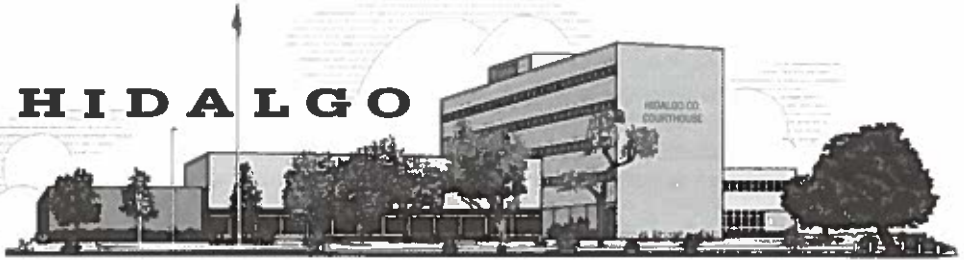


# COUNTY of HIDALGO



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)

November 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:

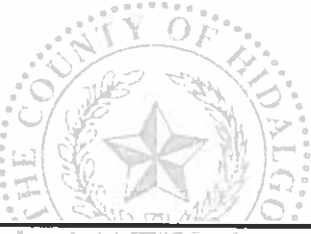
The county auditor shall certify to the commissioners court the receipt of revenue from a new source not anticipated before the adoption of the budget and not included in the budget for that fiscal year. On certification, the court may adopt a special budget for the limited purpose of spending the revenue 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 \$16,905,981.21. 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

11-5-18  
\_\_\_\_\_  
Date



**HIDALGO COUNTY DISTRICT JUDGES**

- |   |   |   |  |  |  |  |  |  |  |  |
|---|---|---|--|--|--|--|--|--|--|--|
| LUIS M. SINGLETERRY<br>JUDGE, 82 <sup>ND</sup> D.C. | JAMIE E. TIERNA<br>JUDGE, 99 <sup>TH</sup> D.C. | J. R. "BOBBY" FLORES<br>JUDGE, 139 <sup>TH</sup> D.C. | ROSE GUERRA REYNA<br>JUDGE, 206 <sup>TH</sup> D.C. | JUAN R. PARTIDA<br>JUDGE, 275 <sup>TH</sup> D.C. | MARIO E. RAMIREZ, JR.<br>JUDGE, 312 <sup>ND</sup> D.C. | NOE DONAZALEZ<br>JUDGE, 370 <sup>TH</sup> D.C.<br>OVERSEER | LETICIA LOPEZ<br>JUDGE, 389 <sup>TH</sup> D.C. | L. KENO VASQUEZ<br>JUDGE, 394 <sup>TH</sup> D.C. | ISRAEL RAMON, JR.<br>JUDGE, 430 <sup>TH</sup> D.C. | RENEE R. BETANCOURT<br>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



## Memorandum

**To:** Maria Arcilia Duran, CPA, County Auditor  
**From:** Sergio Cruz, Budget Officer *SC*  
**Date:** November 2, 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 \$16,905,981.21 from Fund 1258. These monies are scheduled for commissioners court approval on 11/6/18 (AI-67443). Drawdown information and amounts were forwarded by Ms. Dairen Sarmiento on 11/2/18 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.

## Nereyda Gonzalez

---

**From:** alfredo esparza <alfredo.esparza@co.hidalgo.tx.us>  
**Sent:** Friday, November 02, 2018 2:01 PM  
**To:** arcy duran  
**Cc:** linda fong; becky luna; nereyda gonzalez; dairen sarmiento  
**Subject:** Health Care Funding District Certification of Revenues  
**Attachments:** Health Care Funding District Certification of Revenues.pdf

# 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)



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## Memorandum

**To:** Maria Arcilia Duran, CPA, County Auditor  
**From:** Sergio Cruz, Budget Officer *SC*  
**Date:** November 2, 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

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

We are requesting the certification of \$16,905,981.21 from Fund 1258. These monies are subject to the commissioners court approval on 11/6/18 (AI-67443). Drawdown information and amounts forwarded by Ms. Dairen Sarmiento on 11/2/18 through email, see attached.

