

Gaston County

Gaston County Board of Commissioners www.gastongov.com

DHHS - Public Health Division

Board Action

File #: 21-038

Commissioner Brown - DHHS (Health Division) - To Appropriate Excess Fee Revenue Earned During Fiscal Year 2020 from Health Fund Balance for the Public Health Clinics and Environmental Health Program (\$31,181)

STAFF CONTACT

Cathy Cheek - Business Services Administrator - DHHS - Public Health Division - 704-853-5266

BUDGET IMPACT

Appropriate 100% Fee Revenue.

BUDGET ORDINANCE IMPACT

Appropriate \$31,181 into Special Project accounts from revenue received during FY20 in Health Fund Balance.

BACKGROUND

During Fiscal Year 2020, Excess Fee Revenue was generated by the Public Health clinics and Environmental Health Program through Medicaid, Medicare, Insurance, Patient, and Permit Fees. Excess Fee Revenue is recognized when the amount of fees received exceed the fiscal year budgeted amount. In accordance with the Consolidated Agreement between the Gaston Public Health Department and the State of North Carolina, all excess fee revenue earned must be budgeted and spent in the program that earned the revenue and locally appropriated funds may not be supplanted by earned revenues from persons, public, or private third party payors. The funds will be used for patient clinical and Environmental Health operating expenses. These are Non-County funds.

POLICY IMPACT

N/A

ATTACHMENTS

Budget Change Request (BCR)

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DO NOT TYPE BELOW THIS LINE											
I, Donna S. Buff, Clerk to the County Commission, do hereby certify that the above is a true appropriate copy of action taken by the Board of Commissioners as follows:											
NO.	DATE	M1	М2	CBrown	AFraley	BHovis	KJohnson	Keigher	-TPhiloecan RWorley Vote		
2021-048	02/23/2021	TP	BH	Α	AB	Α	Α	A	A AB U		
DISTRIBU											

GASTON COUNTY BUDGET CHANGE REQUEST											
TO:	Dr. Kim S. Eagle	COUNTY	MANAGER								
FROM:	5100 DHF	IS - Public Health									
	Dept. # De	partment Name									
	Steve Eaton	2/23/21	_								
	Department Director's Nam	e Date									
TYPE OF REQUE	ST:			*** · · · · · · · · · · · · · · · · · ·							
Line Item Transfer Within Department & Fund											
Project Transfer Within Department & Fund X Additional Appropriation of Funds *											
Line Item Transfer Between Departments* * Requires resolution by the Board of Commissioners											
		ACCOUNT	JUMBER	AMOUNT							
ACCOU	INT DESCRIPTION	Fund - Function - Dept - Div	Whole Dollars Only								
(As it ap	pears in the budget)	xxx - xx - xxxx - xxxx - xxxxx - xxxxx		(See Note Below)							
Fund Balance A		011-99-9900-0000-490000)-	(\$31,181)							
FY20 EH Excess		011-05-5114-5125-560000		\$27,115							
FY20 Excess IC	S Fee Revenue	011-05-5116-5131-560000	\$4,066								

JUSTIFICATION FOR REQUEST:

During Fiscal Year 2020, Excess Fee Revenue was generated by the Public Health clinics and Environmental Health Program through Medicaid, Medicare, Insurance, Patient, and Permit Fees. Excess Fee Revenue is recognized when the amount of fees received exceed the fiscal year budgeted amount. In Accordance with the Consolidated Agreement between the Gaston County Public Health Department and the State of North Carolina, all excess fee revenue earned must be budgeted and spent in the program that earned the revenue and locally appropriated funds may not be supplanted by earned revenues from persons, public, or private third party payors. The funds will be used for patient clinical and Environmental Health operating expenses. These are Non-County funds.

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.