

W. G. C. I.

AGENDA COVER MEMO

AGENDA DATE: April 1, 2009
TO: Board of County Commissioners
DEPARTMENT: Health & Human Services
PRESENTED BY: Rob Rockstroh



AGENDA TITLE: ORDER / _____ IN THE MATTER OF RATIFYING THE COUNTY ADMINISTRATOR'S DECISION AUTHORIZING SUBMISSION OF A GRANT PROPOSAL IN THE AMOUNT OF \$293,588 FOR ONE-TIME, TWO-YEAR FUNDING FOR THE COMMUNITY HEALTH CENTERS OF LANE COUNTY UNDER THE AMERICAN RECOVERY AND REINVESTMENT ACT AND AUTHORIZING THE ACCEPTANCE OF ANY RESULTING GRANT AWARD

I. MOTION

In the Matter of Ratifying the County Administrator's Decision Authorizing Submission of a Grant Proposal in the Amount of \$293,588 for One-Time, Two-Year Funding for the Community Health Centers of Lane County under the American Recovery and Reinvestment Act and Authorizing the Acceptance of any Resulting Grant Award.

II. AGENDA ITEM SUMMARY

Through the American Recovery and Reinvestment Act (ARRA), the Health Resources and Services Administration (HRSA) has computed one-time "Increased Demand for Services" (IDS) funding for Federally Qualified Health Centers (FQHCs). HRSA notified Lane County on March 8, 2009 that the Community Health Centers of Lane County (CHCLCs) would be eligible for \$293,588 in additional funding. The application documents were released on March 9, 2009 with an application deadline of March 16, 2009. This timeline precluded requesting Board of Commissioners' delegated authority prior to grant submission. Ratification of the County Administrator's actions in permitting the CHCLCs to respond to this grant funding opportunity are hereby requested.

III. BACKGROUND/IMPLICATIONS OF ACTION

A. Board Action and Other History

The Board of County Commissioners last approved the submission of the CHCLC continuation grant application to HRSA via BO 05-12-7-4. Routine approval of

subsequent grant continuation documents (applications and award acceptances) has been directed by the County Administrator under the provisions of LM 21.137(3).

The ARRA was signed on February 17, 2009 and included \$500,000,000 in funding to support the anticipated increase in requests for services at FQHCs, related to the economic downturn (loss of employer-provided healthcare insurance). As stated above under Item II, the timeline for notification/submission made it impossible for H&HS to submit a Board packet in a timely manner, and the lack of a BCC meeting the week of March 9 made emergency action impossible.

B. Policy Issues

H&HS sought Counsel determination of eligibility of this grant application under the dictates of LM 21.137(3). Counsel determined that the ARRA funding, though provided as supplemental funding to the FQHC via HRSA, may represent a separate, short-term grant, as it was designated with a separate grant number. The LM 21.137 suggests that the County Administrator has certain authority to execute grant application and acceptance documents to continue grants previously approved by the Board of Commissioners. The Board is being asked to ratify the County Administrator's execution of the grant application based on the question of authority hereby presented.

C. Board Goals

Supports Board goal of providing services to County residents.

D. Financial and/or Resource Considerations

Please note that this is a non-competitive application. It is anticipated that, between the time this packet is written and heard by the BCC, HRSA notification of approval of the anticipated funding in the amount of \$293,588 should already have been made. Grant award dates will be March 27, 2009 through March 26, 2011.

Although the supplemental funding for these positions will subsidize only 22% of the proposed FTE additions the first year of the grant period and just 13% of the FTE total the second year, the encounters generated via the addition of the provider staff (pediatrician, two nurse practitioners and, in year two, the psychiatric nurse practitioner) will make the positions self-sustaining prior to March, 2011. The encounters per practitioner have been calculated very conservatively at 10 per day, at the "wrap" rate and using the current payor mix.

FTEs – Year One: Total 6.5 FTE

CLASSIFICATION	NEW HIRE FTE (FTE/Base Salary/Step)	TOTAL (+Benefits=) (no overhead Year 1)
MD - Pediatrician	1.0/\$132,766/Step 7	\$106,213 = \$238,979
Nurse Practitioner	.75/\$47,112/Step 2	\$38,161 = \$85,273
Nurse Practitioner	.75/\$47,112/Step 2	\$38,161 = \$85,273

CH (Registered) Nurse 1	1.0/\$44,114/Step 3	\$ 37,352 = \$83,466
Medical Asst. 2	1.0/\$31,595/Step 2	\$ 28,539 = \$60,134
Medical Asst. 2(bilingual)	1.0/\$32,552/Step 2	\$29,966 = \$62,518
Accounting Asst.2	1.0/\$31,907/Step 5	\$30,763 = \$62,670

* Proposed at .75 FTE, based on recent recruiting experience that it is difficult to attract fulltime nurse practitioners.

FTEs – Years Two: Total 9.5 FTE. Although space precludes the placement of enhanced mental health services at RiverStone at this time, the transfer of the CHC's flagship clinic to a new location late in FY 10 will permit the addition of one Psychiatric Nurse Practitioner at Riverstone during the second year of the grant period.