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

-- Thank you.

---

**Alfredo Esparza**  
**Budget Clerk II**  
County of Hidalgo Texas  
Department of Budget & Management  
2818 S. Bus. Hwy 281  
Edinburg ,TX 78539  
Phone: 956-292-7025 Ext: 5409  
alfredo.esparza@co.hidalgo.tx.us

AI-67443  
CC - REGULAR

Health & Human Services Dept. 15. B.  
Other

Meeting Date: 11/06/2018

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

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

Department: HEALTH & HUMAN SERVICES DEPT.

---

**Information**

**CAPTION**

1. Approval to rescind approval of item 16, A, 1 (AI-67209) on 10/23/2018 due to changes in transfer and settlement dates.
2. Discussion, consideration and approval to draw down funds for the Uniform Hospital Rate Increase Program in the amount to be determined by Health and Human Services Commission (HHSC) instructions from the Local Provider Participation Fund (LPPF) with an IGT transfer date of 11/12/18 and settlement date of 11/13/18.
3. Approval of Certification of Revenues as certified by the County Auditor from the Local Provider Participation Fund (LPPF) in the amount to be determined by HHSC instructions.
4. Approval of 2018 appropriation of funds from the LPPF in the amount to be determined by HHSC.

**BACKGROUND**

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**Fiscal Impact**

**Attachments**

instructions 10.29.18

rescind

report

IGT

Appropriation

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**Form Review**

Inbox	Reviewed By	Date
Budget & Management	Veronica Ortiz	10/30/2018 04:25 PM
Final Approval	Monica Salinas	11/02/2018 05:17 PM

Form Started By: Dairen Sarmiento  
Final Approval Date: 11/02/2018

Started On: 10/30/2018 03:37 PM

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 (	4,912,926.75	.00	9,221,561.05	4,308,634.30-
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 HOS	11,374,141.71	.00	21,349,258.33	9,975,116.62-
8-1258-355-20-240-004-0-000	LPPF-SPEC ASSESS-KNAPP MEDICA	3,499,502.31	.00	6,568,564.11	3,069,061.60-
8-1258-355-20-240-005-0-000	LPPF-SPEC ASSESS-LIFECARE HOSF	.00	.00	.00	.00
8-1258-355-20-240-006-0-000	LPPF-SPEC ASSESS-EDINBURG REG	18,422,119.18	.00	18,422,119.18	.00
8-1258-355-20-240-007-0-000	LPPF-SPEC ASSESS-MISSION HOSPT	3,132,447.96	.00	5,879,603.25	2,747,155.30-
8-1258-355-20-240-008-0-000	LPPF-SPEC ASSESS-SOLERA HOSPT	241,420.98	.00	1,203,439.11	962,018.13-
8-1258-355-20-240-009-0-000	LPPF-SPEC ASSESS-WESLACO REH	.00	.00	422,605.66	422,605.66-
<b>Totals</b>		<b>41,582,558.89</b>	<b>.00</b>	<b>63,597,202.12</b>	<b>22,014,843.23-</b>
<b>Cancel</b>					

## **Nereyda Gonzalez**

---

**From:** Dairen Sarmiento <dairen.sarmiento@hchd.org>  
**Sent:** Friday, November 02, 2018 11:07 AM  
**To:** Alfredo Zamarripa; Arcy Duran; 'Becky Luna'; eddie.olivarez@hchd.org; James Hodge; Jennifer Garza; linda.fong@auditor.co.hidalgo.tx.us; lourdes.acevedo@hchd.org; merlen.munoz@co.hidalgo.tx.us; Nereyda Gonzalez; sergio.cruz@co.hidalgo.tx.us; valde.guerra@co.hidalgo.tx.us  
**Subject:** UHRIP IGT TRANSFER  
**Attachments:** instructions 10.29.18.pdf; igt amount \$16,905,981.21.pdf; agMemo\_67443.pdf; PROCESSED REVISED Hidalgo SDA UHRIP Application10.29.18.pdf

Budget, County Treasurer and County Auditor Offices:

Please accept this as my request to transfer **\$16,905,981.21** from the Local Provider Participation Fund for the PGY2 UHRIP IGT. The last day to submit the IGT into TexNet is **11/12/18** with an IGT Settlement date of **11/13/18**.

