Crisis Intervention	X	l x
Child Abuse Reporting and Counseling	X	l x
Substance Abuse Identification and Counseling	X	l x
Eating Disorders	X	X
Weight Control	l $\hat{x}$	X
Personal Hygiene	l $\hat{x}$	X
Burnout	l â	l x
Other Medical Problems, list		^`
Other Medical Flobiettis, list		
Examinations, minor illnesses		
Recheck Minor Injury	X	X
Health Talks or Fairs, Information		
Sexually Transmitted Disease	X	X
Drugs	X	×
Acquired Immune Deficiency Syndrome	X	Х
Child Abuse	l x	l x

#### MANDATED COSTS 1/84 HEALTH FEE ELIMINATION COMPONENT/ACTIVITY COST DETAIL

l) Claimant	(02) Fiscal Year costs were incurre	d:	
semite Community College District	(32) Floodi Fodi 603ta Word Modife		-2005
3) Place an "X" in column (a) and/or (b), as applicable.  Service was provided by student health service fee		(a) FY 1986/87	(b) FY of Clai
Birth Control/Family Planning Stop Smoking Library, Videos and Cassettes		X X X	X X X
First Aid, Major Emergencies First Aid, Minor Emergencies First Aid Kits, Filled		X X	X X X
Immunizations Diphtheria/Tetanus Measles/Rubella Influenza Information		X X X	× × ×
Insurance On Campus Accident Voluntary Insurance Inquiry/Claim Administration		X X X	X X X
Laboratory Tests Done Inquiry/Interpretation Pap Smears		x	×
Physical Examinations Employees Students Athletes		X X	× ×
Medications Antacids Antidiarrheal Aspirin, Tylenol, etc., Skin Rash Preparations Eye Drops		X X X X	X X X X
Ear Drops Toothache, oil cloves Stingkill Midol, Menstrual Cramps Other, list> Hydrocortisone, antihistamines, top. Antibi	otics, Gatorade,	X X X	X X X
oxygen, cool jel, epi-Nephrin Parking Cards/Elevator Keys Tokens		Х	X
Return Card/Key Parking Inquiry Elevator Passes Temporary Handicapped Parking Permits		X X X	X X X

### MANDATED COSTS 1/84 HEALTH FEE ELIMINATION COMPONENT/ACTIVITY COST DETAIL

01) Claimant	(02) Fiscal Year costs were incur		
Yosemite Community College District		2004	-2005
03) Place an "X" in column (a) and/or (b), as applicable,		(a)	(b)
Service was provided by student health service fees	for the indicated fiscal year.	FY	FY
		1986/87	of Claim
Referrals to Outside Agencies			1
Private Medical Doctor		X	×
Health Department		X	X
Clinic		x	X
Dental		X	X
Counseling Centers		X	X
Crisis Centers	•	X	X
Transitional Living Facilities, battered/homeless	women	X	· X
Family Planning Facilities		X	X
Other Health Agencies			
Tests		×	Х
Blood Pressure		X	×
Hearing		l x	l â
Tuberculosis		x	×
Reading		l x	X
Information		X	Х
Vision		X	Х
Glucometer		X	Х
Urinalysis		X	Х
Hemoglobin		X	Х
EKG			.,
Strep A Testing		X	X
PG Testing  Monospot			
Hemacult			
Others, list> STD			Χ.
Miscellaneous			
Absence Excuses/PE Waiver		X	X
Allergy Injections		X	X
Bandaids		X	X
Booklets/Pamphlets		X X	X X
Dressing Change Rest		X	X
Suture Removal		x	×
Temperature			X
Weigh		$ \hat{x} $	X
Information		X	Χ
Report/Form		X	Χ
Wart Removal		X	X
Others, list			
Committees			
Committees Safety		X	Χ
Environmental			X
Disaster Planning		$ \hat{x} $	X
Student Services Council		X	X
Academic Senate		x	Χ_

# Schedule 1 Yosemite Community College District 1/84 Health Fee Elimination FY2004-2005

Purpose: To calculate expenses and income for Health Fees

Source: Yosemite General Ledger for Health

Findings:

#### Modesto Junior College

Total Expense	s per Ledger	\$ 430,304.58 To HFE-1.1 (05)
Total Income	per Ledger	\$ 360,159.41
Less:	Interest	\$ (11,233.83)
	<u>Other</u>	\$ (5,500.00)
	TOTAL	\$ 343,426 To HFE-1.1 (09)

#### Columbia College

Total Expenses po	er Ledger	\$ 87,701.20 To HFE-1.1 (05)
Total Income per Less:	Ledger Interest <u>Other</u> TOTAL	71,048.69 (1,982.43) (1,000.00) 68,066 To HFE-1.1 (09)

