

DHHS POLICIES AND PROCEDURES

Division of Public Health Aid to Counties Database: Local User Access

Introduction

The Division of Public Health (DPH) Aid to Counties Database was designed to replace manual state aid to counties expenditure reporting procedures. The DPH Aid to Counties database is an internet-based system that:

- Tracks budgets, expenditure accounts, and encumbrance amounts for county public health departments and
- Exports payment information to the North Carolina Accounting System (NCAS)

Purpose

The purpose of this policy is to implement a system for adding and/or deleting local health department users to the Aid to Counties Database (WIRM) and for re-setting passwords in the WIRM.

Types of User Roles Available

There are currently two (2) different user roles that have been defined for the DPH Aid to Counties database for local health department staff. The functions users can perform are based on the user role to which they have been assigned.

County User

County Users can perform the following functions:

- View all funding items available to the county.
- Enter and/or amend up to six (6) local county budgets for each funding item as necessary for expenditure tracking.
- Enter line items for reimbursement from state allocation for funding items.
- Enter amendments to expenditure reports as needed.
- Submit monthly line items for certification by the County Administrator.

County Administrator

County Administrators can perform the following functions:

- View all funding items available to the county
- View all line items entered by the County Users.
- Certify line items entered by the County User prior to certification by a State Administrator.

Each Local Health Department is allowed three (3) local employee users in the Aid to County Database—one County User to enter expenditures, one County User to Submit the report (Local Health Director), and one County Administrator to Certify the report (County Finance Officer).

Each district or Public Health Authority is allowed two (2) local employee users—one County User to enter expenditures and Submit the report, and one County Administrator to Certify the report (Local Health Director).

Policy

In order to add a new local employee user to the Aid to County Database, a DIRM Web Portal Request form must be submitted electronically to judy.simmons@dhhs.nc.gov. The following information is required:

- User Name
- E-mail address
- County
- Title
- Telephone Number
- Office Address
- Role

In addition, if a request for a new user is submitted, there must also be a corresponding request to delete a user.

If passwords have expired and need to be re-set, the local HIS security administrator shall be responsible for getting the password re-set.

Procedure

LHD staff making requests to add and/or delete users should adhere to the following procedures to insure accuracy and timeliness:

1. Contact your Administrative Consultant assigned to your Health Department to request a DIRM Web Portal Request form if you don't have one.
2. Form will be sent to requestor electronically.
3. Requestor should complete the form in its entirety. Incomplete forms cannot be processed.
4. DIRM Web Portal Request form should be returned electronically to judy.simmons@dhhs.nc.gov
5. Requestor will be notified electronically once DIRM has completed the change.
6. Completed request forms will be maintained by Judy Simmons, Administrative Consultant.

Passwords for the WIRM/ATC can be re-set as follows:

1. Contact your local security administrator and request a password re-set.
2. The local security administrator will send an email request to DIRM.Web.Service.Request@dhhs.nc.gov
3. On the email, put ATC Password Reset in the Subject line.
4. List the User who needs to have their password reset and your County and indicate that you are the local security administrator or security officer.
5. The local security administrator will receive an email from Mary Cohn or Linda Howard once the reset has been done saying "Password has been reset". The temporary password will always be **changeme**
6. The local security administrator will notify the user that their password has been re-set and give them the temporary password.
7. If the local security administrator is unavailable, contact the Administrative Consultant assigned to your Health Department electronically or by phone, and she can send the email to have the password re-set and notify you once it has been done.

Support

If you encounter difficulties using the DIRM Web Portal Request form, or need other Aid to County Database (WIRM) assistance, please contact the Administrative Consultant assigned to your Health Department.



DIRM Web Portal Request

Aid to Counties Website Database
County Staff
Help Desk (919)855-3200

Please delete this user to the Web Portal

Name:

Division:

E-Mail Address:

County:

Title:

Telephone Number:

Office Address:

Extended Attribute

County Office	
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Please add this user to the Web Portal

Name:

Division:

E-Mail Address:

County:

Title:

Telephone Number:

Office Address:

Extended Attribute

Cty Office	
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Roles:		Aid to County - User
		Aid to County - County User
		Aid to County - County Admin

Date sent to DIRM for Change-
Date official change made -

SINGLE COUNTY HEALTH DEPARTMENTS
Instructions for Staff Entering Expenditures on ATC Website

Aid-To-County Website: <http://atc.dhhs.state.nc.us>

Passwords

1. Go to the website and login with your name (first name.last name) and password. Your password must be at least 8 characters long and you may use a combination of letters and numbers. Your password is case sensitive. **Remember your password—write it down and note the date you last changed it.** You will be prompted to change your password approximately every 90 days. Look for the prompt “Your password will expire in ___ days. Do you want to change it now?” Visit the website a couple of times during the month your password is due to expire so you do not miss the opportunity to change it and get locked out of the system.
2. **If you get locked out of the system due to an expired password, your county HIS Security Officer can email DIRM.Web.Service.Request@dhhs.nc.gov and get your password re-set.** They do not accept phone requests and if you contact the Help Desk, they will just forward your request to DIRM.Web.Service.Request, so it will be much quicker to go directly to DIRM.Web.Service.Request. If your HIS Security Officer is unavailable, your Administrative Consultant can send the email and have it re-set for you. If you get locked out of the system for any other reason, such as account has been deactivated, call the Administrative Consultant assigned to your department

Entering Budgets

1. The State Budget Office will enter all beginning allocations and any revisions that are submitted throughout the year. Please check to make sure that your State Allocations for each activity match your Budgetary Estimates/Funding Authorizations and if you receive any Revisions, make sure they have been entered correctly. If you see any Activity that does not match your Budgetary Estimates/Funding Authorizations and any Revisions, please contact your Administrative Consultant immediately. Beginning in FY 10-11, funding will not be entered in the Aid-To-County Database for your county until the Budget Office has received your signed Consolidated Agreement and Agreement Addenda.
2. You will be responsible for entering your budgets for local allocations. Click on Allocations/County. Click on the dropdown box to highlight the fiscal year you want to view, then click on SEARCH.
3. Click EDIT beside the ZZZZ line for the Activity you are entering appropriations for. Enter your budgeted amount on the proper line. Local 101 is for local appropriations. Local 102 is for Medicaid earnings. Local 103 is for Other Receipts (fees, third-party billings, grants, contracts or donations). Click SAVE.
4. **It is a requirement of the Consolidated Agreement that your budgeted local appropriations be entered into the Aid-To-County Database and updated during**

the year, if necessary. You can go back in and revise these figures by adding additional funds or subtracting funds.

