

**School District of Okaloosa County**  
**SUMMARY LEVEL PROJECT BUDGETS**  
**FISCAL YEAR 2020-2021**

**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 to be used to fund the portion of school healthcare positions not covered by the Project 6004 - Health Services - Schools allocation. Medicaid also funds the overhead costs of the program.

**FUND SOURCE:** Medicaid Reimbursement

**APPROPRIATIONS AND STAFFING:**

APPROPRIATIONS				
Object Group Number	Object Group Name	Original 2019-2020 Appropriation	2020-2021 Appropriation	\$ Increase (Decrease)
100 / 200	Salaries & Benefits			
	Administrative/Managerial	\$ -	\$ -	\$ -
	Educational Support	-	-	-
	Instructional	-	-	-
	Professional / Technical	98,011	102,502	4,491
	Subtotal - Salaries & Benefits	98,011	102,502	4,491
300	Purchased Service	301,489	316,133	14,644
400	Energy Services	-	-	-
500	Materials & Supplies	500	700	200
600	Capital Outlay	-	-	-
700	Other Expenses	-	-	-
900	Transfers/Reserves	-	5,665	5,665
	<b>Total Combined Appropriation</b>	<b>\$ 400,000</b>	<b>\$ 425,000</b>	<b>\$ 25,000</b>

STAFFING			
	2019-2020 Recommendation	2020-2021 Recommendation	# Increase (Decrease)
Administrative/Managerial	-	-	-
Educational Support	-	-	-
Instructional	-	-	-
Professional / Technical	1.00	1.00	-
<b>Total Staff</b>	<b>1.00</b>	<b>1.00</b>	<b>-</b>

**OTHER INFORMATION:**

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

SCHOOL DISTRICT OF OKALOOSA COUNTY  
BUDGET ADJUSTMENT SHEET  
FISCAL YEAR 2020-2021

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
0330	IN-COUNTY TRAVEL Travel to schools to train therapist on Medicaid billing	7500	FISCAL SERVICES (FINANCE DEPT)	\$ 200		\$ 200
0331	OUT-OF-COUNTY TRAVEL Medicaid conferences and meetings (Note: Due to converting to in-house direct Medicaid billing, we should provide staff and back up staff training if available this year - need to start preparing for eventual retirement of main staff and cross training.)	7500	FISCAL SERVICES (FINANCE DEPT)	1,800		1,800
0365	SOFTWARE SUBSCRIPTIONS Annual maintenance for Datawatch Monarch - 1 user @ \$225.90 (last year's cost)	7500	FISCAL SERVICES (FINANCE DEPT)	250		250
0370	POSTAGE/SHIPPING/TELEGRAM For mailing Medicaid billing documentation - increased this year to cover mailings for in-house direct Medicaid billing and due to the new requirement for all therapist to do Medicaid billing on qualifying students	7500	FISCAL SERVICES (FINANCE DEPT)	800		800
0510	SUPPLIES Charges for paper (for printing related to direct Medicaid billing in-house) and other general supplies	7500	FISCAL SERVICES (FINANCE DEPT)	500		500
0519	TECHNOLOGY SUPPLIES Printer laser cartridges	7500	FISCAL SERVICES (FINANCE DEPT)	200		200
Sub-Total (Page 1 Only)				\$ 3,750	\$ -	\$ 3,750
GRAND TOTAL				\$ 3,750	\$ -	\$ 3,750

SCHOOL DISTRICT OF OKALOOSA COUNTY  
BUDGET ADJUSTMENT SHEET  
FISCAL YEAR 2020-2021

MIS 3176

COST CENTER NAME: Fixed Charges  
PROJECT NAME: Medicaid Reimbursement

CENTER NUMBER: 9015  
PROJECT NUMBER: 1084

OBJ	OBJECT NAME/DESCRIPTION	FUNC	FUNCTION NAME	AMOUNT REQUESTED	ADJUSTMENT	PROPOSED FINAL BUDGET
0310	PROFESSIONAL & TECHNICAL SERVICE District's portion of schools' Health Services Contract	6130	HEALTH SERVICES	\$ 313,083		\$ 313,083
Sub-Total (Page 1 Only)				\$ 313,083	\$ -	\$ 313,083
GRAND TOTAL				<u>\$ 313,083</u>	<u>\$ -</u>	<u>\$ 313,083</u>

SCHOOL DISTRICT OF OKALOOSA COUNTY  
BUDGET ADJUSTMENT SHEET  
FISCAL YEAR 2020-2021

MIS 3176

COST CENTER NAME: Remittances, Transfers, & Fund Balance

CENTER NUMBER: 9026

PROJECT NAME: Medicaid Reimbursement

PROJECT NUMBER: 1084

OBJ	OBJECT NAME/DESCRIPTION	FUNC	FUNCTION NAME	AMOUNT REQUESTED	ADJUSTMENT	PROPOSED FINAL BUDGET
0997	RESERVE - PROJECTS	9890	RESERVES	\$ 5,665		\$ 5,665
Sub-Total (Page 1 Only)				\$ 5,665	\$ -	\$ 5,665
GRAND TOTAL				\$ 5,665	\$ -	\$ 5,665

SCHOOL DISTRICT OF OKALOOSA COUNTY  
Department Staffing Summary  
Fiscal Year 2020-2021

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 2019-2020			
Job Title	# of Positions	Average Cost	Total Cost
Financial Analyst - 12 Month	1.00		\$ 102,502
(A) Total Positions Approved For FY 2019-2020	1.00		\$ 102,502

**Section B-1**

Approved Additions, Deletions and/or Changes - Fiscal Year 2019-2020				
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 2020-2021				
Job Title	Type*	# of Positions	Average Cost	Total Cost
(B) Total Requested Additions, Deletions, Changes		-		\$ -

**Section C**

Positions Submitted for Approval for Fiscal Year 2020-2021			
Job Title	# of Positions	Average Cost	Total Cost
Financial Analyst - 12 Month	1.00		\$ 102,502
(C) Total Positions Submitted for Approval FY 2020-2021	1.00		\$ 102,502

**\*Note:**  
A=Add, C=Change, D=Delete, T=Transferred, E=Error Correction, R=Retirement