

2023-24 BUDGET ACT

Department of Health Care Services Highlights

July 14, 2023

**Governor Gavin Newsom
State of California**

**Secretary Mark A. Ghaly, MD, MPH
California Health and Human Services Agency**

**Director Michelle Baass
Department of Health Care Services**



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This document provides a summary of the enacted 2023-24 Budget for the Department of Health Care Services (DHCS), including related statutory changes. The DHCS budget builds on the Administration’s previous investments and enables the Department to continue to transform Medi-Cal into a system that operates more effectively and efficiently for its millions of members, and the people of California as a whole. The whole-system, whole-person, population health approach will preserve and improve the overall health and well-being of Californians—as we progress on the goal of a healthy California for all.

GENERAL BUDGET OVERVIEW

For Fiscal Year (FY) 2023-24, the DHCS budget includes a total of \$156.6 billion and 4,802.5 positions for the support of DHCS programs and services. Of that amount, \$1.3 billion funds state operations (DHCS operations), while \$155.3 billion supports local assistance (funding for program costs, partners, and administration). These expenditures are consistent with the final Budget Act of 2023, as reflected in Chapter 12, Statutes of 2023 (SB 101), and Chapter 38, Statutes of 2023 (AB 102), and the Budget Act of 2021 and Budget Act of 2022, as recently amended by Chapter 33, Statutes of 2023 (AB 103).

Total DHCS Budget

(Includes non-Budget Act appropriations)

Fund Source*	FY 2022-23	FY 2022-23	FY 2023-24
	Enacted Budget	Revised Budget	Budget
Local Assistance (LA)			
LA General Fund	\$ 36,802,077	\$ 31,275,617	\$ 37,909,465
LA Federal Funds	\$ 89,035,408	\$ 91,874,810	\$ 90,872,402
LA Special Funds	\$ 14,773,431	\$ 14,564,847	\$ 24,535,692
LA Reimbursements	\$ 1,978,609	\$ 1,839,067	\$ 1,979,491
Total Local Assistance	\$ 142,589,525	\$ 139,554,341	\$ 155,297,050
State Operations (SO)			
SO General Fund	\$ 530,567	\$ 571,867	\$ 356,427
SO Federal Funds	\$ 644,921	\$ 663,526	\$ 619,778
SO Special Funds	\$ 420,959	\$ 571,261	\$ 339,383
SO Reimbursements	\$ 25,079	\$ 25,674	\$ 25,612
Total State Operations	\$ 1,621,526	\$ 1,832,328	\$ 1,341,200
Total Funds			
Total General Fund	\$ 37,332,644	\$ 31,847,484	\$ 38,265,892
Total Federal Funds	\$ 89,680,329	\$ 92,538,336	\$ 91,492,180
Total Special Funds	\$ 15,194,390	\$ 15,136,108	\$ 24,875,075
Total Reimbursements	\$ 2,003,688	\$ 1,864,741	\$ 2,005,103
Total Funds	\$ 144,211,051	\$ 141,386,669	\$ 156,638,250

* Dollars in Thousands

MAJOR BUDGET ISSUES AND PROPOSALS

Managed Care Organization (MCO) Tax and Medi-Cal Provider Rate Increases

The Budget includes the renewal of the MCO tax, via trailer bill language (TBL), effective April 1, 2023, nine months earlier than planned at Governor's Budget. This renewed MCO tax is estimated to result in approximately \$19.4 billion net state benefit through calendar year 2026. Of the overall net benefit over that period, about \$8.3 billion will be used to support existing Medi-Cal expenditures, with the remaining \$11.1 billion dedicated to new investments in Medi-Cal as described below.

The Budget increases rates to at least 87.5 percent of Medicare for Primary Care (inclusive of Nurse Practitioners and Physician Assistants), Maternity Care (inclusive of OB/GYN and doulas), and non-specialty mental health services, effective January 1, 2024. These rate increases will include the elimination of the historical AB 97 reduction and account for Proposition 56 supplemental payments for the applicable services. Additionally, the state will direct Medi-Cal managed care plans to pay providers at least the base Fee-for-Service rates including in capitated provider arrangements. These investments support the Department's Comprehensive Quality Strategy and its clinical focus on children's preventive care, maternal care and birth equity, and behavioral health integration—aligning our efforts toward upstream preventive and primary care interventions.