Conclusion: Findings go forward to MRP-2

### 1/84 Health Fee Elimination DISTRICT / COLLEGE COST OF SERVICES RECAP

YOSEMITE	04-05	·		
District	Fiscal Yea	ar .		
Jse this form to summarize data for each of ou need to provide supporting document				
General Ledger Expense Data	College 1	College 2	College 3	District Total
General Ledger total direct expenses for Student Health Services	430304.53	87701,201		
2. Add: Other G/L Accounts: Counseling, Instructional materials, student health insurance costs, etc.				
3. Reverse (add) any revenue offsets or cost abatements which reduce general ledger expense accounts (e.g. lab fees)	(11,233.83)	(1982,43)		
4. Delete (subtract) unallowable costs for sabbaticals, athletic program expenses, etc. in student health services ledger accounts				
TOTAL: STUDENT SERVICE EXPENSES Line 1 + Line 2 + Line 3 - Line 4.				
Less: Cost of activities in excess of 1986-87 level of student services				
TOTAL CLAIMABLE STUDENT SERVICES EXPENSES FROM ALL SOURCES	419,071	85,7/9		
EMPLOYEE CERTIFICATION: The State of California requir state mandates in order for the district to receive reimbursen eported actual data or have provided a good faith estimate values on your personal knowledge or information." This info	nent. Your sig which you "certii ormation is used	nature on this fo	orm certifies that	t vou have
mployee Signature:		· · · · · · · · · · · · · · · · · · ·	Date	
mployee Name: (print)	_ `.¬	Position or Title		<del> </del>
you have any questions, please contact			, at	
LEASE SUBMIT THIS INFORMATION BY	; то			

### 1/84 Health Fee Elimination COLLEGE STUDENT HEALTH FEES

columber

District College F				Fiscal Yea	ar ————
Use a	separate form 1.8 for each college campus	with stude	nt health	services.	
	CALCULATION OF "COLLECTIBLE FEES"	Summer or 1 <sup>st</sup> Qtr		Winter/ 3 <sup>rd</sup> Qtr	Spring/ 4th Qtr
1 Aī	Total FULL-TIME student enrollment				
B. <b>N</b>	Number of BOGG/waiver FULL-TIME students		·		
C. /	A subtract B (FULL-TIME fee students)				
D. F	TULL-TIME fee (e.g. \$12.00/semester)	\$	\$	\$	\$
E. I	Line 1 C multiplied by Line 1 D	\$	\$	\$	\$
2 A. T	otal PART-TIME student enrollment		<u> </u>		
B. N	lumber of BOGG/waiver PART-TIME students		8°A		
C. A	A subtract B(PART-TIME fee students)				
D. F	PART-TIME fee (e.g. \$9.00/semester)	\$	\$	\$	\$
E. I	Line 2 C multiplied by Line 2 D	\$ .	\$	\$	\$
3. To	otal collectible fees: Add lines 1 E and 2 E	\$	\$	\$	\$
	ACTUAL STUDENT HEALTH SERVICES REV	ENUES		Amo	ount
4. A	Total Student Health Service Income per gene	ral ledger	÷'	\$ 7/048.69	
В	Less: Clinical Service Fees collected from str	udents		\$	
C. Less: Service Fees collected for employee services					5.0 1
D. Less: Other program income (e.g. Medi-Cal)					
5. TOTAL STUDENT FEES COLLECTED (LINE 4 A subtract B, C, D)					
state ma	YEE CERTIFICATION: The State of California requires that so andates in order for the district to receive reimbursement. Yo actual data or have provided a good faith estimate which you n your personal knowledge or information." This information is	ur signature of "certify under	n this form co penalty of pe	erines mai yo eriurv to be tru	ie and correc

### 1/84 Health Fee Elimination COLLEGE STUDENT HEALTH FEES

11	Modusto Modusto			04/-05	
District	College	College			ar
Use a	separate form 1.8 for each college campus	s with stude	nt health	services.	
	CALCULATION OF "COLLECTIBLE FEES"	Summer or 1 <sup>st</sup> Qtr	Fall or	Winter/ 3 <sup>rd</sup> Qtr	Spring/ 4th Qtr
1 AT	Total FULL-TIME student enrollment				
B. N	Number of BOGG/waiver FULL-TIME students	s		·	
C. A	A subtract B (FULL-TIME fee students)				
D. F	ULL-TIME fee (e.g. \$12.00/semester)	\$	\$	\$	\$
E. L	ine 1 C multiplied by Line 1 D	\$	\$	\$	\$
2 A. T	otal PART-TIME student enrollment				
B. N	lumber of BOGG/waiver PART-TIME students	5	77 <b>A</b>		
C. A	subtract B ( PART-TIME fee students)				
D. P	PART-TIME fee (e.g. \$9.00/semester)	\$	\$	\$	\$
E. I	Line 2 C multiplied by Line 2 D	\$	\$	\$	\$
3. To	tal collectible fees: Add lines 1 E and 2 E	\$	\$	\$	\$
	ACTUAL STUDENT HEALTH SERVICES RE	VENUES		Amo	ount
4. A	Total Student Health Service Income per gen	eral ledger	Ŧ <sup>*</sup>	\$ 360	159,4/
В	Less: Clinical Service Fees collected from s	students		\$	
C.	Less: Service Fees collected for employee	services		\$ 53	500
D.	Less: Other program income (e.g. Medi-Ca	i) :		\$	
5. TC	TAL STUDENT FEES COLLECTED (LINE 4	A subtract E	3, C, D)	\$	·
state ma reported based or Employe	YEE CERTIFICATION: The State of California requires that andates in order for the district to receive reimbursement. A actual data or have provided a good faith estimate which your personal knowledge or information. This information are Signature:	Your signature o ou "certify under n is used for cos	n this form c penalty of pe t accounting Date	emmes mai vo	ie and corre /.
	ee Name: (print) ave any questions, please contact	Position	-		•
PLEASE	SUBMIT THIS INFORMATION BY; TO				·

