



**MULTNOMAH COUNTY  
AGENDA PLACEMENT REQUEST  
BUDGET MODIFICATION**

(revised 12/31/09)

APPROVED: MULTNOMAH COUNTY  
BOARD OF COMMISSIONERS  
AGENDA # R.5 DATE 4/19/12  
LYNDA GROW, BOARD CLERK

**Board Clerk Use Only**

Meeting Date:	<u>4/19/12</u>
Agenda Item #:	<u>R.5</u>
Est. Start Time:	<u>10:30 am</u>
Date Submitted:	<u>3/12/12</u>

**BUDGET MODIFICATION: HD-12-12**

**BUDGET MODIFICATION - HD-12-12 – Request approval to appropriate  
Agenda \$161,100 in revenue from the CareOregon Care Support and System Innovation  
Title: program.**

*Note: For all other submissions (i.e. Notices of Intent, Ordinances, Resolutions, Orders or Proclamations) please use the APR short form.*

<b>Requested Meeting Date:</b>	<u>April 26, 2012</u>	<b>Amount of Time Needed:</b>	<u>5 minutes</u>
<b>Department:</b>	<u>Health Department</u>	<b>Division:</b>	<u>Integrated Clinical Services</u>
<b>Contact(s):</b>	<u>Lester A. Walker - Budget &amp; Finance Manager</u>		
<b>Phone:</b>	<u>(503) 988-3663</u>	<b>Ext.:</b>	<u>26457</u>
<b>Presenter(s):</b>	<u>Christine Bernsten, Program Manager; Vanetta Abdellatif, ICS Director</u>		

**General Information**

**1. What action are you requesting from the Board?**

Approval to appropriate \$161,100 in revenue from the CareOregon Care Support and System Innovation program.

**2. Please provide sufficient background information for the Board and the public to understand this issue. Please note which Program Offer this action affects and how it impacts the results.**

The Multnomah County Health Department (MCHD) has been awarded \$161,100 from the CareOregon Care Support and System Innovation (CSSI) program for two quality improvement projects.

**Enhanced Patient Care - \$80,700**

Different patients have different health care needs. The overall goal of the Enhanced Patient Care project is to enhance care for three target populations. To achieve this goal, MCHD will add and redeploy clinic staff and partner with external agencies in order to expand the services we are able to provide to our patients. The target populations and the corresponding interventions to improve their care include:

- a. Patients who receive primary care in MCHD health centers – incorporate Community Health Workers into the clinical setting,
- b. Patients who require hospital care –improve communication with hospitals and refocus role of patient care team member to support care coordination, and
- c. Patients who are high utilizers of multiple services, particularly hospitals (hot spot patients) – implement a Community Outreach Team model.

**Alternative Treatment System for Chronic Pain - \$80,400**

Chronic pain is a challenging condition to treat. Appropriate treatment of chronic pain requires a multidisciplinary approach that involves behavioral health and self-management support. The urgent need to change opiate-prescribing practices in order to increase patient safety has underscored our need to develop a multidisciplinary treatment system for appropriate management of chronic pain.

This project will enable MCHD to develop a comprehensive pain management program to support patients who experience chronic pain. The overall goal of the project is to enhance the care provided to patients with chronic pain while better controlling the use of prescription opiates. The project will work to achieve this goal through components:

- a. Develop a multidisciplinary treatment system for patients with chronic pain,
- b. Review and refine opiate prescribing policies for short term and long term opiate use, and
- c. Coordinate with broader community actions and initiatives.

This budget modification supports Program Offer 40034: Quality Assurance.

**3. Explain the fiscal impact (current year and ongoing).**

Approval of this budget modification will increase the Health Department's federal/state FY 2012 budget by \$161,100. The total awards for these grants total is \$342,015 with the balance of grant funds included in the Department's FY2013 budget request.

**4. Explain any legal and/or policy issues involved.**

N/A

**5. Explain any citizen and/or other government participation that has or will take place.**

We anticipate soliciting patient feedback as we pilot these projects. We also expect to work with the Department of County Human Services and a number of community partners on the development of these projects.

---

**ATTACHMENT A**

---

**Budget Modification**

---

If the request is a Budget Modification, please answer all of the following in detail:

- **What revenue is being changed and why? If the revenue is from a federal source, please list the Catalog of Federal Assistance Number (CFDA).**

The Health Department's federal/state revenue budget will increase by \$161,100 in FY 2012 as a result of the work performed under this award.

