



MULTNOMAH COUNTY AGENDA PLACEMENT REQUEST NOTICE OF INTENT

(Revised: 8/18/11)

APPROVED: MULTNOMAH COUNTY
BOARD OF COMMISSIONERS

AGENDA # R-3 DATE 5/30/13
MARINA BAKER, ASST BOARD CLERK

Board Clerk Use Only

Meeting Date: 5/30/13
Agenda Item #: R.3
Est. Start Time: 9:20 am
Date Submitted: 5/14/13

Agenda Title: **NOTICE OF INTENT to submit an application for \$292,424 to the Health Resources and Services Administration's Health Centers Outreach and Enrollment Assistance Grant.**

Note: If Ordinance, Resolution, Order or Proclamation, provide exact title. For all other submissions, provide a clearly written title sufficient to describe the action requested.

Requested Meeting Date:	<u>May 30, 2013</u>	Time Needed:	<u>5 min.</u>
Department:	<u>Health</u>	Division:	<u>Integrated Clinical Services</u>
Contact(s):	<u>Marc Harris; Vanetta Abdellatif; Christy Ward</u>		
	<u>29778;</u>		
	<u>26210;</u>		
Phone:	<u>503-988-3663</u>	Ext.	<u>86642</u>
Presenter Name(s) & Title(s):	<u>I/O Address: 160/9</u> <u>Marc Harris, Health Services Development Administrator; Vanetta Abdellatif, Integrated Clinical Services Director; Christy Ward, Health Centers Division Operations Director</u>		

General Information

1. What action are you requesting from the Board?

Authorization for the Director of the Health Department to submit a grant for \$292,424 to the Health Resources and Services Administration's Health Centers Outreach and Enrollment Assistance Grant.

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 grant is a supplemental funding opportunity available to current Health Center Program (Section 330) grantees to expand current outreach and enrollment assistance activities and facilitate enrollment of eligible health center patients and service area residents into affordable health insurance coverage made possible through Cover Oregon, Oregon's new Health Insurance Marketplace that will offer Medicaid and private insurance options. Cover Oregon enrollment will open on October 1, 2013 and insurance benefits will become active on January 1, 2014. The requested grant funds will cover the costs of raising awareness of affordable insurance options and providing eligibility and enrollment

assistance to uninsured Health Department patients and other uninsured residents in Multnomah County.

Through a formula based on the proportion of Multnomah County Health Department's uninsured patients, HRSA has determined that the Health Department is eligible to apply for \$292,424. The Health Department's application will propose using these funds to hire staff to conduct outreach to uninsured clients and community members; educate them on affordable insurance options; and enroll them in insurance through Cover Oregon. These activities will be executed over a 12-month project period beginning July 2013. The outreach and enrollment achieved through this grant will allow 3,000-4,000 previously uninsured Multnomah County clients and residents to benefit from health insurance coverage.

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

This grant will provide the Health Department with \$292,424 to be spent over a 12 month project period.

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

This funding opportunity is being offered in response to federal and state changes in health insurance coverage (i.e. the federal Affordable Care Act's encouragement for states to create health insurance exchanges and expand Medicaid eligibility, and the State of Oregon's legislation to enact these changes).

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

None.

Grant Application/Notice of Intent

If the request is a Grant Application or Notice of Intent, please answer all of the following in detail:

- **Who is the granting agency?**

The granting agency is the Health Resources and Services Administration.

- **Specify grant (matching, reporting and other) requirements and goals.**

The goal of the grant is to assist health centers in expanding current outreach and enrollment assistance activities and facilitate enrollment of eligible health center patients and service area residents into affordable health insurance coverage. Matching is not required. Awardees must submit quarterly progress reports.

- **Explain grant funding detail – is this a one time only or long term commitment?**

This is a one-time grant to be spent over a 12-month project period. However, the funding may be included as part of future Health Center Program H80 grant awards.

- **What are the estimated filing timelines?**

The application is due May 31, 2013.

- **If a grant, what period does the grant cover?**

The grant covers the period of July 2013 through June 2014.

- **When the grant expires, what are funding plans?**

The Department will determine future funding plans upon being notified if the funds will be included in future Health Center Program H80 grant awards. Regardless, enrollment work will continue to take place through the Departments current Enrollment Specialist staff.

- Is 100% of the central and departmental indirect recovered? If not, please explain why.

Yes, 100% of indirect costs are covered in the grant.

Required Signatures

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

KaRin Johnson for

05-14-13

Lillian Shirley

Date:

(signature)

Name/Title:

Budget Analyst:

Althea Gregory /s/

Date: 5-14-13

(signature)

Name/Title: