



Multnomah County Agenda Placement Request Budget Modification

(Revised 9/23/13)

APPROVED: MULTNOMAH COUNTY
BOARD OF COMMISSIONERS

AGENDA # R-4 DATE 6/11/15

MARINA BAKER, ASST BOARD CLERK

Board Clerk Use Only

Meeting Date: 6/11/15

Agenda Item #: R.4

Est. Start Time: 10:40 am

Date Submitted: 5/21/15

Agenda Title: BUDGET MODIFICATION # HD-36-15: Request approval to appropriate \$5,000,000 in increased revenue from intergovernmental charges.

Requested Meeting Date: 6/11/15

Time Needed: 10 Minutes

Department: 40 - Health Department

Division: Integrated Clinic Services

Contact(s): Robert Stoll, Budget and Finance Manager

Phone: 503-988-8445

Ext. 88445

I/O Address 167/2/210

Presenter Name(s) & Title(s): Joanne Fuller, Health Department Director

General Information

1. What action are you requesting from the Board?

Approval to appropriate \$5,000,00 in increased revenue from intergovernmental charges for dental and pharmacy 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.

This budget modification appropriates \$5,000,000 in intergovernmental revenue to bring the Health Department's budget in line with estimated revenue and not exceed budget authority by collecting more revenue than is budgeted.

This budget modification increases the Integrated Clinical Services' (ICS) budget by \$5,000,000 to bring budgeted revenue in line with estimated fee revenue. The increased revenue comes from 1) a higher percentage of insured dental clients; and 2) higher prescription revenue due to productivity increases and service expansion.

These changes impact program offers 40017: Dental Services and 400031: Pharmacy.

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

Approval of this budget modification will increase the Health Department's federal/state FY 2015 budget by \$5,000,000.

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

Without this budget modification the Health Department would likely violate Oregon Budget Law by collecting more revenue than is authorized in the budget. This budget modification is necessary to keep this violation from occurring.

5. Explain any citizen or other government participation.

N/A

Budget Modification

6. 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 budget will increase by \$5,000,000 in FY 2015. There is no CFDA number associated with this revenue.

7. What budgets are increased/decreased?

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

- * Medical Supplies budget will increase by \$504,210
- * Drugs budget will increase by \$4,048,694
- * Central Indirect budget will increase by \$106,539
- * Department Indirect budget will increase by \$340,557

8. What do the changes accomplish?

These changes will help the Health Department avoid a likely violation of Oregon Budget law by increasing budget authority to accommodate estimated fee revenue.

9. Do any personnel actions result from this budget modification?

There are no personnel actions associated with this budget modification.

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

All indirect costs are recovered from Medicaid and Medicare intergovernmental charges.

11. 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 revenue is the result of an ongoing function.

12. 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 (e.g. cash match, in kind match, reporting requirements, etc)?

This budget modification is not grant related.

Required Signature

Elected Official or Joanne Fuller /s/
Dept. Director: _____

Date: 05/20/2015 _____

Budget Analyst: Shannon Gutierrez /s/

Date: 05/21/2015 _____

Department HR: _____

Date: _____

Countywide HR: _____

Date: _____

Exp/Rev/FTE - Budget Modification

Budget Year: 2015

Budget Modification: HD-36-15

Expenditures & Revenues

An increase in revenue is shown as a negative value and a decrease as a positive value for consistency with SAP.

