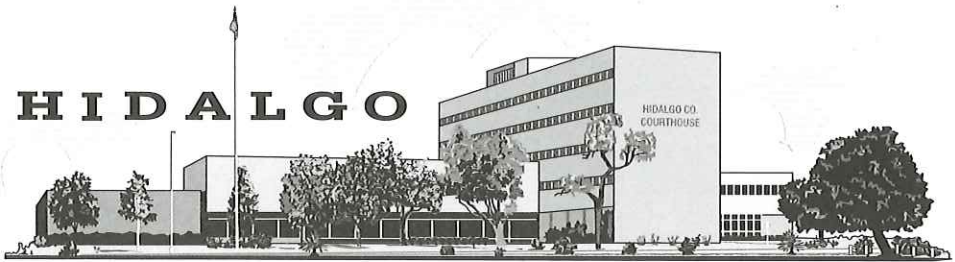


COUNTY of HIDALGO



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

November 4, 2020

The Honorable Richard Cortez, 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 Ellie Torres, 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 \$22,627,995.79. 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

11-4-20

Date

HIDALGO COUNTY DISTRICT JUDGES

LUIS M. SINGLETERRY JUDGE, 92 ND D.C.	FERNANDO MANCIAS JUDGE, 93 RD D.C.	J. R. "BOBBY" FLORES JUDGE, 139 TH D.C.	ROSE GUERRA REYNA JUDGE, 206 TH D.C.	MARLA CUELLAR JUDGE, 275 TH D.C.	MARIO E. RAMIREZ, JR. JUDGE, 332 ND D.C.	NOE GONZALEZ JUDGE, 370 TH D.C. OVERSEER	LETICIA LOPEZ JUDGE, 389 TH D.C.	L. KENO VASQUEZ JUDGE, 399 TH D.C.	ISRAEL RAMON, JR. JUDGE, 430 TH D.C.	RENEE R. BETANCOURT JUDGE, 448 TH D.C.	YSMAEL D. FONSECA JUDGE, 484 TH D.C.
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AI-77942

Health & Human Services
Dept. 24. A. 0.

CC REGULAR AGENDA REGULAR MTG Health Care Funding District

Meeting
Date: 10/27/2020

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

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

Department: HEALTH & HUMAN SERVICES DEPT.

CAPTION

1. Discussion, consideration and approval to draw down funds for the **Uniform Hospital Rate Increase Program** in the amount to be determined by HHSC instructions from the Local Provider Participation Fund (LPPF) with a TEX NET transfer date of November 5, 2020 and a settlement date of November 6, 2020.
2. 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 instructions.
3. Approval of appropriations of funds from the LPPF in the amount to be determined by HHSC.

BACKGROUND

HHSC is providing notification that the IGT for the November 2020 UHRIP Payment must be entered into TexNet no later than close of business **Monday November 5, 2020** with a **settlement date of November 6, 2020**. These funds will need to be placed in the "**UHRIP**" Bucket. The amount that needs to be entered into TexNet are calculated by SDA in cells L4-L16 of the attached "PGY4 UHRIP Mid-Year Calculation" workbook. To assist stakeholders during the coronavirus (COVID-19) emergency, the Health and Human Service Commission (HHSC) changed the schedule for intergovernmental transfers (IGT) for the Uniform Hospital Rate Increase Program (UHRIP). Typically, units of government must transfer the second half of the required funding for the program year in the October. (e.g. For Fiscal Year 2021, transfers are due in October 2020.) Given the current public health emergency, HHSC allowed units of government to make quarterly payments for the first half of their IGT commitment. HHSC is calling for the second half of the IGT commitment for SFY21 for the UHRIP program due November 2020. In light of the eFMAP period being extended through December of 2020, HHSC has calculated an

adjustment to the remaining IGT amounts to account for the eFMAP applying to one third of the program year.

Fiscal Impact

Attachments

instructions

Form Review

Inbox	Reviewed By	Date
Budget & Management	Veronica Ortiz	10/20/2020 04:17 PM
Final Approval		
Form Started By: Dairen Sarmiento		Started On: 10/20/2020 03:55 PM



Department of Budget & Management

2818 S. Business Hwy. 281
Edinburg, Texas 78539
Office: (956) 292-7025
Fax: (956) 292-7034

Sergio Cruz
Budget Officer

www.co.hidalgo.tx.us

MEMORANDUM

To: Maria Arcilia Duran, CPA, County Auditor

From: Sergio Cruz, Budget Officer *SC*

Date: November 4, 2020

Subject: Health Care Funding District Certification of Revenues

Cc: Linda Fong, 1st Assistant County Auditor
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 \$22,627,995.79 from Fund 1258. Drawdown information and amounts were forwarded by Ms. Dairen Sarmiento on 11/2/2020 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.



Dairen Sarmiento <dairen.sarmiento@hchd.org>

UHRIP PGY4 Final IGT Confirmation

1 message

Ronak Karsan <ronak@ahcv.com>
To: Dairen Sarmiento <dairen.sarmiento@hchd.org>
Cc: Jason Durrett <jason@ahcv.com>, David Elliot <david@ahcv.com>

Mon, Nov 2, 2020 at 11:57 AM

Dairen,

As you know, the UHRIP PGY4 Final IGT is taking place Thursday, November 5th. As such, the hospitals participating within the Hidalgo County LPPF would like to request **\$22,627,995.79** for the upcoming UHRIP PGY4 Final IGT.

HHSC requires this IGT amount to be entered into TexNet no later than close of business **Thursday, November 5th** with a settlement date of November 6th. Please provide one TexNet Trace Sheet for the Hidalgo County LPPF. HHSC does not require an allocation form for UHRIP.

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 the trace sheet/confirmation to RAD_UHRIP_Payments@hhsc.state.tx.us.

AHCV also kindly requests a copy of the TexNet trace sheet prior to the November 5th deadline noted above. Please do not hesitate to contact us with any questions.

Thank you,

Ronak

From: Dairen Sarmiento <dairen.sarmiento@hchd.org>
Sent: Monday, November 2, 2020 11:38 AM
To: Jason Durrett <jason@ahcv.com>
Cc: Tomas Vela <tomas@ahcv.com>; David Elliot <david@ahcv.com>; Ronak Karsan <ronak@ahcv.com>
Subject: Re: UHRIP IGT Notification-1

*** Attention: This is an external email. Use caution responding, opening attachments or clicking on links. ***

Good morning.

Do you have the IGT amount for the upcoming UHRIP payment due on 11-5-20?

<Erich_Wallschlaeger@cedarparkregional.com>, "ETyrrell@HoustonMethodist.org" <ETyrrell@houstonmethodist.org>, "eva.cruzhamby@co.mclennan.tx.us" <eva.cruzhamby@co.mclennan.tx.us>, "FBeaman@fchtexas.com" <FBeaman@fchtexas.com>
 Cc: "Brown,Adam (HHSC)" <Adam.Brown04@hhsc.state.tx.us>, "Okoniewski,Amanda (HHSC)" <Amanda.Okoniewski01@hhs.texas.gov>, "Jenkins,Brooke (HHSC)" <Brooke.Jenkins01@hhs.texas.gov>, "Guzman,Kenneth (HHSC)" <Kenneth.Guzman@hhs.texas.gov>, "Fine,Mance (HHSC)" <Mance.Fine@hhsc.state.tx.us>, "Duban,Holly (HHSC)" <Holly.Duban@hhs.texas.gov>, "Work,Benjamin (HHSC)" <Benjamin.Work@hhs.texas.gov>, "Cantu,Rene (HHSC)" <Rene.Cantu@hhsc.state.tx.us>, "Anthony,Alan (HHSC)" <Alan.Anthony@hhs.texas.gov>, HHSC RAD UHRIP Payments <RAD_UHRIP_Payments@hhsc.state.tx.us>

Good Afternoon,

HHSC is providing notification that the IGT for the November 2020 UHRIP Payment must be entered into TexNet no later than close of business **Monday November 5, 2020** with a **settlement date of November 6, 2020**. These funds will need to be placed in the "UHRIP" Bucket. The amount that needs to be entered into TexNet are calculated by SDA in cells L4-L16 of the attached "PGY4 UHRIP Mid-Year Calculation" workbook.

