

DATE: April 18, 2023

DEPARTMENT HEAD: Eduardo Olivarez

DEPARTMENT NAME: Health & Human Services Department

ACCOUNT NUMBER: 2-1293-441-00-340-059-0-XXX

Contact Person: Mike Escanano Ph#: (956) 383-6221 ext. 7210

2022
Appropriation
AI-90515

MAC



SUBJECT: Budget Amendments (increase (decrease)) in accordance with Local Government Code, Chapter 111, § 111.070, Item C (2).

Honorable Commissioners' Court of Hidalgo County:

I would like to request the following Budget Amendments (increase (decrease)) in accordance with Local Government Code, Chapter 111, § 111.070, Item C (2).

INCREASE ACCOUNT NUMBER(S)	ACCOUNT (OBJECT) NAME	AMOUNT
2-1293-441-00-340-059-0-113	MEDICAID ADMIN-REG F/T EMPLOYEES	50,000.00
2-1293-441-00-340-059-0-211	MEDICAID ADMIN-HEALTH INSURANCE	15,000.00
2-1293-441-00-340-059-0-212	MEDICAID ADMIN-LIFE INSURANCE	200.00
2-1293-441-00-340-059-0-220	MEDICAID ADMIN-FICA	8,500.00
2-1293-441-00-340-059-0-230	MEDICAID ADMIN-RETIREMENT	5,000.00
2-1293-441-00-340-059-0-610	MEDICAID ADMIN-GENERAL SUPPLIES	42,195.81
2-1293-345-40-340-059-0-000	MEDICAID ADMIN PROGRAM INCOME	120,895.81
TOTAL BUDGET INCREASE (DECREASE)		120,895.81

REASON: Appropriation of MEDICAID ADMIN Program Income generated from January 1, 2022 through December 31, 2022.

DEPARTMENT HEAD SIGNATURE

APPROVED COMMISSIONERS' COURT

____/____/____
DATE

ATTEST COUNTY CLERK