



**MULTNOMAH COUNTY
AGENDA PLACEMENT REQUEST
BUDGET MODIFICATION**

(Revised 12/31/09)

APPROVED: MULTNOMAH COUNTY
BOARD OF COMMISSIONERS
AGENDA # R-9 DATE 02/04/2010
LYNDA GROW, BOARD CLERK

Board Clerk Use Only	
Meeting Date:	<u>02/04/2010</u>
Agenda Item #:	<u>R-9</u>
Est. Start Time:	<u>10:20 AM</u>
Date Submitted:	<u>01/27/2010</u>

BUDGET MODIFICATION: HD-10-19

<p>BUDGET MODIFICATION HD-10-19 Appropriating \$68,921 in Additional Agenda Revenue from the Department of Health and Human Services – Ryan White Title: Part C Expansion Grant</p>
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Note: For all other submissions (i.e. Notices of Intent, Ordinances, Resolutions, Orders or Proclamations) please use the APR short form.

Requested Meeting Date:	<u>February 4, 2010</u>	Amount of Time Needed:	<u>5 minutes</u>
Department:	<u>Health</u>	Division:	<u>Integrated Clinical Services</u>
Contact(s):	<u>Lester A. Walker, Finance and Budget Manager</u>		
Phone:	<u>(503) 988-3674</u>	Ext.	<u>26457</u>
		I/O Address:	<u>167/2/210</u>
Presenter(s):	<u>Jo Ann Davich, Program Manager – HIV Clinical Services</u>		

General Information

1. What action are you requesting from the Board?

Approval of appropriation of \$68,921 in carryover revenue from the Department of Health and Human Services Ryan White Part C Expansion Grant to support the Multnomah County Health Department's HIV Clinical Services.

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.

Multnomah County Health Department (MCHD) has provided medical care to HIV infected individuals from the onset of HIV disease through its primary care clinics. To respond to the growing number of HIV/AIDS clients and the demand for specialized care from "expert" providers, MCHD applied for and was awarded Ryan White Part C (formerly called Title III) Early Intervention funds from the Department of Health and Human Services (DHHS) in 1990 which established the HIV Health Services Center (HIV Clinic) in 1990.

73% of Oregon's HIV/AIDS cases (close to 4,000 persons) live in the HIV Clinic service area. Each year, another 200+ persons are newly diagnosed with HIV/AIDS in the greater Portland area fueling a continuing public health problem. In FY 2009, the HIV Clinic served 972 low-income patients. This is almost 25% of the total number of persons living with HIV residing in our service area and 7% more clients than served in FY 2008. HIV Clinic patients are likely to be socially stigmatized, economically deprived, and burdened by co-morbid illnesses such as TB, Hepatitis and cancer. Additionally, our client population is aging and their average number of diagnoses has increased steadily from an average of 6.7 diagnoses per client in 1995 to an average of 9.2 diagnoses per client in 2008. When compared to the general population, our patients are five times more likely to be below 100% of the poverty level; almost nine times more likely to be homeless; and twice as likely to be substance abusers and to suffer from mental illness.

In June 2007, HIV Clinic applied for a Ryan White CARE Act Part C Expansion grant. This was an ongoing expansion funding opportunity for current Part C grantees, in order to support increased costs of care including increased numbers of patients and unmet need for early intervention services in the community. We did not receive a response to this grant application until April 2008, when we received a Notice of Grant Award for increasing our annual grant from \$767,503 to \$910,321. The Part C grant year is January 1 through December 31. We received approval for this carryover from DHHS on July 23, 2009. The \$68,921 in carryover funds are being used to support on-call clinical medical assistant staff.

This action supports Program Offer 40012 – Services for Persons Living with HIV. The HIV Care Services Program (HCS) and HIV Health Services Center (HIV Clinic) provide community-based primary care and support services to highly vulnerable populations living with HIV. Services target low income, uninsured, mentally ill, substance abusing, and other special needs populations. These services contribute to lower mortality from HIV, fewer disease complications, and reduced transmission of HIV in the community.

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

Approval of this budget modification will increase the Health Department's federal/state FY10 budget by \$68,921.

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

None

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

None

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 \$68,921 in FY10 as a result of the work performed under this award. – CFDA #93.918

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

As a result of these changes the Health Department's budget will have the following changes:

- Temporary Personnel budget will increase by \$55,990.
- Non Base Salary Related Expense budget will increase by \$4,658.
- Non Base Insurance Benefits budget will increase by \$2,380.
- Central indirect budget will increase by \$1,714.
- Departmental indirect budget will increase by \$4,179.