The Budget also provides \$150 million to supplement the Distressed Hospital Loan Program and \$50 million for the Small and Rural Hospital Relief Program for seismic assessment and construction, both through the Department of Health Care Access and Information, from MCO tax proceeds in FY 2023-24. The Budget also provides \$75 million in FY 2023-24 and later years for graduate medical education through the University of California.

Pursuant to TBL, the Department will submit a plan as part of the 2024-25 Governor's Budget for additional targeted increases to Medi-Cal payments or other investments designed to advance access, quality, and equity for Medi-Cal members and promote provider participation in the Medi-Cal program in addition to the primary care, maternity care, and non-specialty mental health services mentioned above. The plan will include detailed proposals for rate increases and investments in services and supports in primary care, maternity care, and non-specialty mental health services, specialty care services, community or hospital outpatient procedures and services, family planning services and women's health providers, hospital-based emergency and emergency physician services, ground emergency transport services, designated public hospitals, behavioral health care for members in hospital/emergency departments and institutional long-term care settings, and investments to maintain and grow the health care workforce.

Community Assistance, Recovery and Empowerment (CARE) Act

The Budget includes \$52.3 million General Fund in FY 2023-24, \$121 million General Fund in FY 2024-25, and \$151.5 million General Fund in 2025-26 and ongoing to support estimated county behavioral health department costs for the CARE Act (Chapter 319, Statutes of 2022). The Budget also includes \$15 million one-time General Fund for Los Angeles County start-up funding given the December 1, 2023 implementation, in addition to \$57 million one-time General Fund included in the 2022 Budget Act for start-up costs.

California Advancing and Innovating Medi-Cal (CalAIM)

The Budget reflects a number of changes related to the CalAIM initiative:

- **Behavioral Health Community-Based Organized Networks of Equitable Care and Treatment (BH-CONNECT) Demonstration (formerly referred to as the California Behavioral Health Community-Based Continuum, or CalBH-CBC, Demonstration)** - The Department will seek federal approval of a Medicaid Section 1115 demonstration waiver to expand behavioral health services for Medi-Cal members living with serious mental illness and serious emotional disturbance. The Department plans to submit the BH-CONNECT Demonstration proposal for federal approval in the summer /fall of 2023 with implementation beginning no sooner than January 1, 2025. The fiscal impact for DHCS and the Department of Social Services over the five years of the waiver is estimated to be \$6.1 billion total funds (\$306.2 million General Fund). The DHCS budget includes \$6 billion (\$185 million General Fund, \$87.5 million Mental Health Services Fund, \$2.1 billion Medi-Cal County Behavioral Health Fund, and \$3.6 billion federal funds) over five years to implement BH-CONNECT.

The Budget includes an update to the BH-CONNECT Demonstration to include a new Workforce Initiative. BH-CONNECT will make targeted long- and short-term investments in a robust, diverse behavioral health workforce. The BH-CONNECT workforce initiative would include \$480 million in funding for each year of the five-year demonstration period (\$2.4 billion total funding). The \$480 million would be comprised of federal funds available through the Demonstration, with the non-federal share funded through designated state health programs (DSHP) and a portion of Mental Health Services Act (MHSA) state directed revenues.

- **Transitional Rent** - To improve the well-being and health outcomes of Medi-Cal members during critical transitions, the Department will include transitional rent services as part of the BH-CONNECT Demonstration and seek an amendment to the CalAIM waiver to authorize an additional Community Support. The new service would allow the provision of up to six months of rent or temporary housing to eligible individuals experiencing homelessness or at risk of

homelessness and transitioning out of institutional levels of care, a correctional facility, or the foster care system and who are at risk of incurring other Medicaid state plan services, such as inpatient hospitalizations or emergency department visits. Fiscal impacts from this item will not begin until FY 2024-25.

- **Behavioral Health Payment Reform Cash Flow Funding** - The Budget includes \$250 million General Fund one-time in FY 2023-24 to initially fund the non-federal share of behavioral health-related services at the start of the CalAIM Behavioral Health Payment Reform. These funds will mitigate a significant cash flow issue for counties as they transition from cost-based reimbursement to fee-schedule. TBL creates a continuously appropriated fund to facilitate the implementation of county intergovernmental transfers.
- **Justice Involved** - People who are now, or have spent time, in jails and prisons experience disproportionately higher rates of physical and behavioral health diagnoses and are at higher risk for injury and death as a result of trauma, violence, overdose, and suicide than people who have never been incarcerated.

