

*Pro Rata Tobacco
Settlement Distribution*

*County Expenditure
Statement - 2009*



*Ray Eufrazio, CPA
County Auditor*



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Distribution County Expenditures
Statement – 2009**

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**A. PRO RATA TOBACCO
SETTLEMENT DISTRIBUTION
COUNTY EXPENDITURE
STATEMENT – 2009**

**TOTAL ALLOWABLE
EXPENDITURES = \$ 19,131,192.39**

PRO RATA TOBACCO SETTLEMENT DISTRIBUTION
COUNTY EXPENDITURE STATEMENT - 2009

Name of County: Hidalgo County, Texas

Provide the calendar year 2008 unreimbursed health care expenditures for your county within the categories designated below. The Agreement Regarding Disposition of Settlement Proceeds states that these expenditures shall be calculated as follows:

" The total annual unreimbursed health care expenditures for a county not wholly located within hospital district are defined as all unreimbursed amounts, including unreimbursed jail health care, expended by such county for health care services to the general public during that year plus 15% of the total."

Allowable Expenditure Categories

A. County indigent health care services: \$ 2,013,674.36

B. ¹Unreimbursed jail health care: \$ 1,419,561.82

C. ²Additional unreimbursed personal health care services provided to the general public: \$ 13,202,583.29
(The total in this category must match the total identified on page 4 of this statement titled Attachment-County Expenditures Statement-2008.)

D. ³Other allowable expenditures: -
(This category should **ONLY** be completed if the Non-Hospital District Public Hospital Expenditure Statement regarding the sale or lease of a public health care facility applies to you. If applicable, insert the total from page 2 of the foregoing form in this category.)

Total allowable expenditures: \$ 16,635,819.47
(Expenditure categories A+B+C+D)

X 1.15= \$ 19,131,192.39
(Amount claimed by county for pro rata distribution in 2008)

3/23/09

COUNTY EXPENDITURE STATEMENT - 2009
Total Allowable Expenditures:(Expenditure Categories A+B+C+D)

| | |
|--|-------------------------|
| (1) Health care clinic, laboratory, and case management services. | \$ 1,359,714.37 |
| (2) Dental care services | \$ 15,540.98 |
| (3) Outreach and prevention efforts related to tobacco use, including but not limited to media campaigns, education, counseling, and production and distribution of promotional literature. | \$ 79,400.00 |
| (4) Other health care outreach and prevention efforts, including but not limited to media campaigns, education, counseling, and production and distribution of promotional literature. Typical target areas for these efforts include health hazards affecting the general public. | \$ - |
| (5) Medical transportation | \$ 76,770.86 |
| (6) Behavioral or psychiatric health care services | \$ 788,100.00 |
| (7) Capital expenditures for health care services | \$ 342,395.71 |
| (8) Overhead costs for a health care facility | \$ 6,144,941.11 |
| (9) Emergency medical services | \$ 3,113.93 |
| (10) Medical supplies or equipment used for the provision of health care services to the general public. | \$ 404,837.98 |
| (11) Other services provided by the county which are also within the scope of services that hospital districts are authorized by law to provide. These will typically be diagnostic and treatment services. UPL monies provided to hospitals to provide indigent services. | \$ 7,421,004.53 |
| Total | \$ 16,635,819.47 |