CLASSIFICATION	NEW HIRE FTE* (FTE/Base Salary/Step)	TOTAL + BENEFITS
Psychiatric Nurse Practitioner	1.0/\$76,794/Step 7	\$155,938
Mental Health Specialist 2	1.0/\$41,430/Step 2	\$78,693
MHS 2 (bilingual)	1.0/\$44,248/Step 3	\$74,134
	CONTINUING FTE	+ OVERHEAD
MD - Pediatrician	1.0/\$132,766/Step 8	\$259,314
Nurse Practitioner	.75/\$49,469/Step 3	\$97,903
Nurse Practitioner	.75/\$49,469/Step 3	\$97,903
CH (Registered)Nurse 1	1.0/\$48,536/Step 4	\$99,585 -
Medical Asst. 2	1.0/\$31,595/Step 3	\$75,411
Medical Asst. 2 (bilingual)	1.0/\$32,552/Step 3	\$76,416
Accounting Asst. 2	1.0/\$31,907/Step 6	\$77,962

*Includes 5% combined COLA and merit increases for year 2.

E. Analysis

The information required by the Board of County Commissioners prior to approval of grant applications and receipt of grant funds is provided below.

1. What is the Match Requirement, if any, and how is that to be covered for the duration of the grant?

There is no match requirement.

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

No. All expenditures needed for the implementation of the grant are included in the grant application budget.

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

Yes, the grant funds will provide for the new FTEs. The provider FTEs will then generate sufficient revenue to make the positions/services self-sustaining prior to the end of the second year of the grant.

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

The addition of the 1.0 FTE accounting assistant will respond to the increase work load generated by the additional encounter billings and the additional reporting requirements. (Reports will be due quarterly).

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

Concurrence of the Community Health Board will be sought, at the next meeting. As stated under Item 3, these services will become self-sustaining.

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

Reports on the expansion of services and use of the grant funds will be due on the 10th. of July, April, October and January; during the two-year grant cycle.

7. How will the department cover the accounting, auditing, and evaluation obligations? How are the costs for these obligations covered, regardless of 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?

Funds are budgeted in the grant application to meet all these obligations. The county will not be required to expend funds for these purposes.

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

No. An indirect amount has been included in the grant application budget, per the negotiated agreement with the federal government.

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?

No. Practitioner liability insurance if provided directly by the federal government via the Tort Claims Act.

10. Grants involving technology issues require Information Services department review and approval prior to submission to the Board to ensure compatibility with existing county systems and development tools.

This grant does not have technology issues that will have an impact on existing county systems. The CHCs process their encounters under a contract with OCHIN.

11. Information services department sign-off is required for all agenda items requesting funding for new or enhanced computer applications/systems that will interface with existing county systems/infrastructure.

This item does not apply to this grant application.

12. If this is a grant funded computer/software application project . . .

This is not a grant funded computer/software applications project.

F. Alternatives / Options

1. Approve the ratification of the grant proposal submission and authorize the County Administrator to accept any resulting grant award.
2. Direct staff to recall the grant application submitted on March 16, 2009 and to decline any funding offered by HRSA.

IV. TIMING/IMPLEMENTATION

Board approval and HRSA confirmation of the award of funds being received, H&HS will request the addition of the FTEs detailed under Item III.D.

V. RECOMMENDATION

Health & Human Services staff support approval of this request.

VI. FOLLOW-UP

Action will be taken to add 1.0 FTE Psychiatric Nurse Practitioner to Lane County Behavioral Health Services late in FY 10 or early in FY 11, permitting the enhancement of mental health services at the RiverStone Clinic site. H&HS will work with the County Administrator's Office to process all grant award documents.

VII. ATTACHMENTS

Board Order

THE BOARD OF COUNTY COMMISSIONERS, LANE COUNTY, OREGON

ORDER:) ORDER / _____ IN THE MATTER OF RATIFYING THE
) COUNTY ADMINISTRATOR'S DECISION AUTHORIZING
) SUBMISSION OF A GRANT PROPOSAL IN THE AMOUNT OF
) \$293,588 FOR ONE-TIME, TWO-YEAR FUNDING FOR THE
) COMMUNITY HEALTH CENTERS OF LANE COUNTY UNDER
) THE AMERICAN RECOVERY AND REINVESTMENT ACT AND
) AUTHORIZING THE ACCEPTANCE OF ANY RESULTING
) GRANT AWARD

WHEREAS, identifying the means to expand healthcare to the County's low income residents represents a priority at a time of economic downturn, when more residents are unemployed and/or facing the loss of employer-provided health insurance; and

WHEREAS, Lane Manual 21.137 sets forth policy regarding grant applications and requires Board approval of the preliminary application and acceptance of any grant award greater than \$100,0000; and

WHEREAS, the timeline of the request for proposals precluded obtaining Board of Commissioners concurrence prior to submission; and

WHEREAS, the total funding to be awarded through this grant is \$293,588 over a two year period, from March 27, 2009 through March 26, 2011, and, therefore, exceeds the signatory authority of the County Administrator;

NOW, THEREFORE, IT IS HEREBY ORDERED, that the Board of County Commissioners ratify the submission of a grant proposal by the County Administrator for supplemental grant funding under the American Recovery and Reinvestment Act for the Community Health Centers of Lane County in the amount of \$293,588 over a two year period and to accept any resulting grant award; and

IT IS FURTHER ORDERED, that the Board of County Commissioners delegate authority to the county administrator to execute the grant documents and any resulting award documents.

DATED this _____ day of April, 2009.

Pete Sorenson, Chair
Lane County Board Of Commissioners

APPROVED AS TO FORM
Date 3/20/09 Lane County
[Signature]
OFFICE OF LEGAL COUNSEL