These are not federal revenue grants.

- **What budgets are increased/decreased?**

The Health Department's budget will have the following changes:

- Temporary budget will increase by \$105,271
- Non Base Fringe budget will increase by \$32,321
- Non Base Insurance budget will increase by \$5,106
- Direct Client Assistance budget will increase by \$1,100
- Professional Services budget will increase by \$3,000
- Printing budget will increase by \$1,000
- Supplies budget will increase by \$3,082

- Travel & Training budget will increase by \$1,324
- Local Travel/Mileage budget will increase by \$1,224
- Central Indirect budget will increase by \$3,867
- Department Indirect budget will increase by \$3,805

• **What do the changes accomplish?**

The primary accomplishments of the Enhanced Patient Care project will be the incorporation of a Community Health Worker in the clinic, agreements with hospitals about how best to support patients during transitions between the hospital and primary care setting, and through community outreach teams that will develop unique care plans with patients who use hospital services more often than necessary.

The primary accomplishments of the Alternative Treatment System for Chronic Pain project will be the addition of alternative (non-opiate) treatment options for chronic pain, best practice prescribing policies for opiate use, and a standard community approach to prescription drug overdose prevention.

• **Do any personnel actions result from this budget modification? Explain.**

There are no personnel actions as a result of this budget modification. The internal services costs necessary to support any temporary positions are included in the current FY2012 budget.

• **If a grant, is 100% of the central and department indirect recovered? If not, please explain why.**

The revenue covers indirect costs up to 5 percent. Any indirect or administrative costs not recovered from this grant will be funded with existing resources.

• **Is the revenue one-time-only in nature? Will the function be ongoing? What plans are in place to identify a sufficient ongoing funding stream?**

This grant is one-time-only in nature. Funding for the project will primarily support MCHD to implement the project and develop systems so the work is sustainable after the grant period.

• **If a grant, what period does the grant cover? When the grant expires, what are funding plans? Are there any particular stipulations required by the grant (i.e. cash match, in kind match, reporting requirements etc)?**

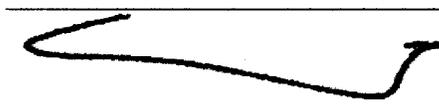
The grant period is December 1, 2011 to November 30, 2012.

There are no match requirements or non-standard reporting requirements.

**ATTACHMENT B**

**BUDGET MODIFICATION: HD-12-12**

**Required Signatures**

Elected Official or Department/ Agency Director:	KaRin Johnson for  	Date: 03-09-2012
Budget Analyst:		Date: 03/12/12
Department HR:		Date: 03/08/2012

Budget Modification ID: HD-12-12

### EXPENDITURES & REVENUES

Please show an increase in revenue as a negative value and a decrease as a positive value for consistency with SAP.

