

**SUBMITTAL TO THE BOARD OF SUPERVISORS  
COUNTY OF RIVERSIDE, STATE OF CALIFORNIA**

246



**SUBMITTAL DATE:**  
09/25/13

**FROM:** District Attorney

**SUBJECT:** Acceptance of the FY 2013-14 Disability and Healthcare Insurance Fraud Program Grant Award and budget adjustment. All Districts [\$360,000]

**RECOMMENDED MOTION:** That the Board of Supervisors:

1. Approve and ratify acceptance of the Disability and Healthcare Insurance Fraud Program Grant Award from the Insurance Commissioner of the State of California Department of Insurance in the amount of \$360,000 for the grant period July 1, 2013 through June 30, 2014.
2. Adopt Resolution 2013-252 authorizing the District Attorney and/or his designee to sign the Grant Award Agreement on behalf of the Board.
3. Approve and direct the Auditor-Controller to make the budget adjustments as specified on the attached Schedule A.

**BACKGROUND:**

Summary

The Insurance Commissioner of the State of California has awarded funds under the Disability and Healthcare Insurance Fraud Grant Program. This is a new grant program for the District Attorney's Office. The grant award program period is July 1, 2013 through June 30, 2014.

(Background cont. on page 2)

Jeffrey A. Van Wagenen Jr., for  
Paul E. Zellerbach,  
District Attorney

FINANCIAL DATA	Current Fiscal Year:	Next Fiscal Year:	Total Cost:	Ongoing Cost:	POLICY/CONSENT (per Exec. Office)
<b>COST</b>	\$ 360,000	\$ 0	\$ 360,000	\$ 0	Consent <input type="checkbox"/> Policy <input checked="" type="checkbox"/>
<b>NET COUNTY COST</b>	\$ 0	\$ 0	\$ 0	\$ 0	

<b>SOURCE OF FUNDS:</b> State of California	<b>Budget Adjustment:</b> Yes
	<b>For Fiscal Year:</b> 13/14

**C.E.O. RECOMMENDATION:**

APPROVE

BY:   
Karen L. Johnson

**County Executive Office Signature**

**MINUTES OF THE BOARD OF SUPERVISORS**

FISCAL PROCEDURES APPROVED  
PAUL ANGULO, CPA, AUDITOR-CONTROLLER  
BY:   
TANYA S. HARRIS, CPA 10/7/13

Departmental Concurrence

DATE

FORM APPROVED COUNTY COUNCIL  
BY:   
NEAL R. KIPNIS

- A-30
- 4/5 Vote
- Positions Added
- Change Order

Prev. Agn. Ref.: N/A | District: ALL | Agenda Number:

3-13

**SUBMITTAL TO THE BOARD OF SUPERVISORS, COUNTY OF RIVERSIDE, STATE OF CALIFORNIA  
FORM 11: Acceptance of the FY 2013-14 Disability and Healthcare Insurance Fraud Program Grant Award  
and budget adjustment.**

**DATE:** 09/25/13

**PAGE:** Page 2 of 3

**BACKGROUND:**

**Summary**

The grant, awarded under the provision of Section 1872.85 of the California Insurance Code, is to be used by the District Attorney solely for the purpose of enhanced investigation and prosecution of disability and healthcare insurance fraud cases. This grant provides funds for a Forensic Accountant which is critical in fighting this type of fraud.

The attached grant award and resolution have been reviewed and approved as to form by County Counsel.

**Impact on Citizens and Businesses**

All costs under this program will be recovered through grant funding.

**SUBMITTAL TO THE BOARD OF SUPERVISORS, COUNTY OF RIVERSIDE, STATE OF CALIFORNIA**  
**FORM 11:** Acceptance of the FY 2013-14 Disability and Healthcare Insurance Fraud Program Grant Award and budget adjustment.

