

Gaston County

Gaston County Board of Commissioners www.gastongov.com

Finance

Board Action

File #: 21-390

Commissioner Worley - Finance (GEMS) - To Appropriate the Medicaid Cost Report Reimbursement and Transfer Project Contract Savings from Rescue Squad Supplements in Order to Fund GEMS Overhires

STAFF CONTACT

Brandy Decker - Finance - 704-866-3338

BUDGET IMPACT

General Fund: Increase expenditures and revenue by \$186,313.00

General Fund: Move expenditures budget in the amount of \$155,000, from Operating to Personnel

BUDGET ORDINANCE IMPACT

General Fund: Increase expenditures and revenue by \$186,313.00

BACKGROUND

GEMS is assuming operation of the Crowders Mountain Rescue Squad. The Rescue Squad was previously funded by the Rescue Squad Supplement operating account, but will now be County operated with County employees. Part of the funding will come from savings as the \$225,000 operating contract will not be fully expended in FY22. The remaining funds will come from unbudgeted / unappropriated revenues from the Medicaid Cost Report.

POLICY IMPACT

N/A

ATTACHMENTS

Budget Change Request (BCR)

	. Buff, Clerk t he Board of C			ity Commi	ssion, do ł	BELOW TH	IS LINE ify that the a	bove is a	frue and correct copy of action
NO.	DATE	M1	M2	CBrown	AFraley	BHovis	Kylohnson	TKelgher	TPhilipelic Rigariey Vote
2021-295 DISTRIBU Laserfiche		СВ	KJ	A	Α	A	A	A	AB A U

	GASTON C	OUNTY BUDG	ET CHANGE REQUES	Γ							
TO:	Dr. Kim S. Eagle		_COUNTY MANAGER								
EDOM:		GEMS									
FROM:		epartment Name									
	•										
	Mark Lamphiear Department Director's Nam	10/	<u> 2/2021</u> Date								
	Department Director's Nam		Date								
TYPE OF REQUE	ST:										
Line Item Transfer Within Department & Fund Line Item Transfer Between Funds *											
Project Transfer Within Department & Fund X Additional Appropriation of Funds *											
Line Item Transfer Between Departments* * Requires resolution by the Board of Commissioners											
		A	CCOUNT NUMBER	AMOUNT							
ACCOU	INT DESCRIPTION	Fund - Funct	ion - Dept - Division - Object - Project	Whole Dollars Only							
(As it ap	pears in the budget)	XXX - XX - XXXX - XXXX - XXXXX - XXXXXX		(See Note Below)							
010-02-4370-000	00-510001-	Salaries		195,867.00							
010-02-4370-000	00-510100-	FICA		17,232.00							
010-02-4370-000	00-510101-	Retirement		25,566.00							
010-02-4370-000	00-510103-	Health Insurance		75,193.00							
010-02-4370-000	00-510104-	Unemployment I	nsurance	1,308.00							
010-02-4370-000	00-510108-	Dental Insurance		1,962.00							
010-02-4370-000	00-510109-	Life Insurance		1,308.00							
010-02-4370-000	00-530024-	Insurance (Risk)		13,077.00							
010-02-4370-000	00-520006-	Uniforms		10,300.00							
010-02-4370-000	00-411007-	Ambulance Fees	Patient	(186,813.00)							
010-02-4372-000	00-530040-	Rescue Squad S	upplements	(155,000.00)							
JUSTIFICATION FOR REQUEST: (133,000.00)											
10 overhires - El	MT Basic for Crowders Mou	ntain coverage									
Funding appropriated from: - Medicaid Cost Report Revenue - \$186,813.00 received in FY22 - Rescue Squad Supplemental Funding - \$155,000 in projected savings from contract 2018-38 for Crowders Mountain FY22 Support											
Note: Decreases i	n expenditures & increases i	n revenue account	s require brackets Increases i	n evnenditures 2 deserves							
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.											