



**MULTNOMAH COUNTY
AGENDA PLACEMENT REQUEST
BUDGET MODIFICATION**

(revised 03/25/11)

Board Clerk Use Only	
Meeting Date:	4/19/12
Agenda Item #:	R.15
Est. Start Time:	11:25 am
Date Submitted:	4/10/12

BUDGET MODIFICATION: DCM-09

Agenda Title: BUDGET MODIFICATION DCM-09 Increasing an Office Assistant Senior by .50 FTE in Worker’s Compensation program.

Note: For all other submissions (i.e. Notices of Intent, Ordinances, Resolutions, Orders or Proclamations) please use the APR short form.

Requested Meeting Date:	4/19/12	Amount of Time Needed:	5 Minutes
Department:	County Management	Division:	Finance & Risk
Contact(s):	Julie Neburka		
Phone:	988-3312	Ext.	27351
		I/O Address:	503/4
Presenter Name(s) & Title(s):	Mark Campbell, Chief Financial Officer		

General Information

1. What action are you requesting from the Board?

The department is requesting board approval of budget modification DCM-09 increasing an Office Assistant Senior by .50 FTE (1.00 annualized) in Worker’s Compensation program.

2. Please provide sufficient background information for the Board and the public to understand this issue. Please note which Program Offer this action affects and how it impacts the results.

This modification increases an existing Office Assistant position by .50 FTE in program offer 72024 (Worker’s Compensation). Staffing changes have occurred in Risk Management over the past year. The staff has had to absorb workload due to the elimination of the Risk Manager position. In addition, the Worker’s Compensation program has been without a manager for nearly a year. Some administrative and clerical tasks were not being performed in a timely manner. This position works closely with both the Worker’s Compensation section and the Property/Liability section to expedite processing of claims and serves as a liaison with the County’s third party administrators. Timely and accurate processing of claims is essential to maintaining the County’s low cost of risk.

3. Explain the fiscal impact (current year and ongoing)

Personnel expenses increase by \$7,903 offset with savings in claims paid. On going cost will be absorbed with in the Worker's Compensation budget.

4. Explain any legal and/or policy issues involved.

N/A

5. Explain any citizen and/or other government participation that has or will take place.

N/A

ATTACHMENT A

Budget Modification

If the request is a Budget Modification, please answer all of the following in detail:

- **What revenue is being changed and why? If the revenue is from a federal source, please list the Catalog of Federal Assistance Number (CFDA).**

N/A

- **What budgets are increased/decreased?**

N/A

- **What do the changes accomplish?**

Provides increased office support to the worker's compensation unit.

- **Do any personnel actions result from this budget modification? Explain.**

Yes, an existing Office Assistant Senior position increases by .50 FTE to 1.00

- **If a grant, is 100% of the central and department indirect recovered? If not, please explain why.**

N/A

- **Is the revenue one-time-only in nature? Will the function be ongoing? What plans are in place to identify a sufficient ongoing funding stream?**

N/A

- **If a grant, what period does the grant cover? When the grant expires, what are funding plans? Are there any particular stipulations required by the grant (i.e. cash match, in kind match, reporting requirements etc)?**

N/A

NOTE: If a Budget Modification or a Contingency Request attach a Budget Modification Expense & Revenues Worksheet and/or a Budget Modification Personnel Worksheet.