**Tobacco Settlement Distribution Proceeds Program
County Expenditure Statement 2009**

| | Indigent Health | Medical Supplement Program | Health Department | Sheriff's Department | Juvenile Probation | Tropical Texas Center | The Easter Seals Society | Texas Cooperative Extension | YEAR 2008 TOTALS |
|--|------------------------|----------------------------|------------------------|------------------------|----------------------|-----------------------|--------------------------|-----------------------------|-------------------------|
| (1) Health care screening, laboratory, and health care case management services. | \$ 972,993.05 | | \$ 31,652.02 | \$ 142,026.71 | \$ 213,042.59 | \$ - | \$ - | \$ - | \$ 1,359,714.37 |
| (2) Oral/dental health care services. | | | \$ - | \$ - | \$ 15,540.98 | \$ - | \$ - | \$ - | \$ 15,540.98 |
| (3) Outreach and prevention efforts related to tobacco use, including but not limited to media campaigns, education, counseling, and production and distribution of promotional literature. | \$ - | | \$ - | \$ - | \$ - | \$ - | \$ - | \$ 79,400.00 | \$ 79,400.00 |
| (4) Other health care outreach and prevention efforts, including but not limited to media campaigns, education, counseling, and production and distribution of promotional literature. Typical target areas for these efforts include health hazards affecting the general public. | \$ - | | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - |
| (5) Medical transportation, including transportation to and from medical appointments. | \$ - | | \$ - | \$ 76,770.86 | \$ - | \$ - | \$ - | \$ - | \$ 76,770.86 |
| (6) Behavioral health care services. | \$ - | | \$ - | \$ 253,275.00 | \$ - | \$ 534,825.00 | \$ - | \$ - | \$ 788,100.00 |
| (7) Capital expenditures for direct health care services, such as construction of ambulance facilities or clinics. | \$ - | | \$ 289,521.51 | \$ 52,874.20 | \$ - | \$ - | \$ - | \$ - | \$ 342,395.71 |
| (8) Overhead costs for a health care facility. | \$ 1,040,681.31 | | \$ 4,360,183.97 | \$ 727,611.60 | \$ - | \$ - | \$ 16,464.23 | \$ - | \$ 6,144,941.11 |
| (9) Emergency medical services. | \$ - | | \$ - | \$ 3,113.93 | \$ - | \$ - | \$ - | \$ - | \$ 3,113.93 |
| (10) Medical supplies or equipment used for the provision of health care services to the general public. | \$ - | | \$ 179,847.82 | \$ 163,889.52 | \$ 61,100.64 | \$ - | \$ - | \$ - | \$ 404,837.98 |
| (11) Other services provided by the county which are also within the scope of services that hospital districts are authorized by law to provide. These will typically be diagnostic and treatment services for individuals. | \$ - | \$ 7,421,004.53 | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ 7,421,004.53 |
| TOTALS | \$ 2,013,674.36 | \$ 7,421,004.53 | \$ 4,861,205.32 | \$ 1,419,561.82 | \$ 289,684.21 | \$ 534,825.00 | \$ 16,464.23 | \$ 79,400.00 | \$ 16,635,819.47 |



**B. UNREIMBURSED JAIL HEALTH CARE
= \$ 1,419,561.82**

**(Base numbers for expenditure category
B)**

Unreimbursed jail health care expenditures were based on itemized health care expenditures for prisoners over the entire year, subtracting any reimbursement received from entities outside our political subdivision to cover health care expenditures for individual prisoners.

COUNTY EXPENDITURE STATEMENT - 2009
(Base numbers for expenditure category B. on page 1)
Unreimbursed Jail Health Care

| | |
|--|------------------------|
| (1) Health care clinic, laboratory, and case management services. | \$ 142,026.71 |
| (2) Dental care services | \$ - |
| (3) Outreach and prevention efforts related to tobacco use, including but not limited to media campaign, education, counseling, and production and distribution of promotional literature. | \$ - |
| (4) Outreach and prevention efforts related to tobacco use, including but not limited to media campaign, education, counseling, and production and distribution of promotional literature. Typical target areas for these efforts include health h | \$ - |
| (5) Medical transportation | \$ 76,770.86 |
| (6) Behavioral or psychiatric health care services | \$ 253,275.00 |
| (7) Capital expenditures for health care services | \$ 52,874.20 |
| (8) Overhead costs for a health care facility | \$ 727,611.60 |
| (9) Emergency medical services | \$ 3,113.93 |
| (10) Medical supplies or equipment used for the provision of health careservices to the general public | \$ 163,889.52 |
| (11) Other services provided by the county which are also within the scope of services that hospital districts are authorized by law to provide. These will typically be diagnostic and treatment services. (Describe below) | \$ - |
| Total Expenditures for Sheriff's Department | \$ 1,419,561.82 |

(1) Health care clinic, laboratory, and care case management services

| Vendor | Amount |
|--|-----------|
| 1 AMEGIN, D.O., P.A., GEORGE P. | 123.42 |
| 2 CHILDRENS PHYSICIANS SERVICES | 1,088.67 |
| 3 COLOMBIA RIO GRANDE HEALTHCARE | 146.30 |
| 4 CREEDMOOR ORTHOPEDICS | 470.31 |
| 5 DOCTORS HOSPITAL AT RENAISSANCE | 384.00 |
| 6 EDINBURG RADIOLOGY, LLP | 75.56 |
| 7 EDINBURG REGIONAL MEDICAL CENTER | 9,529.01 |
| 8 ENVIROTECH CARRIERS, INC. | 2,178.00 |
| 9 GARZA, GUMARO MD | 39,960.00 |
| 10 GARZA, MARIN MD | 39,960.00 |
| 11 HIDALGO COUNTY HEALTH DEPARTMENT | 620.00 |
| 12 HONRUBIA, VINCENT F. MD, PA | 308.68 |
| 13 HOSPITALIST GROUP, LP | 210.80 |
| 14 JELINEK, M.D., MICHAEL T. | 432.86 |
| 15 LABORATORY CORPORATION OF AMERICA | 13,379.02 |
| 16 MACKIE, M.D., P.A., EUGENE S. | 94.51 |
| 17 McALLEN HOSPITALS, L.P. | 6,107.19 |
| 18 McALLEN MEDICAL CENTER | 1,050.56 |
| 19 McLEAN, M.D., P.A., DANIEL P. | 856.00 |
| 20 MISSION HOSPITAL, INC. | 529.68 |
| 21 MISSION ORTHOPEADICS, P.A. | 326.50 |
| 22 MONTANO, PEDRO S., MD | 966.94 |
| 23 PEREZ JR., FRED L. MD | 259.61 |
| 24 QUALITY RADIOLOGY | 49.64 |
| 25 RADIOLOGY ASSOCIATES, LLP | 373.41 |
| 26 RGV ANESTHESIA ASSOCIATES, P.A. | 670.32 |
| 27 RIO GRANDE HEART SPECIALISTS | 67.05 |
| 28 RODRIGUEZ, MARIA E. | 1,722.86 |
| 29 SOUTH TEXAS DIABETES & ENDOCRINOLOGY CLINIC, P.A. | 134.66 |
| 30 SOUTH TEXAS MOBILE X-RAYS | 20,900.00 |
| 31 SOUTHERN ORTHOPAETICS & SPORTS MEDICINE | 99.83 |
| 32 VALLEY AIDS COUNCIL | 386.44 |
| 33 WEST VALLEY RADIOLOGY | 43.90 |
| 34 | |
| 35 | |
| 36 | |
| 37 | |
| 38 | |
| 39 | |

