COMPARING SAN DIEGO COUNTY SERVICES
A Twelve-County Analysis

Prepared for the Girard Foundation in Partnership with the *Voice of San Diego*

February 1, 2010
This report examines several performance indicators of county-provided public services in the 12 most populous California counties. In particular, San Diego County’s services are compared to the other 11 counties when relevant.

We thank Claremont McKenna College Life Trustee Buzz Woolley, whose support has made this project possible. We also thank the Board of Governors of the Rose Institute, Dr. Ralph Rossum, Dr. Florence Adams, and Marionette Moore for their continued guidance and support on this project.

The contents of this report are the sole responsibility of the authors.

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Claremont, CA
February 1, 2010
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INTRODUCTION AND METHODOLOGY

This report examines services in the twelve most populous California counties: Los Angeles, San Diego, Orange, Riverside, San Bernardino, Santa Clara, Alameda, Sacramento, Contra Costa, Fresno, Ventura, and San Francisco. The report focuses on the most significant county services, namely public protection, welfare, public assistance, and mental health, but is not exhaustive. It is organized along these areas of service. While the data are useful for examining any of these twelve counties, San Diego is the county of focus for this study.

Under public protection, caseloads, expenditures, and administrative staffing for Sheriff, District Attorney, Public Defender, Court, and Probation services are examined. Under welfare, eligibility estimates for Medi-Cal, Food Stamps, CalWORKs, and the Supplementary Security Income program were devised, and those estimates are compared to enrollment data. Additionally, funding data and application denials are examined. Under the public assistance category this report discusses In-Home Supportive Services, Adult Protective Services, and Child Welfare Services. The report concludes with a brief summary of mental health services.

Whenever possible, the Rose Institute collected data from standardized state sources, particularly from the California Department of Social Services. Sometimes, however, standardized data was not available, or the state data was faulty because of self-reporting differences. In those instances, the Rose Institute called the relevant county departments and collected data from county officials. In the welfare section, the Census Bureau’s American Community Survey from 2005-2007 was used to devise estimates for the number of persons eligible for welfare programs in the different counties. Population data from 2007 was used for FY07 per capita expenditure calculations and population data from 2008 was used for FY08 per capita expenditure calculations, unless otherwise noted. All figures reflect calculations made by the Rose Institute with the available data.

In some areas, research remains to be done to draw conclusions for public policy purposes. In the least, however, this report collects the relevant data that allow policy analysts and interested citizens to ask the right questions.

Executive summaries are provided at the beginning of Sections 2 through 5.
SECTION I. DEMOGRAPHIC AND FINANCIAL OVERVIEW

This section provides an overview of demographics and county finances for the twelve most populous California counties.

Population

Figure 1.1: Total Unincorporated Population, 2008
Source(s): 2008 California Statistical Abstract

<table>
<thead>
<tr>
<th>COUNTY NAME</th>
<th>Total Population</th>
<th>Unincorporated Population</th>
<th>Percentage Unincorporated Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>San Francisco1</td>
<td>824,525</td>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td>Ventura</td>
<td>831,587</td>
<td>96,309</td>
<td>11.6%</td>
</tr>
<tr>
<td>Fresno</td>
<td>931,098</td>
<td>174,268</td>
<td>18.7%</td>
</tr>
<tr>
<td>Contra Costa</td>
<td>1,051,674</td>
<td>173,573</td>
<td>16.5%</td>
</tr>
<tr>
<td>Sacramento</td>
<td>1,424,415</td>
<td>563,514</td>
<td>39.6%</td>
</tr>
<tr>
<td>Alameda</td>
<td>1,543,000</td>
<td>140,825</td>
<td>9.1%</td>
</tr>
<tr>
<td>Santa Clara</td>
<td>1,837,075</td>
<td>99,122</td>
<td>5.4%</td>
</tr>
<tr>
<td>San Bernardino</td>
<td>2,055,766</td>
<td>298,013</td>
<td>14.5%</td>
</tr>
<tr>
<td>Riverside</td>
<td>2,088,322</td>
<td>554,571</td>
<td>26.6%</td>
</tr>
<tr>
<td>Orange</td>
<td>3,121,251</td>
<td>118,136</td>
<td>3.8%</td>
</tr>
<tr>
<td>San Diego</td>
<td>3,146,247</td>
<td>491,764</td>
<td>15.6%</td>
</tr>
<tr>
<td>Los Angeles</td>
<td>10,363,850</td>
<td>1,092,078</td>
<td>10.5%</td>
</tr>
</tbody>
</table>

Figure 1.1 shows the total population, the unincorporated population, and the percentage of the population that is unincorporated for the twelve counties examined. The figure is rank-ordered by total population. With an estimated 3.15 million residents, San Diego County is second only to Los Angeles County in total population. Over 400,000 (approximately 16 percent) of San Diego County residents live in unincorporated areas of the county. Figures 1.2 and 1.3 illustrate this information graphically.

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1 San Francisco has a unique status as a city-county, and therefore it has no unincorporated population.

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Figure 1.2: Total Population, 2008

Source(s): 2008 California Statistical Abstract

Figure 1.3: Total Unincorporated Population, 2008

Source(s): 2008 California Statistical Abstract

2 Unless otherwise indicated, all tables in this report compare California’s twelve most populous counties.
Economic Indicators

San Diego County’s economic indicators, including poverty and income, fall in the mid-range of the state’s largest counties. Figures 1.4 to 1.8 graphically compare poverty rates from 2007, average unemployment from 2008, unemployment from March 2009, median household income from 2007, and per capita personal income from 2006 for the state’s twelve most populous counties.

Figure 1.4: Poverty Rates, 2007
Source(s): US Census Bureau

Figure 1.4 shows that San Diego had the sixth highest poverty rate in 2007.

Figure 1.5: Average Unemployment Rates, 2008
Source(s): Bureau of Labor Statistics

Note that unemployment varies from month to month, and Figure 1.5 shows the average unemployment over calendar year 2008. San Diego had lower unemployment in 2008 than most of the other populous counties.
While unemployment has increased across all of the twelve counties in recent months, Figure 1.6 shows that San Diego has retained its position relative to the other counties.

Figure 1.7 shows that San Diego County had the sixth highest median household income in 2007.
Figure 1.8 shows that San Diego also had the sixth highest per capita personal income in 2006. Note that Figures 1.7 and 1.8 illustrate that median household income and per-capita personal income do not necessarily correlate. For example, San Francisco ranked seventh in terms of median household income in 2007 (at $67,333), but ranked first in terms of per capita personal income in 2006 (at $69,942 per capita).
Partisan Composition

Figure 1.9: Democratic Registration Percentages, May 2009
Source(s): California Secretary of State

Figure 1.10: Republican Registration Percentages, May 2009
Source(s): California Secretary of State

Figures 1.9 and 1.10 show the partisan composition of California’s twelve most populous counties as of May 2009. San Diego County has approximately the same number of registered Democrats and Republicans (36.6% and 36.0% respectively). Although the county has long leaned Republican, Democratic registration surpassed Republican registration in 2009.

Figure 1.9 shows that compared to the state’s other largest counties, San Diego has the second lowest Democratic registration (36.6%), surpassing only Orange County (32.0%). Notably, San Diego County falls in the mid-range for Republican registration, as seen in Figure 1.10. There has been an increasing number of Declined to State voters in all counties, but San Diego has the third highest percentage of these voters, at 23.3 percent, behind San Francisco and Santa Clara at 29.3 and 26.3 percent respectively.
County Expenditures

Figures 1.11 to 1.15 show the expenditures per capita for the twelve most populous counties in total spending, in public protection services, in health services, and in public assistance services. Each category of expenditure is examined from the Comprehensive Annual Financial Reports (CAFRs) from FY 2007-08. The CAFRs are used because they are more recent than State Controller Reports available at the time of this research, and because they are audited. The Controller Reports require different standards of reporting, however, and data from the FY 2006-07 Counties Annual Report is included for comparison under the total expenditure category.

Figure 1.11: Total County Per Capita Expenditures, FY 2007-08
Source(s): County Comprehensive Annual Financial Reports

Figure 1.11 shows the total county government expenditures per capita in FY 2007-08 for the twelve most populous California counties as reported in each county’s respective Comprehensive Annual Financial Report (CAFR). It should be noted that San Francisco is both a city and a county and thus has more municipal expenses and its expenditure figure is not directly comparable. San Diego County spends the second lowest per capita ($1,197) relative to the other populous counties. Only Orange County spends less per capita ($1,120). Figure 1.12 shows total county government expenditures per capita in FY 2006-07 as reported in the State Controller reports.

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3 Comprehensive Annual Financial Report (CAFR) data for each county are taken from the Statement of Revenues, Expenditures and Changes in Fund Balances.
Figure 1.12 shows the total county government expenditures per capita in FY 2006-07 for the twelve most populous California counties, excluding San Francisco, as reported to the State Controller. San Francisco, which spent $8,503 per capita, is excluded because it is both a city and a county and its figure is not directly comparable to the other populous counties. Note that Figures 1.11 and 1.12, taken from two different data sets, reveal similar spending patterns for these counties. Santa Clara County, however, which spent only $1,238 per capita in FY 2007-08 according to its CAFR (see Figure 1.11), spent $1,452 per capita in FY 2006-07 according to the State Controller report. This discrepancy is likely due to the Santa Clara Valley Medical Center expenditures being excluded from the CAFR number in Figure 1.11.
Figure 1.13 shows public protection expenditures per capita for FY 2007-08 as reported in each county’s respective Comprehensive Annual Financial Report. Note that compared with the California’s other largest counties, San Diego spends relatively less per capita on public protection. Public protection includes sheriffs, fire protection, probation, public defender, district attorney, and court expenditures, and these expenditures are reported explicitly under “public protection” in each county’s Comprehensive Annual Financial Report for FY 2007-08. It should be noted that San Francisco is both a city and county and its figure is not directly comparable to the other counties.
Figure 1.14 shows public assistance expenditures per capita for FY 2007-08 as reported in each county’s respective Comprehensive Annual Financial Report. San Diego spends less per capita on public assistance than seven of the other populous counties. Public assistance includes Food Stamps, CalWORKs, In-Home-Supportive Services, Adoption, Child Welfare Services, Foster Care Services, Medi-Cal, and other services. The data show that San Francisco spends more than other counties on these programs. While San Francisco is both a city and a county, public assistance services are the responsibility of county governments and its figure is largely comparable to the other counties.
Figure 1.15 shows health and sanitation expenditures per capita for FY 2007-08 as reported in each county’s respective Comprehensive Annual Financial Report. Fresno’s data were not comparable and were excluded. Among the state’s largest counties, San Diego spent a median amount per capita on health and sanitation in this year, which means that half of the counties spent more per capita and half spent less per capita. Note that the Comprehensive Annual Financial Report data often exclude county hospital expenditures, which are significant for Santa Clara and Alameda counties, from the health and sanitation figure.
Figures 1.16 to 1.18 show that as a proportion of its total expenditures, San Diego County’s expenditures for health, public protection, and public assistance are generally consistent with the proportions for the other counties. The data for these figures are taken from the State Controller’s Counties Annual Report for FY 06-07.

Figure 1.16: Health Expenditures as a Percentage of Total Expenditures, FY 2006-07
Source(s): California State Controller, Counties Annual Report FY 2006-07

Figure 1.17: Public Protection as a Percentage of Total Expenditures, FY 2006-07
Source(s): California State Controller, Counties Annual Report FY 2006-07
Figure 1.18: Public Assistance as a Percentage of Total Expenditures, FY 2006-07
Source(s): California State Controller, Counties Annual Report FY 2006-07
Figure 1.19 shows revenues per capita from the state and federal governments to the twelve most populous counties in FY 2007-08. Compared with the state’s other largest counties, San Diego received a median amount of funding from the state and federal governments combined in this fiscal year, though the amount is below the average of $751 per capita.

Figure 1.20 shows per capita federal assistance in FY 2006-07 to the most populous counties for which we have data. The figure shows that San Diego received a median amount of federal aid per capita in FY 2006-07; that is, five counties received more aid per capita and five received less.
Figure 1.21 shows per capita state assistance in FY 2006-07 to the most populous counties for which we have data. Note that San Diego County receives less money from the state than most of the other populous counties do. Note that most of the large counties that receive higher levels of per capita funding from the state, including Los Angeles, San Bernardino, Fresno, and Sacramento, have higher poverty rates than San Diego. Of course, other factors contribute to these disparities in state funding.

While San Francisco data is unavailable from the Counties Annual Report, other data indicate that San Francisco receives the highest per capita allocations from the state on a whole host of programs, which will be detailed later in this study.
Section II. Public Protection

EXECUTIVE SUMMARY

Public Protection is the biggest expense for most counties, including San Diego. All counties include under this category Sheriff, District Attorney, Public Defender, Probation, and Superior Court services. Data indicate that:

- **Caseloads**: Among the state’s largest counties, San Diego County has some of the lowest caseloads in its public protection departments.
  - It has the second smallest caseload for adult probationers per adult probation field officers out of the nine counties for which we have data;
  - It has the second smallest caseload both for indigent defendants per public defender and per investigator out of the eleven counties for which we have data;
  - It has the smallest number of submitted cases per district attorney, per DA investigator, and per DA clerical staff of the six counties for which we have data;
  - It has a below average number of crimes and arrests per sheriff in the Sheriff’s jurisdictional area.
  - It has about an average caseload for trials per judge and judicial position equivalents, and an average caseload for dispositions.

- **DA/PD Expenditures**: San Diego County spends the most money per District Attorney and Public Defender case of the counties for which data were available; it spends the second most per prosecutor and per public defender.

- **Investigators**: San Diego County has above average ratios of investigators per public defender and per district attorney in the twelve-county comparison. All twelve counties have a higher ratio of investigators to district attorney than investigators to public defender.

- **Administrative Staffing**: San Diego County has a high number of administrative staff compared to most other counties in the offices of the Sheriff, the District Attorney, and the Public Defender.

- **Sheriff’s Department Expenditures**: San Diego County has the second lowest cost per sheriff of the eleven counties for which we have data. It also has below-average crimes and arrests per sheriff.

- **Crime**: San Diego County has low crime in areas under the Sheriff’s jurisdiction. Countywide, San Diego has the second highest crime rate of the counties, attributable to high property crime.
Sheriffs and Crime

Figures 2.1 to 2.5 show that San Diego County has fewer sheriffs per capita than the average for the twelve most populous counties (Figure 2.1), that its per capita expenditures on Sheriff services are $28 less than the twelve-county average (Figure 2.2), and that San Diego County has fewer violent and property crimes than the twelve-county average (Figures 2.3-5) in its areas of service.4 On a countywide basis, San Diego has the second highest crime rate.

