

Board of Nursing Home Administrators

1755 Lelia Drive, Suite 305, Jackson, MS 39216

Carrie Rowden

AGENCY

ADDRESS

CHIEF EXECUTIVE OFFICER

	Actual Expenses June 30,2016	Estimated Expenses June 30,2017	Requested For June 30,2018	Requested Over/(Under) Estimated	
				AMOUNT	PERCENT
<b>I. A. PERSONAL SERVICES</b>					
1. Salaries, Wages & Fringe Benefits (Base)	106,235	112,047	112,047		
a. Additional Compensation			15,799		
b. Proposed Vacancy Rate (Dollar Amount)					
c. Per Diem	720	1,440	1,440		
<b>Total Salaries, Wages &amp; Fringe Benefits</b>	<b>106,955</b>	<b>113,487</b>	<b>129,286</b>	<b>15,799</b>	<b>13.92%</b>
2. Travel					
a. Travel & Subsistence (In-State)	2,115	3,700	3,700		
b. Travel & Subsistence (Out-Of-State)		1,300	1,300		
c. Travel & Subsistence (Out-Of-Country)					
<b>Total Travel</b>	<b>2,115</b>	<b>5,000</b>	<b>5,000</b>		
<b>B. CONTRACTUAL SERVICE S (Schedule B)</b>					
a. Tuition, Rewards & Awards					
b. Communications, Transportation & Utilities	1,034	1,900	1,900		
c. Public Information					
d. Rents	20,205	25,400	25,400		
e. Repairs & Service					
f. Fees, Professional & Other Services	29,151	33,486	33,486		
g. Other Contractual Services	2,368	2,900	2,900		
h. Data Processing	6,377	2,650	2,650		
i. Other					
<b>Total Contractual Services</b>	<b>59,135</b>	<b>66,336</b>	<b>66,336</b>		
<b>C. COMMODITIES (Schedule C)</b>					
a. Maintenance & Construction Materials & Supplies					
b. Printing & Office Supplies & Materials	74	300	300		
c. Equipment, Repair Parts, Supplies & Accessories					
d. Professional & Scientific Supplies & Materials					
e. Other Supplies & Materials	2,365	3,400	3,400		
<b>Total Commodities</b>	<b>2,439</b>	<b>3,700</b>	<b>3,700</b>		
<b>D. CAPITAL OUTLAY</b>					
<b>1. Total Other Than Equipment (Schedule D-1)</b>					
<b>2. Equipment (Schedule D-2)</b>					
b. Road Machinery, Farm & Other Working Equipment					
c. Office Machines, Furniture, Fixtures & Equipment					
d. IS Equipment (Data Processing & Telecommunications)		5,000	5,000		
e. Equipment - Lease Purchase					
f. Other Equipment					
<b>Total Equipment (Schedule D-2)</b>		<b>5,000</b>	<b>5,000</b>		
<b>3. Vehicles (Schedule D-3)</b>					
<b>4. Wireless Comm. Devices (Schedule D-4)</b>					
<b>E. SUBSIDIES, LOANS &amp; GRANTS (Schedule E)</b>					
<b>TOTAL EXPENDITURES</b>	<b>170,644</b>	<b>193,523</b>	<b>209,322</b>	<b>15,799</b>	<b>8.16%</b>
<b>II. BUDGET TO BE FUNDED AS FOLLOWS:</b>					
Cash Balance-Unencumbered	211,716	127,218	173,695	46,477	36.53%
General Fund Appropriation (Enter General Fund Lapse Below)					
State Support Special Funds					
Federal Funds _____ Other Special Funds (Specify) _____					
License Fees, Exam Fees, Misc. Fees	86,146	240,000	100,000	(140,000)	(58.33%)
Less: Estimated Cash Available Next Fiscal Period	(127,218)	(173,695)	(64,373)	(109,322)	(62.94%)
<b>TOTAL FUNDS (equals Total Expenditures above)</b>	<b>170,644</b>	<b>193,523</b>	<b>209,322</b>	<b>15,799</b>	<b>8.16%</b>
GENERAL FUND LAPSE					
<b>III: PERSONNEL DATA</b>					
Number of Positions Authorized in Appropriation Bill					
a.) Perm Full	2	2	2		
b.) Perm Part					
c.) T-L Full					
d.) T-L Part					
Average Annual Vacancy Rate (Percentage)					
a.) Perm Full					
b.) Perm Part					
c.) T-L Full					
d.) T-L Part					

Approved by: Carrie Rowden, Executive Director

Submitted by: Alice Gorman

Date: 7/26/2016 3:09 PM

Budget Officer: Carrie Rowden / crowden@msnha.ms.gov

Phone Number: 601-362-6914

Title: Fiscal Officer

REQUEST BY FUNDING SOURCE

Name of Agency : Board of Nursing Home Administrators

Specify Funding Sources As Shown Below	FY 2016 Actual Amount	% of Line Item	% of Total Budget	FY 2017 Estimated Amount	% of Line Item	% of Total Budget	FY 2018 Requested Amount	% of Line Item	% of Total Budget
1. General _____ State Support Special (Specify) _____									
2. Budget Contingency Fund									
3. Education Enhancement Fund									
4. Health Care Expendable Fund									
5. Tobacco Control Fund									
6. Capital Expense Fund									
7. Working Cash Stabilization Reserve Fund									
8. Federal _____ Other Special (Specify) _____									
9. License Fees, Exam Fees, Misc. Fees	106,955	100.00		113,487	100.00		129,286	100.00	
10.									
11.									
12.									
<b>Total Salaries</b>	<b>106,955</b>		<b>62.68%</b>	<b>113,487</b>		<b>58.64%</b>	<b>129,286</b>		<b>61.76%</b>
1. General _____ State Support Special (Specify) _____									
2. Budget Contingency Fund									
3. Education Enhancement Fund									
4. Health Care Expendable Fund									
5. Tobacco Control Fund									
6. Capital Expense Fund									
7. Working Cash Stabilization Reserve Fund									
8. Federal _____ Other Special (Specify) _____									
9. License Fees, Exam Fees, Misc. Fees	2,115	100.00		5,000	100.00		5,000	100.00	
10.									
11.									
12.									
<b>Total Travel</b>	<b>2,115</b>		<b>1.24%</b>	<b>5,000</b>		<b>2.58%</b>	<b>5,000</b>		<b>2.39%</b>
1. General _____ State Support Special (Specify) _____									
2. Budget Contingency Fund									
3. Education Enhancement Fund									
4. Health Care Expendable Fund									
5. Tobacco Control Fund									
6. Capital Expense Fund									
7. Working Cash Stabilization Reserve Fund									
8. Federal _____ Other Special (Specify) _____									
9. License Fees, Exam Fees, Misc. Fees	59,135	100.00		66,336	100.00		66,336	100.00	
10.									
11.									
12.									
<b>Total Contractual</b>	<b>59,135</b>		<b>34.65%</b>	<b>66,336</b>		<b>34.28%</b>	<b>66,336</b>		<b>31.69%</b>
1. General _____ State Support Special (Specify) _____									
2. Budget Contingency Fund									
3. Education Enhancement Fund									
4. Health Care Expendable Fund									
5. Tobacco Control Fund									
6. Capital Expense Fund									
7. Working Cash Stabilization Reserve Fund									
8. Federal _____ Other Special (Specify) _____									
9. License Fees, Exam Fees, Misc. Fees	2,439	100.00		3,700	100.00		3,700	100.00	
10.									
11.									
12.									
<b>Total Commodities</b>	<b>2,439</b>		<b>1.43%</b>	<b>3,700</b>		<b>1.91%</b>	<b>3,700</b>		<b>1.77%</b>