| | |
|------------------------------------|-------------------|
| TOTAL EXPENDITURES | 143,485.73 |
| REIMBURSEMENTS | 1,459.02 |
| EXPENDITURES NET OF REIMBURSEMENTS | <u>142,026.71</u> |

VENDORS (REIMBURSEMENTS)

AMOUNT

| | | |
|---|-----------------|------------------|
| 1 US MARSHAL'S REIMBURSEMENT--GARZA, GUMARO, M.D. | 729.51 * | (39,960*1.8256%) |
| 2 US MARSHAL'S REIMBURSEMENT--GARZA, MARIN, M.D. | 729.51 * | (39,960*1.8256%) |
| 3 | | |
| 4 | | |
| TOTAL REIMBURSEMENTS | <u>1,459.02</u> | |

*Average Federal/Inmate Total Population

1.8256%

(2) Dental care services

| | Vendor | Amount |
|----|------------------------------------|-------------|
| 1 | | |
| 2 | | |
| 3 | | |
| 4 | | |
| 5 | | |
| 6 | | |
| 7 | | |
| 8 | | |
| 9 | | |
| 10 | | |
| | TOTAL EXPENDITURES | 0.00 |
| | REIMBURSEMENTS | 0.00 |
| | EXPENDITURES NET OF REIMBURSEMENTS | <u>0.00</u> |

| | Vendor (Reimbursements) | Amount |
|---|-------------------------|-------------|
| 1 | | |
| 2 | | |
| 3 | | |
| 4 | | |
| 5 | | |
| | TOTAL REIMBURSEMENTS | <u>0.00</u> |

(3) Outreach and prevention efforts related to tobacco use, including but not limited to media campaigns, education, counseling, and production and distribution of promotional literature.

| | Vendor | Amount |
|----|---|--------------------|
| 1 | | |
| 2 | | |
| 3 | | |
| 4 | | |
| 5 | | |
| 6 | | |
| 7 | | |
| 8 | | |
| 9 | | |
| 10 | | |
| | TOTAL EXPENDITURES | <u>0.00</u> |
| | REIMBURSEMENTS | <u>0.00</u> |
| | EXPENDITURES NET OF REIMBURSEMENTS | <u><u>0.00</u></u> |

| | Vendor (Reimbursements) | Amount |
|---|--------------------------------|--------------------|
| 1 | | |
| 2 | | |
| 3 | | |
| 4 | | |
| 5 | | |
| | TOTAL REIMBURSEMENTS | <u><u>0.00</u></u> |

(4) Other health care outreach and prevention efforts, including but not limited to media campaigns, education, counseling, and production and distribution of promotional literature. Typical target areas for these efforts include health hazards affecting the general public

| | Vendor | Amount |
|----|---|---------------|
| 1 | | |
| 2 | | |
| 3 | | |
| 4 | | |
| 5 | | |
| 6 | | |
| 7 | | |
| 8 | | |
| 9 | | |
| 10 | | |
| | | <hr/> |
| | TOTAL EXPENDITURES | 0.00 |
| | REIMBURSEMENTS | 0.00 |
| | EXPENDITURES NET OF REIMBURSEMENTS | 0.00 |

| | Vendor (Reimbursements) | Amount |
|---|--------------------------------|---------------|
| 1 | | |
| 2 | | |
| 3 | | |
| 4 | | |
| 5 | | |
| | | <hr/> |
| | TOTAL REIMBURSEMENTS | 0.00 |

