W.10.B.2.

### **AGENDA COVER MEMO**

AGENDA DATE:

March 22, 2006

TO:

**BOARD OF COUNTY COMMISSIONERS** 

DEPT:

Health & Human Services

PRESENTED BY:

Steve Manela

**AGENDA ITEM TITLE:** 

ORDER\_\_\_\_\_/IN THE MATTER OF APPROVING THE SUBMISSION AN EXPANDED MEDICAL CAPACITY GRANT APPLICATION FOR FY 2006-2007 AND FY 2007-2008 IN THE AMOUNT OF \$1,200,000 TO THE FEDERAL DEPARTMENT

OF HEALTH & HUMAN SERVICES.

#### I. MOTION

ORDER\_\_\_\_\_/To Approve The Submission Of An Expanded Medical Capacity Grant Application For FY 2006-2007 And FY 2007-2008 In The Amount Of \$1,200,000 To The Federal Department Of Health & Human Services.

#### II. ISSUE OR PROBLEM

The Lane County Department of Health & Human Services, Human Services Commission (HSC), is eligible for a competitive Expanded Medical Access Capacity (EMC) grant in the amount of up to \$600,000 a year for two years to provide health care to homeless people and to the growing migrant and Latino populations of Lane County. To expand access to CHCLC services for two years beginning November 1, 2006, an EMC grant application needs to be submitted by March 31, 2006.

We need the County Administrator to be delegated authority to sign grant documents with the Federal Department of Health & Human Services over the period of these grants.

#### III. DISCUSSION

# A. Background / Analysis

The Lane County Department of Health & Human Services, Human Services Commission (HSC) Program is requesting approval to submit an Expanded Medical Capacity (EMC) grant application in the amount of up to \$600,000 a year for FY 2007 and FY 2008 to the Federal Department of Health and Human Services (HHS) Health Resources and Services Administration (HRSA) Bureau of Primary Health Care (BPHC). This grant is funded under Section 330 of the Public Health Service Act to provide access to health care services for medically underserved populations.

Community Health Centers of Lane County (CHCLC), under the sponsorship of the Human Services Commission has become a significant provider of primary care medical, behavioral health and preventive dental services to the communities of Lane County. CHCLC has over 8,000 active patients and delivers over 20,000 encounters per year with approximately 57% of those visits to uninsured patients.

We originally applied for an EMC grant with the Board of County Commissioners approval on December 7, 2005 Board Order 05-12-7-4 for expansion of our RiverStone and Churchill High Clinic hours and capacity serving the general low-population and seasonal and migrant farmworkers. However, in January with the passage of the federal Health and Human Services appropriation bill, with only \$12 million available for approximately only 33 new EMC grants, HRSA choose to reissue the EMC grant competition to be directed only to serving special populations such as seasonal and migrant farmworkers and homeless persons. Given that our December proposal had the general low-income population it is not likely to be funded. Therefore, we are repackaging the December application and adding a targeted proposal for serving homeless as well as the original migrant and seasonal farmworker program.

The revised approach to resubmission of the EMC grant was discussed and approved by the Community Health Center Council on January 28, 2006.

We will add two and a half additional providers to our staff, including a physician at the RiverStone Clinic and a part-time nurse practitioner. A part-time nurse practitioner would be added to the Safe and Sound clinic for outreach to homeless persons and families and children. We would increase a .5 FTE Nurse Practitioner to full-time at the Churchill High School Clinic. A homeless outreach worker and two health promoters would be added to assist with health education and outreach access. Additional support staff would be hired to cover the additional operations.

In summary, with the submission of the EMC grant CHCLC's operations and efficiency will be strengthened and it will enable us to increase the healthcare capacity significantly to 2500 new patients for approximately 8000 clinical encounters. The grant will allow CHCLC to continue and expand its contribution to desperately needed healthcare resources in particular for the homeless and migrant/Latino populations of Lane County

Please find below the required administrative procedure manual items for grant consideration.

# 1. What is the match requirement, if any, and how is that to be covered for the duration of the grant?

No local matching funds are required to be eligible to receive the EMC federal HRSA grants.

2. Will the grant require expenditures for Material and Services or capital not fully paid for by the grant?

Material and Services not paid for by the grants are paid for reimbursements from Medicare, Medicaid and private insurance, clinic fees, and other public and private funding.

