



**Multnomah County
Agenda Placement Request
Budget Modification**
(FY 2018)

APPROVED: MULTNOMAH COUNTY
BOARD OF COMMISSIONERS,
AGENDA # R.4 DATE 6/21/18
MARINA BAKER, BOARD CLERK

Board Clerk Use Only

Meeting Date: 6/21/18
Agenda Item #: R.4
Est. Start Time: 10:00 a.m.
Date Submitted: 5/31/18

Agenda Title: BUDGET MODIFICATION # HD-38-18: Request approval to appropriate \$5,000,000 in increased revenue from Integrated Clinical Service

Requested Meeting Date: 6/21/18 Time Needed: 5 Minutes

Department: 40 - Health Department Division: Integrated Clinical Services

Contact(s): Angel Landron-Gonzalez, Budget & Finance Manager

Phone: 503-988-7438 Ext. 87438 I/O Address 167/2/210

Presenter Name(s) & Title(s): Mark Lewis, Health Department Deputy Director

General Information

1. What action are you requesting from the Board?

Approval to appropriate \$5,000,000 in increased revenue from Medicaid incentives and intergovernmental charges for pharmacy and primary care 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 Medicaid incentives and intergovernmental revenue to bring the Health Department's budget in line with actual expenditures and will prevent spending more revenue than the budgeted authority.

This budget modification increases pharmacy and primary care related revenue in the Integrated Clinical Services' (ICS) budget by \$5,000,000 to increase the budget to match estimated expenditures for FY 2018.

These changes impact program offers:

- 40031: Pharmacy
- 40019: North Portland Health Clinic
- 40020: Northeast Health Clinic
- 40022: Mid County Health Clinic

40023: East County Health Clinic
40026: La Clinica de Buena Salud
40027: Southeast Health Clinic
40029: Rockwood Community Health Clinic

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

Approval of this budget modification will increase the Health Department's federal/state budget by \$1,000,000 and the general fund/FQHC Medicaid budget by \$4,000,000.

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

Without this budget modification, the Health Department would likely violate Oregon Budget Law or would be unable to expend collected revenues. 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 \$1,000,000 and the general fund/FQHC Medicaid budget will increase by \$4,000,000 in FY 2018. There is no CFDA number associated with this revenue.

7. What budgets are increased/decreased?

The Health Department's Pharmaceuticals budget will increase by \$3,000,000, and the Medical and Dental Supplies budget will increase by \$2,000,000.

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.

Yes, this revenue source allows for the recovery of indirect expenses. However, since indirects are only assessed on personnel expenses, they're not applicable to this budget modification.

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 operation.

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
Dept. Director:** Wendy Lear/s/

Date: 03/02/2018

Budget Analyst: Trista Zugel-Bensel

Date: 5/30/2018

Department HR: _____

Date: _____

Countywide HR: _____

Date: _____

Exp/Rev/FTE - Budget Modification

Budget Year: 2018

Budget Modification: HD-38-18

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	40019-18	10010	40-70	0030	47600-00-10010	50236 - IG-Charges For Srvc	(227,964)	(247,964)	(20,000)	
2	40019-18	10010	40-70	0030	47600-00-10010	60310 - Pharmaceuticals	60	20,060	20,000	
3	40019-18	10010	40-70	0030	47600-10-10010	50236 - IG-Charges For Srvc	(2,337,256)	(2,517,256)	(180,000)	
4	40019-18	10010	40-70	0030	47600-10-10010	60310 - Pharmaceuticals	0	180,000	180,000	
10010 Total										0
40-70 Total										0
Program Offer Number 40019-18 Total										0
5	40020-18	10010	40-70	0030	47650-10-10010	50236 - IG-Charges For Srvc	(2,872,120)	(3,132,120)	(260,000)	
6	40020-18	10010	40-70	0030	47650-10-10010	60310 - Pharmaceuticals	16,208	276,208	260,000	
10010 Total										0
40-70 Total										0
Program Offer Number 40020-18 Total										0
7	40022-18	10010	40-70	0030	47550-10-10010	50236 - IG-Charges For Srvc	(5,751,641)	(6,331,641)	(580,000)	
8	40022-18	10010	40-70	0030	47550-10-10010	60310 - Pharmaceuticals	0	580,000	580,000	
10010 Total										0
40-70 Total										0
Program Offer Number 40022-18 Total										0
9	40023-18	10010	40-70	0030	47500-00-10010	50236 - IG-Charges For Srvc	(515,489)	(555,489)	(40,000)	
10	40023-18	10010	40-70	0030	47500-00-10010	60310 - Pharmaceuticals	8,377	48,377	40,000	
11	40023-18	10010	40-70	0030	47500-10-10010	50236 - IG-Charges For Srvc	(4,442,791)	(4,902,791)	(460,000)	