DHCS implemented pre-release Medi-Cal eligibility and enrollment processes as of January 1, 2023 and has awarded funding to through the Provider Access and Transforming Health (PATH) program to support correctional agencies to collaborate with county social services department planning and implementation of pre-release Medi-Cal enrollment processes. DHCS also received first-in-the-nation approval to offer a targeted set of Medi-Cal services to youth and adults in state prisons, county jails, and youth correctional facilities for up to 90 days prior to release.

The Budget includes \$9.9 million total funds (\$3.8 million General Fund) in FY 2023-24 for pre-release services to implement the justice involved initiative, with an additional \$225 million estimated to be provided through PATH.

- **Designated State Health Program (DSHP)** – DHCS received approval of a proposal to continue DSHP under the CalAIM 1115 waiver effective January 1, 2023 to December 31, 2026. DSHP will allow DHCS to claim \$646.4 million in federal funding over four years to support the PATH program. As part of its approval of DSHP, the federal Centers for Medicare and Medicaid Services (CMS) requires that California provide rate increases for certain services. These required rate increases are addressed through the planned increases described in the earlier MCO tax section.

- **Additional PATH Funding** – The Budget includes an additional \$40 million General Fund for PATH to assist providers with implementing and building out community supports and enhanced care management through CalAIM in clinics.

Reproductive Waiver

California has long prioritized the goal of providing access to contraceptives and other reproductive health services. Disparities in access persist, however, including disparities based on geography, income, and race. Since the Supreme Court’s June 2022 decision in *Dobbs v. Jackson Women’s Health Organization*, California’s providers have seen an influx of patients traveling from other states to access abortion and other reproductive health services that are no longer available in their state, whether due to express legal prohibitions, the chilling effect those prohibitions create for other reproductive health services, or growing “reproductive health deserts” that lack local providers due to the hostile state regulatory and reimbursement landscape. DHCS seeks to continue California’s progress toward equitable access to comprehensive family planning and related services, even as the state’s reproductive health safety net grapples with the multifaceted pressures described above. In partnership with CMS, DHCS submitted an 1115 demonstration waiver that will advance the following goals:

- Support access to family planning and related services for Medi-Cal members, as well as other individuals who may face barriers to access.
- Support the capacity and sustainability of California’s reproductive-health safety net.
- Promote system transformation for California’s reproductive-health safety net.

The Budget assumes \$200 million total funds (\$15 million General Fund) in FY 2024-25 for the Reproductive Health Services 1115 waiver.

Behavioral Health Modernization

An approved 2023-24 budget change proposal (BCP) includes \$40 million (\$20 million Mental Health Services Fund; \$20 million federal funds) to continue to modernize the behavioral health system. These resources will allow the Department to work on Governor Newsom’s [proposal that includes](#):

1. Authorize a general obligation bond to fund:
 - Unlocked community behavioral health residential settings.
 - Permanent supportive housing for people experiencing or at risk of homelessness who have behavioral health conditions.
 - Housing for veterans experiencing or at risk of homelessness who have behavioral health conditions.
2. Modernize the Mental Health Services Act (MHSA).
3. Improve statewide accountability, transparency, and access to behavioral health services.

Expansion of Medi-Cal to Undocumented Individuals

The May Revision maintains \$1.4 billion (\$1.2 billion General Fund) in 2023-24 and \$3.4 billion (\$3.1 billion General Fund) at full implementation, inclusive of In-Home Supportive Services (IHSS) costs, to expand full-scope Medi-Cal eligibility to all income eligible adults ages 26-49 regardless of immigration status on January 1, 2024, consistent with previously approved TBL.

Home and Community-Based Services (HCBS) Spending Plan

The Budget reflects an update to the HCBS spending plan timeline for all initiatives included in the approved HCBS spending plan to allow for additional time to fully expend the funds and complete initiative objectives through December 31, 2024.

988 Update

The Budget includes a one-time augmentation of \$15 million in FY 2023-24, for a total of \$19 million, from the 988 State Suicide and Behavioral Health Crisis Services Fund for California's 988 centers to maintain operations and services in FY 2023-24. This funding augmentation will support workforce expansion to handle increased answered call volume, extensions of service hours, and the availability of chat and text options for callers utilizing the 988 services.

