

Legal / Contractual Obligation

Various grants require the provision of pharmacy services. State mandated public health services are provided. Pharmacy services are a requirement of the Bureau of Primary Health Care 330 Grant. Pharmacy services in the scope of the Primary Care 330 Grant must follow the HRSA Community Health Center Program operational and fiscal compliance requirements. The Pharmacy Program is also accredited under The Joint Commission and follows TJC accreditation guidelines.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2020	2020	2021	2021
Personnel	\$0	\$8,356,218	\$0	\$8,924,280
Contractual Services	\$0	\$228,116	\$0	\$242,142
Materials & Supplies	\$0	\$13,749,774	\$0	\$15,368,480
Internal Services	\$0	\$3,342,087	\$0	\$3,721,075
Capital Outlay	\$0	\$400,000	\$0	\$100,000
Total GF/non-GF	\$0	\$26,076,195	\$0	\$28,355,977
Program Total:	\$26,076,195		\$28,355,977	
Program FTE	0.00	54.13	0.00	55.13

Program Revenues				
Service Charges	\$0	\$26,076,195	\$0	\$28,355,977
Total Revenue	\$0	\$26,076,195	\$0	\$28,355,977

Explanation of Revenues

This program generates \$1,044,141 in indirect revenues.

Pharmacy is funded exclusively through prescription fees (third party reimbursements) and patient fees. The program uses no County General Fund.

\$ 28,090,116 - Prescription Fees

\$ 265,861 - Patient Fees

Significant Program Changes

Last Year this program was: FY 2020: 40031-20 Pharmacy

Increased expenses for the purchase of drugs.

Creation of a new Deputy Director position to support the following a) oversight of state and federal compliance standards which increase annually, and b) daily operational support such as medication recalls and medication shortages, pharmacy workflows, relief staffing as needed, and the supervision of 32 pharmacists. The Deputy Director will allow the Pharmacy and Clinical Services Director to spend more energy on evaluating contracts, identifying opportunities for expansion of services, evaluating new technology, ensuring 340B compliance and strategic planning to meet the mission and vision of Integrated Clinical Services and the Health Department.