To assist stakeholders during the coronavirus (COVID-19) emergency, the Health and Human Service Commission (HHSC) changed the schedule for intergovernmental transfers (IGT) for the Uniform Hospital Rate Increase Program (UHRIP). Typically, units of government must transfer the second half of the required funding for the program year in the October. (e.g. For Fiscal Year 2021, transfers are due in October 2020.) Given the current public health emergency, HHSC allowed units of government to make quarterly payments for the first half of their IGT commitment. HHSC is calling for the second half of the IGT commitment for SFY21 for the UHRIP program due November 2020. In light of the eFMAP period being extended through December of 2020, HHSC has calculated an adjustment to the remaining IGT amounts to account for the eFMAP applying to one third of the program year.

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
 Please email any questions regarding this change or the calculation in general to RAD-Uhrip@hhsc.state.tx.us.

**HHSC Provider Finance Department-Payments
 (Formerly Rate Analysis)**

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



TEXAS
 Health and Human
 Services



PGY4 UHRIP Mid-Year Calculation and IGT Amounts (Updated IMD UPL Test).xlsx
 1992K



Milagros Rodriguez <milagros.crodriguez@auditor.co.hidalgo.tx.us>

Fwd: Health Care Funding District Certification of Revenues

1 message

Linda Fong <linda.fong@auditor.co.hidalgo.tx.us>
To: Milagros Rodriguez <milagros.crodriguez@auditor.co.hidalgo.tx.us>

Wed, Nov 4, 2020 at 10:02 AM

Please prepare the certification of revenue.

Thank you,

Linda Fong

First Assistant Auditor
Hidalgo County Auditor's Office
2808 South Business Highway 281, Edinburg, Texas 78539
Phone: (956) 318-2511 ext. 4668
Fax: (956) 318-2577
Email: linda.fong@auditor.co.hidalgo.tx.us

CONFIDENTIALITY NOTICE

This transmission is intended for the sole use of the individual and/or entity to whom it is addressed, and may contain information and/or attachments that are privileged, confidential and exempt from disclosure under applicable law. If the reader of this transmission is not the intended recipient, you are hereby notified that any disclosure, dissemination, distribution, duplication or the taking of any action in reliance on the contents of this transmission by someone other than the intended addressee or its designated agent is strictly prohibited. If your receipt of this transmission is in error, please notify the sender by replying immediately to this transmission and destroy the transmission. Thank you.

----- Forwarded message -----

From: **Veronica Ortiz** <veronica.ortiz@co.hidalgo.tx.us>
Date: Wed, Nov 4, 2020 at 9:54 AM
Subject: Health Care Funding District Certification of Revenues
To: duran, arcy <arcy.duran@auditor.co.hidalgo.tx.us>
Cc: linda.fong@auditor.co.hidalgo.tx.us <linda.fong@auditor.co.hidalgo.tx.us>, gonzalez, nereyda <nereyda.gonzalez@auditor.co.hidalgo.tx.us>, sarmiento, dairen <dairen.sarmiento@hchd.org>, ramos, patricia <patricia.ramos@co.hidalgo.tx.us>

**Department of Budget & Management**

2818 S. Business Hwy. 281
Edinburg, Texas 78539
Office: (956) 292-7025
Fax: (956) 292-7034

Sergio Cruz
Budget Officer

www.co.hidalgo.tx.us

MEMORANDUM

To: Maria Arcilia Duran, CPA, County Auditor

From: Sergio Cruz, Budget Officer *SC*

Date: November 4, 2020

Subject: Health Care Funding District Certification of Revenues

Cc: Linda Fong, 1st Assistant County Auditor
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 maintaincy payments from the respective hospitals for the Health Care Funding District.

We are requesting the certification of 522,627,995.79 from Fund 1258. Drawdown information and amounts were forwarded by Ms. Dairen Sarmiento on 11/2/2020 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) 292-7625 ext. 5424.

