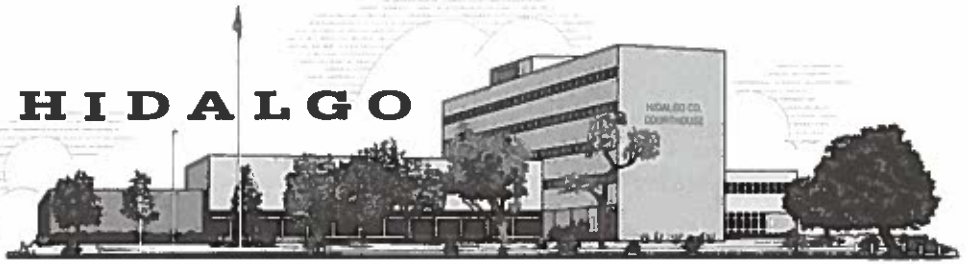


# COUNTY of HIDALGO



EDINBURG, TEXAS 78539

**HIDALGO COUNTY AUDITOR'S OFFICE**  
Hidalgo County Administration Building  
2808 South Business Highway 281  
Edinburg, Texas 78539-6243  
PHONE: (956) 318-2511  
FAX: (956) 318-2577  
WEBSITE: [www.co.hidalgo.tx.us/auditor](http://www.co.hidalgo.tx.us/auditor)

September 5, 2018

The Honorable Ramon Garcia, Hidalgo County Judge  
The Honorable David Fuentes, Commissioner, Precinct No. 1  
The Honorable Eduardo "Eddie" Cantu, Commissioner, Precinct No. 2  
The Honorable Jose M. Flores, Commissioner, Precinct No. 3  
The Honorable Joseph Palacios, Commissioner, Precinct No. 4

**RE: Certification of Revenue**

Dear Judge and Commissioners:

Pursuant to Local Government Code § 111.07075 SPECIAL BUDGET FOR REVENUE RECEIVED AFTER START OF FISCAL YEAR:

The county auditor shall certify to the commissioners court the receipt of revenue from a new source not anticipated before the adoption of the budget and not included in the budget for that fiscal year. On certification, the court may adopt a special budget for the limited purpose of spending the revenue for general purposes or for any of its intended purposes.

I, Maria Arcilia Duran, County Auditor of Hidalgo County, certify to the Hidalgo County Commissioners Court the revenue from the assessment of mandatory payments from the respective hospitals for the Health Care Funding District in the amount of \$17,807,445.36. These funds may now be made available by creating a new special budget or amending a current budget for its intended purposes.

CERTIFIED BY:

  
\_\_\_\_\_  
Maria Arcilia Duran, CPA  
Hidalgo County Auditor

9-5-18  
\_\_\_\_\_  
Date



**HIDALGO COUNTY DISTRICT JUDGES**

LUIS M. SINGLETERRY JUDGE, 1<sup>ST</sup> D.C.    JAMIE E. TIERNA JUDGE, 1<sup>ST</sup> D.C.    J. R. "BOBBY" FLORES JUDGE, 1<sup>ST</sup> D.C.    ROSE GUERRA PEYHA JUDGE, 206<sup>TH</sup> D.C.    JUAN R. PARTIDA JUDGE, 275<sup>TH</sup> D.C.    MARIO E. RAMIREZ, JR. JUDGE, 332<sup>ND</sup> D.C.    NOE GONZALEZ JUDGE, 370<sup>TH</sup> D.C. OVERSEER    LETICIA LOPEZ JUDGE, 389<sup>TH</sup> D.C.    L. KENO VASQUEZ JUDGE, 390<sup>TH</sup> D.C.    ISRAEL RAMON, JR. JUDGE, 430<sup>TH</sup> D.C.    RENEE R. BETANCOURT JUDGE, 449<sup>TH</sup> D.C.


# HIDALGO COUNTY texas

DEPARTMENT OF BUDGET & MANAGEMENT  
2818 S. Business Hwy. 281  
Edinburg, Texas 78539  
Office: (956) 292-7025 • Fax: (956) 292-7034  
[www.co.hidalgo.tx.us/budget](http://www.co.hidalgo.tx.us/budget)



---

## Memorandum

**To:** Maria Arcilia Duran, CPA, County Auditor  
**From:** Sergio Cruz, Budget Officer   
**Date:** September 4, 2018  
**Subject:** Health Care Funding District Certification of Revenues  
**Cc:** Linda Fong, 1<sup>st</sup> Assistant County Auditor  
Becky Luna, Director of Accounting  
Nereyda Gonzalez, Financial Accounting Supervisor  
Dairen Sarmiento, Director, Indigent Health Care Program

---

Please let this memo serve as a request for a Certification of Revenues letter from your office in relation to the mandatory payments from the respective hospitals for the Health Care Funding District.

