



# Gaston County

Gaston County  
Board of Commissioners  
www.gastongov.com

## DHHS - Public Health Division

### Board Action

File #: 17-023

Commissioner Brown - DHHS (Health Division) - To Transfer Medicaid Cost Settlement Project Code Funds Within the Public Health Budget (**No County Funds - \$350,000**)

#### STAFF CONTACT

Chris Dobbins - Director - Department of Health and Human Services - 704-853-5262

#### BUDGET IMPACT

Transfer funds in 11-5100-5111 from Project Code # 17063-0001 to # 17242-0001.

#### BUDGET ORDINANCE IMPACT

N/A

#### BACKGROUND

Gaston County Public Health appropriated \$350,000 in Medicaid Cost Settlement Funds in the FY 2017 budget. These funds were to be used for renovations at the Highland Health Center. These renovations are no longer required, therefore, the funds earmarked for the renovations are needed for other clinical expenses. The funds will be used for Electronic Health Record system expenses and clinic equipment and supplies. Medicaid Cost Settlement funds are required in the NC State Consolidated Agreement and Medicaid guidelines to be utilized in the area in which they were earned. These are non-County funds.

#### POLICY IMPACT

N/A

#### ATTACHMENTS

Budget Change Request

DO NOT TYPE BELOW THIS LINE

I, Donna S. Buff, Clerk to the County Commission, do hereby certify that the above is a true and correct copy of action taken by the Board of Commissioners as follows:

NO.	DATE	M1	M2	Brown	Fraleigh	Grant	Hovis	Keigher	Phillbeck	Worley	Vote
2017-037	02/14/2017	DG	BH	A	A	A	A	AB	A	A	U

#### **DISTRIBUTION:**

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## GASTON COUNTY BUDGET CHANGE REQUEST

TO: Earl Mathers COUNTY MANAGER

FROM: 5100 DHHS - Public Health  
 Dept. # Department Name

\_\_\_\_\_  
 Department Director's Signature Date

**TYPE OF REQUEST:**

- Line Item Transfer Within Department & Fund     
  Line Item Transfer Between Funds \*  
 Project Transfer Within Department & Fund     
  Additional Appropriation of Funds \*  
 Line Item Transfer Between Departments\*     
 \* Requires resolution by the Board of Commissioners

Resolution # \_\_\_\_\_ Date \_\_\_\_\_

ACCOUNT DESCRIPTION <small>(As it appears in the budget)</small>	ACCOUNT NUMBER <small>Fund - Dept - Subdept - Div - Acct - Subacct xx - xxxx - xxxx - xxxx - xxx - xxx</small>	PROJECT SUBPROJECT <small>xxxxx - xxxx</small>	AMOUNT <small>Whole Dollars Only (See Note Below)</small>
Special Programs	11-5100-5111-298-000	17063-0001	(\$350,000)
Special Programs	11-5100-5111-298-000	17242-0001	\$350,000

**JUSTIFICATION FOR REQUEST:**

Gaston County Public Health appropriated \$350,000 in Medicaid Cost Settlement Funds in the FY 2017 budget. These funds were to be used for renovations at the Highland Health Center. These renovations are no longer required, therefore, the funds earmarked for the renovations are needed for other clinical expenses. The funds will be used for Electronic Health Record system expenses and clinic equipment and supplies. Medicaid Cost Settlement funds are required in the NC State Consolidated Agreement and Medicaid guidelines to be utilized in the area in which they were earned. These are non-County funds.

**APPROVAL SIGNATURES:**

\_\_\_\_\_  
 County Manager/Interim Assistant County Manager Date

\_\_\_\_\_  
 Financial Operations Manager/Asst. Financial Operations Mgr. Date

\_\_\_\_\_  
 Interim Budget Administrator Date

**Note:** Decreases in expenditures & increases in revenue accounts require brackets. Increases in expenditures & decreases in revenue do not require brackets. Please note that transfers between funds require interfund transfer accounts.