

ATTACHMENT II
Medicaid Waiver 1115
Fund 29658000
Functional Area 3600000000xxxxx
Proposed Budget for Period: 10/01/2017 to 9/30/2018
Comprehensive Teen Pregnancy Prevention

<u>ESTIMATED REVENUES</u>	<u>SAP GL</u> <u>No.</u>	<u>ORIG</u> <u>BUDGET</u>
Medicaid Waiver 1115	4502280	\$ 900,456
Total Estimated Revenues	\$	900,456

APPROPRIATIONS

Medicaid Waiver 1115

Period: 10/01/2017 - 9/30/2018

Cost Center 3618010002

Internal Order 836000000xxx

		<u>ORIG</u> <u>BUDGET</u>
1	Regular Salaries & Wages	71,136
1	Temporary Salaries	0
1	Language Skill Pay	0
1	Retiree Payout Salary	0
2	Social Security/FICA	5,633
2	Temporary Soc Sec/FICA	0
2	Life Insurance	74
1	Personal Leave Buy Back Pay	2,500
1	Transportation Allowance	0
2	Group Health Insurance	8,139
2	TMRS	8,431
6	Education	500
5	Fees to Professional Contractors	747,999
5	Other Contractual	0
5	Advertising and Publication	0
6	Membership Dues	0
6	Binding, Printing, and Reproduction	9,823
3	Transportation Fees	1,200
6	Mail and Parcel Post Service	400
6	Rental of office equipment	2,400
3	Travel - Official	2,500
4	Office Supplies	1,600
6	Food	800
7	Computer Software	0
4	Other Commodities	10,000
6	Repair Automotive	0
6	Maintenance and Repair Parts – Auto	0
4	Chems Meds & Drugs	0
6	Cellular Phones - Air Time	720
6	Data Work Order Services	0
6	Data Wireless	800
8	Indirect Cost	25,801
7	Furniture	0
7	Computer Equipment	0
Total		900,456

Categorical Budget	
1 Personnel	73,636
2 Fringe Benefits	22,277
3 Travel	3,700
7 Equipment	-
4 Supplies	11,600
5 Contractual	747,999
6 Other	15,443
Total Direct Charges	874,655
8 Indirect Cost	25,801
Total Project Request	900,456

PERSONNEL COMPLEMENT:

<u>Class No.</u>	<u>Title</u>	<u>Positions</u>
Activity 36-18-01		
Cost Center 3618010002		
Internal Order 836000000xxx		
0999	Sr. Management Analyst (1.0 FTE)	<u>1.00</u>
	Total 36-18-01	<u><u>1.00</u></u>