COUNTY OF LOS ANGELES

MARVIN J. SOUTHARD, D.S.W. Director

SHEILA A. SHIMA Chief Deputy Director

RODERICK SHANER, M.D. Medical Director

PORNIA COCCO

BOARD OF SUPERVISORS
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DEPARTMENT OF MENTAL HEALTH

http://dmh.lacounty.gov

550 SOUTH VERMONT AVENUE, LOS ANGELES, CALIFORNIA 90020

March 8, 2007

The Honorable Board of Supervisors 383 Kenneth Hahn Hall of Administration 500 West Temple Street Los Angeles, CA 90012

Dear Supervisors:

ADOPTED
BOARD OF SUPERVISORS

Reply To: (213) 738-4601

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Fax:

MAR 2 0 2007

SACHI A. HAMAI
EXECUTIVE OFFICER

APPROVAL TO AMEND DEPARTMENT OF MENTAL HEALTH LEGAL ENTITY
AGREEMENTS WITH GATEWAYS HOSPITAL AND MENTAL HEALTH CENTER,
SPECIAL SERVICE FOR GROUPS, AND TELECARE CORPORATION TO
IMPLEMENT THE MENTAL HEALTH SERVICES ACT – COMMUNITY SERVICES
AND SUPPORTS PLAN FOR INSTITUTIONS FOR MENTAL DISEASES
STEP-DOWN FACILITIES
AND ENRICHED RESIDENTIAL SERVICES

AND ENRICHED RESIDENTIAL SERVICES (ALL SUPERVISORIAL DISTRICTS) (3 VOTES)

IT IS RECOMMENDED THAT YOUR BOARD:

Approve and instruct the Director of Mental Health or his designee to prepare, sign, and execute amendments, substantially similar to Attachment I, to existing Department of Mental Health (DMH) Mental Health Services Agreements (Agreements) with the following three (3) providers as detailed in Attachment II: Gateways Hospital and Mental Health Center (Gateways) for Fiscal Year (FY) 2006-07 an increase totaling \$530,938, resulting in a revised Maximum Contract Amount (MCA) of \$13,110,113, and for FY 2007-08 an increase totaling \$2,123,750, resulting in a revised MCA of \$14,242,925; Special Service for Groups (SSG) for FY 2006-07 an increase totaling \$175,000, resulting in a revised MCA of \$20,572,865, and for FY 2007-08 an increase totaling \$700,000, resulting in a revised MCA of \$15,695,161; and Telecare Corporation (Telecare) for FY 2006-07 an increase totaling \$148,438, resulting in a revised MCA of \$8,674,276, and for FY 2007-08 an increase totaling \$593,750, resulting in a revised MCA of \$7,177,851. These amendments will be effective upon Board approval or date of execution, whichever occurs later, for FY 2006-07, and are fully funded by Mental Health Services Act (MHSA) - Community Services and Supports (CSS) Plan funds and Federal Financial Participation (FFP) Medi-Cal revenue.

PURPOSE/JUSTIFICATION OF RECOMMENDED ACTIONS

The purpose of the requested actions is to amend Agreements with these three (3) existing providers selected to receive MHSA funding under Request for Services (RFS) No. 5, "Adult Institutions for Mental Diseases (IMD) Step-Down Facilities," and RFS No. 6, "Enriched Residential Services" in order to maintain and expand capacity of intensive residential resources.

The DMH MHSA CSS Plan, approved by your Board and the State Department of Mental Health, included MHSA annual funding of \$1.9 million for IMD Step-Down Facilities and \$1.07 million for Enriched Residential Services to expand intensive mental health services in a range of living situations including licensed Adult Residential Facilities, assisted living programs and congregate housing, or other independent living situations. These programs will support persons being discharged from IMDs, acute psychiatric inpatient units, or higher level intensive residential facilities, or those who are at risk of being placed in these higher levels of care. The IMD Step-Down Facilities and Enriched Residential Services programs will provide recovery-based intensive and supportive services in community housing. Each individual served will participate in the development of an individualized service plan, focused on recovery and wellness principles that include activities and services that promote successful reintegration into the community.

Implementation of Strategic Goals

The recommended Board actions are consistent with the principles of Countywide Strategic Plan Goal No. 1: "Service Excellence," Goal No. 3: "Organizational Effectiveness," and Goal No. 7: "Health and Mental Health." The IMD Step-Down Facilities and Enriched Residential Services are intended to improve the delivery, efficiency, and effectiveness of intensive mental health services for adults being discharged from higher levels of care to the community.