Children and Youth Behavioral Health Initiative (CYBHI) Fee Schedule Third Party Administrator (TPA)

As part of CYBHI, the Department is mandated to establish a statewide all-payer fee schedule to reimburse school-linked behavioral health providers who provide services to students at or near a school-site. Specifically, the Department is required to:

- Develop and maintain a school-linked statewide fee schedule for medically necessary outpatient mental health or substance use disorder services provided to a student 25 years of age or younger at or near a school site, who is an enrollee of the plan or delivery system.
- Develop and maintain a school-linked statewide provider network of school site behavioral health counselors.

The Budget includes \$10 million from the Mental Health Services Fund (MHSF) in FY 2023-24 to begin the development and implementation of a statewide infrastructure that will centralize provider management functions, including credentialing and quality oversight, and manage billing and claiming for the behavioral health services furnished to students by school-based and school-linked providers, under the CYBHI fee schedule.

CalHOPE

The Budget includes \$69.5 million total funds in FY 2022-23 and \$62.5 million total funds in FY 2023-24 for CalHOPE. This funding will be used to continue operating the CalHOPE program, including:

- Media messaging to destigmatize stress and anxiety and promote help-seeking, including using trusted messengers to reach diverse populations.
- CalHOPE web services.
- CalHOPE Warm Line.
- CalHOPE Connect partnership with up to 30 community-based organizations, with over 400 peer crisis counselors.

The CalHOPE program, available to all Californians, is a critical component of the statewide crisis continuum of support. DHCS will continue to support CalHOPE services via the CYBHI virtual services platform when it launches no sooner than January 2024.

Extend Contingency Management Pilot

The Budget allows the Department to extend funding for Contingency Management after March 2024, the point at which support from the HCBS Spending Plan is planned to end for this pilot, through the end of the CalAIM 1115 demonstration. After March 2024, counties will provide the non-federal share for contingency management services. In FY 2023-24, the extension of the pilot is estimated to result in an additional spending of \$2.5 million county funds and \$7 million federal funds.

Additional Funding for Enrollment Navigators

The Budget includes \$10 million General Fund for Health Enrollment Navigators, in addition to the \$60 million appropriated in FY 2019-20 and the \$60 million appropriated in FY 2022-23, to promote outreach, enrollment, and retention activities related to clinics. DHCS anticipates being able to claim an additional \$10 million in federal funding for this increase.

COVID-19 Rate Hold Harmless for Freestanding Pediatric Subacute Facilities

The Budget includes \$1.7 million total funds (\$836,000 General Fund) to maintain freestanding pediatric subacute facility rates at least the level received during the public health emergency.

Other COVID-19 Impacts

The Budget assumes COVID-19 related impacts of \$13.5 billion total funds (\$3.3 billion General Fund) in FY 2023-24. This reflects an overall reduction in total COVID-19 cost impacts, but an increase of \$2.1 billion from the General Fund compared to FY 2022-23. Total costs are projected to decline primarily as a result of caseload reductions due to redeterminations. General Fund costs related to the pandemic are estimated to increase

due to the phasing out of increased federal funding that was available during the public health emergency and through the end of calendar year 2023.

Budget Solutions

The Budget includes some adjustments to reduce General Fund costs in light of the state’s overall General Fund situation:

- Delay Buyback of Two-Week Checkwrite Hold.** The 2022 Budget Act included funding to buy back the current two-week delay of fee-for-service checkwrite payments at the end of each June. This buyback is now delayed until FY 2024-25. This action reduced costs by an estimated \$1.1 billion total funds (\$378 million General Fund) in FY 2022-23.
- Reduce Medi-Cal Drug Rebate Fund Reserve.** The Budget assumes that all drug rebates received in Medi-Cal will be transferred to the benefit of the General Fund by the end of FY 2023-24, with zero reserve in the Medi-Cal Drug Rebate Fund. Assuming no reserve in the fund at the end of FY 2023-24 results in estimated General Fund savings of \$222 million compared to the Governor’s Budget.
- Delay on Behavioral Health Continuum Infrastructure Program (BHCIP) Funding.** DHCS is releasing BHCIP funds through six grant rounds targeting various gaps in the state’s behavioral health facility infrastructure. BHCIP Round 1: Crisis Care Mobile Unites, Round 2: County and Tribal Planning Grant, Round 3: Launch Ready, and Round 4: Children and Youth projects totaling \$1.22 billion, were awarded in 2021 and 2022. Award announcements for BHCIP Round 5: Crisis and Behavioral Health Continuum were made in Spring 2023. \$480.7 million for BHCIP Round 6: Outstanding Needs Remaining is currently in the planning/stakeholder engagement process, with funding of \$240.4 million General Fund distributed in FY 2024-25 and \$240.3 million General Fund distributed in FY 2025-26.
- Delay Behavioral Health Bridge Housing Funding.** The 2022 Budget Act provided \$1 billion General Fund for Behavioral Health Bridge Housing, with another \$500 million planned for FY 2023-24. The 2023 Budget delays \$235 million of the \$500 million planned for FY 2023-24 until FY 2024-25.
- General Fund swap for MHSF.** There are several items included in the budget that resulted in a swap of General Fund for Mental Health Services Funds as noted in the table below.