Entering Monthly Expenditures

1. Click on Line. Make sure you have the proper month and fiscal year highlighted in the dropdown boxes and Click SEARCH. **Reporting Month of:** should always be the month you are reporting expenditures in (not the month the expenditures were made).
2. On the left side of the screen, click on the Activity Number for which you want to enter an expenditure and/or amendment. Make sure the Activity you click on is the one you want to report expenditures in. Pay attention to the Begin Date and End Date of the Activity you are about to Edit. Make sure the dates of your expenditures fall within the specified time frame.
3. On the next screen to appear, Edit Line Item, enter your Amount Requested as a dollar figure 1234.56. On the left side of the screen, you will see the Remaining Allocation available for the Activity you are reporting. The system should not let you request more than the amount showing as the remaining allocation. If you see a negative remaining allocation, do not report any expenditures on that line and contact your Administrative Consultant immediately. If you have no more state funding left, then you will go back to the Line Item List and select the Activity # ZZZZ line and report your expenditures under Local 101, 102 and/or 103. Reporting Month will be the month you are doing the report (October) and Expenditure/Amended Month will be the month the expenditures occurred in (September). Click SAVE.
4. After you have saved your entry, the next screen to appear is Detail Line Items List. This will show the entry you have just made. If you made an error, you can click on Delete and start over. If your entry is correct, click on Line to get back to the Line Item List.
5. If you need to make an amendment to this Activity, before you click on Line, click on Add Line Item near the top of the screen. Make your entry for the amendment in the same manner as you reported the expenditure. If you need to report more spent than you originally reported, put in the dollar amount beside Amount Requested. If you need to reduce what was previously reported, put in a negative figure beside Amount Requested. You only need to report the difference in what you reported the first time. EXAMPLE: You reported an expenditure of 500.00 on your July Report. You actually spent \$750.00. Your Amount Requested will be 250.00. If you only spent \$300.00 (instead of 500.00) your Amount Requested will be -200.00. Your Reporting Month will be the month you are doing your report in and your Expenditure/Amended Month will be July. If your entry is correct, click on Line to get back to the Line Item List.
6. You will enter any matching funds for Teen Pregnancy on the 151 ZZZZ line in the Teen Pregnancy Match Column. Your Bioterrorism matching funds will be reported on the 514 ZZZ line in the Bioterrorism Match Column.

7. **It is a requirement of the Consolidated Agreement that you report your expenditures from Local Appropriations on a monthly basis.** Once you have entered all of your expenditures and amendments for the month and your WIC encumbrances and have balanced your Amount Requested (shown in upper right corner of screen) back to your County Printout, your report is complete. It is a good idea to print a copy of each page of your report in case something should happen to the system and you need to send in a hard copy to the Controller's Office to get paid. Now you can Logout of the system. Please do not forget to Logout every time you are ready to leave the site. You can then notify your Health Director that the report is ready for his/her review and to SUBMIT.
8. In the right hand corner of the Line Item List, there is a cumulative total for the month of the amounts you have requested for state funds. It also shows what you have reported for Local 101, 102, 103, Teen Pregnancy Match and Bioterrorism Match. When you receive your payment for the month, it should be for the amount you requested, unless you had amendments that resulted in a negative amount in any activity for the month. In that case, that negative amount will have been subtracted from your total reimbursement.
9. Once the Health Director hits the SUBMIT button, it will change to "County User Approved" and the report is ready for the County Finance Officer to certify. If for some reason it becomes necessary to change something in the report BEFORE the County Finance Officer certifies it, a correction can be made by having the Health Director click on the UNSUBMIT button, which will allow you to go in and make any necessary changes. Once the County Finance Officer clicks on CERTIFY, it will change to "County Admin Approved" and the report is ready for the Controller's Office to pick up. If you realize that you have made an error at this point, you need to contact your Administrative Consultant to see if the report can be rolled back so you can make the necessary change.
10. It is your responsibility to make sure that your report has been submitted and certified by 5:00 p.m. on the day the report is due. Make sure it says County Admin Approved. After a day or two, log back into the system and check to see that your report says State Admin Approved (which means the Controller's Office has picked up your report).
11. Only one report can be done each month. Reports are due on the dates specified by the OSC E-Payment Scheduled of the Division of Public Health which is issued annually. You can enter your expenditures and/or amendments anytime during the month the report is due, however, you can only SUBMIT one report monthly.
12. Expenditures for Dental Health, Home Health and Primary Care must be reported even though the expenditures are from local appropriations.
13. If you are unable to get your report finished and certified by 5:00 p.m. on the due date, contact your Administrative Consultant and let her know you are experiencing problems and will not get your report done on time. This will not guarantee that you will receive payment if your report is late, but we may be able to assist you in some manner.

