

School District of Okaloosa County
SUMMARY LEVEL PROJECT BUDGETS
FISCAL YEAR 2011-2012

PROJECT NAME: Medicaid Reimbursement

PROJECT NUMBER: 1084

PROJECT DESCRIPTION:

This project accounts for Medicaid Reimbursement dollars received through the Medicaid Certified School Match Program (MCSMP). The District is currently participating in the Medicaid Administrative Claiming (MAC) and the Direct Services component of the Medicaid Certified School Match Program (MCSMP). Revenue in excess of the cost of personnel and billing services is appropriated to the project reserve for future use as determined by the School Board.

FUND SOURCE: Medicaid Reimbursement

APPROPRIATIONS AND STAFFING:

APPROPRIATIONS				
Object Group Number	Object Group Name	Original 2010-2011 Appropriation	2011-2012 Appropriation	\$ Increase (Decrease)
100 / 200	Salaries & Benefits			
	Administrative/Managerial	\$ -	\$ -	\$ -
	Educational Support	64,473	63,603	(870)
	Instructional	-	-	-
	Professional / Technical	-	-	-
	Subtotal - Salaries & Benefits	64,473	63,603	(870)
300	Purchased Service	353,577	381,642	28,065
400	Energy Services	-	-	-
500	Materials & Supplies	750	750	-
600	Capital Outlay	600	250	(350)
700	Other Expenses	-	-	-
900	Transfers/Reserves	-	-	-
	Total Combined Appropriation	\$ 419,400	\$ 446,245	\$ 26,845

STAFFING			
	2010-2011 Recommendation	2011-2012 Recommendation	# Increase (Decrease)
Administrative/Managerial	-	-	-
Educational Support	1.00	1.00	-
Instructional	-	-	-
Professional / Technical	-	-	-
Total Staff	1.00	1.00	-

OTHER INFORMATION:

The Finance - Accounting and Financial Reporting Department has the oversight responsibility for the project.

Note:

Carryover funds will be used to fund \$133,278 of the Health Care Service Plan.

SCHOOL DISTRICT OF OKALOOSA COUNTY
BUDGET ADJUSTMENT SHEET
FISCAL YEAR 2011-2012

MIS 3176

COST CENTER NAME: Accounting & Financial Reporting

CENTER NUMBER: 9205

PROJECT NAME: Medicaid Reimbursement

PROJECT NUMBER: 1084

OBJ	OBJECT NAME/DESCRIPTION	FUNC	FUNCTION NAME	AMOUNT REQUESTED	ADJUSTMENT	PROPOSED FINAL BUDGET
0310	PROFESSIONAL & TECHNICAL SERVICE Hillsborough contract for billing Medicaid and Seminole contract for random sampling for admin claim	5200	EXCEPTIONAL CHILD	\$ 6,000		\$ 6,000
0331	OUT OF COUNTY TRAVEL Medicaid conferences and meetings	7500	FISCAL SERVICES (FINANCE DEPT)	600		600
0370	POSTAGE/SHIPPING/TELEGRAM For mailing Medicaid billing documentation	7500	FISCAL SERVICES (FINANCE DEPT)	200		200
0373	TELEPHONE LONG DISTANCE Long distance dealing with Hillsborough/Seminole Counties on Medicaid billing issues and audit related calls	7900	OPERATION OF PLANT	150		150
0510	SUPPLIES Charges for paper, printer laser cartridge, and other general supplies	7500	FISCAL SERVICES (FINANCE DEPT)	750		750
0642	EQUIPMENT (UNDER \$1,000) Replace one monitor and a shredder	7500	FISCAL SERVICES (FINANCE DEPT)	250		250
Sub-Total (Page 1 Only)				\$ 7,950	\$ -	\$ 7,950
GRAND TOTAL				<u>\$ 7,950</u>	<u>\$ -</u>	<u>\$ 7,950</u>

SCHOOL DISTRICT OF OKALOOSA COUNTY
BUDGET ADJUSTMENT SHEET
FISCAL YEAR 2011-2012

MIS 3176

COST CENTER NAME: Fixed Charges

CENTER NUMBER: 9015

PROJECT NAME: Medicaid Reimbursement

PROJECT NUMBER: 1084

OBJ	OBJECT NAME/DESCRIPTION	FUNC	FUNCTION NAME	AMOUNT REQUESTED	ADJUSTMENT	PROPOSED FINAL BUDGET
0310	PROFESSIONAL & TECHNICAL SERVICE	6130	HEALTH SERVICES	\$ 374,692		\$ 374,692
Sub-Total (Page 1 Only)				\$ 374,692	\$ -	\$ 374,692
GRAND TOTAL				<u>\$ 374,692</u>	<u>\$ -</u>	<u>\$ 374,692</u>

SCHOOL DISTRICT OF OKALOOSA COUNTY
Department Staffing Summary
Fiscal Year 2011-2012

MIS 3390

Department Name: Accounting & Financial Reporting
Cost Center No.: 9205
Project Name: Medicaid Reimbursement
Fund Number : 1010
Project Number: 1084
Type Funding: Medicaid Reimbursement

Section A

Positions Approved for Fiscal Year 2010-2011:			
Job Title	# of Positions	Average Cost	Total Cost
Accountant - 12 Month	1.00		\$ 63,603
(A) Total Positions Approved For FY 2010-2011	1.00		\$ 63,603

Section B-1

Approved Additions, Deletions and/or Changes - Fiscal Year 2010-2011					
Job Title	Type*	# of Positions		Average Cost	Total Cost
(B-1) Total Approved Additions, Deletions, Changes		-			\$ -

Section B-2

Requested Additions, Deletions and/or Changes - Fiscal Year 2011-2012					
Job Title	Type*	# of Positions		Average Cost	Total Cost
(B) Total Requested Additions, Deletions, Changes		-			\$ -

Section C

Positions Submitted for Approval for Fiscal Year 2011-2012			
Job Title	# of Positions	Average Cost	Total Cost
Accountant - 12 Month	1.00		\$ 63,603
(C) Total Positions Submitted for Approval FY 2011-2012	1.00		\$ 63,603

*Note:

A=Add, C=Change, D=Delete, T=Transferred, E=Error Correction, R=Retirement