FISCAL IMPACT/FINANCING

There is no increase in net County cost.

The total cost for FY 2006-07 is \$854,375, consisting of \$742,500 in MHSA funding and \$111,875 in anticipated FFP Medi-Cal revenue, which is included in the Department's FY 2006-07 Adopted Budget. The total cost for FY 2007-08 is \$3,417,500, consisting of \$2,970,000 in MHSA funding and \$447,500 in anticipated FFP Medi-Cal revenue, which will be included in the Department's FY 2007-08 Proposed Budget.

FACTS AND PROVISIONS/LEGAL REQUIREMENTS

The State-approved MHSA CSS Plan is designed to provide recovery-oriented services for people who are diagnosed with severe and persistent mental illness and linkage to ongoing community services and supports, while reducing homelessness, unnecessary hospitalization, and incarceration. The Plan included IMD Step-Down Facilities and Enriched Residential Services that target individuals in higher levels of care who require on-site mental health and supportive services to transition to stable community placement and prepare for more independent community living. The programs will provide individual and group treatment, medication support, crisis intervention, and targeted case management in selected residential settings. The programs will have 24/7 capacity for emergencies and specialized programming including treatment for co-occurring substance abuse disorders. These programs are components of the Adult and Alternative Crisis Services of the MHSA CSS Plan.

In accordance with the Additional Psychiatric Emergency Services (PES) Relief Plan approved by your Board on July 19, 2005, DMH implemented programs funded by one-time net County cost, to continue to address the overcrowding in the County hospital PES. Gateways Intensive Adult Residential Program was a critical component of the Additional PES Relief Plan that provides intensive residential resources to successfully transition adults from locked placements (including IMDs and County hospital inpatient units) to community settings. The program requires funding to continue to provide the level of service that is not eligible for FFP and is eligible for ongoing MHSA funding.

The attached Amendment format has been approved as to form by County Counsel. The Chief Administrative Office (CAO) has reviewed the proposed actions. Clinical and administrative staff of DMH will continue to administer and supervise the IMD Step-Down Facilities and Enriched Residential Services, evaluate the programs to ensure that quality services are being provided to clients, and ensure that Agreement provisions and Department policies are being followed.

CONTRACTING PROCESS

DMH invited community-based agencies to pre-qualify prior to applying for MHSA funds by submitting a Statement of Qualifications (SOQ) in response to a Request for Statement of Qualifications (RFSQ) open solicitation process. The SOQ process was to ensure that each agency demonstrated a basic level of capability (e.g., financial viability, proof of liability insurance and registration as a County vendor) and for agencies to identify the types of services, age groups to be served, and geographic locations where they want to provide services. If agencies met MHSA requirements,

DMH executed MHSA amendments with current DMH providers and MHSA Agreements with new agencies that placed them on the Department's MHSA Master Agreement List, making them eligible to receive RFS related to their service provision capabilities and interest.

On August 29, 2006, DMH issued RFS No. 5 to 11 qualified bidders and RFS No. 6 to 47 qualified bidders on the Master Agreement List that indicated an interest in providing MHSA CSS Adult and Alternative Crisis Services on their SOQ. Qualified bidders were invited to attend a joint mandatory Proposer's Conference on September 13, 2006. Representatives from seven (7) contract agencies attended the Proposers' Conference for RFS No. 5; representatives from 11 contract agencies attended the Proposers' Conference for RFS No. 6.

By the deadline of October 11, 2006, DMH received three (3) proposals in response to RFS No. 5 and one (1) proposal in response to RFS No. 6. Soon after DMH convened a review panel composed of representatives from the Department of Health Services, Department of Children and Family Services, a consumer, and a DMH District Chief to assess and score the proposals. DMH's Executive Management Team reviewed and finalized recommendations. DMH plans to execute amendments to the Agreements of all bidders who responded to RFS No. 5 and No. 6 as detailed on Attachment II.

IMPACT ON CURRENT SERVICES

Implementation of the IMD Step-Down Facilities and Enriched Residential Services programs is anticipated to improve the efficiency and effectiveness of mental health operations. These programs will assist clients from acute inpatient and institutional settings to be safely maintained in the community with mental health services. These programs will reduce the need for emergency and institutional care and promote successful community reintegration.