County Treasurers department please select the **UHRIP 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.

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.

## Dairen Sarmiento

---

**From:** HHSC RAD UHRIP Payments <RAD\_UHRIP\_Payments@hhsc.state.tx.us>  
**Sent:** Monday, October 29, 2018 1:21 PM  
**To:** dairen.sarmiento@hchd.org; 'eddie.olivarez@hchd.org'  
**Cc:** 'jason@ahcv.com'; 'lindsey@gl-law.com'; 'lorenz@gl-law.com'; 'carlos@ahcv.com'; 'crs@charlesrsmithconsulting.com'  
**Subject:** UHRIP IGT Notification Hidalgo SDA  
**Attachments:** PROCESSED REVISED Hidalgo SDA UHRIP Application.xlsx

UHRIP SDA Liaison,

HHSC was recently made aware that the UHRIP files sent out on **October 24, 2018** contained multiple errors. HHSC has corrected these errors in the attached file for IGT Notification. The errors that were changed include fixing actuarial percentages in the Hidalgo and Jefferson SDA applications, fixing the negative Medicaid shortfall for a provider in the Nueces SDA application, zeroing out an IMD's shortfall amount in the El Paso SDA application, and then updating the BN Allotment & IGT tables in all of the applications. Please review the file as the original numbers have changed.

HHSC is providing notification that the IGT for the November 2018 UHRIP Payment must be entered into TexNet no later than close of business **November 12, 2018** with a **settlement date of November 13, 2018**. These funds will need to be placed in the "**UHRIP**" Bucket. The amount that needs to be entered into TexNet is listed in Column L of the "BN Allotment & IGT" tab of the attached Excel workbook. Please note that the percentage increases by class of hospital can be found in the "Analysis" tab of the attached Excel workbook. If the TexNet is entered online, please provide a screen shot or PDF of the confirmation/trace sheet. If the TexNet is entered over the phone, please provide the confirmation number. Please send an email with this information to [RAD\\_UHRIP\\_Payments@hhsc.state.tx.us](mailto:RAD_UHRIP_Payments@hhsc.state.tx.us)

**Please email any questions regarding the calculation to [RAD-Uhrip@hhsc.state.tx.us](mailto:RAD-Uhrip@hhsc.state.tx.us).**

Thank you,

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

Vote: 4 - 0 – Unanimously.

Attachments:

**Budget & Program Amendment City of Alton FY's 29 & 30 (2016 & 2017)  
Work Plans**

16. Health & Human Services Department:

10/23/18

A. Health Care Funding District:

1. AI-67209

A. Discussion, consideration and approval to draw down funds for the Uniform Hospital Rate Increase Program in the amount to be determined by Health and Human Services Commission (HHSC) instructions from the Local Provider Participation Fund (LPPF) with a IGT transfer date of 10/31/18 and settlement date of 11/1/18.

Commissioner Palacios stepped away from the meeting.

Olivarez informed that the stated notified them that they miscalculated the number, the current amount they have is \$27,242,761 this does not impact the general fund.

On motion by COMMISSIONER PCT. 1, DAVID FUENTES, seconded by COMMISSIONER PCT. 2, EDUARDO "EDDIE" CANTU, the Court made a UNANIMOUS vote of approval.

Vote: 3 - 0 – Unanimously.

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

On motion by COMMISSIONER PCT. 1, DAVID FUENTES, seconded by COMMISSIONER PCT. 2, EDUARDO "EDDIE" CANTU, the Court made a UNANIMOUS vote of approval.

Vote: 3 - 0 – Unanimously.