**Budget/Fiscal Year: 2012**

Line No.	Fund Center	Fund Code	Program #	Func. Area	Accounting Unit			Cost Element	Current Amount	Revised Amount	Change Increase/ (Decrease)	Subtotal	Description
					Internal Order	Cost Center	WBS Element						
1	40-80	32240	40034	0030			4CA112-6	50210	-	(80,400)	(80,400)	Increase OP-Nongovt'l Prog	
2	40-80	32240	40034	0030			4CA112-6	60100	-	50,357	50,357	Increase Temporary	
3	40-80	32240	40034	0030			4CA112-6	60135	-	15,462	15,462	Increase Non Base Fringe	
4	40-80	32240	40034	0030			4CA112-6	60145	-	2,443	2,443	Increase Non Base Insurance	
5	40-80	32240	40034	0030			4CA112-6	60155	-	1,100	1,100	Increase Direct Client Asst.	
6	40-80	32240	40034	0030			4CA112-6	60170	-	3,000	3,000	Increase Professional Svcs	
7	40-80	32240	40034	0030			4CA112-6	60180	-	1,000	1,000	Increase Printing	
8	40-80	32240	40034	0030			4CA112-6	60240	-	2,749	2,749	Increase Supplies	
9	40-80	32240	40034	0030			4CA112-6	60270	-	460	460	Increase Local Travel/Mileage	
10	40-80	32240	40034	0030			4CA112-6	60350	-	1,930	1,930	Increase Central Indirect	
11	40-80	32240	40034	0030			4CA112-6	60355	-	1,899	1,899	Increase Dept Indirect	
12													
13	40-80	32240	40034	0030			4CA112-5	50210	(230,000)	(310,700)	(80,700)	Increase OP-Nongovt'l Prog	
14	40-80	32240	40034	0030			4CA112-5	60100	-	54,914	54,914	Increase Temporary	
15	40-80	32240	40034	0030			4CA112-5	60135	-	16,859	16,859	Increase Non Base Fringe	
16	40-80	32240	40034	0030			4CA112-5	60145	-	2,663	2,663	Increase Non Base Insurance	
17	40-80	32240	40034	0030			4CA112-5	60240	636	969	333	Increase Supplies	
18	40-80	32240	40034	0030			4CA112-5	60260	-	1,324	1,324	Increase Travel & Training	
19	40-80	32240	40034	0030			4CA112-5	60270	1,171	1,935	764	Increase Local Travel/Mileage	
20	40-80	32240	40034	0030			4CA112-5	60350	3,067	5,004	1,937	Increase Central Indirect	
21	40-80	32240	40034	0030			4CA112-5	60355	7,885	9,791	1,906	Increase Dept Indirect	
22													
23	72-10	3500		0020		705210		50316	(59,880,411)	(59,885,517)	(5,106)	Insurance Revenue	
24	72-10	3500		0020		705210		60330	4,083,466	4,088,572	5,106	Offsetting Expenditure	
25										-			
26	19	1000		0020		9500001000		50310	(6,782,381)	(6,786,248)	(3,867)	Indirect Reimb Rev in GF	
27	19	1000		0020		9500001000		60470	10,688,280	10,692,147	3,867	CGF Contingency Expenditure	
28	40-90	1000	40040	0030		409050		50370	(6,035,974)	(6,039,779)	(3,805)	Dept Indirect Revenue	
29	40-90	1000	40040	0030		409001		60100	149,292	153,097	3,805	Dept Indirect Offsetting Exp	
										-	-	<b>Total - Page 1</b>	
										-	-	<b>GRAND TOTAL</b>	



FM Side			PS/CO Side			Cost Element/ Commitment Item	Notes
FM Fund Center	FM Fund Code	Functional Area	Internal Order	Cost Center	WBS Element		
<b>General Fund Contingency</b>							
19	1000	0020		9500001000		60470	Reduce available General Fund Contingency
xx-xx	xxxxx	0020		xxx	xxx	xxxxx	Increase Expenditure
<b>Indirect</b>							
<b>Central</b>							
xx-xx	xxxxx				xxx	60350	Indirect Expenditure
19	1000	0020		9500001000		50310	Indirect reimbursement revenue in General Fund
19	1000	0020		9500001000		60470	CGF Contingency expenditure
<b>Departmental</b>							
xxx	xxxxx				xxx	60355	Indirect Department Expenditure
xx-xx	1000			xxx	xxx	50370	Indirect Dept reimbursement revenue in General Fund
xx-xx	1000			xxx	xxx	xxx	Off setting Dept expenditure in General Fund
<b>Telecommunications</b>							
xx-xx	xxxxx				xxx	60370	Departmental telecommunication expenditure
72-60	3503	0020		709525		50310	Budgets receipt of reimbursement
72-60	3503	0020		709525		60200	Budgets offsetting expenditure in telecommunications fund
<b>Data Processing</b>							
xx-xx	xxxxx				xxx	60380	Departmental data processing expenditures
72-60	3503	0020		709000		50310	Budgets receipt of Data Processing reimbursement
72-60	3503	0020		709000		60240	Budgets offsetting expenditures
<b>PC Flat Fee (Flat Fee is no longer in effect for most Departments beginning in FY 2007)</b>							
xx-xx	xxxxx				xxx	60390	Departmental PC Flat Fee expenditure
72-60	2508	0020		between 709201 & 709211		50310	Budgets receipt of PC Flat Fee
72-60	2508	0020		between 709201 & 709211		60240	Budgets offsetting expenditure
<b>Electronic Service Reimbursement</b>							
xx-xx	xxxxx					60420	Departmental Electronics expenditure
72-55	3501	0020		904200		50310	Receipt of Electronics service reimbursement
72-55	3501	0020		904200		60240	Budgets offsetting expenditure
<b>Motor Pool</b>							
xx-xx	xxxxx				xxx	60410	Departmental Motor Pool expenditure
72-55	3501	0020		904100		50310	Budgets receipt of Motor Pool service reimbursement
72-55	3501	0020		904100		60240	Budgets offsetting expenditure
<b>Building Management</b>							
xx-xx	xxxxx				xxx	60430	Departmental Building Management expenditure
72-50	3505	0020		902575		50310	Budgets receipt of Building Management service reimbursement
72-50	3505	0020		902575		60170	Budgets offsetting expenditure
<b>Insurance Service Reimbursement</b>							
xx-xx	xxxxx					60140 or 60145	Departmental Insurance expenditure
72-10	3500	0020		705210		50316	Insurance Revenue
72-10	3500	0020		705210		60330	Offsetting expenditure
<b>Lease Payments to Capital Lease Retirement Fund</b>							
xx-xx	xxxxx					60450	Departmental Capital Lease Retirement expenditure Contact your Budget Analyst to complete this.
<b>Mail &amp; Distribution</b>							
xx-xx	xxxxx				xxx	60460	Mail & Distribution expenditure
72-55	3504	0020		904400		50310	Budgets receipt of service reimbursement
72-55	3504	0020		904400		60230	Budgets offsetting expenditure
<b>Records</b>							
xx-xx	xxxxx				xxx	60460	Records expenditure
72-55	3504	0020		904500		50310	Budgets receipt of service reimbursement
72-55	3504	0020		904500		60240	Budgets offsetting expenditure
<b>Stores</b>							
xx-xx	xxxxx				xxx	60460	Stores expenditure
72-55	3504	0020		904600		50310	Budgets receipt of service reimbursement
72-55	3504	0020		904600		60240	Budgets offsetting expenditure