We are requesting the certification of \$17,807,445.36 from Fund 1258. These monies were approved to be appropriated to fund the LPPF-1115 Waiver expenditures on 8/28/18 (AI-66179). Drawdown information and amounts were forwarded by Ms. Dairen Sarmiento on 8/31/18 through email, see attached.

Thank you for your prompt attention to this matter. If you have any questions, please do not hesitate to call me at (956) 292-7025 ext. 5424.

Zimbra

merlen.munoz@co.hidalgo.tx.us

---

**DRAW DOWN 9-6-18**

---

**From :** Dairen Sarmiento <dairen.sarmiento@hchd.org>

Fri, Aug 31, 2018 08:38 AM

**Subject :** DRAW DOWN 9-6-18

Need to follow up

**To :** Alfredo Zamarripa <alfredo.zamarripa@co.hidalgo.tx.us>, Arcy Duran <arcy.duran@auditor.co.hidalgo.tx.us>, 'Becky Luna' <becky.luna@auditor.co.hidalgo.tx.us>, eddie olivarez <eddie.olivarez@hchd.org>, James Hodge <james.hodge@co.hidalgo.tx.us>, Jennifer Garza <Jennifer.Garza@auditor.co.hidalgo.tx.us>, linda fong <linda.fong@auditor.co.hidalgo.tx.us>, lourdes acevedo <lourdes.acevedo@hchd.org>, merlen munoz <merlen.munoz@co.hidalgo.tx.us>, Nereyda Gonzalez <Nereyda.Gonzalez@auditor.co.hidalgo.tx.us>, sergio cruz <sergio.cruz@co.hidalgo.tx.us>, valde guerra <valde.guerra@co.hidalgo.tx.us>

3 attachments

Budget, County Treasurer and County Auditor Offices:

Please accept this as my request to \$17,807,445.36 From the Local Provider Participation Fund for the DY7 Partial Final UC Payment. The last day to submit the IGT into TexNet is 9/6/18 with an IGT Settlement date of 9/7/18.

County Treasurers department please select the UC bucket in TexNet when you enter the IGT amount. Please send me a copy of the trace sheet once the transfer has been completed so that I may submit to HHSC along with the Allocation Form.

Should you have any questions please contact me at extension 7365 or Lourdes Acevedo at extension 7366.

Thank you for your assistance with this request. Have a good day.

Respectfully submitted,

Dairen Sarmiento, MBA - Division Manager III  
Hidalgo County Indigent Health Care Program  
Health & Human Services  
1304 South 25<sup>th</sup> Avenue  
Edinburg, Texas 78542  
956-292-7000 extension 7365

CONFIDENTIALITY NOTICE: This email and any files transmitted with it may contain Protected Health Information under the Federal Health Insurance Portability and Accountability Act (HIPAA). If the receiver of this email is a Covered Entity under the regulations, you are obligated to treat this information accordingly. If this email was sent to you in error, you are prohibited from utilizing or disseminating this email or any attachments. Please immediately delete it from your computer system and notify the sender of their error.

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— INSTRUCTIONS 8-27-18.pdf  
86 KB

**Dairen Sarmiento**

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**From:** HHSC RAD UC Payments <RAD\_UC\_Payments@hhsc.state.tx.us>  
**Sent:** Monday, August 27, 2018 4:04 PM  
**To:** Castillon,Daniel; Collin.Lemaistre@tenethealth.com; Colt.Sullivan@QuorumHealth.com; colt@noconageneral.com; Colt\_Sullivan@QuorumHealth.com; Connie.Almeida@fortbendcountytexas.gov; CopelandT@uthscsa.edu; corey.davison@tenethealth.com; corrigan@bcm.edu; cory.rhoades@cookchildrens.org; cotty@gl-law.com; CowartK@uthscsa.edu; cparker@throckmortonhospital.com; cplummer@wghospital.com; cpope@starcarelubbock.org; CPutz@jpshealth.org; Craig.morse@csmedcenter.com; craigbjjerke@mhd.com; Cris.Rivera@HCAHealthcare.com; crofforc@nacmem.org; Cruz.Munoz@myfrh.com; crystalconner@shannonhealth.org; csadro@utmb.edu; cskovace@utmb.edu; csmith@texomacc.org; cstucks@echd.org; ctorres@tchospital.us; cwaites@martinch.org; cwborchardt@medicine.tamhsc.edu; cwelch@ies.healthcare; cwolfe@elpasochildrens.org; CWooten1@PrimeHealthcare.com; Cynthia.gomez@austintexas.gov; cynthiap@tricityservices.org; czafero@cmcvtx.org; dairen.sarmiento@hchd.org; daltmiller@fss-cpa.com; Dan.Rich@BSWHealth.org; DanaKennedy@TexasHealth.org; danc@lrhmrc.org; daniel.camacho@ahss.org; daniel.ford@christushealth.org; Daniel.Huffine@stdavids.com; Daniel.Nowak@hcahealthcare.com; Danny.Corpnew@houstontx.gov; daskovsky@gl-law.com; daskovsky@gmail.com; dave\_medley@chs.net; david.byrd@tenethealth.com; david.gutierrez@wtcmhmrc.org; david.lee@okmh.org; david.lewis1@lpnt.net; david.weden@atck.org; davidsalsberry@texashealth.org; Dawn.handley@atcic.org; dberger@stlukeshealth.org; dbillingsley@ehnel Paso.org; dblodgett@oghtx.com; dbrewer@lmhospital.com; dbrown@chambershealth.org; dbrunson@mahdtx.org; dburke@mahdtx.org; dbyrom@cmhos.org; dchester@iasishealthcare.com; Deanne.Kindred@BSWHealth.org; DeanneK@bayorhealth.edu; debbie.tucker@austintexas.gov; debbieg@lrhmrc.org; Deborah.Banerjee@houstontx.gov; deborah.brown@co.bell.tx.us; deborah.cain@ttuhsc.edu; debra.miller@crosbytonclinichospital.com; debra.nystrom@christushealth.org; deede.haggard@WNJ.ORG; deejon.douglass@cchdonline.com; DeL.Smith@campbellwilson.com; Delbert.Smith@utsouthwestern.edu; DeniceBlack@TexasHealth.org; dennis.thomas@hcmhosp.com; devashnee.rodrique@claritycgc.org; dfleenor@mahdtx.org; dfleenor@lambhc.org; DFleenor@mahdtx.org; dfreshour@comancheccmc.com; Dglassburn@primehealthcare.com; dgoggin@st-joseph.org; dgruener@stlukeshealth.org; dhaehn@ccmhospital.com; dhernandez@gmedcenter.com; dhowell@sph.tamhsc.edu; dhull@fishercountyhospital.com; diana.strupp@gl-law.com; diana.strupp@tenethealth.com; Diane\_Moore@chs.net; Diane\_Moore@QuorumHealth.com; dibarra@cranememorial.org; dickey@tamhsc.edu; Dina.Hermes@goldenplains.org; dinah.gonzalez@primehealthcare.com  
**Subject:** DY7 Partial Final UC IGT Notification - Providers 4 of 17  
**Attachments:** Master Affiliation for Publication as of 8\_24\_18.xlsx; DY 7 Partial Final Payment Summary.xlsx; DY7 Sept Partial Final Pmnt IGT.XLSX; DY7 UC Allocation Form.xlsx; Explanation of Calculation of DY 7 UC Partial Final Payment.docx

Providers, Transferring Governmental Entities, and Anchors:

**Please read this entire message carefully and make note of the information provided below that failure by governmental entities providing intergovernmental transfers (IGT) of funds and by providers to submit the required forms may result in a delayed payment for the providers.**

HHSC is providing notice to IGT for the September DY7 UC Partial Final Payment.