Page 1 of 1

Health Care Funding District Certification of Revenues 11.4.2020.pdf
481K

Period Ending 11/30/20

Fund Range 1258-1258

Account Period 11 Year 20

Balance Sheet Summary

FJBAS01A

Account No/Description	Beginning Balance	Current Balance	YTD Balance	Ending Balance
Fund 1258 LOCAL PROVIDER PARTICIPATION FUND				
0-1258-101-00-000-000-0-000 LPPF-CASH	19,082,998.89	.00	7,882,391.26	26,965,390.15
0-1258-101-00-000-001-0-000 LPPF-1115 WAIVER CASH	18,103.81	.00	.00	18,103.81
0-1258-115-00-000-000-0-000 LPPF-SPEC ASSESS-ACCOUNTS RECEIVABLE	.00	.00	.00	.00
0-1258-126-20-000-000-0-000 LPPF-DUE FR STATE	280,531.90	.00	-280,531.90	.00
0-1258-130-03-000-424-0-000 DUE FROM/TO TAX OFFICE TRUST FUND	.00	.00	.00	.00
0-1258-130-01-000-100-0-000 DUE FROM/TO GENERAL FUND	.00	.00	.00	.00
0-1258-130-01-000-246-0-000 DUE FROM/TO TAC SP VEH INV	.00	.00	.00	.00
Total Assets	19,381,634.60	.00	7,601,859.36	26,983,493.96

Report Date 11/04/20 09:54 AM
 Period Ending 11/30/20
 Fund Range 1258-1258
 Account Period 11 Year 20

Hidalgo County

Balance Sheet Summary

FJBAS01A

Account No./Description	Beginning Balance	Current Balance	YTD Balance	Ending Balance
Fund 1258 LOCAL PROVIDER PARTICIPATION FUND				
0-1258-201-00-000-000-0-000 LPPF-ACCR SALARY, WAGES & FRINGE BENEF	.00	.00	.00	.00
0-1258-202-00-000-000-0-000 LPPF-ACCOUNTS PAYABLE	.00	.00	.00	.00
0-1258-202-00-000-001-0-000 LPPF-A/P 1115 WAIVER	4,909,144.29	.00	-4,909,144.29	.00
0-1258-223-00-000-000-0-000 LPPF-UNEARNED REVENUE	.00	.00	.00	.00
0-1258-241-00-000-000-0-000 LPPF-UNAVAILABLE REVENUE	.00	.00	.00	.00
Total Liabilities	4,909,144.29	.00	-4,909,144.29	.00
0-1258-270-00-000-000-0-000 LPPF-BUDGETED FUND BALANCE	.00	.00	-14,472,490.31	-14,472,490.31
0-1258-258-00-000-000-0-000 LPPF-UNASSIGNED FUND BALANCE	14,472,490.31	.00	.00	14,472,490.31
Total Equity	14,472,490.31	.00	-14,472,490.31	.00
0-1258-275-00-000-000-0-000 LPPF-ESTIMATED REVENUES	.00	.00	-41,780,481.39	-41,780,481.39
0-1258-276-00-000-000-0-000 LPPF-REVENUE CONTROL	.00	.00	68,763,975.35	68,763,975.35
0-1258-271-00-000-000-0-000 LPPF-APPROPRIATIONS	.00	.00	56,252,971.70	56,252,971.70
0-1258-272-00-000-000-0-000 LPPF-EXPENDITURE CONTROL	.00	.00	-56,252,971.70	-56,252,971.70
0-1258-273-00-000-000-0-000 LPPF-ENCUMBRANCE CONTROL	.00	.00	.00	.00
0-1258-274-00-000-000-0-000 LPPF-RESERVED FOR ENCUMBRANCES	.00	.00	.00	.00
Total Controls	.00	.00	26,983,493.96	26,983,493.96
Total Equity and Controls	14,472,490.31	.00	12,511,003.65	26,983,493.96
Total Liabilities, Equity and Controls	19,381,634.60	.00	7,601,859.36	26,983,493.96
*Fund is in Balance	.00			