REQUEST BY FUNDING SOURCE

Name of Agency : Board of Nursing Home Administrators

Specify Funding Sources As Shown Below	FY 2016 Actual Amount	% of Line Item	% of Total Budget	FY 2017 Estimated Amount	% of Line Item	% of Total Budget	FY 2018 Requested Amount	% of Line Item	% of Total Budget
1. General _____ State Support Special (Specify) _____									
2. Budget Contingency Fund									
3. Education Enhancement Fund									
4. Health Care Expendable Fund									
5. Tobacco Control Fund									
6. Capital Expense Fund									
7. Working Cash Stabilization Reserve Fund									
8. Federal _____ Other Special (Specify) _____									
9. License Fees, Exam Fees, Misc. Fees									
10.									
11.									
12.									
<b>Total Capital Other Than Equipment</b>									
1. General _____ State Support Special (Specify) _____									
2. Budget Contingency Fund									
3. Education Enhancement Fund									
4. Health Care Expendable Fund									
5. Tobacco Control Fund									
6. Capital Expense Fund									
7. Working Cash Stabilization Reserve Fund									
8. Federal _____ Other Special (Specify) _____									
9. License Fees, Exam Fees, Misc. Fees				5,000	100.00		5,000	100.00	
10.									
11.									
12.									
<b>Total Capital Equipment</b>				<b>5,000</b>		<b>2.58%</b>	<b>5,000</b>		<b>2.39%</b>
1. General _____ State Support Special (Specify) _____									
2. Budget Contingency Fund									
3. Education Enhancement Fund									
4. Health Care Expendable Fund									
5. Tobacco Control Fund									
6. Capital Expense Fund									
7. Working Cash Stabilization Reserve Fund									
8. Federal _____ Other Special (Specify) _____									
9. License Fees, Exam Fees, Misc. Fees									
10.									
11.									
12.									
<b>Total Vehicles</b>									
1. General _____ State Support Special (Specify) _____									
2. Budget Contingency Fund									
3. Education Enhancement Fund									
4. Health Care Expendable Fund									
5. Tobacco Control Fund									
6. Capital Expense Fund									
7. Working Cash Stabilization Reserve Fund									
8. Federal _____ Other Special (Specify) _____									
9. License Fees, Exam Fees, Misc. Fees									
10.									
11.									
12.									
<b>Total Wireless Communication Devs.</b>									

REQUEST BY FUNDING SOURCE

Name of Agency : Board of Nursing Home Administrators

Specify Funding Sources As Shown Below	FY 2016 Actual Amount	% of Line Item	% of Total Budget	FY 2017 Estimated Amount	% of Line Item	% of Total Budget	FY 2018 Requested Amount	% of Line Item	% of Total Budget
1. General _____ State Support Special (Specify) _____									
2. Budget Contingency Fund									
3. Education Enhancement Fund									
4. Health Care Expendable Fund									
5. Tobacco Control Fund									
6. Capital Expense Fund									
7. Working Cash Stabilization Reserve Fund									
8. Federal _____ Other Special (Specify) _____									
9. License Fees, Exam Fees, Misc. Fees									
10.									
11.									
12.									
<b>Total Subsidies</b>									
1. General _____ State Support Special (Specify) _____									
2. Budget Contingency Fund									
3. Education Enhancement Fund									
4. Health Care Expendable Fund									
5. Tobacco Control Fund									
6. Capital Expense Fund									
7. Working Cash Stabilization Reserve Fund									
8. Federal _____ Other Special (Specify) _____									
9. License Fees, Exam Fees, Misc. Fees	170,644	100.00		193,523	100.00		209,322	100.00	
10.									
11.									
12.									
<b>TOTAL</b>	<b>170,644</b>		<b>100.00%</b>	<b>193,523</b>		<b>100.00%</b>	<b>209,322</b>		<b>100.00%</b>

**SPECIAL FUNDS DETAIL**

Board of Nursing Home Administrators (836-00)

Name of Agency

<b>S. STATE SUPPORT SPECIAL FUNDS</b>		(1) <b>Actual Revenues</b> <b>FY 2016</b>	(2) <b>Estimated Revenues</b> <b>FY 2017</b>	(3) <b>Requested Revenues</b> <b>FY 2018</b>
<b>Source (Fund Number)</b>	<b>Detailed Description of Source</b>			
	Cash Balance-Unencumbered			
Budget Contingency Fund	BCF - Budget Contingency Fund			
Education Enhancement Fund	EEF - Education Enhancement Fund			
Health Care Expendable Fund	HCEF - Health Care Expendable Fund			
Tobacco Control Fund	TCF - Tobacco Control Fund			
Capital Expense Fund	CEF - Capital Expense Fund			
Working Cash Stabilization Reserve Fund	WCSRF - Working Cash Stabilization Reserve Fund			
<b>State Support Special Fund TOTAL</b>				
STATE SUPPORT SPECIAL FUND LAPSE				

<b>A. FEDERAL FUNDS *</b>		<b>Percentage Match Requirement</b>		(1) <b>Actual Revenues</b> <b>FY 2016</b>	(2) <b>Estimated Revenues</b> <b>FY 2017</b>	(3) <b>Requested Revenues</b> <b>FY 2018</b>
<b>Source (Fund Number)</b>	<b>Detailed Description of Source</b>	<b>FY 2017</b>	<b>FY 2018</b>			
	Cash Balance-Unencumbered					
<b>Federal Fund TOTAL</b>						

<b>B. OTHER SPECIAL FUNDS (NON-FED'L)</b>		(1) <b>Actual Revenues</b> <b>FY 2016</b>	(2) <b>Estimated Revenues</b> <b>FY 2017</b>	(3) <b>Requested Revenues</b> <b>FY 2018</b>
<b>Source (Fund Number)</b>	<b>Detailed Description of Source</b>			
	Cash Balance-Unencumbered	211,716	127,218	173,695
License Fees, Exam Fees, Misc. Fees (3382100000)	License Fees	86,146	240,000	100,000
<b>Other Special Fund TOTAL</b>		<b>297,862</b>	<b>367,218</b>	<b>273,695</b>

<b>SECTIONS S + A + B TOTAL</b>		<b>297,862</b>	<b>367,218</b>	<b>273,695</b>
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<b>C. TREASURY FUND/BANK ACCOUNTS *</b>			(1) <b>Reconciled Balance</b> <b>as of 6/30/16</b>	(2) <b>Balance</b> <b>as of 6/30/17</b>	(3) <b>Balance</b> <b>as of 6/30/18</b>
<b>Name of Fund/Account</b>	<b>Fund/Account Number</b>	<b>Name of Bank (If Applicable)</b>			
Clearing Account	3382100000	Trustmark National Bank	500	500	500

\* Any non-federal funds that have restricted uses must be identified and narrative of restrictions attached.

