

**2023 BUDGET STATEMENT FOR Bergen COUNTY WELFARE AGENCY
SUMMARY OF BUDGET REQUEST**

A. ASSISTANCE ACCOUNT (From Page 3)	II Budget Request 2023	III State and Federal Funds Required	IV County Funds Required
1. Temporary Assistance Needy Families			
a. Expenditures (Net of CSP and EBT)	2,018,765	1,909,047	109,718
b. Revenues	-	-	-
c. Net Funds Required	2,018,765	1,909,047	109,718
2. Assistance to SSI Recipients	5,415,946	4,061,960	1,353,987
3. Total Assistance Required	7,434,711	5,971,007	1,463,705

B. ADMINISTRATION ACCOUNT	I Budget Request State and Federal %	II Allocated & Direct Charges	III State and Federal Funds Required	IV County Funds Required
1. TANF Income Maintenance Section	[1]	952,700	476,350	476,350
2. Food Stamp Program	50%	10,823,749	5,411,875	5,411,875
3. Child Support & Paternity Program	66%	2,132,172	1,407,233	724,938
4. Refugee Programs	100%	-	-	XXX
5. Fraud Investigation Section (Non-TANF)	50%	1,295,005	647,503	647,503
6. Medical Assistance Program	75%	8,756,239	6,567,179	2,189,060
7. Comm. Care Waiver	[1]	1,160,928	1,070,000	90,928
8. Medicaid Out-Stationing	50%	941,409	470,704	470,704
9. Medically Needy Program [2]	100.00%	159,538	159,538	-
10. TANF Case Management	[1]	261,233	261,233	-
11. TANF Employment Services	[1]	-	-	-
12. General Assistance Program	[1]	1,373,510	1,077,619	295,891
13. Home Care Expansion	[1]	-	-	-
14. GA/FS Case Management	[1]	545,130	545,130	-
15. Non-Matchable	XXX	1,370,938	XXX	1,370,938
16. Personal Attendant Care	[1]	-	-	-
17. Staff Development and Training	[3]	514,338	345,972	168,366
18. Sub-Total	XXX	30,286,889	18,440,336	11,846,553
19. Less: Revenues	XXX	3,487,213	XXX	3,487,213
20. Total Net Administration	XXX	26,799,677	18,440,336	8,359,341

C. SERVICES ACCOUNT				
1. Social Services Section	[4]	1,303,031	820,701	482,330
2. Family Planning Section	90%	-	-	-
3. Early Periodic Screening, Diagnosis & Treat	50%	-	-	-
4. Adult Protective Service	[1]	833,783	610,083	223,700
5. Respite Care	[1]	-	-	-
6. Total Services	XXX	2,136,814	1,430,784	706,030

D. TOTAL NET BUDGET REQUEST AND ALLOCATION (Sum of A.3., B.20., and C.6)	36,371,202	25,842,126	10,529,076
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- [1] Enter in Column III the anticipated amount of reimbursement per the program allotment/contract/grant, not to exceed Column II.
- [2] The computation for the Medically Needy Reimbursement rate is listed on Page 3A2.
- [3] If you have a SDT unit, the items to be posted to Columns II and III are listed on Page 2C. Transfer the total listed in column 1, line 6 to Column II, Line 17. For the State/Federal share, transfer the total listed in column 1, line 8 to column III, line 17.
- [4] Line C.1, Column III must be no greater than 75% of the amount in Column II AND no greater than the sum of the Budget Year Title XX Allotment and the DCF HSAC SSBG contract reimbursement ceiling if any. For those CWAs that choose the following option, an FFP representing the SSBG share for the estimated non-cash allowances, (Indirect Cost, Allowance in Lieu of Rent) that will be transferred to the County may be subtracted. Show calculation below:

Title XX Allotment	820,701
DCF HSAC SSBG Contract	-
FFP for non-cash allowances	-
Adjusted Allotment	820,701