Instructions for Health Director to SUBMIT Report

Aid-To-County Website: <http://atc.dhhs.state.nc.us>

Passwords

1. Go to the website and login with your name (first name.last name) and password. Your password must be at least 8 characters long and you may use a combination of letters and numbers. **Remember your password—write it down and note the date you last changed it.** You will be prompted to change your password approximately every 90 days. Visit the website a couple of times during the month your password is due to expire and look for the prompt “Your password will expire in ___ days. Do you want to change it now?” By doing this, you will not miss the opportunity to change it and get locked out of the system.
2. If you get locked out of the system due to an expired password, your county HIS Security Officer can put in a request and get your password re-set. If your HIS Security Officer is unavailable, your Administrative Consultant can put in the request to have it re-set for you.
3. Once you are in the WIRM, Click on Line and that will bring up the first page of your county’s report. Make sure the correct Fiscal Year and Month in the dropdown boxes are highlighted and Click SEARCH. This will assure that you are in the correct month that needs to be reviewed. It will say Waiting County User Entry. You can navigate from page to page by clicking on the Page number or NEXT. The report will show the Remaining Allocation in the Activity, the Amount Requested and Local Expenditures reported.
4. After you review the expenditure report and are satisfied that it is correct, Click on the SUBMIT button and verify that it changes to UNSUBMIT. If it will not change to UNSUBMIT, contact your Administrative Consultant. Once you have submitted the report, Waiting County User Entry should change to County User Approved.
5. If you see changes that need to be made to the report, these can be done as long as the Report says Submit Month and Waiting County User Entry. If you have already hit the SUBMIT button, click on UNSUBMIT and it will return to Waiting County User Entry.
6. When you are finished and the report says County User Approved, you can Logout. Be sure to Logout every time you are ready to leave the site.
7. Contact your County Finance Officer and let them know the report is ready for them to review and certify.

Instructions for County Finance Officer to CERTIFY Report

Aid-To-County Website: <http://atc.dhhs.state.nc.us>

Passwords

1. Go to the website and login with your name (first name.last name) and password. Your password must be at least 8 characters long and you may use a combination of letters and numbers. **Remember your password—write it down and note the date you last changed it.** You will be prompted to change your password approximately every 90 days. Visit the website a couple of times during the month your password is due to expire and look for the prompt “Your password will expire in ___ days. Do you want to change it now?” By doing this, you will not miss the opportunity to change it and get locked out of the system.
2. If you get locked out of the system due to an expired password, contact the Health Department’s finance officer to get them to request that it be re-set for you.
3. Once you are in the WIRM, Click on Line and that will bring up the first page of your county’s report. Make sure the correct Fiscal Year and Month in the dropdown boxes are highlighted and Click SEARCH. This will assure that you are in the correct month that needs to be reviewed. It will say CERTIFY MONTH and Waiting County Admin Approval. If it does not say this, you will not be able to certify the report. In that case, have the health department contact their Administrative Consultant. You can navigate from page to page by clicking on the Page number or NEXT. The report will show the Remaining Allocation in the Activity, the Amount Requested and Local Expenditures reported.
4. After you review the expenditure report and are satisfied that it is correct, Click on the CERTIFY button and a pop-up screen will come up stating that you have reviewed and will certify that the expenditures reported were incurred. You will need to click on YES if you agree.
5. If you see changes that need to be made to the report, these can be done as long as the report has not been Certified. Once you have clicked on the CERTIFY button, it cannot be pulled back by the county for changes.
6. When you are finished and the report says County Admin Approved, you can Logout. Be sure to Logout every time you are ready to leave the site.
7. Reports are due by 5:00 p.m. on the date specified by the Controller’s Office.

DISTRICT HEALTH DEPARTMENTS AND PUBLIC HEALTH AUTHORITIES

Instructions for Person Entering Expenditures and Submitting Report On ATC Website

Aid-To-County Website: <http://atc.dhhs.state.nc.us>

Passwords

1. Go to the website and login with your name (first name.last name) and password. Your password must be at least 8 characters long and you may use a combination of letters and numbers. Your password is case sensitive. **Remember your password—write it down and note the date you last changed it.** You will be prompted to change your password approximately every 90 days. Look for the prompt “Your password will expire in ___ days. Do you want to change it now?” Visit the website a couple of times during the month your password will expire so you do not miss the opportunity to change it and get locked out of the system.
2. **If you get locked out of the system due to an expired password, your county HIS Security Officer can email DIRM.Web.Service.Request@dhhs.nc.gov and get your password re-set.** They do not accept phone requests and if you contact the Help Desk, they will just forward to request to DIRM.Web.Service.Request, so it will be much quicker to go directly to DIRM.Web.Service.Request. If your HIS Security Officer is unavailable, your Administrative Consultant can send an email and have it re-set for you. If you get locked out of the system for any other reason, such as account has been deactivated, call the Administrative Consultant assigned to your department

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2. You will be responsible for entering your budgets for local allocations. Click on Allocations/County. Click on the dropdown box to highlight the fiscal year you want to view, then click on SEARCH.
3. Click EDIT beside the ZZZZ line for the Activity for which you are entering appropriations. Enter your budgeted amount on the proper line. Local 101 is for local appropriations. Local 102 is for Medicaid earnings. Local 103 is for Other Receipts (fees, third-party billings, grants, contracts or donations). Click SAVE.

4. **It is a requirement of the Consolidated Agreement that your budgeted local appropriations be entered into the Aid-To-County Database and updated during the year, if necessary.** You can go back in and revise these figures by adding additional funds or subtracting funds.

Entering Monthly Expenditures

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4. After you have saved your entry, the next screen to appear is Detail Line Items List. This will show the entry you have just made. If you made an error, you can click on Delete and start over. If your entry is correct, click on Line to get back to the Line Item List.
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entered all of your expenditures and amendments for the month and your WIC encumbrances and have balanced your Amount Requested (shown in upper right corner of screen) back to your County Printout, your report is complete. It is a good idea to print a copy of each page of your report in case something should happen to the system and you need to send in a hard copy to the Controller's Office to get paid. Click on the SUBMIT button to Submit your report. Now you can Logout of the system. Please do not forget to Logout every time you are ready to leave the site. You can then notify your Health Director that the report is ready for his/her review and to CERTIFY.

8. In the right hand corner of the Line Item List, there is a cumulative total for the month of the amounts you have requested for state funds. It also shows what you have reported for Local 101, 102, 103, Teen Pregnancy Match and Bioterrorism Match. When you receive your payment for the month, it should be for the amount you requested, unless you had amendments that resulted in a negative amount in any activity for the month. In that case, that negative amount will have been subtracted from your total reimbursement.
9. Once you hit the SUBMIT button, it will change to "County User Approved" and the report is ready for the Health Director to certify. If for some reason it becomes necessary to change something in the report BEFORE the Health Director certifies it, you can make a correction by clicking on the UNSUBMIT button, which will allow you to go in and make any necessary changes. Once the Health Director clicks on CERTIFY, it will change to "County Admin Approved" and the report is ready for the Controller's Office to pick up and you cannot pull it back. Be sure to Logout every time you are ready to leave the site.
10. It is your responsibility to make sure that your report has been submitted and certified by 5:00 p.m. on the day the report is due. Make sure it says County Admin Approved. After a day or two, log back into the system and check to see that your report says State Admin Approved (which means the Controller's Office has picked up your report).
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12. Expenditures for Dental Health, Home Health and Primary Care must be reported even though the expenditures are from local appropriations.
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INSTRUCTIONS FOR HEALTH DIRECTORS To Certify Report

Aid-To-County Website: <http://atc.dhhs.state.nc.us>

Passwords

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2. If you get locked out of the system due to an expired password, contact the Health Department’s HSIS Security Officer to get them to send a request to have it re-set for you.
3. Once you are in the WIRM, Click on Line and that will bring up the first page of your county’s report. Make sure the correct Fiscal Year and Month in the dropdown boxes are highlighted and Click SEARCH. This will assure that you are in the correct month that needs to be reviewed. It will say CERTIFY MONTH and Waiting County Admin Approval. If it does not say this, you will not be able to certify the report. You can navigate from page to page by clicking on the Page number or NEXT. The report will show the Remaining Allocation in the Activity, the Amount Requested and Local Expenditures reported.
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5. If you see changes that need to be made to the report, these can be done as long as the report has not been Certified. Once you have clicked on the CERTIFY button, it cannot be pulled back by the county for changes.
6. When you are finished and the report says County Admin Approved, you can Logout. Be sure to Logout every time you are ready to leave the site.
7. Reports are due by 5:00 p.m. on the date specified by the Controller’s Office.



WIRM portal

web identity role management

Name :

Password :

You are not authorized. Please login to continue.

**If you should encounter any WIRM Portal IT Issues please contact
DHHS Customer Support Center at 919-855-3200 opt. #2 or email
DHHS.Customer.Support.Center@dhhs.nc.gov**

Business Hours: 7 a.m. - 5:30 p.m. Mon. - Fri.

**Password Resets and Security Requests should be directed to your
Agency Security Officer.**

Login <https://wirm.dhhs.state.nc.us>



WIRM v0.3.1



WIRM portal

web identity role management

My Applications

Aid To Counties

DPH Aid To Counties
Production System

To test the
upgrade

Aid To Counties - Test

To test the upgrade

Directory

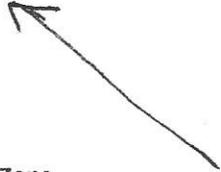
Aid to County is
tool for managi
State Budgets
allocated to cor
agencies - this
the User
Acceptance
Testing site for
system.

Testing mostly

TestZone

Testing mostly

Click on this





DPH Aid To Counties Database

Click here



[Home](#) [SearchQBE](#) [Reports](#) [Fund](#) [Fund Authorization](#) [Allocations/Cou](#)



You have accessed the Division of Public Health, Aid To Counties, Local Health Departments Expenditure Reporting Website. This website is to be used by designated staff in the local county health departments and finance offices to report and certify monthly expenditures. This website is also used by State staff to audit reimbursement requests and budgets of state and federal funds provided to local health departments. The data captured in this database will be used for reporting purposes, of state, federal and local expenditures.

At the beginning of the fiscal year, you need to enter all of your local appropriations budgets



Budget Items List

County: ██████████

Select Fiscal Year: 12/13 ██████████

Page: 1 of 15

<< Previous

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15

Activity	Fund	RCC	FRC	Description	Fiscal Year	Local Budget 101	Local Budget 102	Local Budget 103	Local Teen Pregnancy Budget	Local DERR B	
101	13A1	5740	00	Maternal Health	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
101	13A1	5740	AP	Maternal Health (HMHC)	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
101	13A1	5740	AP	Maternal Health (HMHC)	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Edit	101	ZZZZ	ZZZZ	ZZ	Local Use Only - Maternal Health	12/13	\$0.00	\$61,700.00	\$1,000.00	\$0.00	\$0.00
107	13A1	5107	AP	PCM for Women Ineligible for Medicaid	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
107	13A1	5107	AP	PCM for Women Ineligible for Medicaid	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Edit	107	ZZZZ	ZZZZ	ZZ	Local Use Only - Pregnancy Care Management Women	12/13	\$0.00	\$165,181.00	\$0.00	\$0.00	\$0.00
110	1161	4110	00	General Aid to Counties	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
110	13A1	592A	FP	Pharmacist Services for FP/Title X-1/12th	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
110	13A1	592B	FP	Pharmacist Services for FP/Title X-11/12ths	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Edit	110	ZZZZ	ZZZZ	ZZ	Local Use Only -	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
116	13A1	5116	AP	Healthy Beginnings	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
116	13A1	5116	AP	Healthy Beginnings	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Edit	116	ZZZZ	ZZZZ	ZZ	Local Use Only - Healthy Beginnings	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
125	13A1	510L	JB	Eastern Baby Love Plus	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
125	13A1	510M	JB	Eastern Baby Love Plus	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Edit	125	ZZZZ	ZZZZ	ZZ	Local Use Only - Eastern Baby Love Plus	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
126	13A1	530M	JA	Triad Baby Love Plus	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Edit	126	ZZZZ	ZZZZ	ZZ	Local Use Only - Triad Baby Love Plus	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
127	13A1	520N	JC	Northeastern Baby Love Plus	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	