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Line No.	Program Offer Number	Fund Code	Fund Center	Func. Area	Cost Object	Cost Element	Current Amount	Revised Amount	Change Increase/ (Decrease)	Subtotal
12	40023-18	10010	40-70	0030	47500-10-10010	60310 - Pharmaceuticals	1,454	461,454	460,000	
10010 Total										0
40-70 Total										0
Program Offer Number 40023-18 Total										0
13	40026-18	10010	40-70	0030	47800-10-10010	50236 - IG-Charges For Srvc	(654,650)	(734,650)	(80,000)	
14	40026-18	10010	40-70	0030	47800-10-10010	60310 - Pharmaceuticals	0	80,000	80,000	
10010 Total										0
40-70 Total										0
Program Offer Number 40026-18 Total										0
15	40027-18	10010	40-70	0030	47700-00-10010	50236 - IG-Charges For Srvc	(183,473)	(203,473)	(20,000)	
16	40027-18	10010	40-70	0030	47700-00-10010	60310 - Pharmaceuticals	0	20,000	20,000	
17	40027-18	10010	40-70	0030	47700-10-10010	50236 - IG-Charges For Srvc	(1,366,072)	(1,486,072)	(120,000)	
18	40027-18	10010	40-70	0030	47700-10-10010	60310 - Pharmaceuticals	0	120,000	120,000	
10010 Total										0
40-70 Total										0
Program Offer Number 40027-18 Total										0
19	40029-18	10010	40-70	0030	47400-00-10010	50236 - IG-Charges For Srvc	(256,241)	(276,241)	(20,000)	
20	40029-18	10010	40-70	0030	47400-00-10010	60310 - Pharmaceuticals	2,728	22,728	20,000	
21	40029-18	10010	40-70	0030	47400-10-10010	50236 - IG-Charges For Srvc	(2,604,535)	(2,824,535)	(220,000)	
22	40029-18	10010	40-70	0030	47400-10-10010	60310 - Pharmaceuticals	1,277	221,277	220,000	
10010 Total										0

Exp/Rev/FTE - Budget Modification

Budget Year: 2018

Budget Modification: HD-38-18

Line No.	Program Offer Number	Fund Code	Fund Center	Func. Area	Cost Object	Cost Element	Current Amount	Revised Amount	Change Increase/ (Decrease)	Subtotal
40-70 Total										0
Program Offer Number 40029-18 Total										0
23	40031-18	26080	40-80	0030	48210-00-26080	50236 - IG-Charges For Srvc	(3,250,000)	(4,250,000)	(1,000,000)	
24	40031-18	26080	40-80	0030	48210-00-26080	60310 - Pharmaceuticals	3,250,000	4,250,000	1,000,000	
26080 Total										0
40-80 Total										0
Program Offer Number 40031-18 Total										0
25	40034-18	10020	40-80	0030	4CA243-1-1	50210 - OP-Nongovt'l Prog	0	(1,520,000)	(1,520,000)	
26	40034-18	10020	40-80	0030	4CA243-1-1	60246 - Med&Dental Supplies	0	1,520,000	1,520,000	
27	40034-18	10020	40-80	0030	4CA243-1-2	50210 - OP-Nongovt'l Prog	0	(200,000)	(200,000)	
28	40034-18	10020	40-80	0030	4CA243-1-2	60246 - Med&Dental Supplies	0	200,000	200,000	
29	40034-18	10020	40-80	0030	4CA243-1-3	50210 - OP-Nongovt'l Prog	0	(280,000)	(280,000)	
30	40034-18	10020	40-80	0030	4CA243-1-3	60246 - Med&Dental Supplies	0	280,000	280,000	
10020 Total										0
40-80 Total										0
Program Offer Number 40034-18 Total										0

Exp/Rev/FTE - Budget Modification

Budget Year: 2018

Budget Modification: HD-38-18

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.