CONCLUSION

The Department of Mental Health will need one (1) copy of the adopted Board actions. It is requested that the Executive Officer of the Board notify DMH's Contracts Development and Administration Division at (213) 738-4684 when this document is available.

Respectfully submitted,

Marvin J. Southard, D.S.W. Director of Mental Health

MJS:RK:TB:MM

Attachments (2)

c: Chief Administrative Officer

County Counsel

Chairperson, Mental Health Commission

T:PES Relief II/MHSA Components/RFS 5 & 6

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Early and Periodic Screening, Diagnosis, and Treatment-Federal Financial Participation (non-
EPSDT-FFP in the amount of \$; and
WHEREAS, for FY 2006-2007, County and Contractor intend to amend Agreement to
add MHSA Enriched Residential Services funds in the amount of \$, and add
non-EPSDT-FFP in the amount of \$; and
WHEREAS, for FY 2007-2008, County and Contractor intend to amend Agreement to
add MHSA IMD Step-down Facilities funds in the amount of \$, and add non-
EPSDT-FFP) in the amount of \$; and
WHEREAS, for FY 2007-2008, County and Contractor intend to amend Agreement to
add MHSA Enriched Residential Services funds in the amount of \$, and add
non-EPSDT-FFP in the amount of \$; and
ONE-TIME COSTS:

WHEREAS, for FY 2006-2007, County and Contractor intend to amend Agreement whereby MHSA funds totaling \$_____ can be used to cover MHSA allowable one-time costs. SDMH has not defined MHSA allowable one-time costs. Accordingly, anticipated MHSA allowable costs are identified in Attachment I, which represents County's best effort to identify allowable one-time costs. Such costs may ultimately be subject to disallowance by SDMH.

WHEREAS, if Contractor terminates its Agreement within 24 months of the effective date of this Amendment or execution of an Agreement that includes MHSA allowable one-time costs, or if Contractor fails to achieve a 75 percent enrollment level after 12 months, any or all of MHSA allowable one-time funds received by Contractor from County may be due by Contractor to County at the sole discretion of Director; and

WHEREAS, Contractor shall comply with all statutes, regulations, and directives pertaining to MHSA allowable one-time costs as they currently exist or as they may be modified by the State or County, and in no event shall County be obligated to pay contractor for one-time costs not claimable to the MHSA.

REVISED MCA:

WHEREAS, for FY 2006-2007, the t	otal MCA will be increased by \$	
with a revised MCA of \$; and	
WHEREAS, for FY 2007-2008, the f	total MCA will be increased by \$	
with a revised MCA of \$; and	
MHSA FUNDS:		

WHEREAS, for FY 2006-2007, County and Contractor intend to amend Agreement to add Subparagraph FF. (1) under Paragraph 4 (FINANCIAL PROVISIONS) to include whereby in the event MHSA funds are not available to pay MHSA claims or if the State denies any or all of the MHSA claims submitted by County on behalf of Contractor, County is not responsible for any substantive payment obligation; and

MHSA FLEXIBILITY OF ONE-TIME FUNDS:

WHEREAS, for FY 2006-2007 only, County and Contractor intend to amend the Agreement to include language which will allow Contractors flexibility in serving IMD Step-down Facilities and/or Enriched Residential Services' consumers. Paragraph 4 (FINANCIAL PROVISIONS), Subparagraph FF. (3) Shift of allowable one-time MHSA Funds for FY 2006-2007 only shall be revised accordingly. Under this provision, Contractors will be able to shift without prior DMH approval up to 100 percent of unspent MHSA funds as identified in the Agreement's Financial Summary to pay for MHSA mental health treatment services; and

REDUCTION/REALLOCATION OF MHSA FUNDS:

WHEREAS, not withstanding the provisions set forth in Paragraph 4 (FINANCIAL PROVISIONS), Subparagraph DD (Delegated Authority) of this Agreement, County shall evaluate Contractor utilization of MHSA funding allocated under this Agreement and shall adjust and reallocate amounts to any one or a combination of the following: 1) another Legal Entity contractor, 2) DMH directly operated clinics, and/or 3) the County DMH reserve of unallocated

funding for MHSA services. Amounts to be reduced and reallocated will be based on County's projected underutilization of such MHSA funds; and

