

**SANTA FE COUNTY
RESOLUTION 2020- 90**

DETAILED JUSTIFICATION FOR REQUESTING BUDGET ADJUSTMENT

(If applicable, cite the following authority: State Statute, grant name and award date, other laws, regulations, etc.)

1	<p>Please summarize the request and its purpose in the area below.</p> <p>On May 13, 2020, the Santa Fe County Fire Department entered into a contract with Quick Meds Claims, LLC (QMC) to process ambulance billing and provide collections services. During the initiation of the contract, the Fire Department expected the cost of ambulance billing services would be deducted from the revenue being generated prior to the net amount being received by the County. Therefore, an expenditure budget was not established during preparations for the FY2021 budget. In order to account for the expenditures and revenues separately, budget is being requested for this expense. The estimated expenditure amount of \$90,000.00 was calculated using the contracted compensation rate for QMC of 4.5% on an estimated revenue amount of \$1,975,000.00 in collections.</p>			
2	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Is this Budget Action for a Recurring or Non Recurring Expense(one-time)</td> <td style="width:20%; text-align: center;">Recurring <input checked="" type="checkbox"/></td> <td style="width:20%; text-align: center;">Non-Recurring <input type="checkbox"/></td> </tr> </table>	Is this Budget Action for a Recurring or Non Recurring Expense(one-time)	Recurring <input checked="" type="checkbox"/>	Non-Recurring <input type="checkbox"/>
Is this Budget Action for a Recurring or Non Recurring Expense(one-time)	Recurring <input checked="" type="checkbox"/>	Non-Recurring <input type="checkbox"/>		

Does this request impact a revenue source?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
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A. Is this a State Special Appropriation? If Yes, cite Statute and attach a copy	<input type="checkbox"/>	<input checked="" type="checkbox"/>
B. Does this include state or federal funds?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

C. Is this request a result of Commission action? If YES, please cite and attach a copy of supporting documentation (i.e. Minutes, Resolution, Ordinance, etc)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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D. Is a match required? If Yes, please identify funding source in the line below.				
PLEASE PROVIDE THE LINE ITEM OF THE MATCH BELOW				
FUND	DEPARTMENT	ACTIVITY	ELEMENT	CATEGORY / LINE ITEM
				AMOUNT
				BUDGETED (Drop Down)

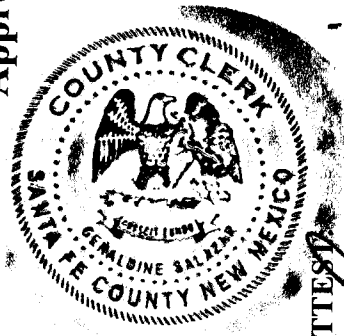
SANTA FE COUNTY
RESOLUTION 2020- 90

NOW, THEREFORE, BE IT RESOLVED by the Board of County Commissioners of Santa Fe County that the Local Government Division of the Department of Finance and Administration is hereby requested to grant authority to adjust budgets as detailed above.

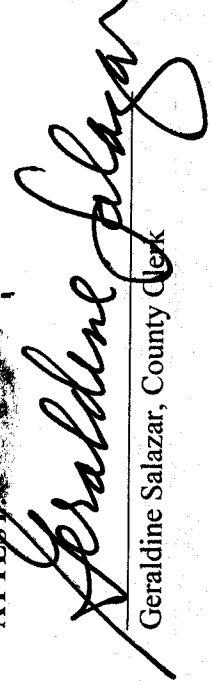
Approved, Adopted, and Passed This 1st Day of December, 2020.

Santa Fe Board of County Commissioners


Henry P. Roybal, Chairperson



ATTEST


Geraldine Salazar, County Clerk



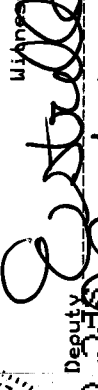
CLERK RECORDED 12/04/2020

COUNTY OF SANTA FE)
STATE OF NEW MEXICO) ss

BCC RESOLUTIONS
PAGES: 3

I Hereby Certify That This Instrument Was Filed for Record On The 4TH Day Of December, 2020 at 08:58:27 AM and Was Duly Recorded as Instrument # 1936353 of The Records Of Santa Fe County

Witness My Hand And Seal Of Office
Geraldine Salazar
County Clerk, Santa Fe, NM


Deputy
SFC