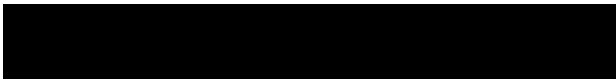


**DHCS Form 5510**

**MHSA Three-Year Program and Expenditure Plan or Update Extension FY 2020-21**

<b>Background and Instructions</b>		
<p>Welfare and Institutions (W&amp;I) Code section 5847(h), allows a county that is unable to complete and submit a Three-Year Program Expenditure Plan (Plan) or annual update (update) for fiscal year (FY) 2020-21 due to the COVID-19 Public Health Emergency to extend the effective time frame of its currently approved Plan or update to include FY 2020-21, and submit the subsequent Plan or Update on July 1, 2021.</p> <p>This document provides notification to DHCS that the County is extending the effective time frame of its currently approved Plan or Update to include FY 2020-21, per W&amp;I Code section 5847(h).</p> <p>Please enter the requested information in the fields below and submit a completed form electronically to DHCS at <a href="mailto:MHSA@DHCS.ca.gov">MHSA@DHCS.ca.gov</a>.</p>		
<b>Section I: County Information</b>		
a. Type of Plan or Update	Plan	
b. Date current Plan/Update was approved	September 19, 2017	
<b>Section II: Stakeholder Notification</b>		
<p>Stakeholders have been notified that the County is extending the effective time frame of its currently approved Plan or update to include FY 2020-21 as of: August 5, 2020</p>		
<b>Section III: Extension Justification</b>		
<p>Provide a brief summary describing how the COVID-19 Public Health Emergency inhibited the County's ability to complete and submit its Three-year Plan or annual update for FY 2020-21.</p> <p>Plumas county Behavioral Health's(PCBH) MHSA 3- Year Revenue and Expenditure Plan (2021-2023) and Annual Update, 2019-20 were delayed due to Plumas County's timeline of COVID-19 response, the stay-at-home orders restricting staff and stakeholders, and the re-opening time line PCBH will endeavor to complete the CPPP process for both the Plan and the Annual Update by December 31, 2020</p>		
<b>Section IV: Certification</b>		
<p>The undersigned certifies that the information included in this form is complete and accurate to the best of their ability.</p>		
 _____ County Behavioral Health Director Signature	Tony Hobson, Ph.D. _____ Printed Name	7/28/2020 _____ Date