**NARRATIVE OF SPECIAL FUNDS DETAIL AND TREASURY  
FUND/BANK ACCOUNTS**

Board of Nursing Home Administrators (836-00)

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Name of Agency

**FEDERAL FUNDS**

**OTHER SPECIAL FUNDS**

The majority of the Board's income is earned from license fees. Renewal of all administrators' licenses is due on June 30 of odd years. Renewal date will be June 30, 2017. These funds will be earmarked for use in FY2017 and FY2018.

**TREASURY FUND / BANK**

The Trustmark checking account is a clearing account by which revenue can be receipted, deposited into the account, and then deposited into the State Treasury.

**CONTINUATION AND EXPANDED TOTAL REQUEST**

Board of Nursing Home Administrators (836-00)

SUMMARY OF ALL PROGRAMS

Name of Agency					Program
	<b>FY 2016 Actual</b>				
	(1) General	(2) State Support Special	(3) Federal	(4) Other Special	(5) Total
Salaries,Wages & Fringe				106,955	106,955
Travel				2,115	2,115
Contractual Services				59,135	59,135
Commodities				2,439	2,439
Other Than Equipment					
Equipment					
Vehicles					
Wireless Communication Devices					
Subsidies, Loans & Grants					
<b>Total</b>				<b>170,644</b>	<b>170,644</b>
No. of Positions (FTE)				2.00	2.00

	<b>FY 2017 Estimated</b>				
	(6) General	(7) State Support Special	(8) Federal	(9) Other Special	(10) Total
Salaries,Wages & Fringe				113,487	113,487
Travel				5,000	5,000
Contractual Services				66,336	66,336
Commodities				3,700	3,700
Other Than Equipment					
Equipment				5,000	5,000
Vehicles					
Wireless Communication Devices					
Subsidies, Loans & Grants					
<b>Total</b>				<b>193,523</b>	<b>193,523</b>
No. of Positions (FTE)				2.00	2.00

	<b>FY 2018 Increase/Decrease for Continuation</b>				
	(11) General	(12) State Support Special	(13) Federal	(14) Other Special	(15) Total
Salaries,Wages & Fringe				15,799	15,799
Travel					
Contractual Services					
Commodities					
Other Than Equipment					
Equipment					
Vehicles					
Wireless Communication Devices					
Subsidies, Loans & Grants					
<b>Total</b>				<b>15,799</b>	<b>15,799</b>
No. of Positions (FTE)					

Note: FY2018 Total Request = FY2017 Estimated + FY2018 Incr(Decr) for Continuation + FY2018 Expansion/Reduction of Existing Activities + FY2018 New Activities.

**CONTINUATION AND EXPANDED TOTAL REQUEST**

Board of Nursing Home Administrators (836-00)

SUMMARY OF ALL PROGRAMS

Name of Agency	Program				
	<b>FY 2018 Expansion/Reduction of Existing Activities</b>				
	<b>(16) General</b>	<b>(17) State Support Special</b>	<b>(18) Federal</b>	<b>(19) Other Special</b>	<b>(20) Total</b>
Salaries,Wages & Fringe					
Travel					
Contractual Services					
Commodities					
Other Than Equipment					
Equipment					
Vehicles					
Wireless Communication Devices					
Subsidies, Loans & Grants					
<b>Total</b>					
No. of Positions (FTE)					

	<b>FY 2018 New Activities (*)</b>				
	<b>(21) General</b>	<b>(22) State Support Special</b>	<b>(23) Federal</b>	<b>(24) Other Special</b>	<b>(25) Total</b>
Salaries,Wages & Fringe					
Travel					
Contractual Services					
Commodities					
Other Than Equipment					
Equipment					
Vehicles					
Wireless Communication Devices					
Subsidies, Loans & Grants					
<b>Total</b>					
No. of Positions (FTE)					

	<b>FY 2018 Total Request</b>				
	<b>(26) General</b>	<b>(27) State Support Special</b>	<b>(28) Federal</b>	<b>(29) Other Special</b>	<b>(30) Total</b>
Salaries,Wages & Fringe				129,286	129,286
Travel				5,000	5,000
Contractual Services				66,336	66,336
Commodities				3,700	3,700
Other Than Equipment					
Equipment				5,000	5,000
Vehicles					
Wireless Communication Devices					
Subsidies, Loans & Grants					
<b>Total</b>				<b>209,322</b>	<b>209,322</b>
No. of Positions (FTE)				2.00	2.00

Note: FY2018 Total Request = FY2017 Estimated + FY2018 Incr(Decr) for Continuation + FY2018 Expansion/Reduction of Existing Activities + FY2018 New Activities.

**SUMMARY OF PROGRAMS  
FORM MBR-1-03sum**

Board of Nursing Home Administrators (836-00)

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Name of Agency

FUNDING REQUESTED FISCAL YEAR 2018

	PROGRAM	GENERAL	ST. SUPP. SPECIAL	FEDERAL	OTHER SPECIAL	TOTAL
1.	Licensure & Regulation				209,322	209,322
	Summary of All Programs				209,322	209,322

CONTINUATION AND EXPANDED REQUEST

Program 1 of 1

Board of Nursing Home Administrators (836-00)

Licensure & Regulation

Name of Agency	FY 2016 Actual				
	(1) General	(2) State Support Special	(3) Federal	(4) Other Special	(5) Total
Salaries,Wages & Fringe				106,955	106,955
Travel				2,115	2,115
Contractual Services				59,135	59,135
Commodities				2,439	2,439
Other Than Equipment					
Equipment					
Vehicles					
Wireless Communication Devices					
Subsidies, Loans & Grants					
<b>Total</b>				<b>170,644</b>	<b>170,644</b>
No. of Positions (FTE)				2.00	2.00

	FY 2017 Estimated				
	(6) General	(7) State Support Special	(8) Federal	(9) Other Special	(10) Total
Salaries,Wages & Fringe				113,487	113,487
Travel				5,000	5,000
Contractual Services				66,336	66,336
Commodities				3,700	3,700
Other Than Equipment					
Equipment				5,000	5,000
Vehicles					
Wireless Communication Devices					
Subsidies, Loans & Grants					
<b>Total</b>				<b>193,523</b>	<b>193,523</b>
No. of Positions (FTE)				2.00	2.00

	FY 2018 Increase/Decrease for Continuation				
	(11) General	(12) State Support Special	(13) Federal	(14) Other Special	(15) Total
Salaries,Wages & Fringe				15,799	15,799
Travel					
Contractual Services					
Commodities					
Other Than Equipment					
Equipment					
Vehicles					
Wireless Communication Devices					
Subsidies, Loans & Grants					
<b>Total</b>				<b>15,799</b>	<b>15,799</b>
No. of Positions (FTE)					

Note: FY2018 Total Request = FY2017 Estimated + FY2018 Incr(Decr) for Continuation + FY2018 Expansion/Reduction of Existing Activities + FY2018 New Activities.