(5) Medical transportation

| Vendor | Amount |
|---|------------------|
| 1 VALLEY EMS, INC. | 2,119.36 |
| 2 INMATE MEDICAL TRANSPORTATION (MILEAGE) | 10,900.80 |
| 3 INMATE MEDICAL TRANSPORTATION (COMPENSATION & BENEFITS) | 18,308.34 |
| 4 MENTAL COMMITMENTS (MILEAGE) | 7,674.25 |
| 5 MENTAL COMMITMENTS (COMPENSATION & BENEFITS) | 37,768.11 |
| 6 | |
| 7 | |
| 8 | |
| 9 | |
| 10 | |
| 11 | |
| 12 | |
| 13 | |
| 14 | |
| 15 | |
| TOTAL EXPENDITURES | 76,770.86 |
| REIMBURSEMENTS | 0.00 |
| EXPENDITURES NET OF REIMBURSEMENTS | <u>76,770.86</u> |

Vendor (Reimbursements) Amount

| | |
|----------------------|-------------|
| 1 | |
| 2 | |
| 3 | |
| 4 | |
| 5 | |
| 6 | |
| 7 | |
| 8 | |
| 9 | |
| 10 | |
| TOTAL REIMBURSEMENTS | <u>0.00</u> |

(6) Behavioral or psychiatric health care services

| Vendor | Amount |
|------------------------------------|-------------------|
| 1 Tropical Texas Behavioral Health | 253,275.00 |
| 2 | |
| 3 | |
| 4 | |
| 5 | |
| 6 | |
| 7 | |
| 8 | |
| 9 | |
| 10 | |
| | <hr/> |
| TOTAL EXPENDITURES | 253,275.00 |
| REIMBURSEMENTS | 0.00 |
| EXPENDITURES NET OF REIMBURSEMENTS | <u>253,275.00</u> |

| Vendor (Reimbursements) | Amount |
|--------------------------------|---------------|
| 1 | |
| 2 | |
| 3 | |
| 4 | |
| 5 | |
| | <hr/> |
| TOTAL REIMBURSEMENTS | <u>0.00</u> |

(7) Capital expenditures for health care services

| Vendor | Amount |
|---|-------------------------|
| 1 Texas State Bank | 52,874.20 |
| 2 | |
| 3 | |
| 4 | |
| 5 | |
| 6 | |
| 7 | |
| 8 | |
| 9 | |
| 10 | |
| TOTAL EXPENDITURES | <u>52,874.20</u> |
| REIMBURSEMENTS | <u>0.00</u> |
| EXPENDITURES NET OF REIMBURSEMENTS | <u><u>52,874.20</u></u> |

| Vendor (Reimbursements) | Amount |
|-----------------------------|--------------------|
| 1 | |
| 2 | |
| 3 | |
| 4 | |
| 5 | |
| TOTAL REIMBURSEMENTS | <u><u>0.00</u></u> |

Source: Information forwarded by Letty Chavez from the Hidalgo County Auditor's Office on 03/11/09.

(7a) Employee salary and benefits to the extent the employee is engaged in patient health care or other health care services.

| Vendor | Amount |
|------------------------------------|-------------------|
| 1 SALARY | 553,651.79 |
| 2 LONGEVITY | 517.50 |
| 3 HEALTH INSURANCE | 53,023.62 |
| 4 LIFE INSURANCE | 375.79 |
| 5 FICA | 41,730.61 |
| 6 RETIREMENT | 48,656.45 |
| 7 UNEMPLOYMENT COMPENSATION | 2,770.83 |
| 8 WORKERS' COMPENSATION | 24,810.34 |
| 9 | |
| 10 | |
| 11 | |
| TOTAL EXPENDITURES | 725,536.93 |
| REIMBURSEMENTS | 13,245.40 |
| EXPENDITURES NET OF REIMBURSEMENTS | <u>712,291.53</u> |

| Vendor (Reimbursements) | Amount |
|----------------------------|------------------|
| 1 US MARSHAL REIMBURSEMENT | 10,107.47 * |
| 2 US MARSHAL REIMBURSEMENT | 9.45 * |
| 3 US MARSHAL REIMBURSEMENT | 968.00 * |
| 4 US MARSHAL REIMBURSEMENT | 6.86 * |
| 5 US MARSHAL REIMBURSEMENT | 761.83 * |
| 6 US MARSHAL REIMBURSEMENT | 888.27 * |
| 7 US MARSHAL REIMBURSEMENT | 50.58 * |
| 8 US MARSHAL REIMBURSEMENT | 452.94 * |
| 9 | |
| 10 | |
| TOTAL REIMBURSEMENTS | <u>13,245.40</u> |