291 Results Available

Click on Edit by the activity you want to enter.
Local Budgets are entered on the ZZZZ line



DPH Aid To Counties Database

County: ██████████

Allocation Information

Activity	110
Fund	ZZZZ
FRC	ZZ
RCC	ZZZZ
Fiscal Year	12/13
Local Budget 101	500000.00
Local Budget 102	0.00
Local Budget 103	0.00
Teen Pregnancy Budget	0.00
DENR Budget	0.00
Bioterrorism Budget	0.00

Enter your local budget.
(You can enter Local
and 103 at the same

Click Save





Budget Items List

County:

Select Fiscal Year: 12/13

Page: 1 of 15

<< Previous

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15

	Activity	Fund	RCC	FPC	Description	Fiscal Year	Local Budget 101	Local Budget 102	Local Budget 103	Local Teen Pregnancy Budget	Local DEMR Bu
	101	13A1	5740	00	Maternal Health	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	101	13A1	5740	AP	Maternal Health (HMHC)	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	101	13A1	5740	AP	Maternal Health (HMHC)	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Edit	101	ZZZZ	ZZZZ	ZZ	Local Use Only - Maternal Health	12/13	\$0.00	\$61,700.00	\$1,000.00	\$0.00	\$0.00
	107	13A1	5107	AP	PCM for Women Ineligible for Medicaid	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	107	13A1	5107	AP	PCM for Women Ineligible for Medicaid	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Edit	107	ZZZZ	ZZZZ	ZZ	Local Use Only - Pregnancy Care Management Women	12/13	\$0.00	\$165,181.00	\$0.00	\$0.00	\$0.00
	110	1161	4110	00	General Aid to Counties	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	110	13A1	592A	FP	Pharmacist Services for FP/Title X-1/12th	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	110	13A1	592B	FP	Pharmacist Services for FP/Title X-11/12th	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Edit	110	ZZZZ	ZZZZ	ZZ	Local Use Only - Pharmacist Services for FP/Title	12/13	\$500,000.00	\$0.00	\$0.00	\$0.00	\$0.00
	116	13A1	5116	AP	Healthy Beginnings	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	116	13A1	5116	AP	Healthy Beginnings	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Edit	116	ZZZZ	ZZZZ	ZZ	Local Use Only - Healthy Beginnings	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	125	13A1	510L	JB	Eastern Baby Love Plus	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	125	13A1	510M	JB	Eastern Baby Love Plus	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Edit	125	ZZZZ	ZZZZ	ZZ	Local Use Only - Eastern Baby Love Plus	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	126	13A1	530M	JA	Triad Baby Love Plus	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Edit	126	ZZZZ	ZZZZ	ZZ	Local Use Only - Triad Baby Love Plus	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	127	13A1	520N	JC	Northeastern Baby Love Plus	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

291 Results Available

To enter expenditures, select activity by clicking on the activity number



DPH Aid To Counties Database

Home SearchQ&E Reports Allocation

Line Item List

Submit Month **Waiting Count**

County: ██████████

Select Fiscal Year: 12/13 Reporting Month of: May

<< Previous

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15

Activity	Fund	RCC	FRC	Description	Begin Date	End Date	Fiscal Year	Remaining Allocations	Amount Requested	Local 101	Local 102	Loc
101	13A1	5740	AP	Maternal Health (HMHC)	6/1/2012	9/30/2012	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.
→ 101	13A1	5740	AP	Maternal Health (HMHC)	10/1/2012	5/31/2013	12/13	\$2,554.37	\$0.00	\$0.00	\$0.00	\$0.
101	13A1	5740	00	Maternal Health	6/1/2012	5/31/2013	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.
101	ZZZZ	ZZZZ	ZZ	Local Use Only - Maternal Health	6/1/2012	5/31/2013	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.
107	13A1	5107	AP	PCM for Women Ineligible for Medicaid	6/1/2012	9/30/2012	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.
107	13A1	5107	AP	PCM for Women Ineligible for Medicaid	10/1/2012	5/31/2013	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.
107	ZZZZ	ZZZZ	ZZ	Local Use Only - Pregnancy Care Management Women	6/1/2012	5/31/2013	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.
110	1161	4110	00	General Aid to Counties	6/1/2012	5/31/2013	12/13	\$18,254.71	\$0.00	\$0.00	\$0.00	\$0.
110	13A1	592A	FP	Pharmacist Services for FP/Title X-1/12th	6/1/2012	6/29/2012	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.
110	13A1	592B	FP	Pharmacist Services for FP/Title X-11/12ths	6/30/2012	5/31/2013	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.
110	ZZZZ	ZZZZ	ZZ	Local Use Only - Pharmacist Services for FP/Title	6/1/2012	5/31/2013	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.
116	13A1	5116	AP	Healthy Beginnings	6/1/2012	9/30/2012	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.
116	13A1	5116	AP	Healthy Beginnings	10/1/2012	5/31/2013	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.
116	ZZZZ	ZZZZ	ZZ	Local Use Only - Healthy Beginnings	6/1/2012	5/31/2013	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.
125	13A1	510L	JB	Eastern Baby Love Plus	6/1/2012	1/31/2013	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.
125	13A1	510M	JB	Eastern Baby Love Plus	2/1/2013	5/31/2013	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.
125	ZZZZ	ZZZZ	ZZ	Local Use Only - Eastern Baby Love Plus	6/1/2012	5/31/2013	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.
126	13A1	530M	JA	Triad Baby Love Plus	6/1/2012	5/31/2013	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.
126	ZZZZ	ZZZZ	ZZ	Local Use Only - Triad Baby Love Plus	6/1/2012	5/31/2013	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.
127	13A1	520N	JC	Northeastern Baby Love Plus	6/1/2012	5/31/2013	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.

