



# MULTNOMAH COUNTY AGENDA PLACEMENT REQUEST BUDGET MODIFICATION

(revised 12/31/09)

APPROVED: MULTNOMAH COUNTY  
BOARD OF COMMISSIONERS  
AGENDA # 12.7 DATE 4/10/12  
LYNDA GROW, BOARD CLERK

## Board Clerk Use Only 19

Meeting Date: 4/10/12  
Agenda Item #: R.7  
Est. Start Time: 10:40 am  
Date Submitted: 3/12/12

## BUDGET MODIFICATION: HD-12-14

**BUDGET MODIFICATION - HD-12-14 – Request approval to appropriate**  
**Agenda \$55,000 in revenue from the Oregon Community Health Information Network -**  
**Title: School Based Health Centers, Electronic Health Records Pilot grant.**

*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>April 26, 2012</u>	<b>Amount of 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(s):</b>	<u>Susan Kirchoff, Health Centers Operations 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 \$55,000 in revenue from the Oregon Community Health Information Network (OCHIN) School Based Health Centers (SBHC), Electronic Health Records Pilot 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 Multnomah County Health Department (MCHD) currently operates twelve school based health centers (SBHC) and one school linked health center in elementary, middle, and high schools in Multnomah County. SBHC provide services such as routine physical exams, including sports physicals; early detection, diagnosis and treatment of illness and injury; immunizations; vision, dental and blood pressure screenings; mental health services; age-appropriate reproductive health; routine lab tests; prescription medications; and health education/wellness promotion. During fiscal year 2011, these centers provided 5,889 students with 18,399 visits.

The Oregon Department of Human Services, Division of Medical Assistance Programs (DMAP) is currently working with OCHIN and MCHD to plan, design, develop, and implement a statewide framework for state certified School-Based Health Center electronic health records (EHRs), Medicaid claims processing, and health information exchange and data reporting. As part of this work, DMAP is working with three state-certified SBHC pilot sites. As one of these pilot sites, MCHD will provide define, create, and test Oregon SBHC standard workflow templates, and functionality in EPIC and SBHC-specific and statewide SBHC data reporting, and implement the new workflows and functionality in all MCHD SBHC sites.

This budget modification supports Program Offer 40024: School Based Health Centers.

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

Approval of this budget modification will increase the Health Department's federal/state FY 2012 budget by \$55,000.

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

N/A

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

None.

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## ATTACHMENT A

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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 \$55,000 in FY 2012 as a result of the work performed under this award.

This is federal revenue, CFDA 93.793: Medicaid Transformation Grants.

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

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

- Temporary budget will increase by \$37,204
- Non Base Fringe budget will increase by \$11,428
- Non Base Insurance budget will increase by \$1,804
- Central Indirect budget will increase by \$1,271
- Department Indirect budget will increase by \$3,293

- **What do the changes accomplish?**

MCHD will assist OCHIN and the State of Oregon in defining, creating, and piloting a SBHC-specific electronic health records process, including identifying and revising existing workflows and templates for statewide SBHC data reporting, and implementing new workflows in all MCHD SBHC sites.

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

There are no personnel actions as a result of this budget modification. The internal services costs necessary to support temporary employees are included in the current FY 2012 budget.

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

The revenue covers 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?**

This grant is one-time-only in nature, and the project will be complete when the grant expires. Ongoing funding for this project will not be necessary.

- **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 period is March 22, 2011 to March 31, 2013.

There are no match requirements or non-standard reporting requirements.

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## ATTACHMENT B

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**BUDGET MODIFICATION: HD-12-14**

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### Required Signatures

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

**KaRin Johnson for**

*Lillian Shirley*

**Date: 03-09-12**

*[Signature]*

**Budget Analyst:**

**Shannon Busby**

**Date: 03/12/12**

**Department HR:**

*Kathleen Fuller*

**Date: 03/08/2012**

Budget Modification ID: **HD-12-14****EXPENDITURES & REVENUES**

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

**Budget/Fiscal Year: 2012**

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	40-45	32458	40024	0030			4CA167-1	50195	-	(55,000)	(55,000)		Increase IG-OP-Fed Thru Other
2	40-45	32458	40024	0030			4CA167-1	60100	-	37,204	37,204		Increase Temporary
3	40-45	32458	40024	0030			4CA167-1	60135	-	11,428	11,428		Increase Non Base Fringe
4	40-45	32458	40024	0030			4CA167-1	60145	-	1,804	1,804		Increase Non Base Insurance
5	40-45	32458	40024	0030			4CA167-1	60350	-	1,271	1,271		Increase Central Indirect
6	40-45	32458	40024	0030			4CA167-1	60355	-	3,293	3,293		Increase Dept Indirect
7									-	-			
8	72-10	3500		0020		705210		50316	(59,747,437)	(59,749,241)	(1,804)		Insurance Revenue
9	72-10	3500		0020		705210		60330	4,007,034	4,008,838	1,804		Offsetting Expenditure
10										-			
11	19	1000		0020		9500001000		50310	(6,716,175)	(6,717,446)	(1,271)		Indirect Reimb Rev in GF
12	19	1000		0020		9500001000		60470	11,258,502	11,259,773	1,271		CGF Contingency Expenditure
13										-			
14	40-90	1000	40040	0030		409050		50370	(5,918,187)	(5,921,480)	(3,293)		Dept Indirect Revenue
15	40-90	1000	40040	0030		409001		60100	31,505	34,798	3,293		Dept Indirect Offsetting Exp
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