

REQUEST NO.
ATR 20-008

COUNTY OF SAN MATEO

APPROPRIATION TRANSFER REQUEST

DEPARTMENT
HEALTH – AGING AND ADULT SERVICESDATE
November 8, 2019

1. REQUEST TRANSFER OF APPROPRIATION AS LISTED BELOW:

	C O D E S		A M O U N T	D E S C R I P T I O N
	FUND OR ORG.	ACCOUNT		
From	58210	1713	\$277,226	State – IHSS
	58210	1913	\$374,390	Federal - IHSS
To	58210	5611	\$651,616	Blanket Insurance Premiums

Justification. (Attach Memo if Necessary)

For FY2019-2020, There is a projected increase in Independent Provider's Health Premium by \$651,616 (from \$321.50 to \$417.95 for 1126 members per month effective 1/1/2020). The funds will be covered by State/Federal funds for IHSS Public Authority.

BY: DEPARTMENT HEAD

DATE:

BY: CFO

DATE:

2. ☐ Board Action Required☒ Four-Fifths Vote Required☐ Board Action Not Required

Remarks:

BY: COUNTY CONTROLLER

DATE:

3. ☒ Approve as Requested☐ Approve as Revised☐ Disapprove

Remarks:

BY: COUNTY MANAGER

DATE: