

**AI-63304**  
**CC - REGULAR**

**Health & Human Services Dept.**  
**Indigent Health Care Program**

**Meeting Date:** 01/23/2018

**Submitted For:** Dairen Sarmiento, HEALTH & HUMAN SERVICES DEPT.

**Submitted By:** Dairen Sarmiento, HEALTH & HUMAN SERVICES DEPT.

**Department:** HEALTH & HUMAN SERVICES DEPT.

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**Information**

**CAPTION**

Discussion, consideration and approval to draw down funds for Demonstration Year 7 Advance UC Payment in the amount to be determined by HHSC instructions from the General Fund and Local Provider Participation Fund (LPPF) with a settlement date of 2/2/18.

Approval of Certification of Revenues as certified by the County Auditor from the Local Provider Participation Fund in the amount to be determined by HHSC final instructions.

Approval of 2018 Appropriation of funds from the LPPF in the amount to be determined by HHSC final instructions.

**BACKGROUND**

Tentative UC IGT notification for DY7 Advance payment is 1/26/18.

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**Fiscal Impact**

**Attachments**

**TIMELINE 2018**

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**Form Review**

<b>Inbox</b>	<b>Reviewed By</b>	<b>Date</b>
(Originator)	Dairen Sarmiento	01/12/2018 04:21 PM
Form Started By:	Dairen Sarmiento	Started On: 01/12/2018 04:21 PM