Dates pertinent to this payment:

9/06/18	Last day to submit your IGT into TexNet
9/07/18	IGT Settlement date
9/17/18	Payments to Transferring Hospitals, i.e. Large public hospitals, as defined in 1 Tex. Admin. Code §355.8201(b)(14)
9/28/18	All UC Providers paid

Attached to this email are the following documents:

- DY7 Sept Partial Final Pymnt IGT spreadsheet
- Master Affiliation as of 08\_24\_18 for Publication spreadsheet
- DY7 UC Allocation Form
- Explanation of Calculation of DY7 UC Partial Final Payment
- DY7 Sept Partial Final Payment Summary

The amount that needs to be submitted into TexNet for all entities is in **Column H** while the corresponding payment amount is in **Column G** of the DY7 Sept Partial Final Pymnt IGT spreadsheet. Please ensure you select the applicable UC bucket in TexNet when you enter your IGT. It is imperative that you send a screen shot/PDF copy of the confirmation/trace sheet from TexNet or an email with the trace number, location number, IGT amount and settlement date, if the TexNet is submitted over the phone, to [RAD\\_UC\\_Payments@hhsc.state.tx.us](mailto:RAD_UC_Payments@hhsc.state.tx.us). Additionally, you must submit the IGT allocation form. Please include two contacts and their phone numbers and email addresses, should HHSC have any questions regarding the TexNet received.

Governmental entities that are transferring funds for multiple providers may submit one lump sum IGT for their affiliates. All IGTs, even for entities submitting IGT for themselves, must complete and submit the attached allocation form. If a Trace Sheet is received without an IGT allocation form HHSC will allocate the IGT received in accordance with 1 Tex. Admin. Code §355.8201(h)(2)(B)(ii). In the absence of the notification described in 1 Tex. Admin. Code §355.8201(h)(2)(B)(i), each hospital owned by or affiliated with the governmental entity will receive a portion of its payment amount for that period, based on the hospital's percentage of the total payment amounts for all hospitals owned by or affiliated with that governmental entity.

In accordance with 1 Tex. Admin. Code §355.8201(h)(2)(C), if a government entity transfers more than the maximum IGT amount that can be provided for that hospital, and that hospital is affiliated with multiple governmental entities, then HHSC will calculate the amount of IGT funds necessary to fund the hospital's payment and HHSC will issue a pro-rata refund to the governmental entity/entities identified by HHSC. HHSC will determine the pro-rata refund, not the government entity/entities or their representative(s).

An explanation of the UC September Partial Final Payment Calculation is being sent separately.

If you have questions regarding the UC payment process, please send an email to [RAD\\_UC\\_Payments@hhsc.state.tx.us](mailto:RAD_UC_Payments@hhsc.state.tx.us).

If you have questions regarding the payment calculation file, please send an email to [uctools@hhsc.state.tx.us](mailto:uctools@hhsc.state.tx.us)

**HHSC Rate Analysis Payments**

Texas Health and Human Services Commission  
P.O. Box 149030, Mail Code H-400  
Brown-Heatly Building  
4900 N. Lamar Blvd.  
Austin, TX 78714-9030



AI-66179

Health & Human Services Dept. 17. B. 1.

CC - REGULAR

Health Care Funding District

**Meeting Date:** 08/28/2018

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

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

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

---

**Information**

**CAPTION**

A. Discussion, consideration and approval to draw down funds for Demonstration Year 7 UC Payment in the amount to be determined by HHSC instructions from the Local Provider Participation Fund (LPPF) with a settlement date of Friday, September 7, 2018.

B. Approval of Certification of Revenues as certified by the County Auditor from the LPPF in the amount to be determined by HHSC final instructions.

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

**BACKGROUND**

Tentative Notification of IGT payment, Monday, August 27, 2018.

---

**Fiscal Impact**

**Attachments**

schedule

backup

backup

appropriation

---

**Form Review**

<b>Inbox</b>	<b>Reviewed By</b>	<b>Date</b>
Budget & Management	Veronica Ortiz	08/16/2018 12:32 PM
Final Approval	Monica Salinas	08/24/2018 06:05 PM
Form Started By: Dairen Sarmiento		Started On: 08/16/2018 08:46 AM
Final Approval Date: 08/24/2018		

