

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL

TO	DATE
<i>Mell's</i>	<i>9-23-10</i>

DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <i>1001136</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <i>cc: Ms. Forlner</i> 	<input type="checkbox"/> Prepare reply for appropriate signature DATE DUE _____ <input type="checkbox"/> FOIA DATE DUE _____ <input checked="" type="checkbox"/> Necessary Action

	APPROVALS (Only when prepared for director's signature)	APPROVE	* DISAPPROVE (Note reason for disapproval and return to preparer.)	COMMENT
1.				
2.				
3.				
4.				

MARK SANFORD, CHAIRMAN
GOVERNOR
CONVERSE A. CHELDS, III, CPA
STATE TREASURER
RICHARD ECKSTROM, CPA
COMPTROLLER GENERAL



SC BUDGET AND CONTROL BOARD

Office of State Budget
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EXECUTIVE DIRECTOR

RECEIVED

September 22, 2010

SEP 23 2010

Department of Health & Human Services
OFFICE OF THE DIRECTOR

To Agency Chief Financial Officer:

Enclosed is your agency's **Preliminary Allocation** of State Funds for FY 2010-11. This information is provided to assist in the planning of your current year budget and in preparation of the Detail Budget for FY 2011-12. This Preliminary Allocation reflects the initial action for preparation of the gubernatorial budget for submission to the General Assembly, in accordance with Act 132 of 1993. Please note the allocation does not include authorized carry-forward funds, since these items will not be considered as base appropriation.

The enclosed allocation includes the following items:

FY 2010-11:

Budget and Control Board Distribution of Employer Contributions (Line 090).

This line represents the allocation of funds related to the rate increases effective January 1, 2011 of the State Health Plan as authorized by the Budget and Control Board. This line also includes an allocation of funds related to the health/dental insurance for rate increases and the anticipated growth in the number of retirees.

For preparation of the detailed budget, please note that Line 180 is the total funds available for FY 2010-11 and Line 340 is the total funds available for FY 2011-12.

The Office of State Budget will prepare the documents necessary for the transfer of these allocations from the F30 holding account to your agency's employee benefits program. This transfer will be processed through STARS using a form 30 and is scheduled to be posted by September 28, 2010.

If you have any questions concerning the allocation and transfer process, please contact your budget analyst at 734-2280.

Sincerely,


Harry Bell
Assistant Director

Enclosure

cc: Agency Budget Contact

AAL701NP
09/20/10

AGENCY NAME: DEPT OF HEALTH AND HUMAN SERVICES

AGENCY # J02

ALLOCATION OF STATE FUNDS FOR FY 2011-2012
OFFICE OF STATE BUDGET

	AMOUNT	LINE NO
FY 2010-2011		
TOTAL STATE FUNDS PER 2010-2011 APPROPRIATION ACT	726,496,085	(010)
ALLOCATION FOR PAY PLAN	-----	
EMPLOYEE PAY PLAN AND EMPLOYER CONTRIBUTION		(030)
OTHER ADJUSTMENTS		
HEALTH/DENTAL INSURANCE	194,165	(090)
TRANSFERS BETWEEN AGENCIES		(150)
TOTAL APPROPRIATION BASE FOR FY 2010-2011	726,690,250	{180}
FY 2011-2012		
ADJUSTMENTS		
TRANSFERS BETWEEN AGENCIES	-----	(280)
TOTAL ADJUSTMENTS		{300}
GROSS SUBTOTAL FOR FY 2011-2012 PRIOR TO INCREASES/DECREASES	726,690,250	{320}
SUM OF ADDITIONAL INCREASES AND DECREASES	-----	(330)
NET ALLOCATIONS FOR FY 2011-2012	726,690,250	{340}