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

On motion by COMMISSIONER PCT. 1, DAVID FUENTES, seconded by COMMISSIONER PCT. 2, EDUARDO "EDDIE" CANTU, the Court made a UNANIMOUS vote of approval.

Vote: 3 - 0 – Unanimously.

Attachments:

drawdown

**INSTRUCTIONS 10-31-18**

2. Discussion and/or action, including but not limited to Health Care Funding District and/or Expenditures

No action taken on this item.

B. Indigent Health Care Program:

1. Discussion and/or action, including but not limited to Indigent Health Care Program and 1115 Waiver and/or Expenditures

No action taken on this item.

2. AI-67097 Approval of County Indigent Health Care Program Confidentiality Agreement for the following Human Services Division staff:

Employee # 061093, 104566, 123048, 157961, 168327, 229806, 096202

On motion by COMMISSIONER PCT. 2, EDUARDO "EDDIE" CANTU, seconded by

10/23/18  
rescind

SDA	Estimated 2017 Medicaid Shortfall (modified) <sup>1</sup>	BN Allocation per SDA for SFY 2019	BN Allocation for 9/1/2018 - 2/28/2019 <sup>2</sup>	IGT Commitment including 10% and MCO costs for 6 months	Requested Payment Increase	Cutback to comply with BN (prior to Actuarial adjustments)	Cutback to comply with BN (after Actuarial adjustments)	Estimated IGT before 10% and HIP fee	Estimated IGT after 10% and HIP fee	Estimated IGT For 6 months	OLD Estimated IGT after 10% for 6 months
Beaer	\$ 509,653,610	\$ 115,476,569	\$ 57,738,284.63	\$ 59,415,104	\$ 230,084,801	50%	\$ 137,171,134	\$ 48,280,754	\$ 53,929,602	\$ 26,964,801	\$ 29,008,044.24
Dallas	\$ 839,320,762	\$ 190,172,070	\$ 95,086,035.09	\$ 73,909,169	\$ 248,890,886	76%	\$ 214,592,996	\$ 79,510,943	\$ 86,813,723	\$ 44,406,861	\$ 49,078,749.57
El Paso	\$ 174,550,975	\$ 39,549,504	\$ 19,774,752.25	\$ 18,051,273	\$ 73,001,493	54%	\$ 43,692,984	\$ 16,535,648	\$ 18,470,319	\$ 9,235,159	\$ 9,595,406.80
Harris	\$ 1,227,700,029	\$ 278,170,476	\$ 139,085,238.13	\$ 116,872,028	\$ 452,586,554	61%	\$ 319,796,798	\$ 116,303,076	\$ 129,910,536	\$ 64,955,268	\$ 66,394,263.23
Hidalgo	\$ 514,907,254	\$ 118,686,932	\$ 58,333,466.15	\$ 46,784,808	\$ 154,287,933	76%	\$ 150,710,700	\$ 48,778,444	\$ 54,485,522	\$ 27,242,761	\$ 20,327,988.12
Jefferson	\$ 97,940,197	\$ 22,191,147	\$ 11,095,573.26	\$ 8,980,054	\$ 29,628,092	75%	\$ 27,308,542	\$ 9,278,118	\$ 10,363,658	\$ 5,181,829	\$ 4,970,268.20
Lubbock	\$ 189,495,464	\$ 42,935,605	\$ 21,467,802.46	\$ 12,514,494	\$ 39,530,810	100%	\$ 52,521,503	\$ 17,951,376	\$ 20,051,687	\$ 10,025,844	\$ 10,656,301.99
MRSA Central	\$ 281,093,320	\$ 63,689,713	\$ 31,844,856.61	\$ 24,272,162	\$ 77,540,881	82%	\$ 90,357,488	\$ 26,628,689	\$ 29,744,223	\$ 14,872,112	\$ 16,402,916.57
MRSA Northeast	\$ 357,664,808	\$ 81,039,169	\$ 40,519,584.45	\$ 19,362,904	\$ 63,091,337	100%	\$ 82,490,131	\$ 33,892,477	\$ 37,846,726	\$ 18,923,363	\$ 14,670,295.70
MRSA West	\$ 309,227,197	\$ 70,064,246	\$ 35,032,122.94	\$ 20,243,127	\$ 59,540,833	100%	\$ 83,384,441	\$ 29,293,861	\$ 32,721,243	\$ 16,360,621	\$ 16,023,429.60
Nueces	\$ 162,302,060	\$ 36,774,163	\$ 18,387,081.59	\$ 13,038,143	\$ 47,900,036	77%	\$ 44,279,875	\$ 15,375,278	\$ 17,174,185	\$ 8,587,093	\$ 8,421,375.57
Tarrant	\$ 586,137,401	\$ 132,806,155	\$ 66,403,077.31	\$ 49,447,569	\$ 163,143,464	81%	\$ 131,055,684	\$ 54,794,381	\$ 61,205,324	\$ 30,602,662	\$ 30,269,121.95
Travis	\$ 266,857,802	\$ 60,464,250	\$ 30,232,125.15	\$ 30,142,314	\$ 86,293,917	63%	\$ 60,423,741	\$ 25,263,166	\$ 28,218,956	\$ 14,109,478	\$ 15,164,110.52
Totals	\$ 5,516,850,879	\$ 1,250,000,000	\$ 625,000,000	\$ 493,833,149	\$ 1,735,511,037		\$ 1,437,786,016	\$ 521,876,191	\$ 582,935,705	\$ 291,467,853	\$ 291,982,272