All averages in this section are for the counties for which data is available.

Figure 2.1: Number of Sheriffs per 100,000 People in Service Area, 2007
Source(s): 2007 Criminal Justice Profiles;5 2008 California Statistical Abstract

Figure 2.1 shows for the twelve most populous counties the number of sheriffs in 2007 per 100,000 people in each county’s service area, defined as the unincorporated parts of the county and any city or area in which the sheriff is contracted to provide services. Note that San Diego County had 244 sheriffs per 100,000 residents, which is less than the twelve-county average of 253 sheriffs per 100,000 residents. Alameda County is an outlier with 528 sheriffs per 100,000 residents.

4 Service Area refers to unincorporated parts of the county plus any other city or area in which the sheriff is contracted to provide services. Sheriffs include those serving in courts and county jails.

5 The 2007 criminal justice profiles are available from the office of the California Attorney General.
Figure 2.2: Sheriff Expenditures Per Capita, FY 2006-07
Source(s): California State Controller, Counties Annual Report FY 2006-07

Figure 2.2 shows, for the populous counties for which data were available, the public protection expenditures per capita for FY 2006-07. Note that 2007 population numbers were used to calculate the per capita figures. San Diego spent $81 per capita on Sheriff services in this fiscal year, less than eight of the counties in the figure and less than the average ($109) of the counties for which data were available.

Figure 2.3: Violent Crime per 100,000 People in Service Area, 2007
Source(s): 2007 Criminal Justice Profiles

Figure 2.3 shows for the twelve most populous counties the number of violent crimes in 2007 per 100,000 people in each county’s service area, defined as the unincorporated parts of the county and any city or area in which the sheriff is contracted to provide services. San Diego County had 366 violent crimes per 100,000 residents in its service area in this fiscal year, less than the twelve-county average of 395 violent crimes.
Figure 2.4 shows for the twelve most populous counties the number of property crimes in 2007 per 100,000 people in each county’s service area, defined as the unincorporated parts of the county and any city or area in which the sheriff is contracted to provide services. San Diego County had 1,277 property crimes per 100,000 residents in its service area in this fiscal year, less than the twelve-county average of 1,453 property crimes.

Figure 2.5 shows for the twelve most populous counties the number of all crimes, i.e. the sum of violent and property crimes, in 2007 per 100,000 people in each county’s service area, defined as the unincorporated parts of the county and any city or area in which the sheriff is contracted to provide services. San Diego County had 1,654 crimes per 100,000 residents in its service area in this fiscal year, less than the twelve-county average of 1,873 crimes.
**Countywide Crime**

It is important to note crime on a county-wide basis because county District Attorneys, Public Defenders, Courts, and Probation Departments have jurisdiction over the entire county, not just the Sheriff’s service area. Figures 2.6 to 2.8 show that while violent crime rates are low for San Diego County, it has by far the highest property crime, and therefore a high total crime.

**Figure 2.6: County-Wide Violent Crime per 100,000 People, 2007**

*Source(s): 2007 Criminal Justice Profiles*

Figure 2.6 shows the number of violent crimes in 2007 per 100,000 residents for the twelve most populous counties. San Diego County had a relatively low violent crime rate, at 434 per 100,000 residents. The twelve-county average was 506 violent crimes per 100,000 residents. Alameda and San Francisco Counties had the most violent crimes per 100,000 (819 and 791 respectively), while Ventura, Orange, and Santa Clara Counties had the lowest violent crimes per 100,000 (257, 265, and 307 respectively).
Figure 2.7 shows the number of property crimes in 2007 per 100,000 residents for the twelve most populous counties. San Diego County had the highest property crime rate, at 2,855 property crimes per 100,000 residents. The twelve-county average was 1,961 property crimes per 100,000 residents.

Figure 2.8 shows the number of total crimes in 2007 per 100,000 residents for the twelve most populous counties. San Diego County had the second highest total crime rate, at 3,304 crimes per 100,000 residents. The twelve-county average was 2,495 property crimes per 100,000 residents. San Diego County’s high total crime rate is due to its high property crime rate (see Figure 2.7).
Caseloads

Overall, San Diego public protection departments have fewer cases per official, suggesting more time commitment per case. This trend is particularly evident in the Probation, Public Defender, and District Attorney departments.

Sheriffs

**Figure 2.9: Total Crimes per Sheriff in Service Area, 2007**
*Source(s): 2007 Criminal Justice Profiles*

As we have noted, crime rates in San Diego County are slightly lower than average for the state’s largest counties in the unincorporated and contracted areas. Figures 2.9 and 2.10 show that the San Diego
County Sheriffs Department’s “caseload” is also slightly below the average, as measured by crimes per sheriff in the service area and arrests per sheriff.

**Figure 2.11: Arrests per Crime, 2007**
*Source(s): 2007 Criminal Justice Profiles*

Interestingly, among the state’s largest counties, San Diego County has the second fewest arrests per number of crimes, as shown in Figure 2.11. This ratio was calculated by taking two previous ratios, arrests per sheriff over total crimes in the service area per sheriff, which is equivalent to arrests per crime. The result suggests that the San Diego County Sheriff Department is not as efficient as the overall crime statistics might imply.
Violent crimes per sheriff and juvenile arrests per sheriff again reveal a slightly-below-average caseload, as shown in Figures 2.12 and 2.13.
**District Attorney**

In terms of cases submitted—the count of defendants for whom the District Attorney received a presentation from law enforcement and then filed, declined or referred to the City Attorney—for San Diego, Riverside, Orange, San Bernardino, Sacramento, Los Angeles, and Santa Clara, San Diego again has the lowest caseload per attorney and per clerical staff. See Figures 2.14-2.16.

**Figure 2.14: Cases Submitted to District Attorney per Attorney, 2007**

*Source(s): 2007 Criminal Justice Profiles; County Departments*

![Figure 2.14: Cases Submitted to District Attorney per Attorney, 2007](image)

**Figure 2.15: Cases Submitted to District Attorney per Investigator, 2007**

*Source(s): 2007 Criminal Justice Profiles; County Departments*

![Figure 2.15: Cases Submitted to District Attorney per Investigator, 2007](image)

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6 An Inland Valley Daily Bulletin article additionally confirms that San Diego, while having the smallest number of submitted cases per attorney, also has the highest number of deputy district attorneys. See Lauren McSherry, “County Caseload Piling Up,” *Inland Valley Daily Bulletin*, April 20, 2008.

7 This and all subsequent references to County Departments listed as a source indicate that the research team corresponded with and received data from county officials from various departments.
The number of trials per attorney—the attorney figure includes the district attorney and deputy district attorneys—is slightly above average for these six counties, suggesting that a higher percentage of cases go to trial in San Diego, as shown below in Figure 2.17:

Figure 2.17: Trials per Attorney, 2007
Source(s): Judicial Council of California, 2008 Court Statistics Report; 2007 Criminal Justice Profiles
Public Defender

There are no statewide reports on public defender caseloads; the only statewide information available is on the number of attorneys in each county’s public defender office, which we use in this section. Caseload information had to be collected from each county by the Rose Institute, and includes new juvenile, misdemeanor, and felony cases either in CY07 or FY07 as well as probation violations in that time. Based on the county-provided information, San Diego County appears to offer a comparatively high level of service to indigent defendants. In Figure 2.18, Los Angeles is excluded because it is well outside the chart scale with about 780 cases per public defender. Riverside County would not release data on public defender caseload.

Figure 2.18: Indigent Cases per Public Defender, 2007
Source(s): 2007 Criminal Justice Profiles; County Public Defender Offices

Figure 2.19: Indigent Cases per Investigator, 2007
Source(s): 2007 Criminal Justice Profiles; County Public Defender Offices
Caseload - Courts

San Diego’s Superior Court is approximately average by measures of caseload performance. San Diego’s judges preside over fewer jury trials than the state average (Figure 2.20) and the court falls just below average in trials per Judicial Position Equivalent (Figure 2.21). San Diego’s judicial officers (judges and subordinate judicial officers) have a slightly above-average rate of dispositions, which is still lower than 6 of the 10 counties for which we have data (Figure 2.23).

Figure 2.20: Jury Trials Per Judge, FY 2006-07

Figure 2.21: Jury Trials Per Judicial Position Equivalent, FY 2006-07
Source(s): Judicial Council of California, 2008 Court Statistics Report

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8 Judicial Position Equivalent reflects “authorized judicial positions adjusted for vacancies, assistance rendered by court to other courts, and assistance received by the court from assigned judges, temporary judges, commissioners, and referees” (Judicial Council of California, 2008 Court Statistics Report).
Figure 2.22: Court Filings per Judicial Position, FY 2006-07
Source(s): Judicial Council of California, 2008 Court Statistics Report

Figure 2.23: Dispositions per Judicial Position Equivalent, FY 2006-07
Source(s): Judicial Council of California, 2008 Court Statistics Report
Probation

San Diego County has a low ratio of adult probationers to adult probation field officers. San Diego’s 66 adult probationers per officer is 70 cases fewer than the average; only Riverside has a smaller adult caseload. Contra Costa is an outlier with 362 cases per officer. Our data exclude information on juvenile field services and institutions/juvenile camps.

Figure 2.24: Adult Probationers per Adult Probation Field Officer, FY08 or Current
Source(s): Provided by County Probation Departments

The data for probation departments was collected by Rose Institute phone calls to each county’s probation department. Data was collected on adult field officers, juvenile field officers, and institutions officers when available. Only adult field officers factor into Figure 2.24. Note that some counties provided data from Fiscal Year 2007-08 while a few provided the most up-to-date numbers.

Other Data

In addition to caseloads, it is interesting to examine other data, including administrative staffing, expenditures, and investigators.

Expenditures

Data on expenditures for District Attorney, Public Defender, and Police Protection were taken from the Counties Annual Report from the California State Controller’s Office. They are self-reported figures. Expenditure data on the court system was taken from the Administrative Office of the Courts, a statewide organization.
Expenditures – Courts

Expenditures per judge in San Diego County are a little below the 12-county average, as shown in Figure 2.25:

**Figure 2.25: Expenditure per Judge, FY 2007-08**
*Source(s): Administrative Office of the Courts, 2008 Year End Report*

Expenditures – Probation

Expenditures for probation are too undefined to evaluate. The data indicate that San Diego’s expenditure per adult probationers is among the highest of the state’s largest counties. But this could be due to a large investment in juvenile field services and institutions. Probation departments are typically divided into Adult Field Services, Juvenile Field Services, and Institutions, and funding data are not divided by these same categories.
Expenditures – Public Defender and District Attorney

From the limited, rough data available, San Diego spends the most money on its public protection, including for the public defender. San Diego on the whole expends nearly twice the 12-county average on indigent cases, second highest per public defender, and highest per submitted case in the District Attorney’s office. See Figures 2.26-2.29.

**Figure 2.26: Expenditures per Indigent Case, FY 2006-07**
*Source(s): FY07 County Annual Reports; County Public Defender Offices*

<table>
<thead>
<tr>
<th>County</th>
<th>Expenditures per Indigent Case (in thousands)</th>
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<tbody>
<tr>
<td>Fresno</td>
<td>$313</td>
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<td>$1,302</td>
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<td>San Diego</td>
<td>$1,637</td>
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**Figure 2.27: Expenditures per Public Defender, FY 2006-07**
*Source(s): 2007 Criminal Justice Profiles; FY07 Counties Annual Reports*

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<tr>
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<th>Expenditures per Public Defender (in thousands)</th>
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</tbody>
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9 San Francisco expenditure data is unavailable from the Counties Annual Report.
Figure 2.28: District Attorney Expenditures per Submitted Case, FY 2006-07
Source(s): 2007 Criminal Justice Profile; FY07 Counties Annual Reports

Figure 2.29: Expenditures per District Attorney Prosecutors, FY 2006-07
Source(s): 2007 Criminal Justice Profiles; FY07 Counties Annual Reports
Expenditures – Sheriffs

San Diego County has one of the lowest costs per sheriff among California’s largest counties, as shown in Figure 2.30:

Figure 2.30: Police Protection Expenditures per Sheriff, FY07 (In Thousands)
Source(s): FY07 Counties Annual Report; 2007 Criminal Justice Profiles

Investigators

As a rule, counties allocate more investigators per attorney to the District Attorney’s office than to the Public Defender’s office. San Diego is no exception, and the difference is more pronounced in San Diego than average in the state’s largest counties. San Diego has an average number of investigators per public defender, but one of the highest ratios of investigators per attorney in the District Attorney’s office. See Figures 2.31 and 2.32 below.

Figure 2.31: Investigators per Public Defender, 2007
Source(s): 2007 Criminal Justice Profiles
When we look at caseloads, we see that San Diego public defender investigators, as well as district attorneys, still have very low caseloads compared to the state’s other largest counties. See Figures 2.33 and 2.34:

**Figure 2.33: Cases Submitted per District Attorney Investigator, 2007**
*Source(s): 2007 Criminal Justice Profiles; County Departments*
Figure 2.34: Indigent Cases per Public Defender Investigator, 2007
Source(s): 2007 Criminal Justice Profiles; County Public Defender Offices
Administrative staffing

Most of San Diego’s public protection departments have more administration employees than the average of the state’s largest counties. See Figures 2.35-2.37:

Figure 2.35: Number of Sheriffs per Civilian Staff, 2007
Source(s): 2007 Criminal Justice Profiles

Figure 2.36: DA Attorneys per Clerical Staff, 2007
Source(s): 2007 Criminal Justice Profiles

10 Probation data is too incomplete, and thus not included. Probation departments include both adult and juvenile field services, as well as institutions such as juvenile camps; available data do not distinguish between these categories.
Finally, the San Diego Superior Court has a near-average number of staffers per judge, as shown in Figure 2.38:

**Figure 2.38: Non-Judicial FTEs per Judge, FY08**
*Source(s): Administrative Office of the Courts, 2008 Year End Report*
Section III. Welfare

EXECUTIVE SUMMARY

Welfare and public assistance are usually a county’s second-largest expense after public protection, and for some counties they are the biggest expense. For this report, we limit our discussion of “welfare” to three specific programs providing cash aid (food stamps, SSI, CalWORKs) and also Medi-Cal. Medi-Cal is not a cash aid program but rather a health insurance program that is closely related to other welfare programs. Public assistance that does not involve cash aid payments, such as In-Home Supportive Services, foster care, and adoption, will be treated in the next section. Our data indicate the following:

- **Low Enrollments.** Our eligibility estimates indicate that, among the state’s largest counties, San Diego enrolls the lowest proportion of eligible* persons for Medi-Cal, the Food Stamps program, and CalWORKs. Our research also indicates that, among these counties, San Diego County enrolls the lowest proportion of households in SSI, although San Diego is not last on a per-individual basis.