**CONTINUATION AND EXPANDED REQUEST**

Board of Nursing Home Administrators (836-00)

Licensure & Regulation

Name of Agency	FY 2018 Expansion/Reduction of Existing Activities				
	(16) General	(17) State Support Special	(18) Federal	(19) Other Special	(20) Total
Salaries,Wages & Fringe					
Travel					
Contractual Services					
Commodities					
Other Than Equipment					
Equipment					
Vehicles					
Wireless Communication Devices					
Subsidies, Loans & Grants					
<b>Total</b>					
No. of Positions (FTE)					

	FY 2018 New Activities (*)				
	(21) General	(22) State Support Special	(23) Federal	(24) Other Special	(25) Total
Salaries,Wages & Fringe					
Travel					
Contractual Services					
Commodities					
Other Than Equipment					
Equipment					
Vehicles					
Wireless Communication Devices					
Subsidies, Loans & Grants					
<b>Total</b>					
No. of Positions (FTE)					

	FY 2018 Total Request				
	(26) General	(27) State Support Special	(28) Federal	(29) Other Special	(30) Total
Salaries,Wages & Fringe				129,286	129,286
Travel				5,000	5,000
Contractual Services				66,336	66,336
Commodities				3,700	3,700
Other Than Equipment					
Equipment				5,000	5,000
Vehicles					
Wireless Communication Devices					
Subsidies, Loans & Grants					
<b>Total</b>				<b>209,322</b>	<b>209,322</b>
No. of Positions (FTE)				2.00	2.00

Note: FY2018 Total Request = FY2017 Estimated + FY2018 Incr(Decr) for Continuation + FY2018 Expansion/Reduction of Existing Activities + FY2018 New Activities.

**PROGRAM DECISION UNITS**

Board of Nursing Home Administrators

1 - Licensure & Regulation

Name of Agency							Program Name
	A	B	C	D	E	F	
<b>EXPENDITURES</b>	FY 2017 Appropriated	Escalations By DFA	Non-Recurring Items	SPB recommended	Total Funding Change	FY 2018 Total Request	
<b>SALARIES</b>	113,487			15,799	15,799	129,286	
GENERAL							
ST. SUP. SPECIAL							
FEDERAL							
OTHER	113,487			15,799	15,799	129,286	
<b>TRAVEL</b>	5,000					5,000	
GENERAL							
ST. SUP. SPECIAL							
FEDERAL							
OTHER	5,000					5,000	
<b>CONTRACTUAL</b>	66,336					66,336	
GENERAL							
ST. SUP. SPECIAL							
FEDERAL							
OTHER	66,336					66,336	
<b>COMMODITIES</b>	3,700					3,700	
GENERAL							
ST. SUP. SPECIAL							
FEDERAL							
OTHER	3,700					3,700	
<b>CAPTITAL-OTE</b>							
GENERAL							
ST. SUP. SPECIAL							
FEDERAL							
OTHER							
<b>EQUIPMENT</b>	5,000					5,000	
GENERAL							
ST. SUP. SPECIAL							
FEDERAL							
OTHER	5,000					5,000	
<b>VEHICLES</b>							
GENERAL							
ST. SUP. SPECIAL							
FEDERAL							
OTHER							
<b>WIRELESS DEV</b>							
GENERAL							
ST. SUP. SPECIAL							
FEDERAL							
OTHER							
<b>SUBSIDIES</b>							
GENERAL							
ST. SUP. SPECIAL							
FEDERAL							
OTHER							
<b>TOTAL</b>	193,523			15,799	15,799	209,322	

**FUNDING**

GENERAL FUNDS							
ST. SUP. SPCL FUNDS							
FEDERAL FUNDS							
OTHER SP. FUNDS	193,523			15,799	15,799	209,322	
<b>TOTAL</b>	193,523			15,799	15,799	209,322	

**POSITIONS**

GENERAL FTE							
ST. SUP. SPCL. FTE							
FEDERAL FTE							
OTHER SP. FTE	2.00					2.00	
<b>TOTAL</b>	2.00					2.00	

**PRIORITY LEVEL :**

				1			
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**PROGRAM NARRATIVE**

Program Data Collected in Accordance with the Mississippi Performance Budget and Strategic Planning Act of 1994  
(To Accompany Form MBR-1-03)

Board of Nursing Home Administrators

1 - Licensure & Regulation

Name of Agency

Program Name

**I. Program Description:**

This program is designed to provide standards, techniques, materials, educational training, and examinations that will assist qualified individuals to prepare for careers as nursing home administrators. This program also involves issuing licenses to qualified individuals and establishing and carrying-out procedures to ensure that licensed individuals are conducted to increase the proficiency of those who care for Mississippi residents in long-term care facilities.

**II. Program Objective:**

1. Develop and impose standards for licensure
2. Devise and implement educational programs and seminars to assist individuals in preparing for careers in nursing home administration
3. Examine applicants for entry level competency prior to licensing
4. Establish procedures to ensure compliance with standards, laws, and rules
5. Regulate and enforce state laws and rules
6. Conduct on-going studies to provide effective programs for conducting competency evaluation
7. Conduct complaint investigations as appropriate

**III. Current program activities as supported by the funding in Columns 6-15 (FY 2017 & FY 2018 Increase/Decrease for continuations) of MBR-1-03 and designated Budget Unit Decisions columns of MBR-1-03-A:**

**(D) SPB recommended salary changes for staff:**

SPB recommended salary changes for staff

**PROGRAM PERFORMANCE INDICATORS AND MEASURES**

Program Data Collected in Accordance with the Mississippi Performance Budget and Strategic Planning Act of 1994

Board of Nursing Home Administrators (836-00)

1 - Licensure & Regulation

Name of Agency

PROGRAM NAME

**PROGRAM OUTPUTS:** (This is the measure of the process necessary to carry on the goals and objectives of this program. This is the volume produced, i.e., how many people served, how many documents generated.)

	FY 2016 APPRO	FY 2016 ACTUAL	FY 2017 ESTIMATED	FY 2018 PROJECTED
1 Number of complaint investigations conducted	5.00	3.00	5.00	7.00
2 Number of new licenses issued	27.00	30.00	35.00	37.00
3 Applications for license processed	38.00	32.00	38.00	45.00
4 Number of examinations administered	43.00	31.00	36.00	41.00
5 Number of continuing education programs reviewed	47.00	39.00	45.00	48.00
6 Number of Administrators certified as Preceptors	65.00	60.00	65.00	70.00
7 Number of licenses renewed	0.00	0.00	415.00	0.00
8 Number of continuing education records maintained for each licensed administrator	460.00	432.00	460.00	465.00

**PROGRAM EFFICIENCIES:** (This is the measure of the cost, unit cost or productivity associated with a given outcome or output. This measure indicates linkage between services and funding, i.e., cost per investigation, cost per student or number of days to complete investigation.)

