Budget Revision Request

Gov. Code Sec. 29125 & 29130

BJE 2007680
Budget Journal Entry #

JE 2252024
Related Journal Entry #

Subject / Title: *Provide a **short description** for this budget revision request. For example: "Designate funds for zoning ordinance amendments" or "Distribute proceeds from sale of 2005 COPS".*

Department of Social Services: Appropriate a total of $850,000 in unanticipated Medi-Cal revenue. These funds are necessary for expenditures to comply with the Medi-Cal Data Privacy and Security Project.

Justification: ***For all changes:** explain what the change is for and why it is needed. Attach additional justification, board Letters or spreadsheet, if appropriate. **When moving Appropriation:** explain why it's available. **When Revenue is adjusted:** explain the reason for the increase or decrease. **For adjustments to General Fund Contingency:** explain why no other alternative funding source is available.*

This budget revision appropriates a total of $850,000 in unanticipated Medi-Cal revenue and transfers $300,000 to the General Services Department for acquistion and installation of a building Card Access System to meet MEDS Security protocol.

Approval of the requested action will provide the California Department of Health Services with an assurance that the County's Department of Social Services will have security and privacy measures in place to protect Personally Identifiable Information accessed by the County from the State's Medi-Cal Eligibility Determination System (MEDS).

Funding for security enhancements to bring the Santa Barbara County Department of Social Services (DSS) into compliance with the Medi-Cal Data Privacy and Security Agreement is provided as an augmentation to the County's Fiscal Year 2008-09 Medi-Cal allocation. The State evaluated counties' needs for additional funding on a case-by-case basis. The agreement stipulates that substantial compliance must be met no later than July 1, 2010. Therefore, any compliance standards not met in the current fiscal year would need to be completed in Fiscal Year 2009-2010.

Funding for this project will be provided via a Medi-Cal augmentation, 50% State and 50% Federal. No additional General Fund dollars are required for this effort.

Financial Summary

Increase or (Decrease) in Appropriation for / Uses:	Department / Fund 044 / 0055		Department / Fund 063 / 0030		Department / Fund /		Department / Fund /	
Salaries & Benefits		00		00		00		00
Services & Supplies	319,000	00	-	00		00		00
Other Charges		00		00		00		00
Fixed Assets	231,000	00	300,000	00		00		00
Other Financing Uses	300,000	00		00		00		00
Intrafund Transfers		00		00		00		00
Reserve or Designation	-	00		00		00		00
Sources:								
Revenue	850,000	00		00		00		00
Other Financing Sources		00	300,000	00		00		00
Intrafund Transfers		00		00		00		00
Reserve or Designation	-	00		00		00		00
Effect on Contingency / RE	-	00		00		00		00

RECEIVED 2009 MAR 5 PM 3 18 AUDITOR CONTROLLER

Departmental Authorization	Auditor-Controller	CEO's Recommendation	Board of Supervisor's Action
3/6/2009 Department Head Date	Budget Journal Entry and Related Journal Entry *if applicable* Approved as to Accounting Form.	☒ Approve 3/5/09	☐ Approved
3/6/09 Department Head Date	3/5/09 Auditor-Controller	☐ Disapprove Date	☐ Disapproved Date
Department Head Date		Transfer/Revision in Accordance with Board Policy dated 8/3/93. County Executive Officer	Agenda Item Clerk of the Board of Supervisors

Budget Journal Entry (On-Line)

Batch ID: 000-107-2930

Page #	Posting Date	Audit Trail #	Document # BJE
1 of 1		JE2252024	**2007680**

Fund	Department	GL Account	Line Item Account	Debit Amount	Credit Amount	Program	Org Unit	Project	Bdgt. Period	Descr ID
0055	044	2530	7901		300,000.00	5000	8001		04/2009	A
0055	044	2420	3633	425,000.00		5000	8001		04/2009	A
0055	044	2420	4383	425,000.00		5000	5220		04/2009	A
0030	063	2420	5911	300,000.00		1930			04/2009	A
0030	063	2530	8700		300,000.00	6050	8002		04/2009	A
0055	044	2530	8300		231,000.00	6050	8002		04/2009	B
0055	044	2530	7322		319,000.00	6050	8002		04/2009	C
				1,150,000.00	1,150,000.00	Form Totals				

Descr ID	Description		
A	DSS funding transfer for Card Access System.		
B	DSS funding MEDS Equipment Costs		
C	DSS funding MEDS Consulitng & Maintenance Costs		

Evelyn Rainbolt

Form Prepared By | Phone # | Departmental Authorized Signature | Date | Posted By | Date

Journal Entry (On-Line)

Batch ID: 000-107-2931

Treasurer's Cash Type:
- [ ] Receipts (R)
- [ ] Warrants (W)
- [ ] Elec Trf (E)

Page # 1 of 1

Posting Date:

Audit Trail #: BJE2007680

Document # JE: **2252024**

Fund	Department	GL Account	Line Item Account	Debit Amount	Credit Amount	Program	Org Unit	Project	Activity	Area	Depositor	Descr ID
0055	044	2810	7901	300,000.00		5000	8001					A
0055		0110			300,000.00							A
0030	063	2710	5911		300,000.00	1930						A
0030		0110		300,000.00								A
				600,000.00	600,000.00	Form Totals						

Descr ID	Description
A	Fund for DSS Card Access System.

Evelyn Rainbolt

Form Prepared By | Phone # | Departmental Authorized Signature | Date | Posted By | Date