<sup>1</sup>The estimated shortfall does not include the Medicaid Shortfall for non-DSV/non-LC providers or providers for which HRSC does not have Medicaid Shortfall information. The Medicaid Shortfall of all providers in an SDA will be used to finalize the budget neutrality allotment in the completed application.

<sup>2</sup>Neither the 10% holdback nor the ACA health insurance premium fee are applied to the budget neutrality cap.

## Dairen Sarmiento

---

**From:** David Elliot <david@ahcv.com>  
**Sent:** Thursday, November 1, 2018 10:54 AM  
**To:** Dairen Sarmiento  
**Cc:** Jason Durrett; Tomas Vela  
**Subject:** Hidalgo County - PGY2 Final UHRIP IGT Amounts

Dairen,

Below is the confirmed PGY2 Final UHRIP IGT amount for the Hidalgo County LPPF. HHSC requires this IGT amount to be entered into TexNet no later than close of business **November 12, 2018** with a **settlement date of November 13, 2018**.

- \$16,905,981.21

These funds will need to be placed in the "UHRIP" Bucket. If the TexNet is entered online, please provide a screen shot or PDF of the confirmation/trace sheet. If the TexNet is entered over the phone, please provide the confirmation number. Please send an email with this information to [RAD-Uhrip@hhsc.state.tx.us](mailto:RAD-Uhrip@hhsc.state.tx.us).

AHCV also kindly requests a copy of the TexNet trace sheet as soon as available.

Please do not hesitate to contact us with any questions.

Thank you,

**Dave Elliot**  
Adelanto HealthCare Ventures L.L.C.  
401 W. 15th Street, Suite 840 | Austin, TX 78701  
(512) 322-9413 - main  
(847) 650-2120 - cell

<http://www.ahcv.com/>

DATE: November 6, 2018

DEPARTMENT HEAD: Sergio Cruz, Budget Officer

**2018**  
Appropriation  
AI-67443



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	16,905,981.21
8-1258-355-20-240-001-0- 000	LPPF-SPEC ASSESS- COLUMBIA RIO GRANDE	4,308,634.30
8-1258-355-20-240-003-0- 000	LPPF-SPEC ASSESS- DOCTORS HOSPITAL AT REN	9,975,116.62
8-1258-355-20-240-004-0- 000	LPPF-SPEC ASSESS- KNAPP MEDICAL CENTER	2,622,230.29
<b>TOTAL BUDGET INCREASE (DECREASE)</b>		<b>16,905,981.21</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