*Average Federal Inmate/Average Total Population 1.8256%

(8) Overhead costs for a health care facility

| Vendor | Amount |
|-------------------------------------|------------------|
| 1 EDINBURG UTILITIES | 3,977.89 |
| 2 MAGIC VALLEY ELECTRIC CO-OP, INC. | 11,342.18 |
| 3 | |
| 4 | |
| 5 | |
| 6 | |
| 7 | |
| 8 | |
| 9 | |
| 10 | |
| <hr/> | |
| TOTAL EXPENDITURES | 15,320.07 |
| REIMBURSEMENTS | 0.00 |
| EXPENDITURES NET OF REIMBURSEMENTS | <u>15,320.07</u> |

| Vendor (Reimbursements) | Amount |
|-------------------------|-------------|
| 1 | |
| 2 | |
| 3 | |
| 4 | |
| 5 | |
| <hr/> | |
| TOTAL REIMBURSEMENTS | <u>0.00</u> |

Source: Information forwarded by Letty Chavez from the Hidalgo County Auditor's Office on 03/13/09.

(9) Emergency medical services

| Vendor | Amount |
|--|-----------------|
| 1 EDINBURG EMERGENCY MEDICINE ASSOCIATES | 254.42 |
| 2 GATEWAY EMERGENCY PHYSICIANS | 404.32 |
| 3 HIDALGO EMERGENCY MEDICINE ASSOCIATES, P.A. | 252.27 |
| 4 PALMS EMERGENCY PHYSICIANS | 1,945.42 |
| 5 RIO GRANDE VALLEY EMERGENCY PHYSICIANS, PLLC | 338.74 |
| 6 | |
| 7 | |
| 8 | |
| 9 | |
| 10 | |
| TOTAL EXPENDITURES | 3,195.17 |
| REIMBURSEMENTS | 81.24 |
| EXPENDITURES NET OF REIMBURSEMENTS | <u>3,113.93</u> |

| Vendor (Reimbursements) | Amount |
|--|--------------|
| 1 GATEWAY EMERGENCY PHYSICIANS (REC. NO. 120491) | 81.24 |
| 2 | |
| 3 | |
| 4 | |
| 5 | |
| TOTAL REIMBURSEMENTS | <u>81.24</u> |

(10) Medical supplies or equipment used for the provision of health care services to the general public

| | Vendor | Amount |
|----|---------------------------------|------------|
| 1 | ANDA, INC. | 3,930.05 |
| 2 | AUBURN PHARMACEUTICAL CO. | 2,643.10 |
| 3 | HEALTH CARE LOGISTICS | 172.90 |
| 4 | INDEPENDENT HEALTH SERVICES | 254.59 |
| 5 | MAXOR NATIONAL PHARMACY SERVICE | 1,326.34 |
| 6 | MEDICAL PLAZA PHARMACY | 152,564.73 |
| 7 | MOORE MEDICAL | 565.41 |
| 8 | PORTCITY MEDICAL | 2,400.00 |
| 9 | RICHMOND PHARMACEUTICALS, INC. | 32.40 |
| 10 | | |
| 11 | | |
| 12 | | |
| 13 | | |
| 14 | | |
| 15 | | |

| | |
|------------------------------------|-------------------|
| TOTAL EXPENDITURES | 163,889.52 |
| REIMBURSEMENTS | 0.00 |
| EXPENDITURES NET OF REIMBURSEMENTS | <u>163,889.52</u> |

| | Vendor (Reimbursements) | Amount |
|----------------------|-------------------------|-------------|
| 1 | | |
| 2 | | |
| 3 | | |
| 4 | | |
| 5 | | |
| 6 | | |
| 7 | | |
| 8 | | |
| 9 | | |
| 10 | | |
| TOTAL REIMBURSEMENTS | | <u>0.00</u> |

(11) Other services provided by the county which are also within the scope of services that hospital districts are authorized by law to provide. These will typically be diagnostic and treatment services.

| Vendor | Amount |
|------------------------------------|--------------------|
| 1 | |
| 2 | |
| 3 | |
| 4 | |
| 5 | |
| 6 | |
| 7 | |
| 8 | |
| 9 | |
| 10 | |
| | <hr/> |
| TOTAL EXPENDITURES | 0.00 |
| REIMBURSEMENTS | <u>0.00</u> |
| EXPENDITURES NET OF REIMBURSEMENTS | <u><u>0.00</u></u> |

| Vendor (Reimbursements) | Amount |
|-------------------------|--------------------|
| 1 | |
| 2 | |
| 3 | |
| 4 | |
| 5 | |
| | <hr/> |
| TOTAL REIMBURSEMENTS | <u><u>0.00</u></u> |



**C. ADDITIONAL UNREIMBURSED
PERSONAL HEALTH CARE
SERVICES PROVIDED TO THE
GENERAL PUBLIC**

\$ 13,202,583.29

ATTACHMENT - COUNTY EXPENDITURE STATEMENT - 2009
(Base numbers for expenditure Listed on category C ONLY from page 1)