Line No.	Program Offer Number	Fund Code	Fund Center	Func. Area	Cost Object	Cost Element	Current Amount	Revised Amount	Change Increase/ (Decrease)	Subtotal
1	40017A-15	26030	40-60	0030	46300-00-26030	50236 - IG-Charges For Srvc	(336,974)	(419,067)	(82,093)	
2	40017A-15	26030	40-60	0030	46300-00-26030	60246 - Med&Dental Supplies	0	74,753	74,753	
3	40017A-15	26030	40-60	0030	46300-00-26030	60350 - Central Indirect	7,180	8,929	1,749	
4	40017A-15	26030	40-60	0030	46300-00-26030	60355 - Dept Indirect	22,952	28,543	5,591	
5	40017A-15	26030	40-60	0030	46550-00-26030	50236 - IG-Charges For Srvc	(219,408)	(441,841)	(222,433)	
6	40017A-15	26030	40-60	0030	46550-00-26030	60246 - Med&Dental Supplies	14,724	217,267	202,543	
7	40017A-15	26030	40-60	0030	46550-00-26030	60350 - Central Indirect	4,675	9,415	4,740	
8	40017A-15	26030	40-60	0030	46550-00-26030	60355 - Dept Indirect	14,944	30,094	15,150	
9	40017A-15	26030	40-60	0030	46600-00-26030	50236 - IG-Charges For Srvc	(213,913)	(256,880)	(42,967)	
10	40017A-15	26030	40-60	0030	46600-00-26030	60246 - Med&Dental Supplies	794	39,918	39,124	
11	40017A-15	26030	40-60	0030	46600-00-26030	60350 - Central Indirect	4,558	5,474	916	
12	40017A-15	26030	40-60	0030	46600-00-26030	60355 - Dept Indirect	14,570	17,497	2,927	
13	40017A-15	26030	40-60	0030	46650-00-26030	50236 - IG-Charges For Srvc	(193,836)	(259,342)	(65,506)	
14	40017A-15	26030	40-60	0030	46650-00-26030	60246 - Med&Dental Supplies	9,700	69,348	59,648	
15	40017A-15	26030	40-60	0030	46650-00-26030	60350 - Central Indirect	4,130	5,526	1,396	
16	40017A-15	26030	40-60	0030	46650-00-26030	60355 - Dept Indirect	13,202	17,664	4,462	
17	40017A-15	26030	40-60	0030	46750-00-26030	50236 - IG-Charges For Srvc	(457,002)	(513,756)	(56,754)	
18	40017A-15	26030	40-60	0030	46750-00-26030	60246 - Med&Dental Supplies	24,174	75,853	51,679	
19	40017A-15	26030	40-60	0030	46750-00-26030	60350 - Central Indirect	9,738	10,947	1,209	
20	40017A-15	26030	40-60	0030	46750-00-26030	60355 - Dept Indirect	31,128	34,994	3,866	
21	40017A-15	26030	40-60	0030	46800-00-26030	50236 - IG-Charges For Srvc	(150,314)	(234,285)	(83,971)	
22	40017A-15	26030	40-60	0030	46800-00-26030	60246 - Med&Dental Supplies	33,779	110,242	76,463	
23	40017A-15	26030	40-60	0030	46800-00-26030	60350 - Central Indirect	3,203	4,992	1,789	
24	40017A-15	26030	40-60	0030	46800-00-26030	60355 - Dept Indirect	10,238	15,957	5,719	
26030 Total										0
40-60 Total										0
Program Offer Number 40017A-15 Total										
25	40031-15	26020	40-80	0030	48200-00-26020	50236 - IG-Charges For Srvc	(4,698,000)	(6,921,138)	(2,223,138)	
26	40031-15	26020	40-80	0030	48200-00-26020	60310 - Drugs	91,193	2,115,540	2,024,347	
27	40031-15	26020	40-80	0030	48200-00-26020	60350 - Central Indirect	100,103	147,473	47,370	
28	40031-15	26020	40-80	0030	48200-00-26020	60355 - Dept Indirect	319,988	471,409	151,421	
26020 Total										0
29	40031-15	26080	40-80	0030	48200-00-26080	50236 - IG-Charges For Srvc	(4,168,414)	(6,391,552)	(2,223,138)	
30	40031-15	26080	40-80	0030	48200-00-26080	60310 - Drugs	1,180,000	3,204,347	2,024,347	
31	40031-15	26080	40-80	0030	48200-00-26080	60350 - Central Indirect	88,819	136,189	47,370	
32	40031-15	26080	40-80	0030	48200-00-26080	60355 - Dept Indirect	283,917	435,338	151,421	
26080 Total										0
40-80 Total										0
Program Offer Number 40031-15 Total										
33	40040-15	1000	40-90	0030	409001	50370 - Dept Indirect Rev	(7,383,680)	(7,724,237)	(340,557)	
34	40040-15	1000	40-90	0030	409001	60100 - Temporary	643,383	983,940	340,557	
1000 Total										0
40-90 Total										0
Program Offer Number 40040-15 Total										
35	95000-15	1000	19	0020	9500001000	60470 - Contingency	9,326,928	9,433,467	106,539	
1000 Total										106,539
19 Total										106,539
Program Offer Number 95000-15 Total										
36	95001-15	1000	19	0020	9500001000	50310 - Intl Svc Reimburse	(7,315,812)	(7,422,351)	(106,539)	
1000 Total										(106,539)
19 Total										(106,539)
Program Offer Number 95001-15 Total										

Exp/Rev/FTE - Budget Modification

Budget Modification: HD-36-15

Annualized Personnel Changes

Change is shown on a full year basis even though this action affects only a part of the fiscal year (FY).

No positions were affected by this Budget Modification.

Current Year Personnel Changes

Cost/savings that will take place in this FY; these explain the actual dollar amounts being changed by this BudMod.

No positions were affected by this Budget Modification.