	·		

Community College Mandated Cost Manual State Controller's Office · · For State Coritroller Use only-**CLAIM FOR PAYMENT** (19) Program Number 00234 Pursuant to Government Code Section 17561 (20) Date Filed **HEALTH FEE ELIMINATION** (21) LRS Input (01) Claimant Identification Number: Reimbursement Claim Data CC 50150 (22) HFE-1.0, (04)(b) (02) Claimant Name 413,324 Yosemite Community College District ₿ (23)County of Location Stanislaus (24)Street Address P. O. Box 4065 Ε R (25)Zip Code State City Ε 95352 CA Modesto Reimbursement Claim **Estimated Claim** (26)Type of Claim (09) Reimbursement (27)(03) Estimated (28)(10) Combined (04) Combined (29)(05) Amended (11) Amended (30)(06)(12)Fiscal Year of Cost 2005-2006 2006-2007 (31)(13)(07)Total Claimed Amount 413,324 454,000 (14)(32)Less: 10% Late Penalty, not to exceed \$1,000 (33)(15)Less: Prior Claim Payment Received (34)(16)**Net Claimed Amount** 413,324 \$ (35)(17)(80)Due from State 413,324 454,000 (36)(18)Due to State (37) CERTIFICATION OF CLAIM In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive. I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant. The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct. Date Signature of Authorized Officer Vice Chancellor, Fiscal Services Teresa Scott Type or Print Name (38) Name of Contact Person for Claim (858) 514-8605 Telephone Number: kbpsixten@aol.com SixTen and Associates E-mail Address:

State Controller's Office	Community college Ma	ndated Cost Manua
	ATED COSTS EE ELIMINATION	FORM
	I SUMMARY	HFE-1.0
(01) Claimant:	(02) Type of Claim:	Fiscal Year
	Reimbursement	X
Yosemite Community College District	Estimated	2005-2006
(03) List all the colleges of the community	college district identified in form HFE-1.1,	line (03)
	(a)	(b)
	e of College	Claimed Amount
1. Modesto Junior College		\$350,020.76
2. Columbia College		\$ 63,303.36
3.		·
4.		
5.		
3.		
7		
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0.		
		-  ···

[Line (3.1b) + line (3.2b) + line (3.3b) + ...line (3.21b)]

(04) Total Amount Claimed

State Controller's Office Community College Mandated Cost Manual **MANDATED COSTS** PHOGRAM **FORM HEALTH FEE ELIMINATION** HFE-1.1 **CLAIM SUMMARY** (01) Claimant: (02) Type of Claim: Fiscal Year Yosemite Community College District Reimbursement 2005-2006 Estimated (03) Name of College: Modesto Junior College (04) Indicate with a check mark, the level at which health services were provided during the fiscal year of reimbursement in comparison to the 1986/87 fiscal year. If the "Less" box is checked, STOP, do not complete the form. No reimbursement is allowed. **LESS** SAME MORE Χ Direct Cost Indirect Cost of: Total 36.38% (05) Cost of Health Services for the Fiscal year of Claim \$ 506,863 \$ 184,397 \$ 691,260 (06) Cost of providing current fiscal year health services in excess of 1986/87 \$ \$ \$ Cost of providing current fiscal year health services at 1986/87 level 506,863 184,397 691,260 [Line (05) - line (06)] (0) complete Columns (a) through (g) to provide detail data for health fees Collection Period (a) (b) (d) (c) (e) (f) (g) Number of Number of Unit Cost for Full-time Part-time Unit Cost for Student Health Full-time Part-time Full-time Student Part-time Student Fees That Could Students Students Student per Health Fees Student per Health Fees Have Been Educ. Code Educ. Code Collected (a) x (c) (b) x (e) §76355 §76355 (d) + (f)Per Fall Semester \$ \$ \$ Per Spring Semester \$ \$ \$ Per Summer Session \$ \$ \$ Per First Quarter \$ \$ \$ Per Second Quarter \$ \$ \$ 5. Per Third Quarter \$ (09) Total health fee that could have been collected: The sum of (Line (08)(1)(c) through line (08)(6)(c) 335,739 (10) Subtotal [Line (07) - line (09)] 355,521 Cost Reduction ess: Offsetting Savings, if applicable (12) Less: Other Reimbursements, if applicable 5,500.00 (13) Total Amount Claimed [Line (10) - {line (11) + line (12)}] 350,021