	FY 2016 APPRO	FY 2016 ACTUAL	FY 2017 ESTIMATED	FY 2018 PROJECTED
1 Cost to administer one examination	150.00	150.00	150.00	150.00
2 Cost to review one continuing education program	175.00	175.00	175.00	200.00
3 Cost to process one application for license	225.00	225.00	225.00	225.00
4 Cost to maintain continuing education records for one licensed administrator	380.00	375.00	380.00	385.00
5 Cost to certify one preceptor	400.00	400.00	425.00	425.00
6 Cost to issue one license	500.00	500.00	500.00	500.00
7 Cost to investigate an average complaint	3,750.00	3,500.00	3,750.00	4,000.00

**PROGRAM OUTCOMES:** (This is the measure of the quality or effectiveness of the services provided by this program. This measure provides an assessment of the actual impact or public benefit of your agency's actions. This is the results produced, i.e., increased customer satisfaction by x% within a 12-month period, reduce the number of traffic fatalities due to drunk drivers within a 12-month period.)

	FY 2016 APPRO	FY 2016 ACTUAL	FY 2017 ESTIMATED	FY 2018 PROJECTED
1 Number of new licenses issued	27.00	30.00	35.00	37.00
2 Number of records maintained of training details for each intern	30.00	32.00	38.00	45.00
3 Evaluated backgrounds of each applicant	38.00	32.00	38.00	45.00
4 Number of examinations administered	43.00	31.00	36.00	41.00
5 Number of Continuing education programs reviewed	47.00	39.00	45.00	48.00
6 Number of licenses processed during renewal	0.00	0.00	460.00	0.00

**MS STATE BOARD OF NURSING HOME ADMINISTRATORS MEMBERS**

Board of Nursing Home Administrators (836-00)

Name of Agency

**A. Explain Rate and manner in which board members are reimbursed:**

\$40.00 per diem is paid per day of service and mileage is paid based on the number of miles from the member's office/home to the meeting location.

**B. Estimated number of meetings FY 2017:**

For budget purposes the Board plans for six meetings. Regular meetings are held quarterly and over the past several years it has been necessary to hold additional meetings to deal with discipline matters.

<b>C. Names of Members</b>	<b>City, Town, Residence</b>	<b>Appointed By</b>	<b>Date of Appointment</b>	<b>Length of Term</b>
1. Dr. Kimberly Ratcliff	Benton, MS	Bryant	6- 30- 2012	4 years
2. Thomas E. Hill	Grenada, MS	Bryant	6- 25- 2014	4 years
3. Dr. Daniel Edney	Vicksburg, MS	Bryant	6- 6- 2014	4 years
4. Steven Delaney	Brandon, MS	Bryant	6- 5- 2013	4 years
5. Brian Cain	Wiggins, MS	Bryant	6- 5- 2013	4 years
6. Dr. Lisa Byrd	Madison, MS	Bryant	6- 30- 2012	4 years

Identify Statutory Authority (Code Section or Executive Order Number)\*

*Mississippi Code of 1972 Section 73-17-1 through 73-17-17*

\*If Executive Order, please attach copy.

**SCHEDULE B  
CONTRACTUAL SERVICES**

Board of Nursing Home Administrators (836-00)

Name of Agency

MINOR OBJECT OF EXPENDITURE	(1) Actual Expenses FY Ending June 30, 2016	(2) Estimated Expenses FY Ending June 30, 2017	(3) Requested for FY Ending June 30, 2018
<b>A. Tuition, Rewards &amp; Awards (61050xxx-61080xxx)</b>			
61050000 Tuition			
61060000 Employee Training			
61070000 Travel Related Reg			
61080000 Rewards & Awards			
<b>Total</b>			
<b>B. Transportation &amp; Utilities (61100xxx-61200xxx)</b>			
61100000 Transport of Goods			
61110000 Postal Services	1,034	1,900	1,900
61200000 Utilities			
<b>Total</b>	<b>1,034</b>	<b>1,900</b>	<b>1,900</b>
<b>C. Public Information (61300xxx-61310xxx)</b>			
61300000 Advert & Public Info			
61310000 Promotional Expenses			
<b>Total</b>			
<b>D. Rents (61400xxx-61490xxx)</b>			
61400000 Building and Floor Space Rental	16,455	20,000	20,000
61420000 Equipment Rental	2,550	3,000	3,000
61430000 Capitol Facilities Rental			
61450000 Conference Rooms, Exhibits and Display Rentals	1,200	2,400	2,400
61490000 Other Rentals			
<b>Total</b>	<b>20,205</b>	<b>25,400</b>	<b>25,400</b>
<b>E. Repairs &amp; Service (61500xxx)</b>			
61500000 Repair and Maintenance Services			
<b>Total</b>			
<b>F. Fees, Professional &amp; Other Services (61600xxx-61699xxx)</b>			
61600000 Inter-Agency Fees	6,944		
61610000-61625000 Contract Worker Expenses	2,657	8,065	8,065
61660000 Accounting and Financial Services	13,810	18,000	18,000
61670000 Legal and Related Services			
61680000 Medical Services			
61690000 Fees and Services	5,740	7,421	7,421
61695000 Prof Fees-Trav-1099			

**SCHEDULE B  
CONTRACTUAL SERVICES**

Board of Nursing Home Administrators (836-00)

Name of Agency

MINOR OBJECT OF EXPENDITURE	(1) Actual Expenses FY Ending June 30, 2016	(2) Estimated Expenses FY Ending June 30, 2017	(3) Requested for FY Ending June 30, 2018
61696000 Prof Fee-Trv-No 1099			
<b>Total</b>	<b>29,151</b>	<b>33,486</b>	<b>33,486</b>
<b>G. Other Contractual Services (61700xxx-61790xxx, 61900xxx)</b>			
61700000 Insurance Fees and Services	563	600	600
61705000 Banking and Credit Card Fees	305	350	350
61710000 Membership Dues	1,500	1,950	1,950
61715000 Trade Subscriptions			
61730000 Ldry,Dry Clean,Towel			
61735000 Salvage,Demo,Removal			
61900000 Procurement Card - Contractual Purchases			
<b>Total</b>	<b>2,368</b>	<b>2,900</b>	<b>2,900</b>
<b>H. Information Technology (61800xxx-61890xxx)</b>			
61800000 Basic Telephone Monthly - Outside Vendor			
61803000 Long Distance Charges - Outside Vendor			
61806000 Data Line and Network Charges - Outside Vendor	1,766	1,800	1,800
61818000 Cellular Usage Time - Outside Vendor	102	150	150
61821000 Wireless Data Transmission-not cell-Outside Vendor			
61824000 Satellite Voice Transmission Services - Out Vendor			
61830000 IT Professional Fees - Outside Vendor	53	100	100
61833000 IS Training and Education - Outside Vendor			
61836000 Outsourced IT Solutions - Outside Vendor			
61839000 Software Acq, Installation & Maint - Out Vendor	600	600	600
61842000 Rental of IT Equipment - Outside Vendor			
61845000 Off-site Storage of IS Software & Data -Out Vendor			
61848000 Maintenance & Repair of IT Equipment-Outside Vend			
61850000 Payments to ITS	3,856		
<b>Total</b>	<b>6,377</b>	<b>2,650</b>	<b>2,650</b>
<b>I. Other (61910xxx-61990xxx)</b>			
61910000 Petty Cash Expense - Contractual			
61920000 Travel Related Contractual Reimbursements			
61950000 Prior Year Exp - Contract Worker Travel			
61955000 Prior Year Exp - Contract Worker Matching Amts			
61960000 Prior Year Expense - Contractual			