WHEREAS, County will perform its utilization review after the initial MHSA amendments are executed and annually thereafter, or as deemed necessary by County based on County's review of utilization of such MHSA funds under this Agreement. Notification of such actions to Contractor will follow timeframes prescribed in Paragraph 4 (FINANCIAL PROVISIONS), Subparagraph DD (Delegated Authority); and

- has been incurred. Contractor shall send such notice to those persons and addresses which are set forth in Paragraph 61 (NOTICES)."
- Paragraph 4 (FINANCIAL PROVISIONS), Subparagraph D (Reimbursement For First Automatic Renewal Period) shall be deleted in its entirety and the following substituted therefore:

"D. Reimbursement If Agreement Is Automatically Renewed:

- Contract Amount (MCA) for the First Automatic Renewal Period: The Maximum Contract Amount (MCA) for the First Automatic Renewal Period of this Agreement as described in Paragraph 1 (TERM) shall not exceed _____DOLLARS (\$_____) and shall consist of County, State, and/or Federal funds as shown on the Financial Summary. This MCA includes the Cash Flow Advance which is repayable through cash and/or appropriate SFC units and/or actual and allowable costs as authorized by other provisions of this Agreement. Notwithstanding any other provision of this Agreement, in no event shall County pay Contractor more than this MCA for Contractor's performance hereunder during the First Automatic Renewal Period. Furthermore, Contractor shall inform County when up to 75 percent of the MCA has been incurred. Contractor shall send such notice to those persons and addresses which are set forth in Paragraph 61 (NOTICES).
- For FYs 2006-2007 and 2007-2008, Paragraph 4 (FINANCIAL PROVISIONS), Subparagraph FF (MHSA Funds) shall be deleted in its entirety and the following substituted therefor:

"FF: Mental Health Services Act (MHSA) Funds:

(1) In the event that MHSA funds are not available to pay MHSA claims or that State denies any or all of the MHSA claims, including one-time costs, submitted by County on behalf of Contractor, Contractor understands and agrees that County is not responsible for any substantive payment obligation and, accordingly, Contractor shall not seek any payment from County and shall indemnify and hold harmless County for any and all liability for payment of any or all of the denied MHSA claims or for the unavailability of MHSA funds to pay for MHSA claims.

- (2) Payments to Contractor may be suspended if Director, for good cause, determines that Contractor is in default under any of the provisions of this Agreement. In the event that Contractor's Agreement is terminated within 24 months of the effective date of this Amendment or execution of an Agreement that includes MHSA one-time funds, or Contractor fails to achieve a 75 percent enrollment level after 12 months, any or all of MHSA one-time funds received by Contractor from County shall be due by Contractor to County."
- Contractor shall enter into a good faith negotiation prior to the implementation of MHSA Full Service Partnership (FSP), IMD Step-down facilities, and/or Enriched Residential services regarding the allocation of MHSA for allowable one-time Client Supportive Services/Support Services and/or Community Outreach Services as identified on Attachment I. Once this allocation has been negotiated, based on actual services delivered, and without the prior approval of the Department, Contractor may shift up to 100 percent of the allowable one-time MHSA funds as identified in the Financial Summary to MHSA FSP, IMD Step Down Facilities and/or Enriched Residential services, that may be used as non EPSDT-FFP match (Match), as long as the MCA is not exceeded and with the provision that at settlement, MHSA funds will be first used for Match if the amount needed for Match exceeds the amount projected by Contractor.

Any such shift of funds shall be in compliance with all County, State, and Federal regulations."