Revised 12/05

State Controller's Office **Community College Mandated Cost Manual** MANDATED COSTS **OGRAM FORM HEALTH FEE ELIMINATION** HFE-1.1 **CLAIM SUMMARY** (01) Claimant: (02) Type of Claim: Fiscal Year Yosemite Community College District Reimbursement 2005-2006 Estimated (03) Name of College: Columbia College (04) Indicate with a check mark, the level at which health services were provided during the fiscal year of reimbursement in comparison to the 1986/87 fiscal year. If the "Less" box is checked, STOP, do not complete the form. No reimbursement is allowed. **LESS** SAME MORE Direct Cost Indirect Cost of: Total 36,38% (05) Cost of Health Services for the Fiscal year of Claim \$ 96,642 35,158 \$ 131,800 (06) Cost of providing current fiscal year health services in excess of 1986/87 \$ \$ Cost of providing current fiscal year health services at 1986/87 level 96.642 35,158 131.800 [Line (05) - line (06)] Complete Columns (a) through (g) to provide detail data for health fees Collection Period (a) (b) (c) (d) (f) (g) (e) Number of Number of Unit Cost for Full-time Unit Cost for Part-time Student Health Full-time Part-time Full-time Student Part-time Fees That Could Student Students Students Student per Health Fees Student per Health Fees Have Been Educ, Code (a) x (c) Educ. Code (b) x (e) Collected §76355 §76355 (d) + (f)Per Fall Semester \$ \$ \$ Per Spring Semester \$ \$ \$ 2. Per Summer Session \$ \$ 3. Per First Quarter \$ \$ \$ Per Second Quarter \$ \$ 5. Per Third Quarter \$ \$ (09) Total health fee that could have been collected: The sum of (Line (08)(1)(c) through line (08)(6)(c) 66,440 (10) Subtotal [Line (07) - line (09)] 65,360 **Cost Reduction** ess: Offsetting Savings, if applicable \$ (12) Less: Other Reimbursements, if applicable 2,057.00

[Line (10) - {line (11) + line (12)}]

63,303

Total Amount Claimed -

Revised 12/05

### MANDATED COSTS 1/84 HEALTH FEE ELIMINATION COMPONENT/ACTIVITY COST DETAIL

FORM HFE-2

	COMPONENT/A	ACTIVITY COST DETAIL		re-2
(01) Claimant		(02) Fiscal Year costs wer		
osemite Comm	unity College District		200	05-2006
	in column (a) and/or (b), as appli		(a)	(b)
Service was	provided by student health service	e fees for the indicated fiscal yea		FY of Claim
Accident Re	ports		1986/87 X	7 of Claim X
Appointmen		•	X	X
	Physician, surgeon	•	X	X
	ology, Family practice	•	X	X
	Medicine		×	X
	Physician			
Dental S				
	Labs, (X-ray, etc.,)		X	X
-	ogist, full services			
	Change Appointments	·	X	, X
	ed Nurse		X	X
Check A	ppointments		X	X
Assessment	, Intervention and Counseling			
Birth Co			X	X
Lab Rep	orts		X	Х
Nutrition			X	X
	sults, office		X	X
	I Disease		X	) x
	nicable Disease		x	x
	espiratory Infection		l x	X
	ose and Throat		l x	x
Eye/Visi			l x	x
	logy/Allergy		l x	) x
	ogy/Pregnancy Service		l x	X
Neuralgi			l x	x
Orthope			X	x
Genito/U			x	X
Dental	in at y		l x	x
Gastro-Ir	ntestinal		x	x
	ounseling		x	x
	ervention		Î	l x
	use Reporting and Counseling		l â	l x
	ce Abuse Identification and Couns	alina	^	^
		eling		
Eating D	Immune Deficiency Syndrome		X	. X
Weight C			X	X
•			X	X
Personal	пуунте		X	X
Burnout Other Mo	edical Broblems list		X	X
Other Me	edical Problems, list			
	s, minor illnesses			
Recheck	Minor Injury		X	X
			ĺ	1

Drugs

Child Abuse

Health Talks or Fairs, Information Sexually Transmitted Disease

Acquired Immune Deficiency Syndrome

X X X X X X

Commur

Program 234

### MANDATED COSTS 1/84 HEALTH FEE ELIMINATION COMPONENT/ACTIVITY COST DETAIL

Place an "X" in column (a) and/or (b), as applicable, to indicate which health	(a)	(b)
Service was provided by student health service fees for the indicated fiscal year.	FÝ	ÈΥ
	1986/87	of Cla
Birth Control/Family Planning	X	X
Stop Smoking	X	X
Library, Videos and Cassettes	X	l x
Elbrary, viacou and cappolics		
First Aid, Major Emergencies	X	X
First Aid, Minor Emergencies	X	X
First Aid Kits, Filled		
Immunizations		
Diphtheria/Tetanus	X	X
Measles/Rubella	X	X
Influenza	X	X
Information	×	×
Insurance		
On Campus Accident	X	X
Voluntary	X	X
Insurance Inquiry/Claim Administration	×	X
Laboratory Tests Done	*	
Inquiry/Interpretation	X	X
Pap Smears	1	
Physical Examinations	1	
Employees	1	
Students	X	X
Athletes	X	X
Medications		
Antacids	X	X
Antidiarrheal -	X	X
Aspirin, Tylenol, etc.,	X	X
Skin Rash Preparations	X	X
Eye Drops	X	X
Ear Drops		
Toothache, oil cloves	X X	X
Stingkill Midel Manatruel Cramps	l â	l â
Midol, Menstrual Cramps Other, list>	l â	l â
Outer, list>	}	
Parking Cards/Elevator Keys	X	X
Tokens	ļ	
Return Card/Key		
Parking Inquiry	X	X
Elevator Passes	X	×
Temporary Handicapped Parking Permits	^	ı ^