- **Administration Spending Pattern: Overall.** Our findings indicate that San Diego County spends less on administrative costs per dollar of welfare and per dollar of public assistance than the state’s other largest counties do. The data are self-reported to the State Controller and are too inconsistent to rely upon, but data from other programs support a similar conclusion.

- **Administration Allocations: Food Stamps and CalWORKs.** San Diego County receives fewer administrative dollars per estimated eligible person for the food stamps program than the other counties do, though its per beneficiary funding is about average. This is because food stamps funding is determined on a per-recipient basis. San Diego also receives a smaller administrative allocation per capita for CalWORKs, and spends less on administrative costs—including Welfare-to-Work, Employment Services, and Eligibility Verification—per CalWORKs recipient than average.

- **Rigorous Eligibility Verification: Food Stamps and CalWORKs.** Compared to the other counties in the study, San Diego denies the highest percentage of applicants for both food stamps and CalWORKs. This important finding requires further investigation to determine whether San Diego County is doing a good job excluding people who are ineligible for these programs, or inappropriately denying eligible persons.

- **Rigorous Eligibility Verification: Medi-Cal.** While San Diego County receives more money for Medi-Cal per estimated number of eligible persons than five of the state’s other largest counties, it still enrolls the smallest proportion of eligible persons into the program. This finding may imply that San Diego more rigorously verifies the eligibility of Medi-Cal applicants. However, this and other possible interpretations require further investigation of Medi-Cal application procedures and applicant data.

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* By “eligible,” we mean those individuals who are likely to be eligible for the respective programs based on survey data and methodologies devised by the Rose Institute. This term is not to be confused with “certified eligibles,” individuals who have applied for the programs and have been verified to be eligible for them.
WELFARE OVERVIEW

General Conclusion

Overall, available data confirm the perception that San Diego County keeps enrollments in welfare programs comparatively low. More specifically, San Diego enrolls far fewer eligible persons, and denies the highest percentage of applications for these programs than the state’s other largest counties do. It also expends less on, and receives less from the state for, administrative costs for welfare programs.

Self-Reported Administrative Spending

As Figure 3.1 indicates, San Diego expended only 34 cents on administrative costs for every dollar of welfare in FY06-07, the most recent year for which we have data from the State Controller. One should note that the data are self-reported and appear to have comparability problems.\(^{11}\)

Figure 3.1: County Administrative Cost per Dollar of Welfare

Source(s): FY07 Counties Annual Report

The following graph (Figure 3.2) shows how state and federal monies are allocated between county-level program costs and administrative costs for Public Assistance, which includes In-Home Supportive Services, Adoption, Foster Care, and CalWORKs, among other programs not specified in the Counties Annual Report. Figure 3.2 indicates that in Public Assistance more broadly, less money is allocated to administrative costs in San Diego than in most of the state’s other largest counties.

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\(^{11}\) Figure 3.1 is based on data from the Counties Annual Report. That report summarizes “expenditures incurred in the administration of the public assistance cash grant programs,” including AFDC payments, CalWORKs cash payments, and food stamps. That portion of the report excludes Medi-Cal, because Medi-Cal is an insurance program and not a cash grant program. But for reasons discussed above, we include Medi-Cal in our analysis here.
We note that one needs to exercise caution when comparing county data concerning administrative costs for public assistance programs. Because the counties have discretion as to what they define as “administrative expenditures,” it is not possible to use the Counties Annual Report to assess overall differences in administrative spending on public assistance programs. However, it is possible to make more limited comparisons.

A comparison between San Diego and Orange Counties illustrates the point. Figure 3.3 (below) shows administrative spending on just the food stamps program. The data reveal that at least for this program, San Diego County’s and Orange County’s administrative spending per dollar of welfare are not dissimilar. This will be the case for most welfare programs, because both welfare dollars and administrative costs are provided by allocations from the state based on enrollment numbers.

When comparing Orange County to San Diego on CalWORKs, Orange does spend far more on administrative costs for every dollar of assistance payments, at about a 1:1 ratio; San Diego has a 0.47:1 ratio (Figure 3.4). That is, Orange County spends more money than San Diego per dollar of CalWORKs aid on eligibility verification, child care, and welfare-to-work.

These allocations for administration, however, do not include activities such as outreach for programs. San Diego spent an additional $137.7 million in FY 2007-08 on outreach activities for Medi-Cal, County Medical Services, SSI, Food Stamps, and CalWORKs, in its Strategic Planning & Operational Support Department. According to a county official, a majority of that department’s budget is spent on County Medical Services outreach. The Counties Annual Report may reveal differences in this kind of administrative spending, which is not allocation-based, but it is impossible to know without further investigation.
Figure 3.3: FY 08 Food Stamps Administration Allocation per Dollar of Food Stamps
Source(s): CDSS, County Fiscal Letter No. 07/08-52

![Figure 3.3](image)

Figure 3.4: Comparison of Orange and San Diego Counties’ Administrative Spending on Public Assistance Programs
Source(s): CalWORKs Quarterly Reports; County Fiscal Letter No. 07/08-52; Individual County Budgets

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MEDI-CAL

Basics

Medi-Cal is California’s form of Medicaid. The program was established in 1966 as public health insurance for low-income persons with the intent to reduce long-term health care costs not covered by Medicaid. It is not a welfare program that provides direct aid payments to beneficiaries, but because many eligibility requirements for Medi-Cal overlap with CalWORKs and other welfare programs, it is included in this section. Medi-Cal is organized into two different options, Regular Medi-Cal coverage and Medi-Cal Health Plans, but for purposes of this report the distinction is unimportant: the study compares Medi-Cal budgetary information and enrollment with the two options taken together. For our study, San Diego’s administrative allocations for this program and enrollment rates are of particular interest.

Eligibility and Coverage

Medi-Cal is available to families with dependents, senior citizens, the blind, the disabled, minors, pregnant women and low income persons who are pregnant or have high-risk diseases such as HIV or tuberculosis. Persons receiving aid through CalWORKs, SSI/SSP, foster care, or In-Home Supportive Services (IHSS), are eligible for some form of Medi-Cal coverage. Pregnant women and infants are eligible for Medi-Cal with an income below 200% of the federal poverty level (“FPL”); a child between one and six is eligible for Medi-Cal if the family income is at or below 133% of FPL; and a child between six and 19 is eligible for Medi-Cal if the family income is at or below 100% of FPL. Specified low-income beneficiaries may have up to 120% of FPL and individuals can be eligible for transitional Medi-Cal with an income up to 185% of poverty. Typically, the family must also suffer deprivation, i.e. the principal wage earner is underemployed, disabled, absent, or otherwise unable to provide for the household, for the entire family to be on Medi-Cal.

On top of the program’s federal requirements, which limit long term care, Medi-Cal covers extended residency—in some cases for multiple years—at assisted homes. Subsidized services, which must be permitted by an approved doctor, include surgery, prescription drugs, long-term care, and limited mental health coverage. Recipients may receive Medi-Care and Medi-Cal at the same time, though Medi-Cal will only supplement services not already covered by Medi-Care.

Enrolled v. Estimated Eligible

In this section, we have taken U.S. Census data and data from other sources to estimate the number of persons in each county who are eligible for Medi-Cal, and then compared the estimated number of eligible persons with the number of persons enrolled in Medi-Cal programs in each county. We have used a leading data source for the number of persons in poverty, the Census Bureau’s American Community Survey (ACS), but many believe that the ACS undercounts the number of persons in poverty. To address this problem, we have used various other measures to estimate the number of persons eligible for Medi-Cal. The methodological difficulty is consistent for all counties, so the comparisons between counties should hold. By each of the measures we have used, San Diego enrolls a lower percentage of eligible persons in Medi-Cal than the other largest counties in California.

12 See Department of Health Care Services Letter No. 08-05 to All County Welfare Directors, http://www.dhcs.ca.gov/services/medi-cal/eligibility/Documents/c08-05.pdf, for income guidelines.
Figure 3.5 computes the ratio of enrollees to individuals whose income is under 125% of poverty, as reported in the Census Bureau’s American Community Survey. As indicated above, families within 100% of FPL and with children are eligible for Medi-Cal. Based on our review of the data, we conclude that 125% or 130% of FPL in the American Community Survey is a better indication of 100% of FPL for welfare programs, because the survey calculates poverty based on “gross income,” before any deductions have been taken into account, whereas for eligibility requirements welfare programs use “net income,” which is gross income less deductions. Because deductions are made on a case-by-case basis, it is difficult to assign percentages that equate gross income to net income; therefore, we use the criteria for the Federal Food Stamps Program, which defines income eligibility as a net income within 100% of FPL or a gross income within 130% of FPL.

The population data was collected from 2005-2007 and represents the average number of individuals in that income range in a 12-month period in those years. The number of Medi-Cal beneficiaries was taken from Fiscal Year 07-08.

While the number of individuals under 125% of poverty excludes higher income categories and discounts the requirement to have children, as well as other possible requirements such as being blind or disabled, the data indicate that San Diego enrolls in Medi-Cal a smaller percentage of those in poverty than California’s other largest counties do. Including the child requirements would reduce the eligibility pool and increase the proportion of eligible persons enrolled in Medi-Cal programs beyond the percentages shown in Figure 3.5. However, Figure 3.5 indicates that there is already over-enrollment in most counties. These anomalies suggest that transitional Medi-Cal, coverage for special beneficiaries, and other higher-income categories of eligible people must be taken into account.

The data are not available to calculate all of these possible eligibility requirements. Therefore, the following figure uses a more specific eligibility category, 1931(b), to provide a more accurate picture of eligibility and enrollment in a specific category.

13 See U.S. Census Bureau, American Community Survey, 2007 Subject Definitions.
1931(b) Eligibility

1931(b) is the Medi-Cal aid category for families on CalWORKs; non-CalWORKs families can enroll in Medi-Cal under the 1931(b) category if they live in poverty (within 100% of FPL) and have a child. Typically, the child must suffer “deprivation,” which means the breadwinner of the family is unemployed, underemployed, disabled, deceased, away from home, or otherwise unable to work. 14 1931(b) is the largest Medi-Cal aid category. By the 1931(b) aid category, San Diego still enrolls fewer eligibles than the other counties in this study.

To repeat, based on our review of the data, we conclude that 125% or 130% of FPL in the American Community Survey is a better indication of 100% of FPL for welfare programs (see explanation under Figure 3.5).

By tabulating the number of CalWORKs 1931(b) Medi-Cal recipients and the non-CalWORKs 1931(b) recipients from the Medi-Cal Beneficiaries Tables published by the California Department of Health Care Services, and dividing this number by the estimated number of individuals who live within 130% of poverty in families with children—that is, persons who meet all the requirements to be eligible save property requirements and deprivation requirements—we arrive at Figure 3.6:

Figure 3.6: 2007 Estimated Ratio of Enrolled to Estimated 1931(b) Eligibles Under 130% of FPL
Source(s): Calculated from American Community Survey 2005-2007 data; DHCS Medi-Cal Beneficiary Tables

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14 See, Department of Health Care Services, All County Letter February 14, 2008; and Medi-Cal Eligibility Procedures Handbook, 5S(D)(1-10).
We conclude that San Diego County enrolls a lower percentage of eligible persons than the state’s other largest counties do.15

To estimate the number of individuals living in families within 130% of poverty and with children, we used the data on number of families with this demographic from ACS data table B17022. In order to convert the number of families into an approximate number of individuals, we needed to multiply the number of families by the average size of a family with children.

To find the average size, we divided the number of individuals determined above for poverty households by the number of families living in poverty. We then applied this ratio to the number of families living within 130% of poverty to find the approximate number of individuals.

15 We must also note that illegal immigration probably disproportionately affects San Diego County. The ACS data does not distinguish between illegal and legal residents; thus, the poverty numbers might be inflated by illegal immigrants who are ineligible for the welfare programs.
Spending

In terms of state funding allocations, Figures 3.7 and 3.8 indicate that San Diego County receives roughly the same amount of money from the state as most other counties do when compared against the estimated number of eligible persons. Figure 3.7 uses the less specific measure of general poverty (under 125% of FPL) without any additional requirements for eligibility, while Figure 3.8 uses the 1931(b) eligibility pool and adds aged and disabled adults in poverty to account for a wider number of eligible people.  

Figure 3.7: Medi-Cal State Allocation per Capita Under 125% of FPL, FY 07-08
Source(s): DCHS Medi-Cal County Administration; American Community Survey 2005-2007

For a more detailed account of how the aged and disabled figure was calculated, see the section on Supplementary Security Income.
It is also interesting to note that per beneficiary, San Diego County receives about the same amount of funding as other counties:

The data indicate that funding allocations are based on the number of beneficiaries from the previous year—because San Diego County has enrolled fewer people in the program, it gets less overall funding for administration. Nevertheless, five other counties still get less money per estimated eligible than San Diego County.
**FOOD STAMPS**

**Basics**

As of Oct 1, 2008 the federal Food Stamp program is known as the “Supplemental Nutrition Assistance Program,” or “SNAP.” SNAP is a federally funded, state- and county-administered program to provide nutrition to low-income households.

**Eligibility and Enrollment**

Eligibility for SNAP is a function of several metrics, and complete rules may be found at the USDA website. In general, to be eligible for SNAP households must have a gross income no greater than 130% of the federal poverty level, or a net income no greater than 100% of FPL.

The American Recovery and Reinvestment Act (ARRA) of 2009 eliminated the time limit for able-bodied adults without dependents (ABAWDs) during the period from April 1, 2009 through September 30, 2010, unless a state chooses to offer a qualifying work activity.

**Funding**

SNAP is completely funded by the federal government, though NAFS—or Non-Assistance Food Stamps—can be supplemented by the state and the county.

**Current Status**

There are no proposed funding reductions for the food stamps program. NAFS funding, while partially state- and county-funded, is federally mandated and consequently beyond state or county control. The American Recovery and Reinvestment Act increases the potential funding for the program by eliminating the time limit for able-bodied adults without dependents until September 30, 2010. California counties—and specifically San Diego County—may be able to take advantage of the increased funding to supplement nutrition for low-income households.

