



# MULTNOMAH COUNTY AGENDA PLACEMENT REQUEST BUDGET MODIFICATION

(Revised: 8/18/11)

### Board Clerk Use Only

**Meeting Date:** 5/9/13  
**Agenda Item #:** R.9  
**Est. Start Time:** 10:40 am  
**Date Submitted:** 5/1/13

**Agenda Title:** **BUDGET MODIFICATION # HD-13-18 – Request approval to appropriate \$300,000 in revenue from the Department of Health & Human Services**

*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>9 May 2013</u>	<b>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 Name(s) &amp; Title(s):</b>	<u>Jodi Davich, HIV Health Services Center Manager; Vanetta Abdellatif, Integrated Clinical Services Director</u>		
<b>I/O Address:</b>	<u>167/2/210</u>		

### General Information

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

Approval to appropriate \$300,000 in revenue from the Department of Health and Human Services (DHHS) – Special Projects of National Significance (SPNS) 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.**

The Special Projects of National Significance (SPNS) Program supports the development of innovative models of HIV care to quickly respond to the emerging needs of clients served by the Ryan White HIV/AIDS Programs. According to the Centers for Disease Control and Prevention, national HIV incidence in the United States is now relatively stable. However, as many as one third of those previously diagnosed and aware of their HIV infection remain out of care. Homeless persons living with HIV who also have persistent mental illness and substance use disorders present a formidable challenge for public health authorities seeking to engage and retain them in HIV primary care. The daily imperative of meeting subsistence needs (food, shelter, clothing, etc.) makes getting any form of medical care a secondary concern for most homeless people, until a medical issue becomes acute and warrants a visit to the emergency room and often subsequent hospitalization.

Data show that these issues are highly present in Multnomah County. According to the 2010 United States Conference of Mayors Hunger and Homelessness Survey, 15% of the homeless population in Portland is HIV-positive; this value was the highest of all cities surveyed across the nation. Approximately 36% of homeless individuals in Portland are dually diagnosed with mental illness, substance abuse, and a chronic health condition, such as HIV.

The purpose of this SPNS Program funding is to implement and evaluate models for providing coordinated or integrated care for multiply-diagnosed HIV positive homeless individuals that will help in the implementation of medical homes for the target population. The Health Department's HIV Health Services Center (HHSC) plans to support a program supervisor and three Navigators, to be housed at Cascade AIDS Project (CAP). The Navigators will be fully integrated into HHSC's medical home model provider teams and coordinate and accompany patients to medical and support service appointments. While integrating Navigators into a medical home provider team is new territory for HHSC, there is strong evidence supporting its efficacy for retaining patients in care. The project will also pilot newer technologies by using iPads to facilitate teleconferences from the field between patients and medical team members. Implementing this project will greatly improve HHSC's ability to care for the most vulnerable patients and will contribute to its reputation as a leader in HIV specialty services.

This budget modification supports Program Offer 40012: Services for Persons Living with HIV.

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

Approval of this budget modification will increase the Health Department's federal/state FY 2013 budget by \$300,000. There is no impact to the County General Fund. This grant has a 5-year project period, and the program will receive \$300,000 annually through FY 2017.

**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.**

The HIV Health Services Center will contract with the Cascade AIDS Project and will partner with Central City Concern, as well as other service providers identified during the project period. The project will have an oversight committee of local stakeholders to help steer project activities. The HIV Health Services Center's Client Advisory Board assisted in developing the model and is fully supportive of the project.

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**Budget Modification**

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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 \$300,000 in FY 2013 as a result of the work performed under this award.

This is federal revenue, CFDA 93.928: Special Projects of National Significance.

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

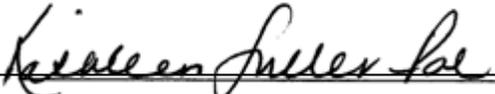
The Health Department's budget will have the following changes:

- Permanent budget will increase by \$15,293
- Temporary budget will increase by \$23,107

- Salary Related Expense budget will increase by \$4,519
  - Non Base Fringe budget will increase by \$5,988
  - Insurance Benefits budget will increase by \$4,838
  - Non Base Insurance budget will increase by \$1,120
  - Professional Services budget will increase by \$203,692
  - Supplies budget will increase by \$2,830
  - Travel & Training budget will increase by \$9,438
  - Software License/Maintenance budget will increase by \$4,000
  - Central Indirect budget will increase by \$6,294
  - Department Indirect budget will increase by \$18,881
- **What do the changes accomplish?**  
This project will design, implement, and evaluate models for providing coordinated or integrated care for multiply-diagnosed HIV-positive homeless individuals that will lead to the development of a medical home for this target population.
  - **Do any personnel actions result from this budget modification? Explain.**  
This budget modification will add a 0.25 FTE Project Manager, position 715923. This position was approved by Class/Comp on 04/01/2013 with request #2165. The internal services costs necessary to support this position are included in the FY 2013 budget.
  - **If a grant, is 100% of the central and department indirect recovered? If not, please explain why.**  
The revenue covers all central and department indirect 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?**  
This grant is a 5-year award with an annual amount of \$300,000 per year.
  - **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 current grant period is September 1, 2012 to August 31, 2013.  
The full project period is September 1, 2012 to August 31, 2017.  
There are no match requirements or non-standard reporting requirements.

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

**Required Signature**

<b>Elected Official or Dept Director:</b>		<b>Date:</b> 4/25/2013
<b>Budget Analyst:</b>	Althea Gregory /s/	<b>Date:</b> 4/30/2013
<b>Department HR:</b>		<b>Date:</b> 4/18/2013
<b>Countywide HR:</b>		<b>Date:</b> 4/30/13