School District of Okaloosa County SUMMARY LEVEL PROJECT BUDGETS FISCAL YEAR 2021-2022

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	2020	ginal 1-2021 priation		2021-2022 Appropriation		se (Decrease)		
100 / 200	Salaries & Benefits Administrative/Managerial Educational Support Instructional Professional / Technical Subtotal - Salaries & Benefits	\$	102,502 102,502	\$	- - - 107,122 107,122	\$	4,620 4,620		
300	Purchased Service		316,133		478,778		162,645		
400	Energy Services		-		-		-		
500	Materials & Supplies		700		700		-		
600	Capital Outlay		-		-		-		
700	Other Expenses		-		-		-		
900	Transfers/Reserves		5,665		13,400		7,735		
	Total Combined Appropriation	\$	425,000	\$	600,000	\$	175,000		

STAFFING									
	2020-2021 Recommendation	2021-2022 Recommendation	# Increase (Decrease)						
Administrative/Managerial	-	-	-						
Educational Support	-	-	-						
Instructional	-	-	-						
Professional / Technical	1.00	1.00							
Total Sta	.ff 1.00	1.00							

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 2021-2022

COST CENTER NAME:Accounting & Financial ReportingCENTER NUMBER:9205PROJECT NAME:Medicaid ReimbursementPROJECT NUMBER:1084

KOJE	C1 NAME: Medicaid Reimbursement		-	PROJECT NUMBER:			108
OBJ	OBJECT NAME/DESCRIPTION	FUNC	FUNCTION NAME	AMOUNT REQUESTED	ADJUSTMENT	1	OPOSED FINAL UDGET
0330	IN-COUNTY TRAVEL Travel to schools to train therapist on Medicaid billing	7500	FISCAL SERVICES (FINANCE DEPT)	\$ 200		\$	200
	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)	1,500			1,500
0365	SOFTWARE SUBSCRIPTIONS Annual maintenance for Datawatch Monarch - 1 user @ \$800 (This was a large increase per license that occurred in FY20-21)	7500	FISCAL SERVICES (FINANCE DEPT)	800			800
	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)	1,000			1,000
	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)			\$ 4,200	\$ -	\$	4,200
	GRAND TOTAL			\$ 4,200	\$ -	\$	4,200

SCHOOL DISTRICT OF OKALOOSA COUNTY BUDGET ADJUSTMENT SHEET FISCAL YEAR 2021-2022

COST CENTER NAME: Fixed Charges CENTER NUMBER: 9015
PROJECT NAME: Medicaid Reimbursement PROJECT NUMBER: 1084

ОВЈ	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	\$ 475,278		\$	475,278
	Sub-Total (Page 1 Only)			\$ 475,278	\$ -	•	475,278
	GRAND TOTAL			\$ 475,278 475,278			475,278

SCHOOL DISTRICT OF OKALOOSA COUNTY BUDGET ADJUSTMENT SHEET FISCAL YEAR 2021-2022

COST CENTER NAME: Remittances, Transfers, & Fund Balance 9026
PROJECT NAME: Medicaid Reimbursement PROJECT NUMBER: 1084

ОВЈ	OBJECT NAME/DESCRIPTION	FUNC	FUNCTION NAME	AMOUNT REQUESTED	ADJUSTMENT	PROPOSED FINAL BUDGET
0997	RESERVE - PROJECTS	9890	RESERVES	\$ 13,400		\$ 13,400
	Sub-Total (Page 1 Only)			\$ 13,400	\$ -	\$ 13,400
	GRAND TOTAL			\$ 13,400	\$ -	\$ 13,400

SCHOOL DISTRICT OF OKALOOSA COUNTY Department Staffing Summary Fiscal Year 2021-2022

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 2020-2021									
Job Title	# of Positions	Average Cost	Total Cost						
Financial Analyst - 12 Month	1.00		\$	107,122					
			-						
			1						
(A) Total Positions Approved For FY 2020-2021	1.00		\$	107,122					

Section B-1

Approved Additions, Deletions and/or Changes - Fiscal Year 2020-2021									
Job Title Type* # of Positions Average Cost Total Cost									
(B-1) Total Approved Additions, Deletions, Chan	ges	-			\$ -				

Section B-2

Requested Additions, Deletions and/or Changes - Fiscal Year 2021-2022									
Job Title	Type*	# of Positions		Average Cost	Total Cost				
(B) Total Requested Additions, Deletions, Chang	es	-			\$ -				

Section C

Positions Submitted for Approval for Fiscal Year 2021-2022									
Job Title	# of Positions	Average Cost	Total Cost						
Financial Analyst - 12 Month	1.00		\$	107,122					
(C) Total Positions Submitted for Approval FY 2021-2022	1.00		\$	107,122					

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