

Mike Escaname

From: Ruiz, Kevin (DSHS) <Kevin.Ruiz@dshs.texas.gov>
Sent: Wednesday, August 02, 2017 4:18 PM
To: eddie.olivarez@hchd.org; mike.escaname@hchd.org
Cc: Triplett, Jeremy (DSHS); Furdek, Natalie A (DSHS)
Subject: Zika Health Care Services Program - Budget and Face Page information requested
Attachments: DSHSCostsOnlyBudgetTemplateFY2018.xls; Face Page for Hidalgo County HHS.docx; Zika LHD Grantee Work Requirements DRAFT.DOCX

Good afternoon Mr. Olivarez,

Ref: Zika Health Care Services Program

Please use the attached Budget Template to complete a proposed budget for the above project. In addition please complete the attached Face Page (no signature is required on the form). It is critical to notate the signature authority and the program contact in this form. The information included on the face page will be utilized to route the contract through DocuSign. If you prefer for additional individuals to be copied on the contract when sent out please let me know and I can include this in the DocuSign routing process. The DocuSign process will allow you to view and sign the contract electronically.

The budget allocation for the above contact is not to exceed \$ 311,162.00. Some logistics to consider while completing your budget are the following:

- **Contract Period-** We are planning on making the contract effective upon execution through 6/30/18. We are projecting due to the multiple reviews and processing for the contract to start in late October or early November. There will be options to renew the contract for an additional 2 terms.
- **Budget-** Please complete the eight category budget and some additional tips for the below categories will be helpful during our review:
 - **Personnel-** It is critical to include in the justification portion if the cost is clinic based or outreach related. As mentioned on the call under the personnel budget it would be helpful to separate the same position by these two settings and notate the appropriate projected percentages. For example:
Case Manager #1 .6 "Activities conducted in a outreach setting....."
Case Manager #1 .4 "Activities conducted in a clinic setting"
 - **Supplies-** You may also include start-up expenses such as tablets, desktops, and laptops that are under \$5,000. Please note tablets, desktops, and laptops will not be considered in the subsequent years.
 - **Equipment-** Equipment items will not be considered under this contract.

Submit the completed Budget and Face Page to me, by Tuesday, August 8, 2017 by close of business or earlier if possible.

As a reminder, the budget templates are locked to prevent the deletion of formulas. Budgets will only be accepted on the new budget templates labeled FY 2018.

- Dollar amounts in the budget must be in whole numbers.
- Please limit FTEs to two decimal places.
- Please do not use cents or create formulas in the Excel cells.

Please contact me regarding any questions.

Sincerely,

Kevin Ruiz, CTCM, CTPM
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Contract Development and Support Branch
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Please note My email address has changed to reflect @dshs.texas.gov domain. Please be sure to update your contact information with the new address.