Commun'

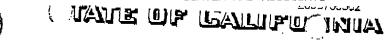
Program 234

### MANDATED COSTS 1/84 HEALTH FEE ELIMINATION COMPONENT/ACTIVITY COST DETAIL

—— COMPONENT/ACTI	VIII COST BETAIL	'''	
01) Claimant	(02) Fiscal Year costs were incu	rred:	
osemite Community College District	(52) 1.0001 1.001 00010 1100		-2006
03) Place an "X" in column (a) and/or (b), as applicable	to indicate which health	(a)	(b)
Service was provided by student health service fe		FY	FY.
dervice was provided by student health service to	co for the indicated fiscal year.	1986/87	of Clain
Referrals to Outside Agencies			
Private Medical Doctor		X	. х
Health Department		X	Х
Clinic		X	Х
Dental		X	Х
Counseling Centers		X	Х
Crisis Centers		X	X
Transitional Living Facilities, battered/homeles	s women	X	Х
Family Planning Facilities		X	Х
Other Health Agencies			
Stroit Fiduliti Agoriolog			
Tests		×	X
Blood Pressure	•	X	X
Hearing		X	Х
Tuberculosis		X	Х
Reading		X	Х
Information		X	Х
Vision		X :	Х
Glucometer		X	Х
Urinalysis		X	Х
Hemoglobin		X	Х
EKG			
Strep A Testing		X	Х
PG Testing		1	
Monospot			
Hemacult			
Others, list			
Miscellaneous			
Absence Excuses/PE Waiver		X	X
Allergy Injections		X	X
Bandaids		X	X
Booklets/Pamphlets		X	X
Dressing Change		X	X
Rest		X	X
Suture Removal		X	Х
Temperature		X	X
Weigh		X	X
Information		X	X
Report/Form		X	X
Wart Removal		×	X
Others, list			
Committees			
Safety		X	×
Environmental		$\begin{bmatrix} \hat{x} \end{bmatrix}$	x
Disaster Planning		l â	X
2.0dotor raining			^
		i 1	

State Controller's Offi	ce			Community College	Mandated Cost Man
	CLAIM FOR PAYN ursuant to Government Cod HEALTH FEE ELIMIN	e Section 17561		(19) Program Number 0023 (20) Date Filed/_/ (21) LRS Input/_/	
(01) Claimant Identification	Number:	CC 50150		Reimbursemen	
(02) Claimant Name	Yosemite Co	mmunity College District		(22) HFE-1.0, (04)(b)	
County of Location		Stanislaus		(23)	329,80
Street Address	P	.O. Box 4065		(24)	
City	State	Zip Code	· .	(25)	· · · · · · · · · · · · · · · · · · ·
Modesto Type of Claim	CA	95352		1(20)	
Type of Clant	Estimated Claim	Reimbursement	Claim	(26)	
	(03) Estimated	(09) Reimbursement		(27)	<u> </u>
	(04) Combined	(10) Combined		(28)	
	(05) Amended	(11) Amended	х	(29)	·
Fiscal Year of Cost	(06)	(12)		(30)	
Total Claimed Amount	(07)	2006-2007		(31)	
,		\$	329,864		
Less: 10% Late Penalty,	not to exceed \$10,000	(14) \$	10,000	(32)	
Less : Prior Claim Payme	nt Received	(15) \$	263,110	(33)	
Net Claimed Amount		(16)	56,754	(34)	
Due from State	(08)	(17) \$	56,754	(35)	
Oue to State		(18)	30,134	(36)	
37) CERTIFICATION OF		···			
in accordance with the prov mandated cost claims with Government Code Sections	isions of Government Code Sect the State of California for this pro 1990 to 1998, including	tion 17561, i certify that I am t Pgram, and cortify under pen	the officer at sity of perjur	ithorized by the community colleg y that I have not violated any of the	ge district to file he provisions of
I further certify that there we such costs are for a new per	as no application other than from	the claiment, nor any grant	er paymont r	ecoived, for reimbursement of co savings and reimbursements sel on currently maintained by the cl	ofe eleimod horate and
The amounts for this Estima	itad Cisim and/or Pelmburreen-	f Alasus au		on correctly maintained by the cli for payment of estimated and/or that the foregoing is true and cor	
ignature of Authorized Offi	icer (USE BLUE INK)		r	)ate	
Sum	1 Scott		J	2-2-09	
resa Scott			~·· V	ice Chancellor, Fiscal Services	
pe or Print Name 8) Name of Contact Perso	n for Ola	····		tle	<u></u>
		Telephone	Number	/0E0\ E44 BCOF	
ixTen and Associa	tes		Address:	(858) 514-8605 kbpsixten@aoLcom	
rm FAM-27 (Revised 09/	03)				<u> </u>

PN=TRNRST



fund name

THE TREASURER OF THE STATE WILL PAY OUT OF THE H THE THE TOWN NO.