3. Will the grant funds be fully expended before county funds need to be spent?

The grant requires that all available local support and third party payments are applied to costs before using federal grant funds.

4. How will the administrative work of the grant be covered if the grant funds don't cover it?

Administrative costs include accounting, contracting, auditing, and evaluation. County indirect costs are covered through the grant application based on the OMB A-87 Cost Allocation Plan for Lane County.

5. Have grant stakeholders been informed of the grant sun setting policy so there is no misunderstanding when the funding ends? Describe plan for service if funding does not continue.

The federal HRSA BPHC grants will not sunset unless Congress de-funds the program. HRSA BPHC has sustained all CHC's since the inception of the program in 1972. We have established a reserve to cover costs that would be incurred if we had to shut the project down some time in the future.

6. What accounting, auditing and evaluation obligations are imposed by the grant conditions?

Standard cost accounting and audit requirements per OMB circulars are needed for the HRSA BPHC grants. Evaluation for the project is built into the practice management software.

7. How will the department cover the accounting, auditing and evaluation obligations? How are the costs for these obligations covered, regardless whether they are in the department submitting the grant or a support service department? Does the department acknowledge that the county will need to cover these costs and it is an appropriate cost incurred by support service departments?

The obligations for costs associated with accounting, audit and evaluation are supported by the SAC and EMC grant budgets.

8. Are there any restrictions against applying the county full cost indirect charge?

No

9. Are there unique or unusual conditions that trigger additional county work effort, or liability, i.e., maintenance of effort requirements or supplanting prohibitions or indemnity obligations?

There are no unique or unusual conditions triggering additional work. Liability is covered by the Federal Torts Liability Claims Act.

**10.-12.** This is not a technology grant, so questions 10-12 are not applicable.

# B. Alternatives / Options

- 1. To approve the submission of an expanded medical capacity grant for FY 2006-2007 and FY 2007-2008 in the amount of up to \$1,200,000 to the federal department of health & human services.
- 2. To not approve the submission an expanded medical capacity grant for FY 2006-2007 and FY 2007-2008 in the amount of up to \$1,200,000 to the federal department of health & human services.

# C. Recommendation

H&HS recommends that the Board of County Commissioners approve the submission of an expanded medical capacity grant for FY 2006-2007 and FY 2007-2008 in the amount of \$1,200,000 to the federal department of health & human services.

#### D. Timing

Upon Board approval, the EMC grant application will be submitted to the HRSA BPHC U.S. Department of Health & Human Services by March 31, 2006.

#### IV. IMPLEMENTATION

Upon the Board Order being approved and signed, the department will submit the grant application to HRSA BPHC U.S. Department of Health & Human Services.

### V. ATTACHMENTS

**Board Order** 

Shared \ HSC Admin \ Steve \ CHC 5 Year Grant

# THE BOARD OF COUNTY COMMISSIONERS, LANE COUNTY, OREGON

ORDER:

) IN THE MATTER OF APPROVING THE SUBMISSION OF AN EXPANDED MEDICAL CAPACITY GRANT APPLICATION FOR FY 2006-2007 AND FY 2007-2008 IN THE AMOUNT OF UP TO \$1,200,000 TO THE FEDERAL DEPARTMENT OF HEALTH & HUMAN SERVICES.

WHEREAS, Lane County Department of Health & Human Services, Human Services Commission Program, funds and administers community primary, dental and behavior healthcare programs through the Community Health Centers of Lane; and

WHEREAS, the U.S. Department of Health & Human Services has made available, on funding for continuing and expanding Community Health Center services.

NOW THEREFORE, IT IS HEREBY ORDERED, that the Lane County Department of Health & Human Services is approved to submit an Expanded Medical Capacity grant for FY 2006-2007 and FY 2007-2008 in the amount of up to \$1,200,000 to the federal department of health & human services.

AND IT IS FURTHER ORDERED that the County Administrator is delegated authority to sign the grant documents.

AND FURTHER ORDERED that the County Administrator is delegated to sign revenue documents resulting from this grant.

DATED this	da	y of	March	2006.

Bill Dwyer, Chair Lane County Board of Commissioners

APPROVED AS TO FORM

OFFICE OF LEGAL COUNSEL