On the appropriate line below, enter the base numbers for your county's unreimbursed category C expenditures during calendar year 2008. The total amount that you enter on this attachment should equal the amount that you entered for category C on page one (1) of the expenditure statement. Any unreimbursed expenditures that you made from a trust fund or reserve account for the provision of health care services may also be included below.

| | | |
|--|----|----------------------|
| (1) Health care clinic, laboratory, and case management services. | \$ | 244,694.61 |
| (2) Dental care services | \$ | 15,540.98 |
| (3) Outreach and prevention efforts related to tobacco use, including but not limited to media campaign, education, counseling, and production and distribution of promotional literature. | \$ | 79,400.00 |
| (4) Other health care outreach and prevention efforts, including but not limited to media campaign, education, counseling, and production and distribution of promotional literature. Typical target areas for these efforts include health hazards affecting the general public. | \$ | - |
| (5) Medical transportation | \$ | - |
| (6) Behavioral or psychiatric health care services | \$ | 534,825.00 |
| (7) Capital expenditures for health care services | \$ | 289,521.51 |
| (8) Overhead costs for a health care facility | \$ | 4,376,648.20 |
| (9) Emergency medical services | \$ | - |
| (10) Medical supplies or equipment used for the provision of health care services to the general public. | \$ | 240,948.46 |
| (11) Other services provided by the county which are also within the scope of services that hospital districts are authorized by law to provide. These will typically be diagnostic and treatment services. (Describe below) Payments made to Medical Supplemental Program Escrow # 1. | \$ | 7,421,004.53 |
| TOTAL FOR CATEGORY C | \$ | 13,202,583.29 |

Tobacco Settlement Distribution Proceeds Program
County Expenditure Statement 2009
Additional Unreimbursed Personal Health Care
Services Provided To The General Public

| | Health Department | Medical Supplemental Program | Juvenile Probation | Tropical Texas Center | The Easter Seals Society | Texas Cooperative Extension | YEAR 2007 TOTALS |
|--|------------------------|------------------------------|----------------------|-----------------------|--------------------------|-----------------------------|-------------------------|
| (1) Health care screening, laboratory, and health care case management services. | \$ 31,652.02 | \$ - | \$ 213,042.59 | \$ - | \$ - | \$ - | \$ 244,694.61 |
| (2) Oral/dental health care services. | \$ - | \$ - | \$ 15,540.98 | \$ - | \$ - | \$ - | \$ 15,540.98 |
| (3) Outreach and prevention efforts related to tobacco use, including but not limited to media campaigns, education, counseling, and production and distribution of promotional literature. | \$ - | \$ - | \$ - | \$ - | \$ - | \$ 79,400.00 | \$ 79,400.00 |
| (4) Other health care outreach and prevention efforts, including but not limited to media campaigns, education, counseling, and production and distribution of promotional literature. Typical target areas for these efforts include health hazards affecting the general public. | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - |
| (5) Medical transportation, including transportation to and from medical appointments. | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - |
| (6) Behavioral health care services. | \$ - | \$ - | \$ - | \$ 534,825.00 | \$ - | \$ - | \$ 534,825.00 |
| (7) Capital expenditures for direct health care services, such as construction of ambulance facilities or clinics. | \$ 289,521.51 | \$ - | \$ - | \$ - | \$ - | \$ - | \$ 289,521.51 |
| (8) Overhead costs for a health care facility. | \$ 4,360,183.97 | \$ - | \$ - | \$ - | \$ 16,464.23 | \$ - | \$ 4,376,648.20 |
| (9) Emergency medical services. | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - |
| (10) Medical supplies or equipment used for the provision of health care services to the general public. | \$ 179,847.82 | \$ - | \$ 61,100.64 | \$ - | \$ - | \$ - | \$ 240,948.46 |
| (11) Other services provided by the county which are also within the scope of services that hospital districts are authorized by law to provide. These will typically be diagnostic and treatment services for individuals. | \$ - | \$ 7,421,004.53 | \$ - | \$ - | \$ - | \$ - | \$ 7,421,004.53 |
| TOTALS | \$ 4,861,205.32 | \$ 7,421,004.53 | \$ 289,684.21 | \$ 534,825.00 | \$ 16,464.23 | \$ 79,400.00 | \$ 13,202,583.29 |



D. CERTIFICATIONS

County Judge

County Auditor

Human Services/Indigent Health

Sheriff's Department

Health Department

Adult Probation

Juvenile Probation

Tropical Texas Center

Easter Seal Society

Texas Cooperative Extension

**Pro Rata Tobacco Settlement Distribution
County Expenditure Statement – 2009**

The deadline for submission of this form to the Department of State Health Services is **March 31, 2009**. The target date for payment by the Comptroller of Public Accounts to the political subdivisions, based on this information, is no later than April 30, 2009.