Item	Issue	2023-24*
4260-101-3085	CalHOPE	\$ 50.5
4260-101-3085	Behavioral Health Bridge Housing Program	\$ 265.0
4260-101-3085	Behavioral Health Modernization	\$ 20.0
4260-101-3085	CYBHI Fee Schedule Third Party Administrator	\$ 10.0
0530-001-3085	CYBHI - Subject Matter Expertise and Evaluation	\$ 8.1

*Amounts in Millions

Trailer Bill Language

AB 118 (Committee on Budget, Chapter 42, Statutes of 2023), the Health Omnibus Trailer Bill, contains the following, as it relates to DHCS:

- Newborn Hospital Gateway
- Opioid Settlement Fund Transfer
- Post Eligibility Treatment of Income
- California Children’s Services Whole Child Model Expansion in County Organized Health Systems (COHS) Counties and Mandatory Managed Care Enrollment of Foster Youth in new Single Plan Counties and COHS Counties
- Drug Medi-Cal Claiming Timelines
- Designated State Health Program (DSHP) and Primary Care Obstetric Rate Increases
- Mandatory Certification of Substance Use Disorder Outpatient Programs
- Enhanced Accountability in the Lanterman-Petris Short (LPS) Act Data and Reporting (SB 929 (Eggman, Chapter 539, Statutes of 2022)) Cleanup
- 988 Suicide and Crisis Lifeline (AB 988 (Bauer-Kahan, Chapter 747, Statutes of 2022)) Cleanup
- Conform Statutory Estimate Requirements to Recent Program Changes
- Increase Medical Provider Interim Payment Loan Authority
- Establishment of Medi-Cal County Behavioral Health Special Fund
- CalAIM – Designated State Health Programs and Delay Intermediate Care Facilities for the Developmentally Disabled and Subacute Services Medi-Cal Managed Care Carve-in
- Doula Services Implementation Evaluation
- Medical Interpreters Pilot Project - Extension
- Long-Term Care Facilities Rate Year Shift
- Virtual Services in Driving Under the Influence Programs
- Managed Care Organization (MCO) Provider Tax Provider Payments
- Medi-Cal Asset Limit Elimination Statutory Cleanup
- Delay the Presumptive Transfers of Foster Children Between Counties (AB 1051, (Bennet, Chapter 402, Statutes of 2022))
- Acute Inpatient Intensive Rehabilitation Services
- Freestanding Pediatric Subacute Facilities Rates

AB 119 (Committee on Budget, Chapter 13, Statutes of 2023) enacted the MCO Provider Tax.

STATE OPERATIONS AND NON-ESTIMATE LOCAL ASSISTANCE BUDGET ADJUSTMENTS

The Budget includes additional expenditure authority of \$202.1 million total funds (\$34.9 million General Fund) for 185 positions (130 Permanent, 31 limited-term (LT) to Permanent, 24 LT-funded).

Detailed budget change proposal narratives can be found on the Department of Finance website at [link](#). To view DHCS proposals, select the appropriate budget year (2023-24) and search for org code 4260 in the search bar located in the middle of the website.