0001 GENERAL FUND

CC50150

MO. DAY! YR. 6870 03 12 2007

90-1342/1271 60180821

70: 180821 TREASURER YDSEMITE COMM COLL DIST STANISLAUS COUNTY P D BOX 4065 MODESTO CA 95352

£¥263110.00

CALIFORNIA STATE CONTROL

misiliadaam Goldobalim

DETACH ON DOTTED LINE KEEP THIS PORTION FOR YOUR RECORDS

60-180821

ISSUE DATE: 03/12/2007 ISSUE DATE: 03/12/2007

CLAIM SCHEDULE NBR: MA64147E

REIMBURSEMENT OF STATE MANDATED COSTS PLEASE CALL GWEN 8916-3242341 FOR QUERIES ABOUT THIS CLAIM. PROG : HEALTH FEE ELIMINATION (CC) 2006/2007 ESTIMATED PAYMENT CLAIMED AMY: 454,000.00 TOTAL ADJUSTMENTS: TOTAL APPROVED CLAIMED AMT: LESS PRIOR PAYMENTS: 454,000.00 PRORATA PERCENT: 57.953835 PRORATA BALANCE DUE: APPROVED PAYMENT AMOUNT: 190,890.00-263,110.00 PAYMENT OFFSETS -NONE

NET PAYMENT AMOUNT:

263,110.00

RECEIVED MAR 16 2007 CONTROLLER'S OFFICE

State Controller's Office	Community College Mar	rdated C	ost Manu
HEALTH F	ATED COSTS EE ELIMINATION M SUMMARY		FORM HFE-1.0
(01) Claimant:	(02) Type of Claim:	<i></i>	iscal Year
Yosemite Community College District	Reimbursement	X	
	Estimated		2006-2007
03) List all the colleges of the community	college district identified in form HFE-1.1, lin	e (03)	
N	(a)	<del>-</del>	(b)
Name	e of College		Claimed Amount
. Modesto Junior College		\$	
. Columbia College			280,734
		\$	49,130
		-	
		<del> </del>	· ·
		<del> </del> -	<u> </u>
		+	
		<del>  -</del>	
		-	
		<del>-</del>	
		<del> </del>	
		<del> </del>	
Total Amount Claimed [Lir	ne (3 1b) + line (2 2b) + line (2 0b)	-	
[[]	ne (3.1b) + line (3.2b) + line (3.3b) +line (3.21b)]	\$ 32	9,864

State Controller's Office			A Park Park Andrews		·········	_	Communit	y Coll	ege Mand	lateo	i Cost Man
PROGRAM			ATED COS	•						T	
234			EE ELIMINA		ł					1	FORM HFE-1,1
(01) Claimant:	<u> </u>	CLAII	M SUMMAR	_	<del>-</del>					1	- ** = ***
Yosemite Community College Distric	ot .		(02) Type o	t Claim nbursei							Fiscal Year
			1		nent						2006-2007
(03) Name of College:	Modesto Jun	ior College		nated	_						<u>.</u>
(04) Indicate with a check ma comparison to the 1986/87 fis-	rk the level of which	- 1 111	es were pro	vided	during t	he fis	cal veer o	f role			
comparison to the 1986/87 fis- allowed.	cal year. If the "Less	s" box is chec	ked, STOP,	do no	comple	te the	form. N	o rein	ibursem nbursen	ent ient	in : Is
	LESS		AME X				RE	٠.			
			<u> </u>			<u> </u>	Direct Cost	lodic	ect Cost of:	<del></del>	Total
								i i	41,07%		) D(HI
(05) Cost of Health Services for the I		···.				\$	633,397	s	260,136	\$	893,533
06) Cost of providing current fiscal y	ear health services in ex	cess of 1986/87				\$		\$		\$	
O7) Cost of providing current fiscal y [Line (05) - line (06)]	ear health services at 19	86/87 level			. ,	\$	633,397	\$	260,136	\$	893,533
08) Complete Columns (a) through (	g) to provide detail data	for health fees									
Collection Period	(a) Number of Full-time Students	(b) Number of Part-ilme Students	(C) Unit Cost for Full-time Student per Educ. Code §76355	He	(d) Full-time Student aith Fees a) x (c)	SI Et	(e) ill Cost for Part-lime udent per luc. Code \$76355	St Heal	(f) rf-lime udent lih Fees ) × (e)	Fee H	(g) Ident Health is That Could Lave Been Collected (d) + (f)
Per Fall Semester				\$		-	-	\$		\$	(11) + (1)
Per Spring Semester				\$		<del>                                     </del>					
Per Summer Session				┼				\$		\$	
Per First Quarter			<u> </u>	\$		<u> </u>		\$		\$	•
Per Second Quarter				\$				\$	-	\$	
Per Third Quarter				\$	-			\$	-	\$	-
				\$				\$	-	5	-
Total health fee that could have be	en collected:		The sum	of (Lin	e (08)(1)(	c) thro	ugh line (08	)(6)(c)		 \$	F00 60C
Subtotal				įi	Line (07) -	line (	09)]				599,596
st Reduction	•						·			<u>.                                    </u>	293,937
Less: Offsetting Savings, if applic	able				· <u> </u>		<u> </u>				
Less: Other Reimbursements, If a	pplicable		···········		<u> </u>				\$		7,703
Total Amount Claimed	· · · · · · · · · · · · · · · · · · ·	-		 Line /10	)) - {line ('	11) 4 6	ne (12\11		\$		5,500
sed 12/05					·/ fints (	· +/ + 11	(12)}		\$	2	280,734