4.		Financial Summary for Fiscal Year 2006-2007 shall be deleted in its entirety and
		replaced with Financial Summary for Fiscal Year 2006-2007, attached hereto and
		incorporated herein by reference. All references in Agreement to Financial Summary -
		for Fiscal Year 2006-2007 shall be deemed amended to state Financial Summary -
		for Fiscal Year 2006-2007.
5.		Financial Summary for Fiscal Year 2007-2008 shall be deleted in its entirety and
		replaced with Financial Summary for Fiscal Year 2007-2008, attached hereto and
		incorporated herein by reference. All references in Agreement to Financial Summary -
		for Fiscal Year 2007-2008 shall be deemed amended to state Financial Summary -
		for Fiscal Year 2007-2008.
6.		Attachment III, Service Delivery Site Exhibit, shall be deleted in its entirety and replaced
		with the revised Attachment III, Service Delivery Site Exhibit dated All
		references in Agreement to Attachment III, Service Delivery Site Exhibit shall be deemed
		amended to state Attachment III, Service Delivery Site Exhibit dated
7.		Attachment IV, Service Exhibits, shall be deleted in their entirety and replaced with the
		revised Attachment IV, Service Exhibits dated All referenced in Agreement
		to Attachment IV, Service Exhibits shall be deemed amended to state Attachment IV,
		Service Exhibits dated
8.	95 66	Contractor shall provide services in accordance with the Contractor's Fiscal Year
		Negotiation Package for this Agreement and any addenda thereto approved in
		writing by Director.
9.	a Si	Except as provided in this Amendment, all other terms and conditions of the Agreement
	8	shall remain in full force and effect.
		I.

IN WITNESS WHEREOF, the Board of Supervisors of the County of Los Angeles has caused used this Amendment to be subscribed by County's Director of Mental Health or his designee, and Contractor has caused this Amendment to be subscribed in its behalf by its duly authorized officer, the day, month, and year first above written.

	ARVIN J. SOUTHARD, D.S.W. irector of Mental Health
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	9 9 9
	CONTRACTOR
Ву	
Name	9
Title	
	(AFFIX CORPORATE SEAL HERE

COUNTY OF LOS ANGELES

APPROVED AS TO FORM
OFFICE OF THE COUNTY COUNSEL

APPROVED AS TO CONTRACT ADMINISTRATION:

DEPARTMENT OF MENTAL HEALTH

By _____ Chief, Contracts Development and Administration Division

AW: RFS 5 AMENDMENT

Attachment I to Amendment

COUNTY OF LOS ANGELES - DEPARTMENT OF MENTAL HEALTH MENTAL HEALTH SERVICES ACT COMMUNITY SERVICES AND SUPPORTS ONE-TIME COSTS FOR IMD STEP-DOWN FACILITIES AND ENRICHED RESIDENTIAL SERVICES PROGRAMS

	60: Support Services	60: Support Services	60: Support Services	60: Support Services	60: Support Services	ne-Time allocations will slowing two (2) types of	MODE	
78: Other Non-Medi-Cal	78: Other Non-Medi-Cal Client Support Expenditures	78: Other Non-Medi-Cal Client Support Expenditures	78: Other Non-Medi-Cal Client Support Expenditures	75: Non-Medi-Cal Capital Assets	72: Client Flexible Support Expenditures	be made to agencies awarded If expenditures: Client Support (Mo	SERVICE FUNCTION CODE (SFC)*	
	Reconfiguration of existing space	Initial lease expenses including cost of cubicles/build-out of space	Orientation and training of new staff	Vehicles	Provide supports to clients prior to their enrollment into a IMD Step-down Facilities and/or Enriched Residential Services program. Allowable costs may include vouchers, goods, items for daily living, transportation, etc.	One-Time allocations will be made to agencies awarded IMD Step-down Facilities and/or Enriched Residental Services contracts. The following two (2) types of expenditures: Client Support (Mode 60 SFC 72) and Non-Medi-Cal Capital Assets (Mode 60 SFCs 75 & 78).	ALLOWABLE ONE-TIME	
For e-mail, electronic progress notes, and	Many of the providers received less slots than Must be pre-approved by Countywide anticipated and, therefore, cannot afford to lease new space. They are going to need to reconfigure space/cubicles to accommodate this.	For those agencies that will be providing services in areas remote from where they currently provide services.	These expenses will occur prior to the staff person's ability to bill for services.	These are field-based programs and programs that require staff to transport clients Many agencies have policies that staff can only transport clients in an agency vehicle.	These funds will be available to pre-enrolled consumers during outreach and engagement efforts to assist them with meeting their basic needs prior to IMD Step-down Facilities and/or Enriched Residential Services enrollment.	One-Time allocations will be made to agencies awarded IMD Step-down Facilities and/or Enriched Residental Services contracts. These funds must be spent by June 30, 2007, and are limited to the following two (2) types of expenditures: Client Support (Mode 60 SFC 72) and Non-Medi-Cal Capital Assets (Mode 60 SFCs 75 & 78).	JUSTIFICATION	
Must be pre-approved by the Countywide Resource Management District Chief who will evaluate the appropriateness of the number of computers given the size of the IMD Step-down	Must be pre-approved by Countywide Resource Management District Chief who will visit site to determine appropriateness of the request given the number of new staff and clients.	Appropriateness of the location. Does it meet the needs of the Service Area. Must be preapproved by the Countywide Resource Management District Chief.	Evaluate content of the staff trainings to ensure they include domains appropriate for the IMD Step-down Facilities and/or Enriched Residential Services Programs.	Must be pre-approved by the Countywide require staff to transport clients. evaluate appropriateness of the type of vehicle shave policies that staff can clients in an agency vehicle. Must be pre-approved by the Countywide Resource Management District Chief who will evaluate appropriateness of the type of vehicle and number of vehicles given the size of the Clients in an agency vehicle. Must be pre-approved by the Countywide Resource Management District Chief who will and number of vehicle shave and number of vehicles and/or Enriched Residential Services programs.	Allowable expenses will be clearly defined by State, County, and DMH policies and processed through Countywide Resosurce Management District Chief, IMD Step-down Facilities and/or Enriched Residential Services administrative staff, and DMH Provider Reimbursement.	spent by June 30, 2007, and are limited to the	EVALUATE APPROVAL/DENIAL	