**Enrolled v. Estimated Eligible**

According to the Food Research and Action Center, to be eligible for food stamps “[h]ouseholds, except those with elderly or disabled members, must have gross incomes below 130 percent of the poverty line. All households must have net incomes below 100 percent of poverty to be eligible.”


18 Usually ABAWDS between 18 and 50 who do not have any dependent children can get SNAP benefits for only 3 months in a 36-month period if they do not work or participate in a workfare or employment and training program other than job search. This requirement is waived in some locations. With some exceptions, able-bodied adults between 16 and 60 must register for work, accept suitable employment, and take part in an employment and training program to which they are referred by the local office. Failure to comply with these requirements can result in disqualification from the Program.

As noted above, the American Community Survey collects data on gross income.\textsuperscript{20} To determine an estimate for food stamp eligibility, we collected data from the American Community Survey on people whose income is under 125% of poverty, the closest breakdown to the 130% gross income eligibility threshold. When compared against the average monthly food stamps program enrollment in FY07-08, San Diego County is second-to-last, narrowly surpassing Orange County, as shown in Figure 3.10.

\textit{Spending}

For California counties, the only readily available data on administrative spending applies to Non-Assistance Food Stamp (NAFS) recipients, that is, those not also on Medi-Cal. The vast majority of food stamp recipients are in this category, with only a small number on Public Assistance Food Stamps (PAFS) who are also receiving Medi-Cal. In order to compare administrative allocations, data on which are only available for NAFS, it is necessary to define eligibility for NAFS more precisely.

In order to estimate the number of persons eligible for Non-Assistance Food Stamps, we have taken those persons whose income is under 125% of poverty, and subtracted the number of persons on public assistance food stamps. That is, the number of estimated eligibles comprises those who are under 125% of the Federal Poverty Level and not receiving PA food stamps. When compared against those receiving NAFS, San Diego County is last among the state’s largest counties in enrolling estimated eligible persons.

\textsuperscript{20} U.S. Census Bureau, American Community Survey, 2007 Subject Definitions, \url{http://www.census.gov/acs/www/Downloads/2007/usedata/Subject_Definitions.pdf}. The survey explains, “Wage or salary income includes total money earnings received for work performed as an employee during the past 12 months. It includes wages, salary, armed forces pay, commissions, tips, piece-rate payments, and cash bonuses earned before deductions were made for taxes, bonds, pensions, union dues, etc.”
In order to compare the amount that counties spend on administering the NAFS program, as we did with Medi-Cal, Figures 3.12 and 3.13 calculate the administrative allocation per the estimated number of eligibles. The former uses the eligibility pool for all food stamps, and the latter uses the eligibility pool estimated for NAFS food stamps in particular.

Figure 3.12: NAFS Administrative Allocation per Capita Under 125% of FPL
Source(s): Calculated from CDSS, County Fiscal Letter No. 07/08-52; American Community Survey 2005-2007

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Figure 3.11: Non-Assistance Food Stamp Recipients to Estimated Number of Eligibles, FY 07-08
Source(s): Calculated from CDSS, DFA 256 reports; American Community Survey 2005-2007
One can see from these graphs that San Diego County receives less administrative allocation for the Non-Assistance Food Stamps program than the other counties do per estimated eligible person. The food stamp funding distribution contrasts with the Medi-Cal distribution, which showed that San Diego was receiving an average amount of administrative funding per estimated eligible (see Figures 3.7, 3.8 and 3.9).

Also unlike the Medi-Cal funding distribution, the NAFS administration allocation per recipient has a wide range across the counties; however, San Diego still receives an average allocation per beneficiary, as was the case with Medi-Cal, because funding is dependent on recipients in previous years rather than on possible eligibility in a given county.

Figure 3.14: Non-Assistance Food Stamp Administrative Allocation per Recipient, FY 07-08
Source(s): CDSS, County Fiscal Letter No. 07/08-52; CDSS, DFA 256 Reports
When the allocation for administrative costs is computed against number of households on the Non-Assistance Food Stamp program instead of the number of individuals, San Diego receives a slightly higher allocation. The counties still receive approximately the same allocations. See Figure 3.15:

**Figure 3.15: Non-Assistance Food Stamp Administrative Allocation per NAFS Household, FY 07-08**

*Source(s): CDSS, County Fiscal Letter No. 07/08-52; CDSS, DFA 256 Reports*

![Bar chart showing administrative allocations per NAFS household for various counties.]

**Conclusion: Patterns of Program Administration**

The counties’ pattern for administering the food stamps program is much the same as for Medi-Cal: San Diego is enrolling a smaller proportion of those estimated to be eligible than other counties; and it is receiving less administrative funding from the state per estimated eligible, though it is receiving an average amount of funding on a per beneficiary basis because funding is allocated on a caseload basis.
Figure 3.16: Percent of Food Stamps Applications Denied, FY 07-08
Source(s): Calculated from CDSS; DFA 296 Reports

Figure 3.17: Percent of CalWORKs Applications Denied, FY 07-08
Source(s): Calculated from CDSS; CA 237 CW Reports
Figure 3.18 shows, moreover, that as a percentage of the estimated number of people eligible for food stamps but not enrolled (calculated by subtracting the number enrolled from the eligibility pool estimate), San Diego receives the fewest applicants.

**Figure 3.18: Number of Food Stamps Applicants as Percentage of Unenrolled Estimated Eligibles**

*Source(s): Calculated from CDSS, DFA 296 Reports; CDSS, DFA 256 Reports; American Community Survey 2005-2007*
SUPPLEMENTAL SECURITY INCOME (SSI)

Basics

Supplemental Security Income (SSI) is an application-based, federally-funded program that provides monthly cash payments to those with low incomes. The federal Social Security Administration administers both SSI and the State Supplementary Payment (SSP) program (the state supplement to SSI) and determines eligibility using federal requirements.

Eligibility and Enrollment

Possible candidates for SSI include people who are 65 and older, blind or disabled of any age, and children. To be eligible, applicants must have less than $2000 in resources if they are single, or less than $3000 if married, usually excluding the value of a person’s home, car, or burial plot. The SSI Program requires that each applicant apply for all other possible cash benefits.

The SSP program works in conjunction with SSI through assistance from the State of California. Recipients who qualify for SSI are automatically benefited by SSP as well; each monthly cash payment includes assistance from the federal government and State of California. Eligibility for the SSI program usually guarantees automatic medical coverage through Medi-Cal. However, California SSI enrollees do not qualify for food stamps because the state contributes money to the federal payment through the SSP instead.\textsuperscript{21}

Monthly Payments

Not all SSI recipients receive the maximum amount of payments; they may be lower if the recipient has other income. In general, the aid payments amount to the federal poverty line over a 12-month period, with some variation depending on marital status, age, and disability status.

Enrolled v. Estimated Eligible

To determine the enrollment rates for SSI, we have estimated by county the number of aged, blind, or disabled persons living in poverty.

Data for SSI recipients was only available by household from the American Community Survey and not by individual. The ACS also provides data on the number of householders over 65 (aged) and living in poverty. It does not provide the number of households living in poverty with at least one disabled individual, but it does provide the number of disabled individuals living in poverty. To calculate households, we took the ratio of disabled households to disabled individuals per county, which was available and approximately the same for each county, and we multiplied that ratio by the number of disabled individuals living in poverty. We only calculated the number of disabled individuals under 65, as to not double-count those who were both aged and disabled. Figure 3.19 is the result:

\textsuperscript{21} See \url{http://www.ssa.gov/pubs/11125.html} for more detail.
Using this per-household measure, San Diego County enrolls fewer estimated eligible households in SSI than any other county in the study. When we compute SSI by individual, however, San Diego no longer ranks lowest in the percentage of eligibles enrolled. The Social Security Administration reports the number of individuals receiving SSI by county. Because we are using demographic data is from 2005-2007, we used the SSI individual enrollment data from December 2006.

Again, estimating the number of individuals eligible for SSI presents a methodological challenge. In order to estimate the number of eligible individuals, we used Census Bureau data from the ACS on the number of aged adults living in poverty and the whole number of disabled individuals under 65 living in poverty. We used the 125% poverty breakdown, the closest poverty bracket available in the ACS when compared against the other variables (age, disability). We then calculated the number of individuals enrolled in SSI compared with the estimated number of persons eligible for the program, as shown in Figure 3.20:

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22 Because the number of disabled individuals was not available based on income relative to FPL, but was only available by poverty, we had to calculate approximately how many disabled individuals live under 125% of poverty. To do so, we found the ratio of individuals under 65 living under 125% of poverty to individuals under 65 living under 100% of poverty—an average of 1.34. We multiplied the number of disabled individuals living in poverty by this ratio, which gave us an estimate of the number of disabled individuals living under 125% of poverty.
When SSI enrollment is computed by individual rather than by household, San Diego County is no longer at the bottom of the pack. It should be noted that the Social Security Administration, not the counties, has the responsibility to process applications.
CalWORKs

Basics

CalWORKs is designed to transition people from welfare to work. It provides temporary cash assistance to eligible families with minor children, to move families with children from dependency to self-sufficiency through employment.

Eligibility and Enrollment

To be eligible for CalWORKs, one must have dependent children immunized and enrolled in school if of age, a social security number, personal property valued under $2,000, and income less than the program limits. The principal wage earner must be working less than 100 hours per month at the time they apply for assistance, or otherwise be unemployed, incapacitated, away from home, or unable to work for other reasons. Typically, the requirements for CalWORKs are identical to the 1931(b) Medi-Cal requirements.

Services provided by CalWORKs include welfare to work and employment services, child care services, mental health and substance abuse services, and CalLearn for teen parents, which helps them work toward their GEDs. The county has some discretion as to how to allocate the resources among these various services. CalWORKs automatically ensures eligibility for Medi-Cal.

In San Diego, CalWORKs was allocated $90,497,700 in FY08, and $85,449,383 of that money was expended. CalWORKs has about 9,210 adults enrolled in welfare-to-work programs per month and 13,270 aided each month by cash payments, with a cost of $6,439 per person aided.

Enrolled v. Estimated Eligible

We can use the eligibility numbers from the 1931(b) Medi-Cal graph (Figure 3.6) to estimate eligibility for CalWORKs, but those estimates still ignore underemployment. If we want to include underemployment, estimating eligibility becomes more difficult. The Census Bureau’s American Community Survey can estimate the number of families with dependent children and both parents out of work, but that measure ignores poverty. Some families in that category could be temporarily out of work but in need of no financial assistance.

It is possible, however, to estimate the number of families with children, with both parents out of work, who are also in poverty. To do so, we used ACS data on married families with children and both parents out of work, or single families with children with the parent out of work, without the poverty factor. To account for poverty, we can compare the number of families with no workers who are in poverty to the total number of families with no workers, and find the ratio of how many of these families are in poverty. By multiplying these ratios by the number of families with the parents out of work and with children, we now have an estimate of the number of adults out of work, with children, and in poverty;\(^\text{23}\) when compared to the number of adults enrolled in CalWORKs Welfare-to-Work produces the following results, as shown in Figure 3.21:

\(^{23}\) We used Tables B17014 and B23007 from the American Community Survey, 2005-2007 data for our estimate. The latter table contains data on married families with children and both parents out of work; ACS Table B17014 allowed us to estimate how many of these families live in poverty by computing the percentage of married and single families with no workers who are also living in poverty. The ratios average to 11.6% in poverty for married, no-worker families; 43.5% in poverty for single male no-worker households; and 58.6% in poverty for single female no-worker households.
Using this measure, San Diego County enrolls the third lowest proportion of persons we estimate are eligible for CalWORKs. We must remember, however, that Figure 3.21 takes into account presence of children, poverty, and unemployment of parents. The metric ignores that only the primary wage earner must be out of work, and even then he may be employed for up to 100 hours in a month and still be eligible. Thus, our methodology understates the eligibility pool and the counties probably enroll smaller proportions than Figure 3.21 shows. Nevertheless, as a relative measure, Figure 3.21 reveals that San Diego, Orange, and Los Angeles Counties (and to some extent Contra Costa County) enroll far fewer in CalWORKs than the other counties.
As noted above in our discussion of Food Stamps and again below in Figure 3.22, San Diego’s administration of CalWORKs conforms to a pattern. San Diego denies CalWORKs applicants at a higher rate than any other county in this study, according to CDSS application data:

**Figure 3.22: Percent of CalWORKs Applications Denied, FY 07-08**

*Source(s): Calculated from CDSS, CA 237 CW Reports*

Figure 3.22 shows that while San Diego denies a high proportion of applicants, nearby counties such as Orange County and Los Angeles deny significantly fewer.

Further investigation is required to determine why San Diego denies applications at a higher rate than the other counties, and, specifically, whether the differences are caused by more rigorous eligibility verification. We note that San Diego County does not appear to spend a higher proportion of its allocation on eligibility verification. See Figure 3.23. Yet it is possible that San Diego spends a comparable amount on verification, while applying more rigorous standards.

Figure 3.24 shows the reasons given for denial by San Diego County. The data was averaged from the first month of each quarter in FY08. “Failed to comply with procedural requirements” and “children not deprived of support or care” were the two principal reasons for denials, with 29.7% of applications being denied for the former reason and 28.0% being denied for the latter.
Figure 3.23: Eligibility Allocation as a Percentage of Total Single Allocation
Source(s): CDSS, County Fiscal Letter No. 07/08-21

Figure 3.24: Reasons Given by San Diego County for CalWORKs Denials, FY08
Source(s): CDSS, CA 255 CW Reports
Other Administrative Allocations

It is difficult to analyze other administrative expenditures for CalWORKs. Whereas food stamps and Medi-Cal administrative dollars generally go to eligibility determination and outreach, CalWORKs administrative dollars go to welfare-to-work programs, case management, employment services, and child care. These all fall under “Single Allocation.”

We can see that on a per-capita population basis, San Diego receives as well as expends less on CalWORKs than the other largest counties, but it is difficult to draw conclusions from this data because it is not on a per-capita eligible basis. See Figures 3.25 and 3.26.

Figure 3.25: CalWORKs Single Allocation (Administration) per Capita Received from State, FY08
Source(s): CDSS, FY08 CalWORKs Quarterly Reports
The results in Figure 3.27 indicate that on a per-eligible basis, San Diego still receives a smaller allocation than the other counties in the study. We emphasize again that our eligibility methodology probably undercounts the number of eligible individuals, and thus that these estimated per-eligible allocation figures are higher than actual. They are still revealing, however, when comparing counties to each other:

**Figure 3.27: CalWORKs Single Allocation per Estimated Eligible, FY08**
*Source(s): CalWORKs Quarterly Reports; Calculations based on American Community Survey 2005-2007 data*
Using this measure for allocation per estimated eligible, San Francisco receives more than double the allocation of any other county in the study.