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**Schedule A**

**Increase Appropriations:**

10000-2200100000-510040	Regular Salaries	\$182,955
10000-2200100000-518100	Budgeted Benefits	70,713
10000-2200100000-521100	Expert Witness Fees	<u>106,332</u>
	Total	\$360,000

**Increase Estimated Revenues:**

10000-2200100000-755650	CA-Disability Healthcare Fraud	\$360,000
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INSURANCE COMMISSIONER  
OF THE STATE OF CALIFORNIA

**GRANT AWARD AGREEMENT**

Fiscal Year 2013-14

**Disability and Healthcare Insurance Fraud Program**

The Insurance Commissioner of the State of California hereby makes award of funds to **Riverside County**, Office of the District Attorney, in the amount and for the purpose and duration set forth in this grant award.

This grant award consists of this agreement and the application for the grant which is made a part hereof. By acceptance of the grant award, the grant award recipient agrees to administer the grant project in accordance with all applicable statutes, regulations and Request-for-Applications (RFA).

**Duration of Grant:** The grant award is for the program period, **July 1, 2013** through **June 30, 2014**.

**Purpose of Grant:** This grant award is made pursuant to the provisions of California Insurance Code Section 1872.85 and shall be used solely for the purposes of enhanced investigation and prosecution of disability and healthcare insurance fraud cases.

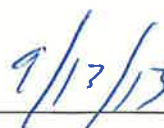
**Amount of Grant:** The grant award agreed to herein is in the amount of **\$360,000**. This amount has been determined by the Insurance Commissioner. However, the actual total award amount for the county is contingent on the collection and the authorization for expenditure pursuant to the Government Code Section 13000 et seq. The grant award shall be distributed pursuant to Section 1872.85 of the Insurance Code.

FORM APPROVED BY COUNTY COUNSEL  
BY: Neal R. Kipnis  
DATE: 9/11/13

Official Authorized to Sign for Applicant/Grant Recipient  Name: Paul E. Zellerbach Title: District Attorney Address: 3960 Orange Street Riverside, CA 92501 Date: 8/6/13	<b>DAVE JONES</b> Insurance Commissioner  Name: <b>Rick Plein</b> Title: Deputy Commissioner Date: 9-11-13
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I hereby certify upon my own personal knowledge that budgeted funds are available for the period and purposes of this expenditure.

  
Caleb Horel, Budget Officer

  
Date

2  
3 RESOLUTION NO. 2013-252

4 RESOLUTION OF THE BOARD OF SUPERVISORS OF THE  
5 COUNTY OF RIVERSIDE, STATE OF CALIFORNIA, REGARDING  
6 THE DISABILITY AND HEALTHCARE INSURANCE FRAUD PROGRAM

7  
8 WHEREAS, the County of Riverside desires to undertake a certain program designated the  
9 Diability and Healthcare Insurance Fraud Program to be funded by funds made available through and  
10 administered by the California Department of Insurance (hereinafter referred to as "DOI"); now therefore,

11 BE IT RESOLVED AND ORDERED by the Board of Supervisors of the County of Riverside, State  
12 of California, in regular session assembled on \_\_\_\_\_, 2013, that District Attorney of  
13 the County of Riverside, State of California and/or his designee is authorized, on its behalf, to submit and  
14 to sign the Grant Award Agreement as well as related contracts, amendments, or extensions with DOI  
15 that do not significantly change the grant or contract. This resolution shall be in effect for a three-year  
16 period beginning July 1, 2013 and ending June 30, 2016.

17 IT IS AGREED that any liability arising out of the performance of this contract, including civil court  
18 actions for damages, shall be the responsibility of the grant recipient and the authorizing agency. The  
19 State of California and DOI disclaim responsibility of any such liability.

20 BE IT FURTHER RESOLVED that grant funds received hereunder shall not be used to supplant  
21 local expenditures controlled by this body.

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FORM APPROVED COUNTY COUNSEL  
BY: [Signature] 9/30/13  
DATE