^{*} Based on the SFC's that were proposed at the State level and discussed at the CHMDA Finance Committee meetings.

COUNTY OF LOS ANGELES - DEPARTMENT OF MENTAL HEALTH EMERGENCY OUTREACH BUREAU-SERVICE AREA 4 & 7 IMD STEP DOWN FACILITIES (RFS 5) AND ENRICHED SERVICES (RFS 6) AWARDS BY LEGAL ENTITY

9.*	IMD ST	IMD STEP DOWN FACILITIESRFS 5	S-RFS 5	ENR	ENRICHED SERVICESRFS 6	-RFS 6	TOTAL RFS 5 & 6	MAXIMU	MAXIMUM CONTRACT ALLOCATION	OCATION
FY 2006/07	(A)	(B)	(C=A+B)	(D)	(E)	(F=D+E)	(G=C+F)	Ī	3	(J=H+1)
NAME OF AGENCY	MHSA	Non EPSDT FFP	SUBTOTAL	MHSA	Non EPSDT FFP	SUBTOTAL	TOTAL	LATEST MCA	INCREASE TO MCA	REVISED MCA
Gateways	\$ 233,750	\$ 29,688	\$ 263,438	\$ 267,500	69	\$ 267,500	\$ 530,938	\$ 12,579,175	\$ 530,938	\$ 13,110,113
Special Service Groups	122,500	52,500	175,000	0	. 0	0	175,000	20,397,865	175,000	20,572,865
Telecare Corporation	118,750	29,688	148,438	0	0	0	148,438	8,525,838	148,438	8,674,276
FY 06/07 NGA TOTAL	\$ 475,000	\$ 111,876	\$ 586,876	\$ 267,500	•	\$. 267,500	\$ 854,376			
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	IMD STI	IMD STEP DOWN FACILITIESRFS 5	SRFS 5	ENR	ENRICHED SERVICESRFS 6	-RFS 6	TOTAL RFS 5 & 6	MAXIMU	MAXIMUM CONTRACT ALLOCATION	OCATION
		9								.,
FY 2007/08	(A)	(B)	(C=A+B)	(D)	Œ	(F=D+E)	(G=C+F)	(H	(1)	(I+H=L)
NAME OF AGENCY	MHSA ·	Non EPSDT FFP	SUBTOTAL	MHSA	Non EPSDT FFP	SUBTOTAL	TOTAL	LATEST	INCREASE TO MCA	REVISED MCA
Gateways	\$ 935,000	\$ 118,750	\$ 1,053,750	\$ 1,070,000	ε η .	\$ 1,070,000	\$ 2,123,750	\$ 12,119,175	\$ 2,123,750	\$ 14,242,925
Special Service Groups	490,000	210,000	700,000	. 0	0	0	700,000	14,995,161	700,000	15,695,161
Telecare Corporation	475,000	. 118,750	593,750	0	0	0	593,750	6,584,101	593,750	7,177,851
FY 07/08 NGA TOTAL	\$ 1,900,000	\$ 447,500	\$ 2,347,500	\$ 1,070,000		\$ 1,070,000	\$ 3,417,500		94	
			3							