Controller's Office							Communit	y Cali	ege Mano	later	i Cost Mar
PROGRAM			ATED COST							T	
234	HEALTH FEE ELIMINATION							1	FORM		
(04) (04)	CLAIM SUMMARY									HFE-1.1	
(01) Claimant:	···		(02) Type of	Claim:	,		·			<u> </u>	Fiscal Yes
Yosemite Community College District	ŧ		Reim	bursen	nent		Y				2006-200
(00) No. 1	<u> </u>		Estin	ated	·						
(03) Name of College:	Columbia Col										
(04) Indicate with a check man comparison to the 1986/87 fisc allowed.	k, the level at which al year If the "Less	health services" how is choo	es were prov	ided (	luring ti	he fis	cal year o	f rein	nbursen	rent	in
allowed.	,,=====================================	DOX IS CITED	NBQ, \$10P, 0	jon ot	comple	te th	eform.N	o reil	mburser	nent	: is
	LESS	S	AME			MC	RE				
<u> </u>		L	х			<u> </u>	Direct Cost	1 1841	ireal Cost of:	_	
······································							ISOC 13BUC	1	#807 €051 <del>01</del> 2 41.07%		Talel
05) Cost of Health Services for the F	iscal year of Claim					\$	113,326	\$	46,543	\$	159,869
06) Cost of providing current fiscal ye	ar health services in exc	cess of 1986/87				\$	<u>-</u>	\$		\$	
Cost of providing current fiscal year health services at 1986/87 level						46,543	┪	159,869			
08) Complete Columns (a) through (g	)) to provide detail data f	for health fees									
Collection Period	(2) Number of Full-time Students	(b) Number of Part-time Students	(C) Unit Cost for Full-time Student per Educ. Code §76355	S Hes	(d) ull-time tudent alth Fees a) × (c)	SI	(e) nit Cost for Part-time udent per luc, Code §76355	S Hes	(f) srt-time Sudent sith Fees o) x (a)	Fee	(g) udent Health is That Could tave Been Collected (d) + (f)
Per Fall Semester				\$					- · ·	8	1-7 (-7
Per Spring Semester		<u> </u>		\$	··· · · · · · ·	┼					
Per Summer Session		<u>.                                    </u>	. ,,,,,	<del>                                     </del>		┢		\$		\$	-
Per First Quarter				\$	-	<u> </u>	· [	\$	-	\$	
Per Second Quarter				\$	-	<u> </u>		\$	-	\$	-
·				\$				\$	-	\$	_
Per Third Quarter				\$	-			<del></del>		_	
Total health fee that could have be	en collected:		The sum		<u> </u> e (08)(1)(	c) thro	ugh line (08		<del>-  </del>	\$	
) Subtotal					ine (07) -					\$	109,739
st Reduction		<u></u>			(01)		<del> </del>			\$	50,130
Less: Offsetting Savings, if applica	able	<u>, ,</u>					<u>.                                    </u>				
Less: Other Reimbursements, if a	pplicable	,			<u> </u>						
Total Amount Claimed		,		ine (10	) - {line (	11) +1	ine (12)11				1,000
lsed 12/05				- 1/2	, ()	,	······································		\$	)	49,130