The information submitted on this form is subject to audit by the State of Texas. If ineligible expenditures are identified through an audit following payment to a political subdivision, the ineligible amount may be deducted from the subsequent year's payment to that political subdivision.

This is to certify that the above expenditures are eligible for pro rata payment in accordance with the Agreement Regarding Disposition of Settlement Proceeds between the State of Texas and American Tobacco Company, et al.

Name of County: Hidalgo County

Name of Certifying Officer: J.D. Salinas, III

Certifying Officer's Title: Hidalgo County Judge

Certifying Officer's Signature/Date: _____

Telephone Number: (956) 318-2600 Email: jd.salinas@hidalgocountyjudge.com

If you chose to have your completed signed expenditure statement (1) hand delivered or (2) faxed or (3) emailed to DSHS, it must be received no later than 5:00 p.m., March 31, 2009. If you elect to mail (via the U.S. Postal Service) or ship (via a commercial mail service) your completed signed expenditure statement, the postmark must reflect a date no later than midnight, March 31, 2009. STATEMENTS THAT DO NOT INCLUDE A SIGNATURE WILL NOT BE ACCEPTED. Statements are to be addressed to:

**Department of State Health Services
Funds Coordination & Management
Attn: Kim Gold, MC 4501, Rm. T-511
PO Box 149347
Austin, Texas 78714-9347**

You may direct any questions to Ms. Gold at the above address or by telephone, fax, or email as follows:

Telephone Number: 512.458.7111, ext. 6646

Fax: 512.458.7774

Email: kim.gold@dshs.state.tx.us

DSHS WILL ACKNOWLEDGE IN WRITING THE RECEIPT OF ALL COMPLETED SIGNED EXPENDITURE STATEMENTS.

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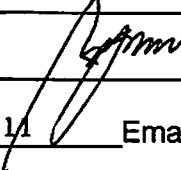
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Name of County: Hidalgo County

Name of Certifying Officer: Ray Eufracio, CPA

Certifying Officer's Title: County Auditor

Certifying Officer's Signature/Date:  3/23/09

Telephone Number: (956) 318-2511 Email: ray.eufracio@auditor.co.hidalgo.tx.us

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Name of County: HIDALGO COUNTY

Name of Certifying Officer: EDUARDO OLIVAREZ

Certifying Officer's Title: HEALTH & HUMAN SERVICES CHIEF ADMINISTRATIVE OFFICER

Certifying Officer's Signature/Date: MARCH 23, 2009

Telephone Number: () 956 318-2100 Email: eddie.olivarez@hchd.org

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Name of County: Hidalgo

Name of Certifying Officer: Guadalupe "Lupe" Trevino

Certifying Officer's Title: Hidalgo County Sheriff

Certifying Officer's Signature/Date:  03/18/09

Telephone Number: (956) 393-6002 Email: sherifftrvino@hidalgoso.org

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Name of County: Hidalgo County

Name of Certifying Officer: Eduardo Olivarez

Certifying Officer's Title: Chief Administrative Officer

Certifying Officer's Signature/Date: 

Telephone Number: (956) 383-6221 Email: eddie.olivarez@hchd.org

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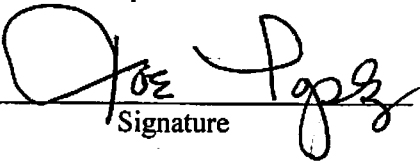
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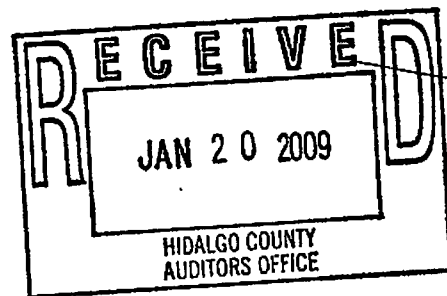
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Our funding is primarily through state funds. Any equipment and services related to Health services are paid 100% with state funds.


Signature


Date

Joe Lopez, Director
Hidalgo County Community Supervision & Corrections Department



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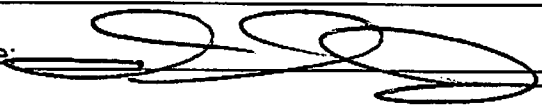
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Name of County: HIDALGO COUNTY

Name of Certifying Officer: MR. ISRAEL "BUDDY" SILVA, JR.

Certifying Officer's Title: DIRECTOR/CHIEF JUVENILE PROBATION OFFICER

Certifying Officer's Signature/Date:  1-29-09

Telephone Number: (956) 587-6200 Email: buddy.silva@jpd.co.hidalgo.tx.us

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TROPICAL

TEXAS BEHAVIORAL HEALTH

P.O. Drawer 1108 • 1901 South 24th Avenue
Edinburg, Texas 78540
(956) 289-7000

CERTIFICATION

This is to certify that the Tropical Texas Behavioral Health, located at 1901 S. 24th Ave., Edinburg, Texas 78539 received \$534,825 from Hidalgo County for health care expenditures. All funds stated above were disbursed during the calendar year ended December 31, 2008.