Account Number	Description	Pre Budget Budget	Pre Encumbrance Encumbrance	Pre Actual Actual	Avail/Rec
0-1258-355-20-240-001-0-000	LPPF-SPEC ASSESS-COLUMBIA RIO GR	3,968,504.75	.00	9,658,716.36	690,211.61-
0-1258-355-20-240-002-0-000	LPPF-SPEC ASSESS-CORNERSTONE RE	484,797.28	.00	745,837.11	261,039.83-
0-1258-355-20-240-003-0-000	LPPF-SPEC ASSESS-DOCTORS HOSPIT	17,042,369.48	.00	25,860,266.31	8,817,896.83-
0-1258-355-20-240-004-0-000	LPPF-SPEC ASSESS-KHAPP MEDICAL C	4,737,708.42	.00	5,119,736.94	382,028.52-
0-1258-355-20-240-005-0-000	LPPF-SPEC ASSESS-LIFECARE HOSPIT	.00	.00	.00	.00
0-1258-355-20-240-006-0-000	LPPF-SPEC ASSESS-EDINBURG REGION	5,095,927.33	.00	14,785,245.65	9,689,318.32-
0-1258-355-20-240-007-0-000	LPPF-SPEC ASSESS-MISSION HOSPITAL	4,029,522.39	.00	4,352,850.27	323,327.88-
0-1258-355-20-240-008-0-000	LPPF-SPEC ASSESS-SOLERA HOSPITAL	793,389.24	.00	924,089.97	130,700.73-
0-1258-355-20-240-009-0-000	LPPF-SPEC ASSESS-WESLACO REHAB	297,620.49	.00	445,784.31	148,163.82-
0-1258-360-00-240-000-0-000	LPPF-MISCELLANEOUS REVENUE	218,325.85	.00	6,755,055.77	6,536,729.92-
0-1258-361-10-240-000-0-000	LPPF-INTEREST EARNINGS	112,316.16	.00	116,392.66	4,076.50-
0-1258-361-11-240-000-0-000	LPPF-NOW INTEREST	.00	.00	.00	.00
Totals		41,780,481.39	.00	68,763,975.35	26,983,493.96-

Spreadsheet Cancel

DATE: November 4, 2020

DEPARTMENT HEAD: Sergio Cruz, Budget Officer

2020
Appropriation
AI-77942



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

ACCOUNT NUMBER: 0-1258-444-00-240-006-3-843

Contact Person: Patricia Ramos Ph#: (956) 292-7025 ext. 5416

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
0-1258-444-00-240-006-3- 843	LPPF	Aid to Nongovt	22,627,995.79
0-1258-355-20-240-001-0- 000	LPPF-SPEC ASSESS-	COLUMBIA RIO GRANDE	543,293.46
0-1258-355-20-240-002-0- 000	LPPF-SPEC ASSESS-	CORNERSTONE REGIONAL	205,475.00
0-1258-355-20-240-003-0- 000	LPPF-SPEC ASSESS-	DOCTORS HOSPITAL AT REN	6,940,923.11
0-1258-355-20-240-004-0- 000	LPPF-SPEC ASSESS-	KNAPP MEDICAL CENTER	300,710.09
0-1258-355-20-240-006-0- 000	LPPF-SPEC ASSESS-	EDINBURG REGIONAL MED	7,626,854.19
0-1258-355-20-240-007-0- 000	LPPF-SPEC ASSESS-	MISSION HOSPITAL	254,504.45
0-1258-355-20-240-008-0- 000	LPPF-SPEC ASSESS-	SOLERA HOSPITAL MCALLEN	102,879.83
0-1258-355-20-240-009-0- 000	LPPF-SPEC ASSESS-	WESLACO REHAB HOSPITAL	116,625.74
0-1258-360-00-240-000-0- 000	LPPF	MISC. REVENUES	6,536,729.92
TOTAL BUDGET INCREASE (DECREASE)			22,627,995.79

REASON: Appropriation of funds in relation to revenue from the assessment of mandatory payments from various hospitals for the LPPF-1115 Waiver. PGY4 UHRIP Final Payment IGT.

DEPARTMENT HEAD SIGNATURE

APPROVED COMMISSIONERS' COURT

DATE

ATTEST COUNTY CLERK