Budget Change Proposal Title	Budget Change Proposal Number	Positions	Total Funds	General Fund
988 Suicide and Crisis Lifeline (AB 988)	4260-092-BCP-2023-GB	10 Perm	\$5.5	
988 Suicide and Crisis Lifeline (AB 988) Augmentation	4260-271-BCP-2023-MR		\$15.0**	
Assisted Living Waiver Expansion Permanent Workload	4260-221-BCP-2023-MR	15 LT to Perm	\$0.9	\$0.3
Behavioral Health Modernization	4260-278-BCP-2023-MR		\$40.0	
California Cancer Care Equity Act (SB 987)	4260-079-BCP-2023-GB	3 Perm 1 LT*	\$1.1	\$0.5
Care Coordination for Individuals Exiting Temporary Holds or Conservatorships (AB 2242)	4260-096-BCP-2023-GB	2 Perm	\$0.3	\$0.2
Children's Psychiatric Residential Treatment Facilities (AB 2317)	4260-077-BCP-2023-GB	15 Perm	\$2.6	\$1.2
Community Assistance, Recovery, and Empowerment Court (SB 1338)	4260-142-BCP-2023-GB	2 Perm	\$5.0	\$5.0
Contingency Management Pilot Extension	4260-222-BCP-2023-MR	11 Perm	\$1.5	\$0.8
Dental Program Procurement	4260-058-BCP-2023-GB	2 Perm 4 LT to Perm	\$1.8	\$0.4
Electronic Visit Verification Phase II	4260-060-BCP-2023-GB	3 LT to Perm	\$2.1	\$0.5
Enhanced Accountability in the Lanterman-Petris Short Act Data and Reporting (SB 929)	4260-074-BCP-2023-GB	10 Perm	\$2.4	\$1.2
Fentanyl Test Strips Distribution	4260-287-BCP-2023-L		\$6.0**	\$6.0
Gender-Affirming Care (SB 923)	4260-094-BCP-2023-GB	11 Perm 3 LT*	\$2.7	\$1.3
Health Care Coverage: Contraceptives (SB 523)	4260-078-BCP-2023-GB	3 Perm	\$0.5	\$0.2

Budget Change Proposal Title	Budget Change Proposal Number	Positions	Total Funds	General Fund
Health Care Coverage: Maternal and Pandemic-Related Mental Health Conditions (SB 1207)	4260-080-BCP-2023-GB	2 Perm	\$0.3	\$0.2
Indian Health Program	4260-281-BCP-2023-L	3 LT to Perm	\$11.0**	\$11.0
Interoperability Federal Rule Implementation	4260-203-BCP-2023-A1	9 LT*	\$1.5	\$0.1
Local Educational Agency Medi-Cal Billing Option Program Withhold Return	4260-054-BCP-2023-GB	-	\$7.4	-
Medi-Cal Enterprise System Modernization	4260-059-BCP-2023-GB	7 Perm 6.0 LT*	\$7.8	\$1.4
Medi-Cal Managed Care Plans: Mental Health Benefits (SB 1019)	4260-098-BCP-2023-GB	5 Perm	\$1.4	\$0.7
Medi-Cal: Short-Term Community Transitions Program (SB 281)	4260-097-BCP-2023-GB	2 LT	-	-
Naloxone Distribution Project Expansion	4260-223-BCP-2023-MR		\$58.0**	
Nursing Facility Financing Reform	4260-205-BCP-2023-A1	2 Perm	\$1.3	\$0.7
Opioid Settlements Fund State-Directed Programs	4260-188-BCP-2023-GB	-	\$32.0**	-
Program of All-Inclusive Care for the Elderly (PACE) Monitoring and Program Operations	4260-051-BCP-2023-GB	10 Perm	\$1.7	\$0.7
Program Workload	4260-055-BCP-2023-GB	16 Perm 3 LT to Perm 5 LT*	\$3.8	\$1.9
Public Social Services: Hearings (AB 1355)	4260-095-BCP-2023-GB	2 Perm	\$0.5	\$0.2
Specialty Mental Health Services: Foster Youth Presumptive Transfer (AB 1051)	4260-073-BCP-2023-GB	5 Perm	\$0.8	\$0.4
Statewide Automated Welfare System Ongoing Support	4260-069-BCP-2023-GB	3 LT to Perm	\$0.5	\$0.1
Strengthening Oversight for Substance Use Disorder Licensing and Certification	4260-052-BCP-2023-GB	12 Perm	\$2.0	-
	Total	130 Perm 31 LT to Perm 24 LT	\$202.1	\$34.9

(Amounts in Millions)

*Resources equivalent to limited-term positions.

** Resources include Non-Estimate Local Assistance items.

Chart totals may not match due to rounding.