The per-beneficiary allocation and spending presented in Figures 3.28-3.32 support this conclusion. San Francisco spends far more money for CalWORKs given the number of people on the program than any other county. Conversely, San Diego spends less than average per CalWORKs recipient on administrative costs, including Welfare to Work, Employment Services, Child Care, and Eligibility Verification, though more than a few of the other top twelve counties.

**Figure 3.28: CalWORKs Administrative Expenditure per Monthly Aided Adults, FY 07-08**

*Source(s): CDSS, FY08 CalWORKs Quarterly Reports*
Figure 3.29: CalWORKs FY08 Expenditures per all CalWORKs Recipients, Including Children
Source(s): CDSS, FY08 CalWORKs Quarterly Reports; CDSS, CA 237 CW Reports

Figure 3.30: CalWORKs FY08 Single Allocation per Monthly Aided Adult
Source(s): CDSS, FY08 CalWORKs Quarterly Reports
Figure 3.31: WtW and Employment Services Allocation per Adult on CalWORKs
Source(s): CDSS, County Fiscal Letter No. 07/08-21; CDSS, CA 237 CW Reports

Figure 3.32: Child Care Allocation per Child on CalWORKs
Source(s): CDSS, County Fiscal Letter No. 07/08-21; CDSS, CA 237 CW Reports
Finally, we note that San Diego as well as the other counties enroll low numbers of adults aided by CalWORKs cash payments into the welfare-to-work or education programs and Medi-Cal. See Figures 3.33-3.35.

Figure 3.33: Percentage of Aided (CalWORKs) Enrolled in Welfare-to-Work, FY08
Source(s): CDSS, FY08 CalWORKs Quarterly Reports

Figure 3.34: Percentage of Aided (CalWORKs) Receiving Education/Training, FY08
Source(s): CDSS, FY08 CalWORKs Quarterly Reports

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CalWORKs data is from 07-08, while the Medi-Cal data is from 2007.
In sum, government data indicate that San Diego denies more applications for the CalWORKs program, and enrolls fewer per capita in the program, than the other largest counties do. In addition, by our estimates, San Diego enrolls a lower percentage of persons who are eligible for the program. Finally, the state’s funding allocation for CalWORKs administrative costs, including welfare-to-work, employment services, and child care, are seriously disproportional when compared to San Francisco and other counties.
One theory why San Diego County enrolls fewer people in welfare than other counties was that charitable organizations might be picking up where the county left off. By a standard measure of charitable giving, however, San Diego does not rank particularly high among the twelve most populous counties:

**Figure 3.36: Proportion of per Capita Income Going to Charity (2006)**
*Source(s): Calculated from data from the National Center for Charitable Statistics; Census Bureau*

The percentages above were calculated by dividing per capita charitable contributions by per capita personal income in 2006. In terms of charitable organizations, San Diego is in the middle of the pack:

**Figure 3.37: 2007 501(c)3 Public Charities per 100,000 Residents**
*Source(s): Calculated from data from the National Center for Charitable Statistics*
It is too difficult to conclude from charitable giving statistics anything with certainty. There are many confounding variables, including the different kinds of public charities and organizations and unaccounted volunteer time.

**General Conclusions**

One can conclude from the above points that San Diego is under-enrolling county residents in the food stamps program either because of a lack of administrative funding/allocation or because of more rigorous eligibility verifications, or both. San Diego seems to under-enroll in the CalWORKs program because of rigorous eligibility verifications, and it probably under-enrolls in Medi-Cal for the same reason, although application data for Medi-Cal need to be examined. Further qualitative investigation is required to interpret these findings.
Section IV. Other Public Assistance

EXECUTIVE SUMMARY

Most counties define “public assistance” as a range of social services, including welfare. In the last section, we separately analyzed welfare programs that provide cash aid, as well as the Medi-Cal program. In this section, we turn to three county-administered programs that provide living assistance and human services to clients but no cash aid—specifically, In-Home Supportive Services, Adult Protective Services, and Child Welfare Services. Our data reveal that, among the state’s twelve largest counties:

- San Diego spends the third lowest amount per consumer for In-Home Supportive Services (IHSS).
- San Diego spends the fourth lowest amount per consumer hour for IHSS.
- San Diego authorizes the fourth least number of hours per IHSS consumer.
- San Diego maintains the third lowest hourly wage for IHSS providers.
- San Diego County receives the fourth lowest allocation for IHSS from the state per consumer.
- San Diego has an average administrative cost per dollar of provider wages and benefits for IHSS.
- As of 2005, San Diego County has the second-smallest percentage of IHSS providers receiving medical benefits.
- As of 2005, San Diego tied with Sacramento for having the lowest percentage of IHSS providers eligible for medical benefits out of the eight counties for which we have data.
- San Diego County spends the third least of the ten counties examined on Child Welfare Services per resident under the age of 18, and per case referred to Child Welfare Services. San Diego County spends the second least of these counties per substantiated case.
- San Diego County has the longest median time to adoption of the twelve most populous counties. Children in San Diego County are spending more time in foster care. Moreover, 50 percent of San Diego foster-care children are put in more than two placements over their time in the system, the third highest out of the twelve counties.
In-Home Supportive Services

Basics

In-Home Supportive Services (IHSS) is a federal-state health and public assistance program that provides personal care and domestic services to people who are elderly, blind, or disabled, with the goal of allowing them to remain in their homes instead of entering a nursing home. A social worker assesses the needs of the client and, where appropriate, authorizes the client to hire an individual provider for a set amount of hours per week. The client is responsible for choosing the provider but the government pays for the services. Every county also has an IHSS Public Authority which is the employer of record for providers, assists consumers in finding providers, and serves as an advocate for consumers and providers.

San Diego County IHSS monthly caseload as of May 2009 is 24,440. The county’s total IHSS expenditure for FY09 was $260,129,294, of which it spent $14,927,261 on administrative costs and $245,035,705 on provider payments. In addition to the above numbers, the IHSS Public Authority spent an additional $13,799,180, $9,255,494 of which went to provider health benefits and the rest to administration. Thus, the overall spending on the IHSS programs was $273,928,474. The County pays about 17.5% of the cost of the program, the State 32.5%, and the federal government 50%. The federal government’s share is now increasing due to federal stimulus funding.

Eligibility

Eligibility requirements for the IHSS program are similar to those for SSI/SSP. To be eligible for IHSS, a person must be a US citizen or qualified alien and a California resident; must live at home; and have personal property of no more than $2,000 for an individual or $3,000 for a couple (excluding their home, one car, and life insurance policies). Depending on their income, individuals may be required to pay a share of their IHSS costs.

Expenditures and Caseloads

A useful way to compare how counties operate their IHSS programs is to compare their respective expenditures on the program. However, it is difficult to gather comparison data on IHSS spending directly from the counties themselves. California’s counties organize their budgets differently and have different practices for reporting IHSS spending. Some counties include IHSS allocation in their budgets for Departments of Aging and Adult Services without breaking out specific information on IHSS allocations. Others split IHSS allocations into several budget categories.

The State of California provides more reliable, standardized information on county-level IHSS spending. Every month, the California Department of Social Services (CDSS) publishes a collection of data on IHSS called the In-Home Supportive Services Management Statistics Summary. The state’s report details each county’s monthly IHSS expenditure, caseload, hours devoted to cases, and average functional index of the clients among other statistics. Unless we note otherwise, the following analysis of IHSS spending relies on these CDSS reports.


26 From email correspondence with assistant deputy director of aging and independence Ellen Schmeding
Figure 4.1 shows both estimated average monthly IHSS expenditures and estimated annual expenditures for FY08 for the state’s twelve most populous counties. We have calculated average monthly expenditures by averaging the data from the two months at the end of the fiscal year, July 07 and June 08, and yearly expenditures by multiplying that number by twelve. Figure 4.2 displays the estimated annual expenditures. Los Angeles County is not included in the graph as its expenditure is so much greater than any other county.

**Figure 4.1: Monthly and Annual IHSS Expenditure**
*Source(s): California Department of Social Services*

<table>
<thead>
<tr>
<th>COUNTY NAME</th>
<th>Monthly Expenditures</th>
<th>Annual Expenditures</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ventura</td>
<td>$2,629,597.75</td>
<td>$31,555,173.00</td>
</tr>
<tr>
<td>Contra Costa</td>
<td>$7,010,094.68</td>
<td>$84,121,136.16</td>
</tr>
<tr>
<td>Orange</td>
<td>$9,323,624.03</td>
<td>$111,883,488.36</td>
</tr>
<tr>
<td>Fresno</td>
<td>$11,435,190.45</td>
<td>$137,222,285.40</td>
</tr>
<tr>
<td>Riverside</td>
<td>$13,559,205.31</td>
<td>$162,710,463.72</td>
</tr>
<tr>
<td>Santa Clara</td>
<td>$14,135,159.79</td>
<td>$169,621,917.48</td>
</tr>
<tr>
<td>San Bernardino</td>
<td>$15,305,394.41</td>
<td>$183,664,732.92</td>
</tr>
<tr>
<td>Alameda</td>
<td>$16,880,925.06</td>
<td>$202,571,100.72</td>
</tr>
<tr>
<td><strong>San Diego</strong></td>
<td><strong>$18,438,546.40</strong></td>
<td><strong>$221,262,556.80</strong></td>
</tr>
<tr>
<td>San Francisco</td>
<td>$20,737,612.63</td>
<td>$248,851,351.56</td>
</tr>
<tr>
<td>Sacramento</td>
<td>$22,692,412.49</td>
<td>$272,308,949.88</td>
</tr>
<tr>
<td><strong>Los Angeles</strong></td>
<td><strong>$133,915,983.12</strong></td>
<td><strong>$1,606,991,797.44</strong></td>
</tr>
</tbody>
</table>

**Figure 4.2: Annual IHSS Expenditure in Millions, FY08 (Excluding Los Angeles)**
*Source(s): California Department of Social Services*
In FY 07-08, San Diego County spent an estimated $221,300,000 on its IHSS program, the fourth highest expenditure by a county in California. Because San Diego County has the second largest population in the state, this relatively high expenditure is unsurprising. It is surprising, however, that Sacramento and San Francisco—two of the lowest population counties in this survey—exceed San Diego and spend significantly more on IHSS than all of the other counties except Los Angeles.

The California Department of Social Services also provides caseload data on a county basis. Using the CDSS data, we have estimated the caseload for a given month in FY08 by averaging data from July 07 and June 08. Figure 4.3 shows the IHSS caseload of each county. Again, Figure 4.3 excludes Los Angeles County because its IHSS caseload is so much greater than any other county. In FY08, Los Angeles County handled an average of 167,033 IHSS cases in a given month.

Figure 4.3: Total IHSS Cases, FY08
Source(s): California Department of Social Services

Interestingly, while San Diego is fourth in the state in IHSS spending, it has the second highest number of cases. This discrepancy suggests that San Diego spends less per case on IHSS than Sacramento and San Francisco.

We can examine the discrepancy between caseload and expenditure by calculating the average monthly expenditure per case using the above data. Figures 4.4 and 4.5 show the average dollars spent per case in a given month in FY08:
## Figure 4.4: Average IHSS Expenditure per Case, FY08
*Source(s): California Department of Social Services*

<table>
<thead>
<tr>
<th>COUNTY NAME</th>
<th>Average Expenditure Per Case</th>
</tr>
</thead>
<tbody>
<tr>
<td>Orange</td>
<td>$654</td>
</tr>
<tr>
<td>Los Angeles</td>
<td>$802</td>
</tr>
<tr>
<td><strong>San Diego</strong></td>
<td><strong>$814</strong></td>
</tr>
<tr>
<td>Ventura</td>
<td>$818</td>
</tr>
<tr>
<td>San Bernardino</td>
<td>$872</td>
</tr>
<tr>
<td>Riverside</td>
<td>$921</td>
</tr>
<tr>
<td>Santa Clara</td>
<td>$963</td>
</tr>
<tr>
<td>Contra Costa</td>
<td>$988</td>
</tr>
<tr>
<td>Fresno</td>
<td>$990</td>
</tr>
<tr>
<td>San Francisco</td>
<td>$1,057</td>
</tr>
<tr>
<td>Alameda</td>
<td>$1,074</td>
</tr>
<tr>
<td>Sacramento</td>
<td>$1,177</td>
</tr>
</tbody>
</table>

Among the state’s largest counties, San Diego is clearly spending below average per case on its IHSS program. The average expenditure per case in the state’s largest counties is $927, or $113 above San Diego’s spending.
The California Department of Social Services provides data on the number of care hours authorized per case:

**Figure 4.6: Average IHSS Authorized Hours per Case, FY08**
*Source(s): California Department of Social Services*

San Diego provides each IHSS client with fewer hours of service than most of the state’s other largest counties do. San Diego authorizes an average of five hours less per case than the 12-county average of 88.3 hours. Interestingly, San Francisco spends far more per case than San Diego but authorizes roughly the same number of hours per case, suggesting that it incurs program costs in other ways. Figures 4.14-19 show that San Francisco provides higher wages and benefits to IHSS providers. Figure 4.7 reveals an overall high administrative allocation.

Funding Allocations

A separate question is how counties allocate their IHSS money. Provider benefits and administration costs are the two main areas of IHSS spending.