- **What do the changes accomplish?**

This grant program will provide on-call staff hours to support the dramatic increase in patients that the clinic has experienced over the past three years—from 665 clients served in FY 2005 to 972 clients in FY 2009.

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

No additional FTE will result from this budget modification.

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

The revenue covers 100% of these costs.

- **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?**

The on-call hours supported by the carryover funds will be supported by third party billing revenue, if available. Otherwise, the on-call hours will be eliminated.

- **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 covers budget period 1/1/09 – 12/31/09. When the grant expires, the project will have been completed. There are no cash match or in kind match requirements for this grant. Additionally, there are no specific reporting requirements beyond the standard federal reporting requirement of an annual Financial Status Report (FSR).

NOTE: If a Budget Modification or a Contingency Request attach a Budget Modification Expense & Revenues Worksheet and/or a Budget Modification Personnel Worksheet.

ATTACHMENT B

BUDGET MODIFICATION: HD-10-19

Required Signatures

**Elected Official or
Department/
Agency Director:**

Lillian Shirley

**Date: 01-19-2010
WL/lp**

Budget Analyst:

[Signature]

Date: 01/27/2010

Department HR:

[Signature]

Date: 01/12/2010

Countywide HR:

Date: _____

FM Side			PS/CO Side			Cost Element/ Commitment Item	Notes
FM Fund Center	FM Fund Code	Functional Area	Internal Order	Cost Center	WBS Element		
General Fund Contingency							
19	1000	0020		9500001000		60470	Reduce available General Fund Contingency
xx-xx	xxxxx	0020		xxx	xxx	xxxxx	Increase Expenditure
Indirect							
Central							
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
Departmental							
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
Telecommunications							
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
Data Processing							
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
PC Flat Fee (Flat Fee is no longer in effect for most Departments beginning in FY 2007)							
xx-xx	xxxxx				xxx	60390	Departmental PC Flat Fee expenditure
				between 709201 & 709211			
72-60	2508	0020		between 709201 & 709211		50310	Budgets receipt of PC Flat Fee
72-60	2508	0020		709201 & 709211		60240	Budgets offsetting expenditure
Electronic Service Reimbursement							
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
Motor Pool							
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
Building Management							
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
Insurance Service Reimbursement							
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
Lease Payments to Capital Lease Retirement Fund							
xx-xx	xxxxx					60450	Departmental Capital Lease Retirement expenditure Contact your Budget Analyst to complete this.
Mail & Distribution							
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
Records							
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
Stores							
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.

Budget Modification ID: **HD-10-19**

EXPENDITURES & REVENUES

Budget/Fiscal Year: 2010

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

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	40-70	20390	40012	0030			4FA25-19-1	50170	0	(68,921)	(68,921)		Increase IG-OP-Other
2	40-70	20390	40012	0030			4FA25-19-1	60100	0	55,990	55,990		Increase Temporary Personnel
3	40-70	20390	40012	0030			4FA25-19-1	60135	0	4,658	4,658		Increase Temp Fringe
4	40-70	20390	40012	0030			4FA25-19-1	60145	0	2,380	2,380		Increase Temp Insurance
5	40-70	20390	40012	0030			4FA25-19-1	60350	0	1,714	1,714		Increase Central Indirect
6	40-70	20390	40012	0030			4FA25-19-1	60355	0	4,179	4,179		Increase Departmental Indirect
7													
8	19	1000	40012	0020		9500001000		50310	(6,836,431)	(6,838,145)	(1,714)		Indirect reimbursement rev in GF
9	19	1000	40012	0020		9500001000		60470	7,251,652	7,253,366	1,714		CGF Contingency expenditure
10													
11	40-40	1000	40040	0030				50370	(4,847,492)	(4,851,671)	(4,179)		Indirect dept reimbursement rev in GF
12	40-40	1000	40040	0030				60000	293,225	297,404	4,179		Off setting dept expenditure in GF
13													
14	72-10	3500		0020				50316	(52,067,858)	(52,070,238)	(2,380)		Insurance Revenue
15	72-10	3500		0020				60330	124,699	127,079	2,380		Offsetting Transaction
16													
17													
18													
19													
20													
21													
22													
23													
24													
25													
26										-			
27										-			
28										-			
29										-			
											0	0	Total - Page 1
											0	0	GRAND TOTAL