291 Results Available

WIC-FRC GC: \$0.00

WIC-FRC GD: \$0.00



DPH Aid To Counties Database

Home SearchQBE Reports Allocations/County

Edit Line Item

Maternal Health (HMHC)

PAY ATTENTION TO FUNDING

County: ██████████

Beginning Date: 10/1/2012

Ending Date: 5/31/2013

Liquidation Period: 6/1/2013

Activity:	Requested Total:	Reported 101:	Reported 102:	Reported 103:	Reported Teen Pregnancy Match:	Reported DENR:	Reported Bicentennial:
101	\$1000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Activity	101
Fund	13A1
RCC	5740
FRC	AP
Local Budget 101	\$0.00
Local Budget 102	\$0.00
Local Budget 103	\$0.00
Teen Pregnancy Local Budget	\$0.00
DENR Local Budget	\$0.00
Bioterrorism Local Budget	\$0.00
Remaining Allocation	\$2,554.37

Fiscal Year	12/13
Amount Requested	1000.00
Local 101	\$0.00
Local 102	\$0.00
Local 103	\$0.00
Teen Pegnancy Match	\$0.00
DENR	\$0.00
Bioterrorism Match	\$0.00
Reporting Month	May
Expenditure/Amended Month	April

Denotes a required data entry field.





DPH Aid To Counties Database

[Home](#) [SearchQBE](#) [Reports](#) [Allocations/County](#)

Detail Line Items List

Maternal Health (HMHC)

County: █████ Fiscal Year: 12/13 Month: May

Activity:101 Fund :13A1 RCC :5740 FRC :AP

	Reported Mth	Expenditure/Amended Mth	Amount Requested	Local 101	Local 102	Local 103	Teen Pegnancy	DENR	Bioterroris
<input type="button" value="Edit"/>	May	April	\$1,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

1 Result Available



To make another entr
Add Line Item



dhhs
Dept of Health
and Human
Services

DPH Aid To Counties Database

Home SearchQBE Reports Allocations/County

Edit Line Item

Maternal Health (HMHC)

County: ██████████

Beginning Date: 10/1/2012

Ending Date: 5/31/2013

Liquidation Period: 6/

Activity: 101	Requested Total: \$1,554.37	Reported 101: \$0.00	Reported 102: \$0.00	Reported 103: \$0.00	Reported Teen Pregnancy Match: \$0.00	Reported DENR: \$0.00	Re Bi Ma
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Activity 101	Fiscal Year 12/13
Fund 13A1	Amount Requested \$554.37
RCC 5740	Local 101 \$0.00
FRC AP	Local 102 \$0.00
Local Budget 101 \$0.00	Local 103 \$0.00
Local Budget 102 \$0.00	Teen Pegnancy Match \$0.00
Local Budget 103 \$0.00	DENR \$0.00
Teen Pregnancy Local Budget \$0.00	Bioterrorism Match \$0.00
DENR Local Budget \$0.00	Reporting Month May
Bioterrorism Local Budget \$0.00	Expenditure/Amended Month <input type="text" value="March"/>
Remaining Allocation \$1,554.37	

Denotes a required data entry field.





DPH Aid To Counties Database

[Home](#)
[SearchQBE](#)
[Reports](#)
[Allocations/County](#)

Detail Line Items List

Maternal Health (HMHC)

County: █████ Fiscal Year: 12/13 Month: May

Activity:101 Fund :13A1 RCC :5740 FRC :AP

	Reported Mth	Expenditure/Amended Mth	Amount Requested	Local 101	Local 102	Local 103	Teen Pegnancy	DENR	Bioterroris
Edit	May	April	\$1,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Edit	May	March	\$554.37	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

2 Results Available





This is what it looks like once it has been submitted. The Health D. unsubmit the report if there are

Line Item List

UnSubmit Month County User Ap

County: ██████████

Select Fiscal Year: 12/13 Reporting Month of: May ██████████

and Previous

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15

Activity	Fund	RCC	PRC	Description	Begin Date	End Date	Fiscal Year	Remaining Allocations	Amount Requested	Local 101	Local 102	Local
101	13A1	5740	AP	Maternal Health (HMHC)	6/1/2012	9/30/2012	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
101	13A1	5740	AP	Maternal Health (HMHC)	10/1/2012	5/31/2013	12/13	\$2,554.37	\$0.00	\$0.00	\$0.00	\$0.00
101	13A1	5740	00	Maternal Health	6/1/2012	5/31/2013	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
101	ZZZZ	ZZZZ	ZZ	Local Use Only - Maternal Health	6/1/2012	5/31/2013	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
107	13A1	5107	AP	PCM for Women Ineligible for Medicaid	6/1/2012	9/30/2012	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
107	13A1	5107	AP	PCM for Women Ineligible for Medicaid	10/1/2012	5/31/2013	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
107	ZZZZ	ZZZZ	ZZ	Local Use Only - Pregnancy Care Management Women	6/1/2012	5/31/2013	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
110	1161	4110	00	General Aid to Counties	6/1/2012	5/31/2013	12/13	\$18,254.71	\$0.00	\$0.00	\$0.00	\$0.00
110	13A1	592A	FP	Pharmacist Services for FP/Title X-1/12th	6/1/2012	6/29/2012	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
110	13A1	592B	FP	Pharmacist Services for FP/Title X-11/12ths	6/30/2012	5/31/2013	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
110	ZZZZ	ZZZZ	ZZ	Local Use Only - Pharmacist Services for FP/Title	6/1/2012	5/31/2013	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
116	13A1	5116	AP	Healthy Beginnings	6/1/2012	9/30/2012	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
116	13A1	5116	AP	Healthy Beginnings	10/1/2012	5/31/2013	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
116	ZZZZ	ZZZZ	ZZ	Local Use Only - Healthy Beginnings	6/1/2012	5/31/2013	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
125	13A1	510L	JB	Eastern Baby Love Plus	6/1/2012	1/31/2013	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
125	13A1	510M	JB	Eastern Baby Love Plus	2/1/2013	5/31/2013	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
125	ZZZZ	ZZZZ	ZZ	Local Use Only - Eastern Baby Love Plus	6/1/2012	5/31/2013	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
126	13A1	530M	JA	Triad Baby Love Plus	6/1/2012	5/31/2013	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
126	ZZZZ	ZZZZ	ZZ	Local Use Only - Triad Baby Love Plus	6/1/2012	5/31/2013	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
127	13A1	520N	JC	Northeastern Baby Love Plus	6/1/2012	5/31/2013	12/13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