**How are functional areas assigned to cost objects?**

For the most part, functional area is related to what department has recorded the revenue or expenditure (i.e. the District Attorney is reported in Public Safety and Justice). There are some exceptions to this rule that require certain funds to be assigned to a particular functional area, regardless of what department the revenues or expenditures are recorded in.

Functional Area Assignments ~ Based on Fund		
1501 – Road Fund	Roads and Bridges	80
1502 – Emergency Communications Fund	Community Services	60
1503 – Bike Path Fund	Community Services	60
1504 – Recreation Fund	Community Services	60
1506 – County School Fund	Community Services	60
1509 – Willamette River Bridges Fund	Roads and Bridges	80
1510 – Library Fund	Library	70
1512 – Land Corner Preservation Fund	Roads and Bridges	80
2500 – Justice Bond Project Fund	Public Safety and Justice	50
2501 – Revenue Bond Project Fund	Community Services	60
2502 – SB 1145 Fund	Public Safety and Justice	50
2504 – Building Project Fund	Community Services	60
2505 – Deferred Maintenance Fund	Community Services	60
2506 – Library Construction / 1996 Bonds Fund	Library	70
2507 – Capital Improvement Fund	Community Services	60
2509 – Asset Preservation Fund	Community Services	60
2510 – Library Property Fund	Library	70
3000 – Dunthorpe-Riverdale Service Dist #14 Fund	Dunthorpe-Riverdale Service Dist #14	500
3001 – Mid County Service District #1 Fund	Mid County Service District #1	510
3002 – Behavioral Health Managed Care Fund	Behavioral Health Managed Care	520

If a cost object is not in one of the funds listed above, then the functional area should be assigned based on the department that the cost object is in.

Functional Area Assignments ~ Based on Department (Fund Center)		
Non-Departmental (10, except 10-50)	General Government	20
Non-Departmental – CCFC (10-50)	Social Services	40
District Attorney (15)	Public Safety and Justice	50
Countywide (18 & 19)	General Government	20
Human Services (20, 25, 26, 30 & 31)	Social Services	40
School and Community Partnerships (21)	Social Services	40
Health (40)	Health Services	30
Community Justice (50)	Public Safety and Justice	50
Sheriff's Office (60)	Public Safety and Justice	50
County Management (72)	General Government	20
Community Services (91)	General Government	20
Library (80)	Library	70

If you have any questions or comments, please contact Susan Luce in General Ledger at ext. 22138.