**SCHEDULE B  
CONTRACTUAL SERVICES**

Board of Nursing Home Administrators (836-00)

Name of Agency \_\_\_\_\_

MINOR OBJECT OF EXPENDITURE	(1) Actual Expenses FY Ending June 30, 2016	(2) Estimated Expenses FY Ending June 30, 2017	(3) Requested for FY Ending June 30, 2018
61965000 Prior Year Expense - Contractual - 1099			
<b>Total</b>			
<b>Grand Total</b> <i>(Enter on Line 1-B of Form MBR-1)</i>	<b>59,135</b>	<b>66,336</b>	<b>66,336</b>
<b>Funding Summary:</b>			
General Funds			
State Support Special Funds			
Federal Funds			
Other Special Funds	59,135	66,336	66,336
<b>Total Funds</b>	<b>59,135</b>	<b>66,336</b>	<b>66,336</b>

**SCHEDULE C  
COMMODITIES**

Board of Nursing Home Administrators (836-00)

Name of Agency

MINOR OBJECT OF EXPENDITURE	(1) Actual Expenses FY Ending June 30, 2016	(2) Estimated Expenses FY Ending June 30, 2017	(3) Requested for FY Ending June 30, 2018
<b>A. Maintenance &amp; Constr. Materials &amp; Supplies (62000xxx, 62015xxx)</b>			
62015000 Building and Construction Materials and Supplies			
<b>Total</b>			
<b>B. Printing &amp; Office Supplies &amp; Materials (62010xxx, 62085xxx, 62100xxx, 62125xxx, 62400xxx)</b>			
62010000 Books, Periodicals, Maps & Instructional Materials			
62085000 Office Supplies and Materials	74	300	300
62100000 Printing Costs and Supplies			
62400000 Furniture and Equipment			
<b>Total</b>	<b>74</b>	<b>300</b>	<b>300</b>
<b>C. Equipment Repair Parts, Supplies &amp; Acces. (62050xxx, 62072xxx, 62110xxx, 62115xxx, 62120xxx, 62130xxx)</b>			
62050000 Fuel			
62055000 Fuel Card Repairs and Maintenance			
62072000 Shop Supplies			
62110000 Parts & Access - Heating, Cooling, Plumbing, Elect			
62115000 Parts & Access - Office, IT, and Other Equip			
62120000 Parts & Access - Vehicles, Buses, Planes, etc.			
62130000 Tires and Tubes			
<b>Total</b>			
<b>D. Professional &amp; Sci. Supplies and Materials (62025xxx, 62030xxx, 62070xxx, 62095xxx, 62105xxx)</b>			
62025000 Educational Supplies			
62070000 Lab and Medical Supplies			
62095000 Photographic Supplies and Processing			
62105000 Promotional Materials			
<b>Total</b>			
<b>E. Other Supplies &amp; Materials (62005xxx, 62020xxx, 62035xxx, 62040xxx, 62045xxx, 62060xxx, 62065xxx, 62075xxx-62080xxx, 62090xxx, 62135xxx, 62140xxx, 62405xxx, 62415xxx, 62500xxx-62999xxx)</b>			
62020000 Decals and Signs - Other Than Construction			
62040000 Food for Business Meetings		300	300
62045000 Food for Persons			
62060000 Janitorial and Cleaning Supplies			
62078000 Other Miscellaneous Supplies			
62135000 Uniforms and Apparel			
62405000 Vehicle Equipment			
62415000 Computers and Computer Equipment			
62900000 Procurement Card - Commodity Purchases	2,295	3,000	3,000

**SCHEDULE C  
COMMODITIES**

Board of Nursing Home Administrators (836-00)

Name of Agency

MINOR OBJECT OF EXPENDITURE	(1) Actual Expenses FY Ending June 30, 2016	(2) Estimated Expenses FY Ending June 30, 2017	(3) Requested for FY Ending June 30, 2018
62910000 Petty Cash Expenses - Commodities			
62920000 Reimbursable Travel - Commodities	70	100	100
62930000 Intergovernmental Commodity Purchases			
62960000 Prior Year Expense - Commodities			
62999000 Commodities - No PO Required			
<b>Total</b>	<b>2,365</b>	<b>3,400</b>	<b>3,400</b>
<b>Grand Total</b> <i>(Enter on Line 1-C of Form MBR-1)</i>	<b>2,439</b>	<b>3,700</b>	<b>3,700</b>
<b>Funding Summary:</b>			
General Funds			
State Support Special Funds			
Federal Funds			
Other Special Funds	2,439	3,700	3,700
<b>Total Funds</b>	<b>2,439</b>	<b>3,700</b>	<b>3,700</b>

**SCHEDULE D-2  
CAPITAL OUTLAY EQUIPMENT**

Board of Nursing Home Administrators (836-00)

Name of Agency

EQUIPMENT BY ITEM	Act. FY Ending June 30, 2016		Est. FY Ending June 30, 2017		Req. FY Ending June 30, 2018	
	No. of Units	Total Cost	No. of Units	Total Cost	No. of Units	Total Cost

<b>D. IS Equipment (DP &amp; Telecommunications) (63200100)</b>						
DESKTOP COMPUTERS			2	5,000	5	5,000
<b>Total</b>				<b>5,000</b>		<b>5,000</b>

<b>Grand Total</b> <i>(Enter on Line 1-D-2 of Form MBR-1)</i>				<b>5,000</b>		<b>5,000</b>
--	--	--	--	--------------	--	--------------

<b>Funding Summary:</b>				
General Funds				
State Support Special Funds				
Federal Funds				
Other Special Funds			5,000	5,000
<b>Total Funds</b>			<b>5,000</b>	<b>5,000</b>

The Mississippi State Board of Nursing Home Administrators is the licensure and regulatory board for Nursing Home Administrators. There are currently 436 licensed administrators in the State of Mississippi. The Board is responsible for training all future nursing home administrators. Training programs must first be approved by the Board. Training occurs for a six-month period by preceptors who also must be approved by the Board and attend training sessions conducted by Board employees. Currently there are 121 certified preceptors and 31 Administrators-in-Training (AIT).

Once the training is complete and a license is issued, the administrators must obtain continuing education credits to retain their licenses. The tracking of these credits and the monitoring functions associated with licensing and regulation are also the responsibility of the Board's staff.

The tasks associated with the licensing and regulation functions of the agency are performed by two full-time positions.

The greatest need of the agency is the retention of qualified and experienced staff. The position of the Executive Director of the agency is under-paid for the functions performed. The Board has repeatedly requested that the salary of this position be paid commensurate with the responsibilities. The salary of this position is still well below that of other Mississippi state agency Executive Directors. We are requesting the salary of this position be \$54,467 which is supported by salary surveys.

According to numerous salary surveys the Board has conducted, the average minimum compensation for Nursing Home Administrative Directors in the surrounding southern states is \$75,921. Even with this requested realignment the new salary would still be 28% lower than the average of the other surrounding states.

