



RESOLUTION No. 19-520

OF THE BOARD OF SUPERVISORS OF THE COUNTY OF NEVADA

RESOLUTION AUTHORIZING ACCEPTANCE OF A GRANT FROM THE CALIFORNIA DEPARTMENT OF INSURANCE FOR \$97,726.00 IN STATE OF CALIFORNIA FUNDS FOR WORKERS' COMPENSATION INSURANCE FRAUD, FOR USE DURING THE PERIOD OF JULY 1, 2019 TO JUNE 30, 2020 AND AUTHORIZING THE DISTRICT ATTORNEY TO EXECUTE THE AGREEMENT

WHEREAS, the Nevada County District Attorney's Office applied for and has been awarded Workers' Compensation Insurance Fraud Grant Funds by the California Department of Insurance; and

WHEREAS, Workers' Compensation Insurance Fraud Grant Funds in the amount of \$97,726.00 have been made available for the period of July 1, 2019 to June 30, 2020; and

WHEREAS, the Nevada County Board of Supervisors desires to continue a Workers' Compensation Insurance Fraud program to be funded in part from funds administered by the California Department of Insurance; and

WHEREAS, the Grant funds received hereunder shall not be used to supplant existing expenditures controlled by this body.

NOW, THEREFORE, BE IT RESOLVED that the Board of Supervisors of the County of Nevada, State of California, accepts the Workers' Compensation Insurance Fraud Grant Funds in the amount of \$97,726.00 for use from July 1, 2019 to June 30, 2020 to investigate and prosecute workers' compensation insurance fraud, and authorizes the District Attorney to execute all necessary contracts, payment requests, agreements and amendments for the purposes of securing these grant funds and to implement and carry out the purposes specified in the application. The grant funds received in the amount of \$97,726.00 for said project shall be deposited into District Attorney Revenue Account 0101 20103 101 1000 445090.

PASSED AND ADOPTED by the Board of Supervisors of the County of Nevada at a regular meeting of said Board, held on the 24th day of September, 2019, by the following vote of said Board:

Ayes: Supervisors Heidi Hall, Edward Scofield, Dan Miller, Susan K. Hoek and Richard Anderson.

Noes: None.

Absent: None.

Abstain: None.

ATTEST:

JULIE PATTERSON HUNTER
Clerk of the Board of Supervisors

By: 



Richard Anderson, Chair

9/24/2019 cc: DA (1)
AC*

**INSURANCE COMMISSIONER
OF THE STATE OF CALIFORNIA**

GRANT AWARD AGREEMENT

Fiscal Year 2019-20

Workers' Compensation Insurance Fraud Program


The Insurance Commissioner of the State of California hereby makes an award of funds to **Nevada 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 and made a part hereof. By acceptance of the grant award, the grant award recipient agrees to administer the grant program in accordance with all applicable statutes, regulations, and Request-for-Application (RFA).

Duration of Grant: The grant award is for the program period **July 1, 2019 through June 30, 2020.**

Purpose of Grant: This grant award is made pursuant to the provisions of California Insurance Code Section 1872.83 and shall be used solely for the purposes of enhanced investigation and prosecution of workers' compensation insurance fraud cases.

Amount of Grant: The grant award agreed to herein is in the amount of **\$97,726**. This amount has been determined by the Insurance Commissioner with the advice and consent of the Fraud Assessment Commission based on the estimated funds collected pursuant to Section 62.6 of the Labor Code. However, the actual total award amount for the county is contingent on the collection of assessments and the authorization for expenditure pursuant to Government Code Section 13000 et seq. The grant award shall be distributed pursuant to Section 1872.83 of the Insurance Code and the California Code of Regulations Subchapter 9, Article 3, Sections 2698.53, 2698.54, and 2698.57.

<p>Official Authorized to Sign for Applicant/Grant Recipient</p>  <p>Name: Clifford Newell Title: District Attorney</p> <p>Address: 201 Commercial Street Nevada City, CA 95959</p> <p>Date: <u>Sept 9, 2019</u></p>	<p>RICARDO LARA Insurance Commissioner</p> <hr/> <p>Name: George Mueller Title: Deputy Commissioner</p> <p>Date: _____</p>
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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.

Crista Hill, Budget Officer, CDI

Date