We served 7,195 people during the year ended December 31, 2008. Supporting documentation is attached.



(Signature)

W. Terry Crocker

Executive Director

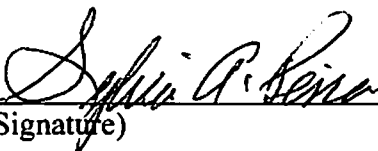
1-20-09

(Date)

(956) 289-7258

(Phone No.)

Attest:



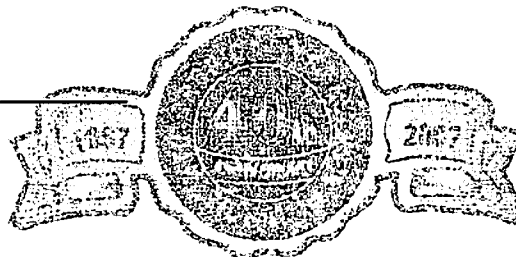
(Signature)

Sylvia Pena

Secretary

1/22/09

(Date)



Providing 40 Years of Quality Service to the Rio Grande Valley
An Equal Opportunity/ Affirmative Action Employer



Creating solutions, changing lives.

Helping people with disabilities
gain greater independence

EASTER SEALS RIO GRANDE VALLEY

P.O. Box 489
1217 Houston Street
McAllen, TX 78505-0489
(956) 631-9171 • Fax (956) 631-7566

Easter Seals Rio Grande Valley, Inc.

CERTIFICATION

HARLINGEN SATELLITE
2422-C E. Tyler Avenue
Harlingen, TX 78550
(956) 423-9171 • Fax (956) 423-7457

www.easterseals-rgv.org

This is to certify that Hidalgo County pays the electricity expenses for the Easter Seals Rio Grande Valley, Inc., located at 1217 W. Houston Ave., McAllen, Texas. The County paid \$ 16,464.23 for electricity for the year ended December 31, 2008 for the facility, which is used to provide health care services for disabled children. The County pays the electricity expense directly to Reliant Energy Solutions.

We served 1,200 children during the year ended December 31, 2008. Supporting documentation is attached.

EASTER SEALS RGV, INC.

By: *Patricia Rosenlund*
PATRICIA L. ROSENLUND
Executive Director

Date: 2/26/09

Phone No: 956 631-9171

ATTEST:

By: *Elvia Hernandez*
Elvia Hernandez
Administrative Secretary

Date: 02-26-09

Note: Electricity Bill Account #1539671949, 1217 W. Houston Ave., McAllen, TX
Meter #GE0000288670 and # GE0000011525

Name: HID Soc Crip Child

BOARD OF DIRECTORS

President
Billy Canales

President-Elect
A.R. "Felo" Guerra

Vice President
Laura Talbot

Treasurer
Leslie Bingham

Secretary
Ricardo Aguirre

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E. Linda Villarreal, MD

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Joseph McDonald, MD

Daniel P. McLean

Tracey Twenhafel
Rosie Wilkinson

Tom Woolsey

MEDICAL DIRECTOR

Dr. Hiram Tavárez

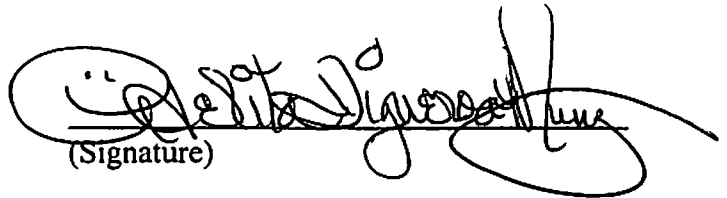
EXECUTIVE DIRECTOR

Patricia Rosenlund

Texas AgriLife Extension Service CERTIFICATION

This is to certify that the Texas AgriLife Extension Service office, located at 410 North 13th Avenue, Edinburg, Texas 78541 received \$79,400.00 from Hidalgo County for outreach and prevention efforts related to health care services provided to the general public. All funds stated above were disbursed during the calendar year ended December 31, 2008.

We served 1,112,964 people during the year ended December 31, 2008. Supporting documentation is attached.

A handwritten signature in black ink, appearing to read "Adelita Figueroa-Munoz", written over a horizontal line. The signature is stylized and includes a large flourish at the end.

(Signature)

Adelita Figueroa-Munoz

County Extension Agent - FCS

(Print Name / Title)

March 5, 2009

(Date)

956/383-1026

(Phone No.)