The average starting salary for other small regulatory boards in Mississippi is approximately \$60,567, which is 21.8% higher than the current salary of the Executive Director. We have provided the starting and ending salaries for Mississippi boards and commissions with less than 15 employees to further demonstrate the disparity of the salaries of agencies of a similar size performing similar functions. Please note that our position is at the bottom of the list and its ending salary is less than some of the other agencies' starting salaries.

Arts Commission	89,591	116,469
Real Estate Commission	84,778	106,311
Motor Vehicle Commission	73,000	94,900
Professional Engineers & Land Surveyors	62,846	81,700
Architecture & Landscaping	58,263	75,742
Dental Examiners	53,215	69,227
Physical Therapy Board	50,605	65,786
Cosmetology Board	45,828	59,576
Funeral Services	44,817	58,262
Barber Board	42,721	55,538
<b>AVERAGE OF THE ABOVE</b>	<b>60,567</b>	<b>78,351</b>
Nursing Home Administrators	43,177	56,130

The Board voted to request that the salary of its Executive Director be raised to \$54,467 and submitted this information to the State Personnel Board for concurrence. It is our understanding that this is also the SPB's recommended realignment. We are seeking legislative authority to implement this Board action. The recommended realignment with fringe is a \$6,418 increase (salary \$4,732 plus fringe \$1,686) over the FY17 appropriation.

The Board also voted to request an increase in the salary of the License/Registration Agent III, in accordance with State Personnel Board realignment recommendations. The incumbent in this position is basically the deputy to the Executive Director, and handles all aspects of the licensing, registration and, in the absence of the Executive Director, the general operations of the office. This change amounts to \$8,031 (salary \$5,922 plus fringe \$2,109), including fringe.

The Board feels so strongly about retaining and adequately compensating its Executive Director as well as its License/Registration Agent III according to the duties performed, that it is willing to reduce all other budget categories to the levels appropriated in FY17 in order to accomplish this goal. Since the Board generates all its revenues from fees and has the revenue to implement the salary increases (total of \$14,449 for both), we respectfully request that approval be given to implement these 2 personnel actions.

Finally, the Board has added a slight increase to the salary line items in both FY17 and FY18 due to the US Department of Labor's regulation on overtime which will not allow employees earning less than \$47,476 to receive compensatory time for working more than 40 hours a week. Although our employees do not typically earn compensatory time, we have budgeted for 10 hours of overtime per month for the License/Registration Agent III which may occur during licensing renewal. We have doubled that for FY18 since the rule will be in effect for the entire year and not just 7 months as it will be in FY17. This amounts to \$1,350 in FY17 and \$2,700 in FY18.

We have provided a summary of the budget by category below.

### **SALARIES**

With the legislative approval to implement the Board actions to increase the salaries of the Executive Director and the License/Registration Agent III, the total salary line items, including fringe, Board per diems, and funding for the required paid overtime will increase only \$15,799 over the FY2017 amount.

### **TRAVEL, CONTRACTUAL SERVICES, COMMODITIES, EQUIPMENT**

In order to responsibly fund the Board's request to realign the salaries of the agency's 2 staff members, the Travel, Contractual Services, Commodities and Equipment Categories' request remains the same as the FY2017 appropriation.

**FEES, PROFESSIONAL AND OTHER SERVICES**

Board of Nursing Home Administrators (836-00)

Name of Agency

TYPE OF FEE AND NAME OF VENDOR	Retired w/ PERS	(1) Actual Expenses FY Ending June 30, 2016	(2) Estimated Expenses FY Ending June 30, 2017	(3) Requested Expenses FY Ending June 30, 2018	Fund Source
<b>61600000 Inter-Agency Fees</b>					
61600000/Inter-agency Fees-AG <i>Comp. Rate: SET BY AGENCY</i>	N	4,673			SF
61600000/Inter-agency Fees-DFA <i>Comp. Rate: SET BY AGENCY</i>	N	1,962			SF
61600000/Inter-agency Fees-OSA <i>Comp. Rate: SET BY AGENCY</i>	N	35			SF
61600000/Inter-agency Fees-SPB <i>Comp. Rate: SET BY AGENCY</i>	N	274			SF
<b>Total 61600000 Inter-Agency Fees</b>		<b>6,944</b>			
<b>61610000-61625000 Contract Worker Expenses</b>					
61610000/Contract Worker Payroll <i>Comp. Rate: \$15/HOUR</i>	N	2,468	7,500	7,500	SF
61615000/Contract Worker Travel <i>Comp. Rate:</i>					
61625000/Contract Worker - Payroll Fringe <i>Comp. Rate:</i>	N	189	565	565	SF
<b>Total 61610000-61625000 Contract Worker Expenses</b>		<b>2,657</b>	<b>8,065</b>	<b>8,065</b>	
<b>61660000 Accounting and Financial Services</b>					
CORNERSTONE CONSULTING/ACCOUNTING/BUDGETING <i>Comp. Rate: \$700/MONTH + HOURLY FEE</i>	N	8,960	10,500	10,500	SF
GRANTHAM POOLE CPAs/ANNUAL FINANCIAL AUDIT <i>Comp. Rate: SET CONTRACT FEE</i>	N	4,850	7,500	7,500	SF
<b>Total 61660000 Accounting and Financial Services</b>		<b>13,810</b>	<b>18,000</b>	<b>18,000</b>	
<b>61690000 Fees and Services</b>					
DALLAS PRINTING/PRINTING <i>Comp. Rate: QUOTE</i>	N	120	500	500	SF
HANSFORD, LUCH/CERTIFICATE CALIGRAPHY <i>Comp. Rate: \$10/CERTIFICATE</i>	N	370	500	500	SF
HAYGOOD, ELIZABETH/TRAINER/PRESENTER <i>Comp. Rate: QUOTE</i>	N	400	500	500	SF
PROSONITECH/DATABASE SUPPORT <i>Comp. Rate: ANNUAL FEE</i>	N	3,600	3,600	4,000	SF
TOWNSEND, JOSEPH/TRAINER/PRESENTER <i>Comp. Rate: QUOTE</i>	N	1,250	2,321	1,921	SF
<b>Total 61690000 Fees and Services</b>		<b>5,740</b>	<b>7,421</b>	<b>7,421</b>	
<b>GRAND TOTAL</b>		<b>29,151</b>	<b>33,486</b>	<b>33,486</b>	

**PRIORITY OF DECISION UNITS  
FISCAL YEAR 2018**

Board of Nursing Home Administrators (836-00)

Name of Agency

Program	Decision Unit	Object	Amount
<b>Priority # 1</b>			
	Program # 1: Licensure & Regulation		
	SPB recommended salary changes for staff		
		Salaries	15,799
		<b>Totals</b>	<u>15,799</u>
		Other Special Funds	15,799