03/18/2009 12:48	8585148645		ND ASSOCIATS			PAG	
			Community Colle	ege Man	dated (	nod N.	
234 (01) (05)	(/04 NE	MANDATED COSTS EALTH FEE ELIMINATION ENT/ACTIVITY COST DET			R	RM	nual
(01) Claimant Yosemite Community				- 1	HF	E-2	- 1
Yosemite Community	College District	(UZ) Fiscal Yea	ar costs were inc	urred:			
Service was service	olumn (a) and/or (b), as	applicable, to indicate whi	<b>=</b>		2006	-2007	
inde was prov	ided by student health :	applicable, to indicate whi service fees for the indicate	ch health		(a)		
Accident Reports			ed fiscal year.		FY	(b) FY	
1				198	86/87	of Clair	m
Appointments	. •			- 1 -	x T	X	
College Physic	cian, surgeon Family practice			1,	x	v	
Internal Medic	ramily practice			3		X X	
Outside Physic	nie zien			\ \ \ \		x	- 1
Dental Service.	e.			×		x	
Outside Labs. (	(X-ray ota \			1	- 1	•	1
y yviiologist, ti	III Spraince				.		
' ∨ande/Change	Annointmost			X	- 1	X	1
49.45(G) (A) 1.14	<del>\$</del> ω			l x			1
Check Appointm				x		X	1
Assessment, Interve	ention and Counseling			l x	-   .	X X	1
	and Counseling			1	- 1	^	l
Lab Reports	•	•			-		
Nutrition				X	- 1	X	
Test Results, offi	ce			X X	- 1	X	
Venereal Disease	<u>.</u>			X	- 1	×	
Communicable D	išease		- 1	X	- 1	$\hat{x}$	
Upper Respiraton Eyes, Nose and T	y intection			X		$\hat{x}$	
Eye/Vision	nioal			Х		x	
Dermatology/Allen	άν			X		x	
Gynecology/Predn	ar Iancy Service			X X		X	
rveuraigic	2 -411(00			X		x x	
Orthopedic			1	$\hat{\mathbf{x}}$		$\hat{x}$	
Genito/Urinary			j	X		è l	
Dental				X		<	
Gastro-Intestinal				X X	)		
Stress Counseling Crisis Intervention			i i	X	X		
	ting and Counseling	•		x	l â		
Substance Abuse I	ung and Counseling dentification and Couns	_D	1	X	l â		
Acquired Immune D	Deficiency Syndrome	eling					
Eating Disorders	and of the state o		1	X	X		
Weight Control			1	X	Х		
Personal Hygiene			]	X X	X X X		
Burnout				x l	×		
Other Medical Probl	ems, list		1	·`	, ,		
Examinations, minor illn	esses			į			
Recheck Minor Injur				x	. v	- 1	
-				^	X		
Health Talks or Fairs, In				ļ			
Sexually Transmitted Drugs	u visease		<b>!</b> .	X	Х	ĺ	
Acquired Immune De	aficiency Syndrome		ł		X	- (	
Child Abuse	wyniaiomo			X	X		
					,,	- 1	

PAGE 08 Community College Mandated Cost Manual

## MANDATED COSTS

MANDATED COSTS  1/84 HEALTH FEE ELIMINATION COMPONENT/ACTIVITY COST DETAIL  (01) Claimant	Н	FORM IFE-2
Yosemite Community College District (02) Fiscal Year costs were inc		006-2007
(03) Place an "X" in column (a) and/or (b), as applicable, to indicate which health Service was provided by student health service fees for the indicated fiscal year.	(a) FY 1986/8	(b) FY 37 of Claim
Birth Control/Family Planning Stop Smoking Library, Videos and Cassettes	X X X	X X X
First Ald, Major Emergencies First Aid, Minor Emergencies First Aid Kits, Filled	×	×
Immunizations Diphtheria/Tetanus Measles/Rubella Influenza Information	X X X	X X X
Insurance On Campus Accident Voluntary Insurance Inquiry/Claim Administration	X X X	X X X
Laboratory Tests Done Inquiry/Interpretation Pap Smears	×	x
Physical Examinations Employees Students Athletes	××	X X
Medications Antacids Antidiarrheal Aspirln, Tylenol, etc., Skin Rash Preparations Eye Drops Ear Drops Toothache, oil cloves Stingkill Midol, Menstrual Cramps Other, list—>	X X X X X	x x x x x x
Parking Cards/Elevator Keys Tokens Return Card/Key Parking Inquiry Elevator Passes	×	x x
Temporary Handicapped Parking Permits	X X	x x

### MANDATED COSTS 1/84 HEALTH FEE ELIMINATION COMPONENT/ACTIVITY COST DETA

**FORM** 

	CTIVITY COST DETAIL	HF	E-2
(01) Claimant Yosemite Community College District	(02) Fiscal Year costs were incu		2007
(03) Place an "X" in column (a) and/or (b), as appli	icable, to indicate which health	(a)	5-2007
Service was provided by student health service	ce fees for the indicated fiscal year.	FY	(b) FY
		1986/87	of Claim
Referrals to Outside Agencies			
Private Medical Doctor		×	X
Health Department Clinic		X	X
Dental		X	X
Counseling Centers		X	X
Crisis Centers		X	X
Transitional Living Facilities, battered/hom	Aless woman	X	X
Family Planning Facilities	CICSS MOLLIELL	X	X
Other Health Agencies		X	×
Tests			
Blood Pressure		X	Х
Hearing		X	X
Tuberculosis		X	X
Reading		X X	X X
Information		x	â
Vision		Î	x
Glucometer		x	â
Urinalysis		l $\hat{x}$ l	x
Hemoglobin EKG		x	x
Strep A Testing		1 ]	
PG Testing		X	. x
Monospot		1 1	
Hemacult		1 1	
Others, list			
Miscellaneous			
Absence Excuses/PE Waiver		. [	
Allergy Injections		X	X
Bandaids		X	X
Booklets/Pamphlets		××	X
Dressing Change		x	X
Rest		x	X
Suture Removal		x	x
Temperature		x	x
Weigh		â	x
Information Report/Form		x	x
Wart Removal		X	x
Others, list		X	х
Committees	·		
Safety		ſ	ľ
Environmental		Х	x
Disaster Planning		X	X
•		X	X
		1	