Figures 4.7 and 4.8 show, by county, the total amount federal, state, and county governments allocated for IHSS administration in FY09. The county share is the “maintenance of effort,” or how much the county must spend in order to keep up its current level and service and continue receiving current levels of funding from other government entities. These numbers are taken from two County Fiscal Letters sent by the state to the counties.
Figure 4.7: Allocations for IHSS Administrative Costs, FY09
Source(s): County Fiscal Letters No 08/09-23 and 08/09-43

<table>
<thead>
<tr>
<th>COUNTY NAME</th>
<th>Total Funds</th>
<th>Federal Funds</th>
<th>State Funds</th>
<th>County Share</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ventura</td>
<td>$3,398,844</td>
<td>$1,739,063</td>
<td>$1,177,141</td>
<td>$482,640</td>
</tr>
<tr>
<td>Contra Costa</td>
<td>$7,390,686</td>
<td>$3,613,049</td>
<td>$2,676,090</td>
<td>$1,101,547</td>
</tr>
<tr>
<td>Fresno</td>
<td>$9,306,879</td>
<td>$4,541,182</td>
<td>$3,359,441</td>
<td>$1,406,256</td>
</tr>
<tr>
<td>Riverside</td>
<td>$9,918,536</td>
<td>$4,788,011</td>
<td>$3,643,199</td>
<td>$1,487,326</td>
</tr>
<tr>
<td>Orange</td>
<td>$10,108,864</td>
<td>$4,373,097</td>
<td>$4,075,976</td>
<td>$1,659,791</td>
</tr>
<tr>
<td>Santa Clara</td>
<td>$11,682,218</td>
<td>$5,586,875</td>
<td>$4,342,511</td>
<td>$1,752,832</td>
</tr>
<tr>
<td>Alameda</td>
<td>$14,079,947</td>
<td>$6,860,349</td>
<td>$5,111,835</td>
<td>$2,107,763</td>
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<tr>
<td>San Bernardino</td>
<td>$15,863,883</td>
<td>$7,945,574</td>
<td>$5,594,642</td>
<td>$2,323,667</td>
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<tr>
<td>San Diego</td>
<td>$16,491,267</td>
<td>$8,109,645</td>
<td>$5,920,270</td>
<td>$2,461,352</td>
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<tr>
<td>San Francisco</td>
<td>$16,578,538</td>
<td>$8,086,788</td>
<td>$6,014,758</td>
<td>$2,476,992</td>
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<tr>
<td>Sacramento</td>
<td>$19,903,979</td>
<td>$10,089,424</td>
<td>$6,936,827</td>
<td>$2,877,728</td>
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<tr>
<td>Los Angeles</td>
<td>$112,018,526</td>
<td>$55,240,882</td>
<td>$40,078,850</td>
<td>$16,698,794</td>
</tr>
</tbody>
</table>

Figure 4.8: Estimated Allocations for IHSS Administrative Costs (Excluding Los Angeles)
Source(s): County Fiscal Letters No 08/09-23 and 08/09-43

Again, Figure 4.8 excludes Los Angeles County because it receives a far greater allocation for administrative costs than any other county. As we would expect, San Diego County receives an above average amount of funding for IHSS for these costs, but San Francisco and Sacramento, which not only have smaller populations but also fewer cases, receive more funding than San Diego does.
In Figure 4.9 we see that out of their total funding allocation, counties contribute approximately the same allocation; however, Orange County contributes a bigger share toward its funding of IHSS. It is worth noting that Sacramento, which receives by far the most funding from the state and federal governments—and more funding per case than all but Ventura and Contra Costa—contributes the second smallest county share.

**Figure 4.9: County Share of Total IHSS Program Costs**

*Source(s): California Department of Social Services and County Fiscal Letters No 08/08-23 and 08/09-43*

Among the state’s largest counties, San Diego receives slightly below-average state and federal IHSS funding, about $620 dollars per case from the federal and state governments combined. This is about $100 less than the 12-county average of $721.17. See Figures 4.10 and 4.11.

**Figure 4.10: State and Federal Dollars per IHSS Case, FY09**

*Source(s): California Department of Social Services, County Fiscal Letters No 08/09-23 and 08/09-43*

<table>
<thead>
<tr>
<th>COUNTY NAME</th>
<th>State and Federal Dollars per Case</th>
<th>Federal Dollars per Case</th>
<th>State Dollars Per Case</th>
</tr>
</thead>
<tbody>
<tr>
<td>Los Angeles</td>
<td>$570.67</td>
<td>$330.72</td>
<td>$239.95</td>
</tr>
<tr>
<td>Riverside</td>
<td>$573.65</td>
<td>$325.77</td>
<td>$247.88</td>
</tr>
<tr>
<td>Orange</td>
<td>$594.19</td>
<td>$307.54</td>
<td>$286.65</td>
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<tr>
<td>San Diego</td>
<td>$619.67</td>
<td>$358.18</td>
<td>$261.48</td>
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<td>Santa Clara</td>
<td>$677.94</td>
<td>$381.45</td>
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<tr>
<td>Fresno</td>
<td>$683.71</td>
<td>$392.99</td>
<td>$290.72</td>
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<tr>
<td>San Francisco</td>
<td>$720.31</td>
<td>$413.08</td>
<td>$307.24</td>
</tr>
<tr>
<td>Alameda</td>
<td>$762.32</td>
<td>$436.83</td>
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<tr>
<td>San Bernardino</td>
<td>$771.96</td>
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<td>$318.96</td>
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<tr>
<td>Sacramento</td>
<td>$884.16</td>
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<tr>
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<td>$886.79</td>
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</tr>
<tr>
<td>Ventura</td>
<td>$908.62</td>
<td>$541.85</td>
<td>$366.77</td>
</tr>
</tbody>
</table>
One possible explanation for this discrepancy is that, as we have noted, each county provides a different number of average hours for each case. To adjust for this difference, we have calculated the number of dollars appropriated by the state and federal governments to each county per hours of service authorized. Figure 4.12 displays that data.

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27 One should also note that the allocation data is from FY09 while the caseload data is from FY08. Because state allocations are based on previous year’s caseloads, Figures 4.10-12 are a good indication of relative spending per case.
By this measure, San Diego County is again the fourth lowest of the twelve counties.

**Administrative Costs**

Now that we have examined administrative allocations in detail, we can return to the bigger picture by comparing administrative costs to total costs, using all of the previous data. The following chart shows the total amount of money spent on IHSS by each county for every one dollar spent on administrative costs. Other costs contributing to the total besides administration include provider payments and provider health benefits.

**Figure 4.13: Total IHSS Cost for Every Dollar of Administration Costs, FY09**

Source(s): California Department of Social Services; County Fiscal Letters No 08/08-23 and 08/09-43
By this measure, San Diego is close to the 12-county average, spending $13 on provider payments and benefits for every one dollar it spends on administration costs.

**Wages and Benefits**

The hourly wages paid to IHSS providers varies from county to county. This is an area that is currently undergoing a good deal of change due to litigation and budget problems in the state, but it is still possible to examine data from previous years, including what the county contributes to the wages of IHSS providers. Counties are allowed to add to the hourly wages of providers and many do so.

The following graph shows the hourly wages of IHSS workers as of April 29, 2009. San Diego County pays its workers the third lowest hourly wage of the twelve counties. These comparatively low wages contribute, however, to San Diego’s ability to provide more clients with IHSS services at less cost.

**Figure 4.14: Average Hourly Wage for IHSS Providers, 2009**

*Source(s): California Association for Public Authorities for IHSS, 2009*

In addition to hourly wages, IHSS Individual Providers also receive health benefits. Figures 4.14-4.19 summarize data on benefits for county IHSS providers, as compiled in a 2005 survey by RTZ Associates.  

Figure 4.14 shows what each county included in its health plan as of 2005.

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Figure 4.14: Health Plans for IHSS Providers, 2005
Source(s): RTZ Associates Study 2005

<table>
<thead>
<tr>
<th>COUNTY NAME</th>
<th>Health</th>
<th>Dental</th>
<th>Vision</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alameda</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Contra Costa</td>
<td>Yes</td>
<td>Yes</td>
<td>None</td>
</tr>
<tr>
<td>Fresno</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Los Angeles - PASC</td>
<td>Yes</td>
<td>None</td>
<td>None</td>
</tr>
<tr>
<td>Orange</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Riverside</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Sacramento</td>
<td>Yes</td>
<td>Yes</td>
<td>None</td>
</tr>
<tr>
<td>San Bernardino</td>
<td>Yes</td>
<td>None</td>
<td>None</td>
</tr>
<tr>
<td>San Diego</td>
<td>Yes</td>
<td>Yes</td>
<td>None</td>
</tr>
<tr>
<td>San Francisco</td>
<td>Yes</td>
<td>Yes</td>
<td>None</td>
</tr>
<tr>
<td>Santa Clara</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Ventura</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
</tbody>
</table>

Figure 4.15 shows the percentage of total providers enrolled in the health benefits program.

Figure 4.15: Percentage of Total IHSS Providers Enrolled in Benefits, 2005
Source(s): RTZ Associates Study 2005

San Diego has the second lowest percentage of its total IHSS providers enrolled in its benefits program. San Bernardino, the only county with a lower percentage than San Diego, uses an enrollment cap to keep its enrollment rate low. San Diego County’s low enrollment could possibly signify a lack of effort to make its providers aware that such a program is available. San Diego County currently does not automatically start providers on the program, but rather requires them to file paperwork.

Figure 4.16 shows, for eight counties, the percentage of eligible IHSS providers that have enrolled in the county’s health benefits program. San Diego County falls below the 8-county average on this measure.
Figure 4.17 uses data from the previous two graphs to show the percent of all IHSS providers eligible for the benefits program. Eligibility for benefits is determined by the number of hours worked per month and the number of consecutive months worked. Exact requirements vary widely but San Diego County has relatively strict requirements of 75-80 hours per month for 3-4 consecutive months. San Diego County has the lowest percentage of providers eligible for benefits, along with Sacramento; but Sacramento enrolls 57% of those providers compared to San Diego’s 38%. Figures 4.15-4.17 collectively indicate that San Diego is not giving its IHSS providers as many benefits as most of the state’s other largest counties do.

Figure 4.17: Percent of IHSS Providers Eligible for Benefits, 2005
Source(s): RTZ Associates Study 2005
Allocations for Health Benefits

State and federal government allocations are based on prior spending and caseloads. The following chart and accompanying graph show the allocation breakdown for IHSS provider benefits in FY05:

Figure 4.18: Allocations for Health Benefits for IHSS Providers, 2005

<table>
<thead>
<tr>
<th>COUNTY NAME</th>
<th>Total</th>
<th>Federal</th>
<th>State</th>
<th>County</th>
</tr>
</thead>
<tbody>
<tr>
<td>San Bernardino</td>
<td>$4,331,174</td>
<td>$2,230,554</td>
<td>$1,342,664</td>
<td>$757,955</td>
</tr>
<tr>
<td>Riverside</td>
<td>$5,148,435</td>
<td>$2,651,444</td>
<td>$1,596,015</td>
<td>$900,976</td>
</tr>
<tr>
<td><strong>San Diego</strong></td>
<td><strong>$6,450,000</strong></td>
<td><strong>$3,321,750</strong></td>
<td><strong>$1,999,500</strong></td>
<td><strong>$1,128,750</strong></td>
</tr>
<tr>
<td>Contra Costa</td>
<td>$7,562,241</td>
<td>$3,894,554</td>
<td>$2,344,294</td>
<td>$1,323,392</td>
</tr>
<tr>
<td>Fresno</td>
<td>$8,139,097</td>
<td>$4,191,635</td>
<td>$2,523,120</td>
<td>$1,424,342</td>
</tr>
<tr>
<td>Sacramento</td>
<td>$8,473,626</td>
<td>$4,363,917</td>
<td>$2,626,824</td>
<td>$1,482,884</td>
</tr>
<tr>
<td>Alameda</td>
<td>$9,970,588</td>
<td>$5,134,853</td>
<td>$3,090,882</td>
<td>$1,744,853</td>
</tr>
<tr>
<td>Santa Clara</td>
<td>$12,403,440</td>
<td>$6,387,771</td>
<td>$3,845,066</td>
<td>$2,170,602</td>
</tr>
<tr>
<td>San Francisco</td>
<td>$24,791,050</td>
<td>$12,767,390</td>
<td>$7,685,225</td>
<td>$4,338,433</td>
</tr>
<tr>
<td>Los Angeles</td>
<td>$45,972,632</td>
<td>$23,675,905</td>
<td>$14,251,516</td>
<td>$8,045,210</td>
</tr>
</tbody>
</table>

Figure 4.19: Allocations for Health Benefits for IHSS Providers, 2005
**Functional Index**

The Functional Index, or “FI score,” measures the extent to which IHSS clients can take care of themselves. The scale goes from one to five, with one being the most highly functional and five being the most severely disabled. Figure 4.20 shows the average FI score for each county:

**Figure 4.20: Average FI Score for IHSS Clients**  
*Source(s): California Department of Social Services*

San Diego’s comparatively low average FI score may help explain why it authorizes fewer hours and can thus enroll IHSS clients at lower cost than other counties.

FI scores, however, are calculated by county social workers and so there is room for deviation in these scores, even though the state has standardized measures for the FI scores. San Diego County’s and Orange County’s low FI averages could be simply a result of more cautious scoring by its social workers and not indicative of an actual significant difference in the level of disabilities across the counties.

Overall, we conclude that San Diego is spending less money on its In-Home Supportive Services Program per case than most of the state’s other largest counties, through a combination of fewer authorized hours and smaller wages and benefits to providers—and perhaps due to a somewhat different client population.
Adult Protective Services

Introduction

Adult Protective Services is a county-run program that investigates and prevents abuse of either disabled adults or elderly people. Each county is mandated to have an Adult Protective Services (APS) program. There is little variation from county to county in the program regarding caseloads and funding.

Several counties do not have separate budgets available for APS and group it with all Adult and Aging Services. As a result, we were able to obtain APS budget numbers from only seven of the twelve counties in the study. Figures 4.21 and 4.22 show the total FY09 expenditures for those counties.

Figure 4.21: Total Adult Protective Services (APS) Expenditures for FY 08-09 (Seven Counties)
Source(s): Individual County Budgets

<table>
<thead>
<tr>
<th>COUNTY NAME</th>
<th>Total Expenditures in FY 08-09</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fresno</td>
<td>$2,511,516</td>
</tr>
<tr>
<td>San Bernardino</td>
<td>$5,531,977</td>
</tr>
<tr>
<td>Santa Clara</td>
<td>$7,011,163</td>
</tr>
<tr>
<td>Sacramento</td>
<td>$8,616,102</td>
</tr>
<tr>
<td>San Diego</td>
<td>$10,114,644</td>
</tr>
<tr>
<td>Alameda</td>
<td>$11,682,311</td>
</tr>
<tr>
<td>Los Angeles</td>
<td>$26,071,000</td>
</tr>
</tbody>
</table>

Of these seven counties, San Diego spends the third most on APS. Of course total spending needs to be adjusted for differences in population. Measuring county-level APS caseloads helps adjust for population.
Figure 4.23 shows for each of the state’s twelve largest counties the total number of active APS cases (both elder and disabled adult) as of March 2009. The data was obtained from the APS and CSBG monthly statistical report released by the California Department of Social Services. Figure 4.23 excludes Los Angeles County because its APS caseload (5,678 active cases) was significantly higher than that of any other county.

**Figure 4.23: Active APS Cases (Excluding Los Angeles) (March 2009)**

 Sources: APS Monthly Statistical Report, March 2009

San Diego County has the fifth most active APS cases of the twelve counties surveyed. Using this caseload data, we have calculated the average expenditure per case for the seven counties for which we have APS expenditure data.