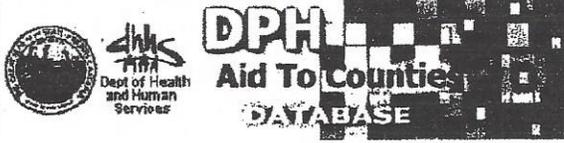
291 Results Available

WIC-FRC GC: \$0.00
WIC-FRC GD: \$40,579.27

Be sure to report WIC encumbrances

<http://atc.dhhs.state.nc.us/displaylineitem.aspx>

Minimum WIC Salaries



This is what the County Finance Officers see when they login and Click on Line

Home Reports Allocations/C

Waiting County

Line Item List

County:

Select Fiscal Year: Reporting Month of: July

Requested:
Loc 101:
Loc 102:
Loc 103:
Grand Total:

Page: 1 of 10

<< Previous

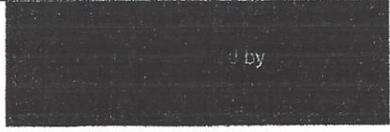
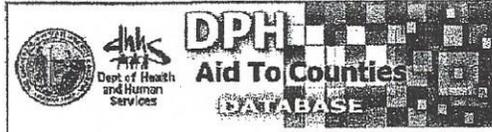
1 2 3 4 5 6 7 8 9 10

Activity	Fund	RCC	FRC	Description	Begin Date	End Date	Fiscal Year	Remaining Allocations	Amount Requested	Local
101	1505	5740	AP	Maternal Health (HMHC)	6/1/2007	5/31/2008	07/08	\$0.00	\$2,000.00	\$0.00
101	1505	5740	00	Maternal Health	6/1/2007	5/31/2008	07/08	\$0.00	\$0.00	\$0.00
101	ZZZZ	ZZZZ	ZZ	Local Use Only - Maternal Health	6/1/2007	5/31/2008	07/08	\$0.00	\$0.00	\$15.00
107	1511	5107	00	Maternity Care Coordination (MCC)	6/1/2007	5/31/2008	07/08	\$0.00	\$0.00	\$0.00
107	ZZZZ	ZZZZ	ZZ	Local Use Only - Maternity Care Coordination (MCC)	6/1/2007	5/31/2008	07/08	\$0.00	\$0.00	\$0.00
108	1511	5108	00	Targeted Infant Mortality Reduction	6/1/2007	5/31/2008	07/08	\$0.00	\$0.00	\$0.00
108	ZZZZ	ZZZZ	ZZ	Local Use Only - Targeted Infant Mortality Reducti	6/1/2007	5/31/2008	07/08	\$0.00	\$0.00	\$0.00
110	1410	4110	00	General Aid-to-County	6/1/2007	5/31/2008	07/08	\$54,426.06	\$34,943.94	\$0.00
110	ZZZZ	ZZZZ	ZZ	Local Use Only - General Aid-To-County	6/1/2007	5/31/2008	07/08	\$0.00	\$0.00	\$0.00
116	1511	5116	AP	Healthy Beginnings	6/1/2007	5/31/2008	07/08	\$0.00	\$0.00	\$0.00
116	ZZZZ	ZZZZ	ZZ	Local Use Only - Health Beginnings	6/1/2007	5/31/2008	07/08	\$0.00	\$0.00	\$0.00
125	1511	510F	JB	Eastern Baby Love Plus	6/1/2007	1/31/2008	07/08	\$0.00	\$0.00	\$0.00
125	1511	510G	JB	Eastern Baby Love Plus	2/1/2008	5/31/2008	07/08	\$0.00	\$0.00	\$0.00

<http://atc.dhhs.state.nc.us/displaylineitem.aspx>

No negative remaining allocation allowed.

This is what it looks like when it has been certified.
 It can be Rolled back by the Controller's Office there are errors to be corrected.



Line Item List

County Admin Approved

Select Fiscal Year: 10/11 Select County: Reporting Month of: January

Requested:
Loc 101:
Loc 102:
Loc 103:
Teen Pregnancy Match:
DENR:
Bioterrorism Match:
Grand Total:

<< Previous

1 2 3 4 5 6 7 8 9 10 11

Activity	Fund	RCC	FRC	Description	Begin Date	End Date	Fiscal Year	Remaining Allocations	Amount Requested	Local 101	Local 102	Local 103	Teen Preg Match
101	1505	5740	AP	Maternal Health (HMHC)	6/1/2010	9/30/2010	10/11	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
101	1505	5740	AP	Maternal Health (HMHC)	10/1/2010	5/31/2011	10/11	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
101	1505	5740	00	Maternal Health	6/1/2010	5/31/2011	10/11	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
101	ZZZZ	ZZZZ	ZZ	Local Use Only - Maternal Health	6/1/2010	5/31/2011	10/11	\$0.00	\$0.00	\$4,531.62	\$75,245.00	\$4,152.00	\$0.00
107	1511	5107	AP	Maternity Care Coordination	6/1/2010	5/31/2011	10/11	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
107	ZZZZ	ZZZZ	ZZ	Local Use Only - Maternity Care Coordination	6/1/2010	5/31/2011	10/11	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
110	1410	4110	00	General Aid-to-counties	6/1/2010	5/31/2011	10/11	\$17,240.50	\$43,972.00	\$0.00	\$0.00	\$0.00	\$0.00
110	1511	592E	FP	Pharmacist Services for Family Planning Program	7/1/2010	5/31/2011	10/11	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
110	1511	592D	FP	Pharmacist Services for Family Planning Program	6/1/2010	6/30/2010	10/11	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
110	2117	1530	04	General Aid-to-counties	6/1/2010	5/31/2011	10/11	\$11,663.50	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
110	ZZZZ	ZZZZ	ZZ	Local Use Only - General Aid-to-Counties	6/1/2010	5/31/2011	10/11	\$0.00	\$0.00	\$14,729.46	\$15.40	\$0.00	\$0.00
116	1511	5116	AP	Healthy Beginnings	6/1/2010	5/31/2011	10/11	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
116	ZZZZ	ZZZZ	ZZ	Local Use Only - Healthy Beginnings	6/1/2010	5/31/2011	10/11	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
125	1511	510J	JB	Eastern Baby Love Plus	6/1/2010	1/31/2011	10/11	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
125	1511	510K	JB	Eastern Baby Love Plus	2/1/2011	5/31/2011	10/11	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
125	ZZZZ	ZZZZ	ZZ	Local Use Only - Eastern Baby Love Plus	6/1/2010	5/31/2011	10/11	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
126	1511	530K	JA	Triad Baby Love Plus	6/1/2010	5/31/2011	10/11	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
126	ZZZZ	ZZZZ	ZZ	Local Use Only - Triad Baby Love Plus	6/1/2010	5/31/2011	10/11	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
127	1511	520L	JC	Northeast Baby Love Plus	6/1/2010	5/31/2011	10/11	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
127	ZZZZ	ZZZZ	ZZ	Local Use Only - Northeast Baby Love Plus	6/1/2010	5/31/2011	10/11	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

203 Results Available

WIC-FRC GA: \$0.00

WIC-FRC GB: \$0.00

Should not be Neg.



DPH Aid To Counties Database

Aid To Counties Reporting Menu

- [+ Local Reported Expenditures](#)
- [+ WIC Report to Excel](#)
- [+ Expenditures by Month](#)
- [+ Expenditures by Federal Month](#)
- [+ WIC Analysis of Lapsed \\$](#)
- [+ State WIC Analysis of Lapsed \\$](#)
- [+ County Signed Agreements](#)
- [+ County Signed Agreements History](#)
- [+ NCAS Payment Report](#)

← Shows how much



DPH Aid To Counties Database

Weekly Report

County: ██████████

Select Fiscal Year: Reporting Month of: ██████████

Page: 1 of 1

Account	Fund	RCC	FRC	Name	Budget	Current
536260101	13A1	5740	AP	Maternal Health (HMHC)	\$27,320.00	\$3,415.00
536260110	1161	4110	00	General Aid to Counties	\$100,520.00	\$8,376.67
536260151	13A1	5735	AP	Family Planning-HMHC-Phase 2	\$2,535.00	\$316.88
536260151	13A1	592B	FP	Family Planning-Title X-11/12ths	\$20,758.00	\$1,887.09
536260318	1271	5318	AP	Care Coordination for Children	\$16,589.00	\$2,073.66
536260351	1271	5745	AP	Child Health	\$25,064.00	\$3,133.00
536260352	1271	5351	AP	Child Fatality Prevention Teams	\$706.00	\$58.83
536260403	13A2	5403	GD	WIC Client Services	\$134,422.00	\$13,478.93
536260403	13A2	5404	GD	WIC Nutrition Education	\$65,084.00	\$8,580.06
536260403	13A2	5405	GD	WIC General Admin	\$11,569.00	\$1,311.40
536260403	13A2	5409	GD	WIC BF Promotiion & Support	\$41,645.00	\$4,979.79
36260510	1175	4510	00	General Communicable Disease Control	\$12,488.00	\$1,040.67
536260514	1264	2680	ET	BT Preparedness & Response	\$42,114.00	\$3,119.56
536260536	1311	4536	RR	HIV/STD State	\$100.00	\$50.00
536260551	1460	4551	00	TB Control	\$1,825.00	\$152.08
536260803	1332	5358	00	School Nurse Funding Initiative	\$150,000.00	\$12,500.00
536260873	1153	4751	00	Environmental Health	\$4,000.00	\$333.33
536260886	1261	5503	00	Healthy Communities	\$6,206.00	\$689.55
Totals					\$662,945.00	\$65,496.50

This should you

NC DHHS DPH Aid To Counties v1.0.5 - Last Modified 7/7/2009

<http://atc.dhhs.state.nc.us/displayWeekRep.aspx>

Should match amt Reg



DPH Aid To Counties Database

QBE Search

Select Fiscal Year:

Activity:

Fund:

RCC:

FRC:

Prentice



dhhs
Dept of Health
and Human
Services

DPH Aid To Counties
Database

QBE Search Results
For Fiscal Year:12/13

	151 13A1- 5151-T2 TANF	151 13A1- 5735-AP Family Planning- HMHC- Phase 1	151 13A1- 5735-AP Family Planning- HMHC- Phase 2	151 13A1- 592A-FP Family Planning- Title X- 1/12th	151 13A1- 592B-FP Family Planning- Title X- 11/12ths	151 13A1- 592B-FP Family Planning - Title X	151 13A1- 6013-FR Women's Health Service Fund	Proposed Total
ALAMANCE	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
ALBEMARLE REG	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
ALEXANDER	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
ANSON	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
APPALACHIAN	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
BEAUFORT	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
BLADEN	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
BRUNSWICK	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
BUNCOMBE	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
BURKE	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
CABARRUS	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
CALDWELL	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
CARTERET	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
CASWELL	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
CATAWBA	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
CHATHAM	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
CHEROKEE	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00