**REVISED**

**Schedule for DY 7 UC Final Payment**

	<b>Step</b>	<b>Due Date</b>
1.	Receive feedback from stakeholders on partial final September payment methodology	COB Wednesday, August 15, 2018
2.	Convene workgroup on September and December payment	Wednesday, August 15, 2018
3.	First meeting of workgroup forum	Thursday, August 16, 2018
4.	Workgroup forum input for September payments	Tuesday, August 21, 2018
5.	UC IGT Notification (partial final September payment)	Monday, August 27, 2018
6.	IGT Settlement Date for September payment	Friday, September 7, 2018
7.	Partial final September UC Paid	By Friday, September 28, 2018
8.	Receive input from workgroup forum on final December payment methodology	Friday, August 24, 2018
9.	Submit proposed rule, if any, to Register	Monday, September 10, 2018
10.	Rule comment period closes	Monday, October 22, 2018
11.	Submit adopted rule to register	Monday, November 5, 2018
12.	RAD completes preliminary calculation of final December payment	Tuesday, November 13, 2018
13.	New rule effective	Monday, November 26, 2018
14.	IGT Commitment to Industry	Monday, November 12, 2018
15.	IGT Commitments due to HHSC	Monday, November 19, 2018
16.	UC IGT Notification	Wednesday, November 21, 2018
17.	IGT Settlement Date	Friday, December 7, 2018
18.	UC Paid	By Sunday, December 30, 2018



## Dairen Sarmiento

---

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**To:** Castillon,Daniel; Collin.Lemaistre@tenethealth.com; Colt.Sullivan@QuorumHealth.com; colt@noconageneral.com; Colt\_Sullivan@QuorumHealth.com; Connie.Almeida@fortbendcountytexas.gov; CopelandT@uthscsa.edu; corey.davison@tenethealth.com; corrigan@bcm.edu; cory.rhoades@cookchildrens.org; cottey@gl-law.com; CowartK@uthscsa.edu; cparker@throckmortonhospital.com; cplummer@wghospital.com; cpope@starcarelubbock.org; CPutz@jpshealth.org; Craig.morse@csmedcenter.com; craigbjerke@mhd.com; Cris.Rivera@HCAHealthcare.com; crofforc@nacmem.org; Cruz.Munoz@myfrh.com; crystalconner@shannonhealth.org; csadro@utmb.edu; cskovace@utmb.edu; csmith@texomacc.org; cstucks@echd.org; ctorres@tchospital.us; cwaites@martinch.org; cwborchardt@medicine.tamhsc.edu; cwelch@ies.healthcare; cwolfe@elpasochildrens.org; CWooten1@PrimeHealthcare.com; cynthia.gamez@austintexas.gov; cynthiap@tricityservices.org; czafero@cmcvtx.org; dairen.sarmiento@hchd.org; daltmiller@fss-cpa.com; Dan.Rich@BSWHealth.org; DanaKennedy@TexasHealth.org; danc@Irmhmrc.org; daniel.camacho@ahss.org; daniel.ford@christushealth.org; Daniel.Huffine@stdavids.com; Daniel.Nowak@hcahealthcare.com; Danny.Corprew@houston.tx.gov; daskovsky@gl-law.com; daskovsky@gmail.com; dave\_medley@chs.net; david.byrd@tenethealth.com; david.gutierrez@wtcmhmr.org; david.lee@okmh.org; david.lewis1@lpnt.net; david.weden@atcic.org; davidsalsberry@texashealth.org; Dawn.handley@atcic.org; dberger@stlukeshhealth.org; dbillingsley@ehnel Paso.org; dblodgett@oghtx.com; dbrewer@lmhospital.com; dbrown@chambershealth.org; dbrunson@mahdtx.org; dburke@mahdtx.org; dbyrom@cmhos.org; dchester@iasishealthcare.com; Deanne.Kindred@BSWHealth.org; DeanneK@baylorhealth.edu; debbie.tucker@austintexas.gov; debbieg@Irmhmrc.org; Deborah.Banerjee@houston.tx.gov; deborah.brown@co.bell.tx.us; deborah.cain@ttuhsc.edu; debra.miller@crosbytonclinichospital.com; debra.nystrom@christushealth.org; deede.haggard@WNJ.ORG; deejon.douglass@cchdonline.com; Del.Smith@campbellwilson.com; Delbert.Smith@utsouthwestern.edu; DeniceBlack@TexasHealth.org; dennis.thomas@hcmhosp.com; devashnee.rodrique@claritycgc.org; dfleenor@mahdtx.org; dfleenor@lambhc.org; DFleenor@mahdtx.org; dfreshour@comanchecmc.com; Dglassburn@primehealthcare.com; dgoggin@st-joseph.org; dgruener@stlukeshhealth.org; dhaehn@ccmhospital.com; dhernandez@grmedcenter.com; dhowell@sph.tamhsc.edu; dhull@fishercountyhospital.com; diana.strupp@gl-law.com; diana.strupp@tenethealth.com; Diane\_Moore@chs.net; Diane\_Moore@QuorumHealth.com; dibarra@cranememorial.org; dickey@tamhsc.edu; Dina.Hermes@goldenplains.org; dinah.gonzalez@primehealthcare.com  
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### **HHSC Rate Analysis Payments**

