Contra Costa County
Position Adjustment Resolution (PAR) Form

This form is to be completed for midyear Position Adjustment Requests, for consideration outside the County's annual budget development process, per Administrative Bulletin No. 400 Section IV.C

I. DEPARTMENT REQUEST

Agency and Dept Name: CCA18 Health Services
Dept No(s). various Org No(s). various

Action Type: Add Position(s)
Net FTE Change: 11.00
Proposed Effective Date: 04/29/2026

Action Requested:

Add one Health Plan Nurse Program Director (VRFA) and one Utilization Review Manager (VWHG)(0860/6106); one Utilization Review Manager (VWHG)(0860/6115); one Dept. Human Resources Analyst II (ARTA) and two Health Services Administrator C (VANH)(0860/6114), two Planner Evaluator Level B (VCXD)(0860/6118); one Health Services Administrator Level B (VANG) and one Clerk Experienced Level (JWXB)(0860/6116); and one Quality Management Program Coordinator (VRHA)(0540/6544).

Use an additional sheet for further explanation or comments.

Fiscal Impact:

Cost is within Department's Budget: ☐ Yes ☐ No

Total Annual Cost: $ 2,877,477.70
Total this FY: $ 599,474.00
Net County Cost:
NCC this FY:
Source of Funding:

Total One-Time Cost:

Carol Berger
(for) Department Head

04/07/2026
Date

II. COUNTY ADMINISTRATOR REVIEW

PAR No. 26596

Comments:
Exempt from HR review under delegated authority

Sarah Kennard
(for) County Administrator

04/16/2026
Date

III. HUMAN RESOURCES (HR) REVIEW/RECOMMENDATION

HR Recommendation(s):

(for) Director of Human Resources

Date

IV. COUNTY ADMINISTRATOR APPROVAL

Approve HR Department Recommendation(s): ☐ Yes ☐ No ☑ N/A
If No or N/A, CAO Recommendation(s):

BOS Approval Required: ☑ Yes ☐ No

Effective: ☑ Day following Board Approval
☐ Date: _____

Jason Chan
(for) County Administrator

04/20/2026
Date

V. BOARD OF SUPERVISORS ACTION

Adjustment Resolution: ☐ ADOPTED ☐ OTHER ACTION: _____

Monica Nino, Clerk of the Board of Supervisors and County Administrator

By: _____
Date: _____