**Figure 4.24: Expenditure per APS Case (Seven Counties)**

*Source(s): Individual County Budgets; APS Monthly Reports*

<table>
<thead>
<tr>
<th>COUNTY NAME</th>
<th>Expenditure Per Case</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fresno</td>
<td>$4,024</td>
</tr>
<tr>
<td>Los Angeles</td>
<td>$4,591</td>
</tr>
<tr>
<td>San Bernardino</td>
<td>$6,500</td>
</tr>
<tr>
<td>San Diego</td>
<td>$7,610</td>
</tr>
<tr>
<td>Sacramento</td>
<td>$11,336</td>
</tr>
<tr>
<td>Santa Clara</td>
<td>$16,381</td>
</tr>
<tr>
<td>Alameda</td>
<td>$24,908</td>
</tr>
</tbody>
</table>
San Diego County spends an average of just over $7,600 per year per APS case. This is the median number for the seven counties for which we have data; but we must reemphasize that the two counties with the most similar caseloads to San Diego do not provide APS funding data, and all budget information is provided by the counties themselves in a non-standardized manner.

**Allocations**

The California Department of Social Services provides data on how much the state allocates to each county for Adult Protective Services and Community Services Block Grants (CSBG), a grant counties use to fund APS. County Services Block Grants are based on prior funding and expenditures by the counties on APS, and thus reflects overall spending on the program. The money from the grant is for protective services and APS administrative costs but can also be used to fund related optional services and activities if funds are available.

Sixty-five percent of state funding for APS is based on each county’s percentage of people over 65 using the US census bureau’s information as of July 1, 2005; thirty-five percent is distributed based on each county’s percentage to the state total of disabled adults between ages 18 and 64. This formula uses SSI-SSP caseload data from March 2007. Each county is guaranteed a minimum of $100,000 for APS. The following table and graph show the state’s actual APS allocations to the twelve largest counties for FY09.

---

29 See County fiscal letter mailed in November 2008 from the California Department of Social Services to the County Welfare Directors.
Figure 4.26: APS and CSBG State Allocations, FY09
Source(s): County Fiscal Letter 08/09-21

<table>
<thead>
<tr>
<th>COUNTY NAME</th>
<th>FY 08-09 APS and CSBG State Allocations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ventura</td>
<td>$980,586</td>
</tr>
<tr>
<td>Contra Costa</td>
<td>$1,392,366</td>
</tr>
<tr>
<td>Fresno</td>
<td>$1,628,785</td>
</tr>
<tr>
<td>Santa Clara</td>
<td>$1,756,303</td>
</tr>
<tr>
<td>San Francisco</td>
<td>$1,855,565</td>
</tr>
<tr>
<td>Alameda</td>
<td>$2,035,408</td>
</tr>
<tr>
<td>San Bernardino</td>
<td>$2,111,957</td>
</tr>
<tr>
<td>Sacramento</td>
<td>$2,626,039</td>
</tr>
<tr>
<td>Riverside</td>
<td>$2,681,150</td>
</tr>
<tr>
<td>San Diego</td>
<td><strong>$3,444,517</strong></td>
</tr>
<tr>
<td>Orange</td>
<td>$3,653,490</td>
</tr>
<tr>
<td>Los Angeles</td>
<td>$14,583,886</td>
</tr>
</tbody>
</table>

Figure 4.27: APS and CSBG State Allocations, FY09 (Excluding Los Angeles)
Source(s): County Fiscal Letter 08/09-21

Figure 4.27 excludes Los Angeles County because its allocation of $14.5 million is much higher than those of any other county.
Figure 4.28 uses the March 2009 caseload data to estimate the state’s allocation per APS case for each of the twelve largest counties.

**Figure 4.28: State Allocation per APS Case, FY09**  
*Source(s): California Department of Social Services*

<table>
<thead>
<tr>
<th>COUNTY NAME</th>
<th>State Allocation per Case</th>
</tr>
</thead>
<tbody>
<tr>
<td>San Francisco</td>
<td>$1,288</td>
</tr>
<tr>
<td>Riverside</td>
<td>$1,415</td>
</tr>
<tr>
<td>San Bernardino</td>
<td>$2,481</td>
</tr>
<tr>
<td>Orange</td>
<td>$2,562</td>
</tr>
<tr>
<td>Los Angeles</td>
<td>$2,568</td>
</tr>
<tr>
<td><strong>San Diego</strong></td>
<td><strong>$2,591</strong></td>
</tr>
<tr>
<td>Fresno</td>
<td>$2,610</td>
</tr>
<tr>
<td>Ventura</td>
<td>$2,701</td>
</tr>
<tr>
<td>Sacramento</td>
<td>$3,455</td>
</tr>
<tr>
<td>Contra Costa</td>
<td>$4,012</td>
</tr>
<tr>
<td>Santa Clara</td>
<td>$4,103</td>
</tr>
<tr>
<td>Alameda</td>
<td>$4,339</td>
</tr>
</tbody>
</table>

San Diego County falls in the mid-range of the twelve largest counties in per-case state funding for Adult Protective Services. One should note the wide range of funding per case; more research is required to determine the reasons for the funding disparities.
Child Welfare Services

Introduction

Each county’s Child Welfare Services Department includes five components: Hotline, Emergency Response, Family Maintenance, Family Reunification, and Permanent Placement. These departments also administer Foster Care, Adoption services, Kin-GAP, the Independent Living Program and Transitional Housing. This report largely focuses on the five components, plus foster care, and adoption.30

One way to analyze Child Welfare Services across the twelve counties is to compare budgets. Since there is no centralized source for this information, we have used each county’s individual budget to find out how much they spend on these services. As we have noted, each county’s budget is organized differently, which complicates cross-county comparisons. Moreover, two counties, Riverside and Ventura, did not provide data regarding their spending on Child Welfare Services and we have excluded them from our comparisons of county-level spending for these programs.

Overall Expenditures

Figures 4.30 and 4.31 depict each county’s planned expenditure on Child Welfare Services for FY 08-09.

Figure 4.30: Total Appropriations for Child Welfare Services, FY09 (Ten Counties)
Source(s): Individual County Budgets

<table>
<thead>
<tr>
<th>COUNTY NAME</th>
<th>Total Appropriations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fresno</td>
<td>$60,084,511</td>
</tr>
<tr>
<td>San Francisco</td>
<td>$125,844,166</td>
</tr>
<tr>
<td>Contra Costa</td>
<td>$129,343,871</td>
</tr>
<tr>
<td>Sacramento</td>
<td>$129,897,770</td>
</tr>
<tr>
<td>San Bernardino</td>
<td>$159,725,349</td>
</tr>
<tr>
<td>Alameda</td>
<td>$180,870,470</td>
</tr>
<tr>
<td>Santa Clara</td>
<td>$181,149,607</td>
</tr>
<tr>
<td><strong>San Diego</strong></td>
<td><strong>$264,356,319</strong></td>
</tr>
<tr>
<td>Orange</td>
<td>$307,667,572</td>
</tr>
<tr>
<td>Los Angeles</td>
<td>$1,736,430,000</td>
</tr>
</tbody>
</table>

30 Kin-GAP offers a subsidy to children who leave the juvenile court system to live with a relative legal guardian. The Independent Living Program helps foster youth exiting the program learn how to live on their own and Transitional Housing is a service provided to foster children who are in the process of exiting the program.
Figure 4.31: Total Appropriations for Child Welfare Services, FY09 (Nine Counties – Los Angeles Excluded)
Source(s): Individual County Budgets

Figure 4.31 excludes Los Angeles County because its appropriations for Child Welfare Services are so much higher than those of the other counties. Of the ten counties for which we have data, San Diego County spends the third most on Child Welfare Services.

One of the factors contributing to the size of a CWS program is the number of people whom it is supposed to serve. CWS programs generally serve juveniles, residents under the age of eighteen. Figures 4.32 and 4.33 calculate by county the spending on CWS per resident under eighteen. The Census Bureau’s population data is from 2008.

Figure 4.32: Child Welfare Spending Per Resident Under Age 18 (Ten Counties)
Source(s): Individual County Budgets; US Census Bureau 2008

<table>
<thead>
<tr>
<th>COUNTY NAME</th>
<th>Population under 18</th>
<th>Total Appropriations</th>
<th>Spending per resident under 18</th>
</tr>
</thead>
<tbody>
<tr>
<td>San Francisco</td>
<td>117,907</td>
<td>$125,844,166</td>
<td>$1,067.32</td>
</tr>
<tr>
<td>Contra Costa</td>
<td>258,712</td>
<td>$129,343,871</td>
<td>$499.95</td>
</tr>
<tr>
<td>Fresno</td>
<td>278,398</td>
<td>$60,084,511</td>
<td>$215.82</td>
</tr>
<tr>
<td>Alameda</td>
<td>362,605</td>
<td>$180,870,470</td>
<td>$498.81</td>
</tr>
<tr>
<td>Sacramento</td>
<td>373,197</td>
<td>$129,897,770</td>
<td>$348.07</td>
</tr>
<tr>
<td>Santa Clara</td>
<td>440,898</td>
<td>$181,149,607</td>
<td>$410.87</td>
</tr>
<tr>
<td>San Bernardino</td>
<td>612,618</td>
<td>$159,725,349</td>
<td>$260.73</td>
</tr>
<tr>
<td>San Diego</td>
<td>783,416</td>
<td>$264,356,319</td>
<td>$337.44</td>
</tr>
<tr>
<td>Orange</td>
<td>799,040</td>
<td>$307,667,572</td>
<td>$385.05</td>
</tr>
<tr>
<td>Los Angeles</td>
<td>2,704,965</td>
<td>$1,736,430,000</td>
<td>$641.94</td>
</tr>
</tbody>
</table>
Of the ten counties, San Diego is the third from the bottom on spending on CWS per resident under eighteen. San Francisco is the one county that is very different from the others in this metric. Compared to the other counties, San Francisco also has a very small percentage of residents under eighteen, and a larger percentage of individuals aged 18 to 21 served by CWS.

Among its most important functions, CWS intervenes in child abuse cases and operates a hotline for child abuse reporting. Figures 4.34 and 4.35 summarize data from the Child Welfare Dynamic Report System, the product of a partnership between the state of California and the University of California Berkeley. The data show the total number of children referred to CWS in each county in 2008.

**Figure 4.34: CWS Child Abuse Referrals in 2008 (Ten Counties)**
*Source(s): Child Welfare Dynamic Report System*

<table>
<thead>
<tr>
<th>COUNTY NAME</th>
<th>Total children referred in 2008</th>
</tr>
</thead>
<tbody>
<tr>
<td>San Francisco</td>
<td>5,098</td>
</tr>
<tr>
<td>Ventura</td>
<td>9,756</td>
</tr>
<tr>
<td>Contra Costa</td>
<td>10,676</td>
</tr>
<tr>
<td>Alameda</td>
<td>12,371</td>
</tr>
<tr>
<td>Santa Clara</td>
<td>14,155</td>
</tr>
<tr>
<td>Fresno</td>
<td>18,414</td>
</tr>
<tr>
<td>Sacramento</td>
<td>23,021</td>
</tr>
<tr>
<td>Orange</td>
<td>29,055</td>
</tr>
<tr>
<td>San Bernardino</td>
<td>34,741</td>
</tr>
<tr>
<td>Riverside</td>
<td>37,179</td>
</tr>
<tr>
<td><strong>San Diego</strong></td>
<td><strong>51,363</strong></td>
</tr>
<tr>
<td>Los Angeles</td>
<td>129,163</td>
</tr>
</tbody>
</table>
Figures 4.36 and 4.37 estimate the per-case expenditures, showing the dollars spent per child referred to the CWS system in each county in 2008. Total dollars spent are from FY 08-09 for each county while total referrals are from calendar year 2008.

**Figure 4.36: Dollars Spent per Child Referred in Child Abuse Cases, FY09 (Ten Counties)**

*Source(s): Individual County Budgets; Child Welfare Dynamic Report System*

<table>
<thead>
<tr>
<th>COUNTY NAME</th>
<th>Dollars spent per child referred</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fresno</td>
<td>$3,262.98</td>
</tr>
<tr>
<td>San Bernardino</td>
<td>$4,597.60</td>
</tr>
<tr>
<td><strong>San Diego</strong></td>
<td><strong>$5,146.82</strong></td>
</tr>
<tr>
<td>Sacramento</td>
<td>$5,642.58</td>
</tr>
<tr>
<td>Orange</td>
<td>$10,589.14</td>
</tr>
<tr>
<td>Contra Costa</td>
<td>$12,115.39</td>
</tr>
<tr>
<td>Santa Clara</td>
<td>$12,797.57</td>
</tr>
<tr>
<td>Los Angeles</td>
<td>$13,443.71</td>
</tr>
<tr>
<td>Alameda</td>
<td>$14,620.52</td>
</tr>
<tr>
<td>San Francisco</td>
<td>$24,685.01</td>
</tr>
</tbody>
</table>
By this measure of expenditures per child referred to the system, San Diego County spends third from the bottom of the ten counties for which data was available. We can evaluate the data better when we consider how many referrals were substantiated and the children then put into the CWS system.

Summarizing data from the Child Welfare Dynamic Report System, Figure 4.38 show how many child referrals each county received from January 1, 2008 to December 31, 2008. Figure 4.38 also categorizes the cases to show whether they were substantiated, inconclusive, unfounded, or received assessment only.
Figure 4.39 calculates the expenditure by each county per substantiated child abuse case. Total dollars spent are from FY 08-09 for each county while total substantiated cases are from calendar year 2008.

**Figure 4.39: Appropriation per Substantiated Case, FY09**  
*Source(s): Individual County Budgets; Child Welfare Dynamic Report System*

Compared to most of the other counties, San Diego is spending a fairly small amount per substantiated referral.

Another way to measure the quality of services provided by each county is the percentage of its responses to referrals that are “timely” as determined by state guidelines. The graph below shows the percentage of planned responses completed in a timely manner from January 1, 2008 through March 31, 2008.

**Figure 4.40: Percentage of CWS Responses that are Timely, January-March 2008**  
*Source(s): Child Welfare Dynamic Report System*

San Diego performs fairly well in this metric.
Adoption Time

Another measurement of the quality of the CWS programs in each county is the median number of months it takes for a child who has entered the system to be adopted. Figure 4.41 shows that data from July 2007 through June 2008 (Fiscal Year 07-08).

Figure 4.41: Median Months to Child Adoption, FY08
Source(s): Child Welfare Dynamic Report System

Of the twelve counties surveyed, San Diego County has the longest median time to adoption at 36.2 months. Further investigation is needed to interpret this finding.