Texas Health and Human Services Commission

P.O. Box 149030, Mail Code H-400

Brown-Heatly Building

4900 N. Lamar Blvd.

Austin, TX 78714-9030

Account Number	Description	Pre Budget Budget	Pre Encumbrance Encumbrance	Pre Actual Actual	Avail/Rec
8-1258-355-20-240-001-0-000	LPPF-SPEC ASSESS COLUMBIA RIO C	3 275 284 50	.00	9 221 561 05	5 946 276 55
8-1258-355-20-240-002-0-000	LPPF-SPEC ASSESS-CORNERSTONE	00	00	530 051 42	530 051 42
8-1258-355-20-240-003-0-000	LPPF-SPEC ASSESS-DOCTORS HOSF	7 582 761 14	00	11 374 141 71	3 791 380 57
8-1258-355-20-240-004-0-000	LPPF-SPEC ASSESS-KNAPP MEDICAL	2 333 001 54	.00	3 499 502 31	1 166 500 77
8-1258-355-20-240-005-0-000	LPPF-SPEC ASSESS-LIFECARE HOSP	00	00	00	00
8-1258-355-20-240-006-0-000	LPPF-SPEC ASSESS-EDINBURG REGI	9 814 663 86	00	18 422 119 18	8 607 455 32
8-1258-355-20-240-007-0-000	LPPF-SPEC ASSESS-MISSION HOSPIT	769 402 49	00	3 132 447 96	2 363 045 47
8-1258-355-20-240-008-0-000	LPPF-SPEC ASSESS-SOLERA HOSPIT	00	00	427 433 66	427 433 66
8-1258-355-20-240-009-0-000	LPPF-SPEC ASSESS-WESLACO REHA	00	.00	225 149 58	225 149 58
<b>Totals</b>		<b>23,775,113.53</b>	<b>.00</b>	<b>46,832,408.87</b>	<b>23,067,293.34</b>
Cancel					

DATE: August 28, 2018

**2018**

DEPARTMENT HEAD: Sergio Cruz, Budget Officer

Appropriation  
AI-66179



DEPARTMENT NAME: Department of Budget & Management for Human Services -LPPF

ACCOUNT NUMBER: 8-1258-444-00-240-006-3-843

Contact Person: Merlen Munoz Ph#: (956) 292-7025 ext. 5403

SUBJECT: **Budget Amendments (increase (decrease)) in accordance with Local Government Code, Chapter 111, § 111.070, Item C (2).**

Honorable Commissioners' Court of Hidalgo County

I would like to request the following Budget Amendments (increase (decrease)) in accordance with Local Government Code, Chapter 111, § 111.070, Item C (2).

INCREASE ACCOUNT NUMBER(S)	ACCOUNT (OBJECT) NAME	AMOUNT
8-1258-444-00-240-006-3- 843	LPPF Aid to Nongovt	17,807,445.36
8-1258-355-20-240-001-0- 000	LPPF-SPEC ASSESS- COLUMBIA RIO GRANDE	1,637,642.25
8-1258-355-20-240-003-0- 000	LPPF-SPEC ASSESS- DOCTORS HOSPITAL AT REN	3,791,380.57
8-1258-355-20-240-004-0- 000	LPPF-SPEC ASSESS- KNAPP MEDICAL CENTER	1,166,500.77
8-1258-355-20-240-006-0- 000	LPPF-SPEC ASSESS- EDINBURG REGIONAL MED	8,607,455.32
8-1258-355-20-240-007-0- 000	LPPF-SPEC ASSESS- MISSION HOSPITAL	2,363,045.47
8-1258-355-20-240-008-0- 000	LPPF-SPEC ASSESS- SOLERA HOSPITAL MCALLEN	241,420.98
<b>TOTAL BUDGET INCREASE (DECREASE)</b>		<b>17,807,445.36</b>

REASON: Appropriation of funds in relation to revenue from the assessment of mandatory payments from various hospitals for the LPPF-1115 Waiver.

DEPARTMENT HEAD SIGNATURE

APPROVED COMMISSIONERS' COURT

    /    /      
DATE

ATTEST COUNTY CLERK