

<b>COUNTY OF SAN MATEO APPROPRIATION TRANSFER REQUEST</b>				REQUEST NO. ATR25-B0705	
DEPARTMENT: County Health / Health Administration				DATE: 6/13/2025	
<b>1. REQUEST TRANSFER OF APPROPRIATION AS LISTED BELOW:</b>					
	CODES			AMOUNT	DESCRIPTION
	FUND or ORG	ACCOUNT	JL ORG CODE Measure K only		
<b>FROM</b>	See Supporting Attachment	See Supporting Attachment		1,167,000	See Supporting Attachment
<b>TO</b>	See Supporting Attachment	See Supporting Attachment		1,167,000	See Supporting Attachment
Justification (Attach Memo if Necessary): See memo					
<div style="display: flex; justify-content: space-between; align-items: center;"> <div> <p>Signed by:</p> <p><b>DEPARTMENT HEAD</b> <i>Coleen Chawla</i> <small>178RP49A967F45D</small></p> </div> <div> <p><b>DATE</b> 6/13/2025</p> </div> </div>					
<b>2.</b> <input type="checkbox"/> Board Action Required <input checked="" type="checkbox"/> Four-Fifths Vote Required <input type="checkbox"/> Board Action Not Required Remarks:					
<div style="display: flex; justify-content: space-between; align-items: center;"> <div> <p>DocuSigned by:</p> <p><b>COUNTY CONTROLLER</b> <i>Noe Noyes</i> <small>311A76FBA8404C2...</small></p> </div> <div> <p><b>DATE</b> 6/17/2025</p> </div> </div>					
<b>3.</b> <input checked="" type="checkbox"/> Approve as Requested <input type="checkbox"/> Approve as Revised <input type="checkbox"/> Disapproved Remarks:					
<div style="display: flex; justify-content: space-between; align-items: center;"> <div> <p>DocuSigned by:</p> <p><b>COUNTY EXECUTIVE</b> <i>Roberto Mandula</i> <small>5178A926843D471...</small></p> </div> <div> <p><b>DATE</b> 6/17/2025</p> </div> </div>					
<b>DO NOT WRITE BELOW THIS LINE – FOR BOARD OF SUPERVISORS USE ONLY</b>					

BOARD OF SUPERVISORS, COUNTY OF SAN MATEO, STATE OF CALIFORNIA  
RESOLUTION TRANSFERRING FUNDS

RESOLUTION NO. 081335

RESOLVED, by the Board of Supervisors of the County of San Mateo, that

WHEREAS, the Department hereinabove named in the Request for Appropriation, Allotment or Transfer of Funds has requested the transfer of certain funds as described in said Request; and

WHEREAS, the County Controller has approved said Request as to accounting and available balances, and the County Executive has recommended the transfer of funds as set forth hereinabove:

NOW, THEREFORE, IT IS HEREBY ORDERED AND DETERMINED that the recommendations of the County Executive be approved and that the transfer of funds as set forth in said Request be effected.

Regularly passed and adopted this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_

AYES and in favor of said resolution:

NOES and against said resolution:

Supervisors: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Supervisors: \_\_\_\_\_  
\_\_\_\_\_  
Absent \_\_\_\_\_  
Supervisors: \_\_\_\_\_

\_\_\_\_\_  
PRESIDENT, BOARD OF SUPERVISORS  
COUNTY OF SAN MATEO

ATTEST: \_\_\_\_\_  
Clerk of Said Board

**County of San Mateo  
Appropriation Transfer Request  
(Supporting Attachment)**

**Department:** County Health / Health Administration

**Date:** 6/13/2025

**REQUEST TRANSFER OF APPROPRIATION AS LISTED BELOW:**

	CODES				
	FUND or ORG	ACCOUNT	JL ORG CODE Measure K only	AMOUNT	DESCRIPTION
FROM	55111	2378		790,000	Other Reimbursement
	55111	2539		300,000	IFR - SMMC
	55121	2378		77,000	Other Reimbursement
		Subtotal			1,167,000
TO	55111	4111		500,000	Regular Hours - Perm Positio
	55111	5858		590,000	Other Prof Contract
	55111	7545		77,000	Operating Transfer Out Debt
		Subtotal			1,167,000

**Special Notice / Hearing:** None  
**Vote Required:** Majority

**To:** Robert Manchia, Chief Financial Officer

**From:** Colleen Chawla, Chief, San Mateo County Health  
Gina Wilson, Chief Financial Officer, County Health

**Subject:** Appropriation Transfer Request – Health Administration (5500B)

**RECOMMENDATION:**

Approve an Appropriation Transfer Request accepting unanticipated Intergovernmental Revenue (\$867,000) and Interfund Revenue (\$300,000) and increasing Salaries and Benefits (\$500,000) and Service and Supplies (\$590,000) and Other Financing Uses (\$77,000).

**BACKGROUND/DISCUSSION:**

Salary and Benefits are exceeding the original budget due to the negotiated increases, salary adjustments based on the management equity study and terminal pay for retirees.

Services and Supplies are exceeding budget as we are seeing in increased use of contract interpreter costs as well as increased participation fees for the Medi-Cal Administrative Activities (MAA) claiming program. Fees for the MAA program are based on revenue generated and as we have increased our claiming opportunities, the portion of fees that are needed to pay has also increased. These fees are paid to the hosting County that provides guidance and coordination with the State. Other Financing Uses needs to be increased to cover the allocated rent from SMMC to the LEAP Program. The allocation methodology was not confirmed when the budget was developed.

**FISCAL IMPACT:**

There is no Net County Cost increase as a result of this ATR. Additional Medi-Cal Administrative Activities revenue will offset these additional expenses. The interpreter expenses will be reimbursed by San Mateo Medical Center; however, the budget needs to be increased to process the payments timely.

BOARD OF SUPERVISORS, COUNTY OF SAN MATEO, STATE OF CALIFORNIA

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WHEREAS, the County Controller has approved said Request as to accounting and available balances, and the County Executive has recommended the transfer of funds as set forth hereinabove:

NOW, THEREFORE, IT IS HEREBY ORDERED AND DETERMINED that the recommendations of the County Executive be approved and that the transfer of funds as set forth in said Request be effected.

Regularly passed and adopted this 25th day of June, 2025.

Ayes and in favor of said resolution:

Supervisors: JACKIE SPEIER  
NOELIA CORZO  
RAY MUELLER  
LISA GAUTHIER  
DAVID J. CANEPA

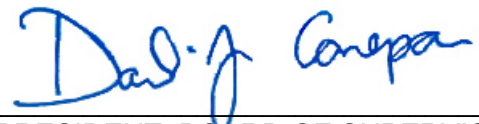
Noes and against said resolution:

Supervisors: NONE

ATTEST:



Deputy Clerk of the Board



PRESIDENT, BOARD OF SUPERVISORS  
COUNTY OF SAN MATEO