Foster Care

Another aspect of CWS is foster care. Figure 4.42 shows how many children were in foster care in each county as of January 1, 2008. The graph excludes Los Angeles County, which as of January 1, 2008 had 23,364 children in foster care.
Yet another metric with which to evaluate the counties is how many placements each foster child has on average. Figures 4.44 and 4.45 show the percentage of children in the system in 2008 with two or fewer placements over the course of their time in the foster care program.

**Figure 4.43: Percent of Children with Two or Fewer Foster Care Placements, 2008**

<table>
<thead>
<tr>
<th>COUNTY NAME</th>
<th>Percent of children with two or fewer placements</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fresno</td>
<td>45.60%</td>
</tr>
<tr>
<td>Santa Clara</td>
<td>47.53%</td>
</tr>
<tr>
<td><strong>San Diego</strong></td>
<td><strong>50.38%</strong></td>
</tr>
<tr>
<td>Sacramento</td>
<td>52.14%</td>
</tr>
<tr>
<td>Alameda</td>
<td>55.83%</td>
</tr>
<tr>
<td>San Bernardino</td>
<td>58.36%</td>
</tr>
<tr>
<td>Orange</td>
<td>58.70%</td>
</tr>
<tr>
<td>Contra Costa</td>
<td>59.52%</td>
</tr>
<tr>
<td>Riverside</td>
<td>60.15%</td>
</tr>
<tr>
<td>San Francisco</td>
<td>62.12%</td>
</tr>
<tr>
<td>Ventura</td>
<td>63.24%</td>
</tr>
<tr>
<td><strong>Los Angeles</strong></td>
<td><strong>63.47%</strong></td>
</tr>
</tbody>
</table>
Put another way, San Diego County puts foster children in more different placements than the 12-county average.
Section V. Mental Health

EXECUTIVE SUMMARY

This section provides an overview of the complex mental health system in California and provides comparative data regarding county-level provision of mental health services. Our data indicate that, among the state’s twelve largest counties:

- San Diego County’s mental health spending per county mental health client is just above the average amount when Santa Clara County, an outlier, is excluded from the data. When including Santa Clara, San Diego falls just below the average spending per client.

- San Diego County spends the fourth lowest per capita on alcohol and drug abuse services.

- Fresno, Riverside, San Bernardino, Orange, and San Diego Counties have the lowest cost per Medi-Cal mental health beneficiaries; that is, those counties request the lowest amounts of money for reimbursement per Medi-Cal mental health claim.

- For Medi-Cal mental health clients with fewer than 15 services or treatments, San Diego maintains the lowest cost per client. The data indicate San Diego is not providing fewer services to the clients, so it is reducing costs in other ways, implying either more efficiency or fewer resources per service.

- Among the twelve counties, San Diego ties San Francisco for the second lowest percentage of Medi-Cal mental health claims denied by the state. Claims are denied by the state for incomplete documentation or for lack of medical necessity. Claims are filed with the state after services are provided by the counties.

- San Diego enrolls a higher percentage of Medi-Cal recipients in Medi-Cal mental health services than most other counties do.

- San Diego received about $170 less per mental health client in FY07 than the twelve-county average, but all counties receive approximately the same allocation per client.

- San Diego County spends the third lowest amount on mental health and substance abuse per aided adult on CalWORKs. As a proportion of total CalWORKs spending, however, San Diego’s CalWORKs mental health and substance abuse spending is about average.
Introduction

California’s Mental Health system has evolved dramatically over the past half century. Today, California’s system consists of a network of 56 Mental Health Plans (MHPs) operated by the state’s 58 counties. Each MHP is developed and run by its respective county (or combination of two counties in two instances) and is funded through a network of federal, state, and local revenue streams. To understand the state’s current mental health system, it is important to consider how it has developed over time.

The California Community Mental Health Services Act of 1969 provided sweeping changes in California’s mental health policy. The act “deinstitutionalized” the system, passing responsibility from state run hospitals to county affiliates for the treatment of mental disabilities. Funding for this movement was supported through the earlier Short-Doyle Act (1958) which aimed to finance community-based mental health programs. The implementation of these goals was, however, hindered by the state’s inability to redirect money efficiently from the closed hospitals to the counties.

During the same period, California was developing its version of Medicaid, known as Medi-Cal, to cover both physically and mentally ill patients. At the time, the state allocated only a small portion of Medi-Cal funding toward mental health. It provided limited services through a reimbursement Fee-For-Service Medi-Cal program (FFC/MC). In the early 1970s, the state realized that Short-Doyle was providing services for a large number of Medi-Cal beneficiaries. The state established the Short-Doyle/Medi-Cal program (SD/MC) to bridge the gap between the two programs.

Despite these efforts, funding shortages persisted through the 1970s and 1980s. In the early 1990s, California experienced a $14.3 billion deficit, which further limited funding for mental health services across the state. With programs on the verge of collapse, legislators again took steps to reform the mental health funding process. In 1991, the Bronzan-McCorquodale Act established a system of “realignment” to dedicate more revenue for mental health, social services, and health to the counties. Realignment provided new funding through state increases in sales tax and vehicle licensing fees. By shifting the funding outlet from the state general fund to the counties, MHPs now had increased responsibilities and direct revenue streams to develop mental health programs. The Act also adjusted cost sharing ratios of social services and health care programs (including mental health) between the state and county for non-federal programs.

In 1993, a Medicaid state amendment extended mental health services under the Medicaid (SD/MC) “Rehab Option,” intended to reduce institutionalization and focus on outcomes instead of amount of services provided. This legislation also extended the range of service providers and implemented new services. Between 1995 and 1998, the Short-Doyle/MC and FFS/MC programs established in the 1970s were merged into a single program, called Medi-Cal Specialty Mental Health Managed Care. The Short-Doyle/Medi-Cal program provides reimbursement for mental health and some substance abuse programs run by the county or by providers contracting with the county. The Fee-for-Service Medi-Cal provides many health services with a limited range for mental health; services are provided in contract with private hospitals or practitioners. The managed care program helped bridge the distinctions between the former two programs and provide a holistic service.

Within Managed Care, MHPs acquired management responsibility for inpatient and outpatient psychiatric services, as well as psychological and some nursing services. The MHPs’ responsibilities extended to all Medi-Cal recipients within its district. Oversight on Managed Care service administration is monitored by the state Department of Mental Health for quality assurance and code compliance.

During the same period, mental health advocates filed a lawsuit claiming that the state was neglecting to cover mental health services for children under Medi-Cal through a program called Early and Periodic
Screening Diagnosis and Treatment (EPSDT). Following the suit, all persons under 21 became eligible for mental health services if they were on Medi-Cal.

The increased program load and perpetual lack of funding left counties with a near impossible task of providing adequate mental health services. Realignment revenues did not grow as expected and do not keep up with the cost of providing services. Those funds are further impacted because they cover the overflow of costs to cover patients under Medi-Cal.

In 2004 California voters passed Proposition 63, an initiative that imposed a one percent tax on individuals who make over $1 million per year in personal income, with the revenues earmarked for mental health services. The law, known as the Mental Health Services Act, consists of five components—Community Program Planning, Community Services and Supports (CSS), Workforce Education and Training, Capital Facilities and Technological Needs, and Prevention and Early Intervention—each receiving separate funding. While roughly $3 billion has been allocated to counties since 2005, most counties have received only one-time planning funds and CSS dollars; over $1.3 billion has been allocated to the other four categories, but not yet distributed. Thus, despite the passage of Proposition 63, the funding and administration of mental health programs remains a challenge for California’s counties.
**Clients and Expenditures**

The following graphs provide comparative data for mental health expenditures and caseloads for the state’s largest counties. Data for San Francisco was unavailable.

**Figure 5.1: County Mental Health Expenditures in Millions, FY 2007 (11 Counties)**  
*Source(s): California State Controller, FY07 Counties Annual Report*

![Expenditure Graph]

**Figure 5.2: Mental Health Clients in Thousands, FY06-07 (11 Counties)**  
*Source(s): 2008 California Statistical Abstract*

![Casedload Graph]

Figure 5.3 estimates per-client mental health funding by combining data on county-level caseloads and expenditures. San Diego’s expenditure per client is the median value. By this measure, Santa Clara
County’s per-client mental health expenditures were clearly anomalous. Further investigation would be required to confirm and interpret that finding.

**Figure 5.3: County Mental Health Expenditures per Client, FY07 (11 Counties)**  

Similarly, as Figure 5.4 indicates, excluding Los Angeles County, San Diego spends the most on drug and alcohol abuse services. However, adjusting for county population, San Diego’s expenditure on these programs is slightly below average (see Figure 5.5).

**Figure 5.4: Expenditures for Drug and Alcohol Abuse Services in Millions, FY 2007 (11 Counties)**  
*Sources: 2008 California Statistical Abstract and FY07 Counties Annual Report*
Figure 5.5: Drug and Alcohol Abuse Services Expenditures Per Capita, FY07 (11 Counties)
Source(s): California State Controller, FY07 Counties Annual Report

A large number of county mental health clients are Medi-Cal beneficiaries. Figure 5.6 presents, by county, the number of Short-Doyle/Medi-Cal Beneficiaries served in Calendar Year 2008.

Figure 5.6: Short-Doyle/Medi-Cal Beneficiaries Served in CY 2008
Source(s): California External Quality Review Organization

Figure 5.7 shows, by county, the percentage of Medi-Cal beneficiaries receiving mental health services. San Diego County ranks high on this measure. Further investigation is needed to explain this result.
Figure 5.7: Percentage of Medi-Cal Beneficiaries Receiving Mental Health Services, CY 2007
Source(s): California External Quality Review Organization

Figure 5.8 reveals that San Diego County has the fifth lowest overall Medi-Cal cost per client. Figures 5.11-5.16 break down these costs by high-cost and low-cost patients.

Figure 5.8: Average Amount Approved for Mental Health Claims, CY 2007
Source(s): California External Quality Review Organization

Figures 5.9 presents, by county, the percentage of Short-Doyle/Medi-Cal Denied Claims for Fiscal Year 2007-2008. San Diego’s denial ranking of 2.06% illustrates that the state approves reimbursements for almost all clients. Most of the counties in the study have similarly low denial rates.
In Figure 5.10 below, San Diego is in red, and the 12-county average is in blue. The graph displays the percent of total patients that received a certain number of services within the SD/MC plan. For example, people who received one service or treatment in 2007 made up 7.2% of San Diego’s overall allocation for mental health. Data show that San Diego provides an amount of services in line with the 11 other counties. That is, San Diego provides a given number of services to approximately the same proportion of clients as other counties, suggesting that they are not saving money by limiting the number of services per patient.
Figures 5.11-5.16 break down, by county, the state’s reimbursement for clients receiving these respective number of services. The figures show that San Diego has the lowest cost for all categories except the highest-cost patients, which account for 37% of the total number of patients. We see that these higher-cost patients, despite San Diego’s lower cost in all other categories, place Fresno, Riverside, San Bernardino, and Orange counties at lower overall costs per clients (Figure 5.8).

Because San Diego provides the same number of services, the only conclusion as to why its costs are lower is that it either operates on a more efficient model or provides fewer resources for each “service.” More research is required to make any determinations.

**Figure 5.11: Cost per Beneficiary Receiving One Service, CY 2007**
*Source: California External Quality Review Organization*

**Figure 5.12: Cost per Beneficiary Receiving Two Services, CY 2007**
*Source: California External Quality Review Organization*
Figure 5.13: Cost per Beneficiary Receiving Three Services, CY 2007
Source: California External Quality Review Organization

Figure 5.14: Cost per Beneficiary Receiving Four Services, CY 2007
Source: California External Quality Review Organization
Figure 5.15: Cost per Beneficiary Receiving 5-15 Services, CY 2007
Source: California External Quality Review Organization

Figure 5.16: Cost per Beneficiary Receiving Over 15 Services, CY 2007
Source: California External Quality Review Organization
Mental Health Allocations

As noted above, the state has developed a “realignment” policy for allocating money to counties for the provision of mental health services. Figure 5.17 presents data on state allocations of sales tax collections to counties for these purposes. The graph excludes Los Angeles County, which received a $253 million allocation in FY 2008.

Figure 5.17: Health and Welfare Realignment for Mental Health Allocation from Sales Tax Collections FY 2008, in Millions (Excluding Los Angeles)

Source(s): State Controller’s Office, Division of Accounting and Reporting

Similarly, the state allocates a share of vehicle license fees to counties for provision of mental health services. Figure 5.18 shows the amounts of these allocations for FY 2008.

Figure 5.18: Health and Welfare Realignment for Mental Health Allocation from Vehicle License Fee Collections, FY 2008 (in Thousands)

Source(s): State Controller’s Office, Division of Accounting and Reporting
Figure 5.19 combines sources of realignment funding for mental health services. Excluding Los Angeles, San Diego received the largest amount of realignment funds.

**Figure 5.19: Overall State Aid Realignment in Millions, FY 2008 (Excluding Los Angeles)**  
*Source(s): State Controller’s Office, Division of Accounting and Reporting*

![Figure 5.19: Overall State Aid Realignment in Millions, FY 2008 (Excluding Los Angeles)](chart)

By combining data from the FY07 Counties Annual Report on funding and caseloads, Figure 5.20 calculates, by county, the total per-client state allocations for mental health services.

**Figure 5.20: Total State Aid for Mental Health per Client, FY07 (11 Counties)**  
*Source(s): California State Controller, FY07 Counties Annual Report*

![Figure 5.20: Total State Aid for Mental Health per Client, FY07 (11 Counties)](chart)

By this measure, San Diego County receives $170 less allocation than average per mental health client, less than six of the 11 counties for which we have data.
**CalWORKs Mental Health Expenditures**

As part of the CalWORKs program, which was analyzed in Section III, counties are required to provide mental health and substance abuse services. Figure 5.21 shows that San Diego County spends less CalWORKs money on mental health and substance abuse per aided adult on CalWORKs than nine other counties. As a percentage of total CalWORKs funding, however, San Diego spends an average proportion. See Figure 5.22.

**Figure 5.21: CalWORKs Mental Health and Substance Abuse Expenditures per Aided Adult, FY08**

*Source(s): CDSS, 2007-2008 CalWORKs Quarterly Reports*

**Figure 5.22: CalWORKs Mental Health and Substance Abuse Expenditures as Percentage of Total CalWORKs Expenditures**

*Source(s): CDSS, 2007-2008 CalWORKs Quarterly Reports*