Mississippi State Board of Nursing Home Administrators

1755 Lelia Drive, Suite 305, Jackson, MS 39216

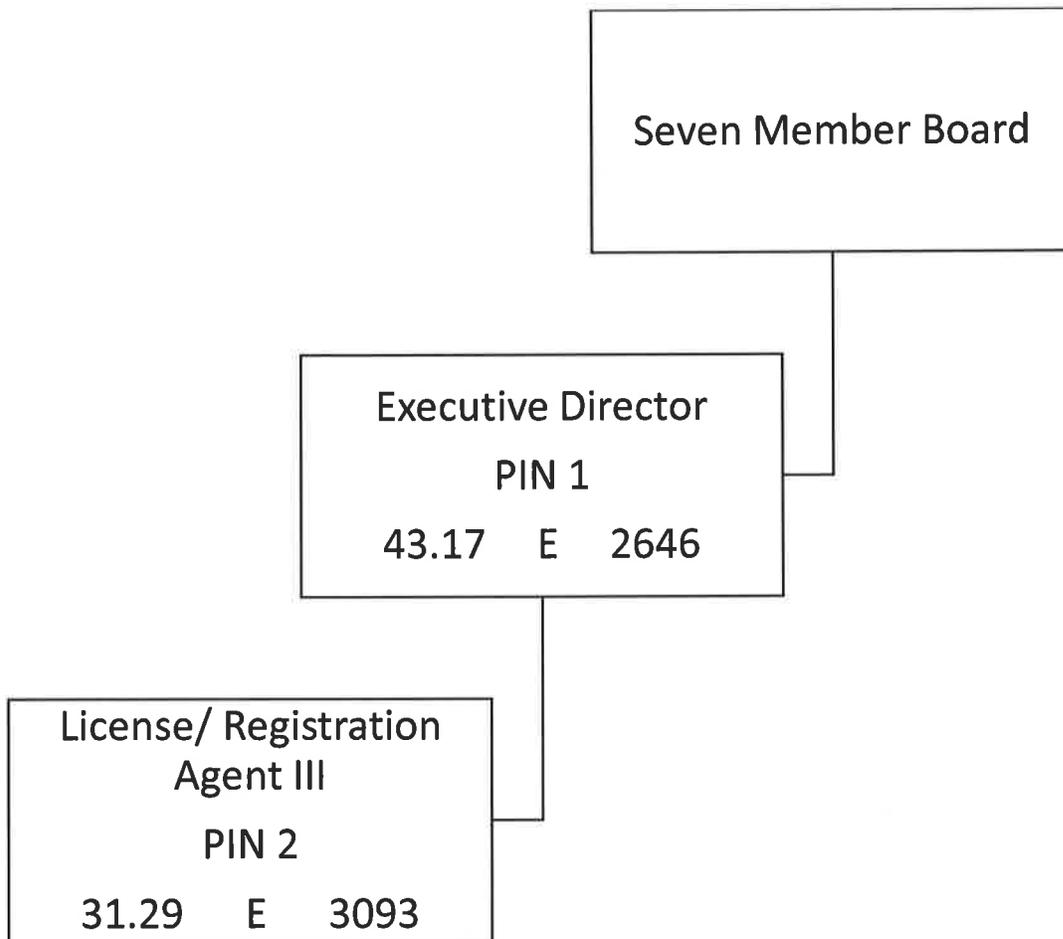
601-362-6914

601-362-6925 fax

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**Organizational Chart**

**Fiscal Year 2017**



*Carrie Rowden*

**Carrie Rowden**

Executive Director

Agency Revenue Source Report - FY16 Data  
 As Required by HB 831, 2015 Legislative Session  
 And SB 2387, 2016 Legislative Session

Agency Name Board of Nursing Home Administrators

Budget Year 2016

State Support Sources  
 General Funds NA

State Support Special Funds  
 Amount Received  
 Education Enhancement Funds NA  
 Health Care Expendable Funds NA  
 Tobacco Control Funds NA  
 Capital Expense Funds NA  
 Budget Contingency Funds NA  
 Working Cash Stabilization Reserve Funds NA

Special Funds  
 Amount Received  
 Special Fund # 3382100000 86,146

*Add Rows for Additional Special Funds*

List all Federal Funds at its most specific level, such as an office or division, not the federal department.

<u>Federal Funds</u>	Amount Received	Action or results promised in order to receive funds
Description of any Maintenance of Effort agreements entered into with any federal agency or subdivision thereof		

*Add Rows for Additional Special Funds*

Revenue from Tax, Fine or Fee Assessed

License Fees	Amount Assessed	See Fee Schedule below
<i>Copy Entire Section to Add New Item</i>	Amount Collected	86146
Authority to Collect		<b>73-17-7 and 73-17-11 (3&amp;4)</b>
Method of Determining Assessment		Set by Board
		<b>The majority of all revenue is received from an online system which deposits the monies directly into our Fund. The remaining revenue is sent to the Board for deposit into a clearing account and then a transfer to the Fund.</b>

Method of Collection	Amt. & Purpose for which Expended	Purpose
Amount	170,644	<b>The funds are used to offset all expenses of the Board.</b>
		<b>NOTE: License fees are collected bi-annually. The odd years generate twice as much revenue as even years. Cash balances in odd years are utilized to offset expenses in even years.</b>

Amount Transferred to General Fund	na
Authority for Transfer to General Fund	
Amount Transferred to Another Entity	na
Authority for Transfer to Other Entity	
Name of Other Entity	
Fiscal Year-Ending Balance	127,218

Mississippi State Board of Nursing Home Administrators  
 1755 Lelia Drive, Ste. 305, Jackson, MS 39216 (601) 362-6914 www.msnha.ms.gov  
 Current Fee Schedule

- APPLICATION FEES:**  
 Administrator-in-Training Application \$225.00  
 Endorsement/Reciprocity Application \$225.00  
 Reinstatement Application \$175.00  
 Temporary Permit Application \$200.00  
 Administer Two Facilities \$200.00
- LICENSE FEES:**  
 Renewal Fee \$500.00  
 Renewal Late Fee \$150.00  
 Temporary Permit Fee \$ 50.00  
 Reinstatement Fee \$500.00  
 Initial License Prorated renewal fee
- CONTINUING EDUCATION FEES:**  
 Sponsor Fees:  
 1 - 6 Hours..... \$175.00  
 For each additional hour or portion thereof over six (6) hours ..... \$ 30.00  
 Each Additional Presentation of same program..... \$100.00  
 Individual Request Fee: \$ 50.00
- ADMINISTRATIVE FEES**  
 Release of information to another state board \$ 50.00  
 (Endorsement Questionnaire)  
 Duplicate Large License \$ 50.00  
 Duplicate Small License \$ 25.00  
 I.D. Card Replacement \$ 25.00  
 Directory of Licensed Administrators \$100.00  
 (paper Directory, CD, or labels)  
 Rules and Regulations Cost of Duplication  
 State Study Packet (Prep for State Test) \$ 50.00  
 Preceptor Notebook Replacement \$100.00  
 Change of Information Research Fee \$ 25.00 (per incident)  
 Returned Check Fee \$ 50.00
- OTHER FEES:**  
 State Test \$150.00  
 Preceptor Certification (Both Days) \$375.00  
 Preceptor Certification (One day only) \$275.00  
 (Fee Schedule Effective 3/1/15)