

COUNTY of HIDALGO



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

July 03, 2024

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 Everardo "Ever" Villarreal, 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, Letty Chavez, County Auditor of Hidalgo County, certify to the Hidalgo County Commissioners Court, the revenues received from the assessment of mandatory payments from the respective hospitals for Health Care Funding District in the amount of \$952,180.95 for the Graduate Medical Education (GME) Payment 2 of FFY 2024. These funds may now be made available by creating a new special budget or amending a current budget for its intended purposes.

CERTIFIED BY:



Letty Chavez
County Auditor

7/9/2024

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, 398 TH D.C.	ISRAEL RAMON, JR. JUDGE, 430 TH D.C.	RENEE R. BETANCOURT JUDGE, 449 TH D.C.	JOSE "JOE" RAMIREZ JUDGE, 464 TH D.C.	YSMAEL FONSECA JUDGE, 476 TH D.C.
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Jesus Muniz <jesus.muniz@auditor.co.hidalgo.tx.us>

AI-915899

3 messages

Lourdes Acevedo <lourdes.acevedo@hchd.org>

Wed, Jul 3, 2024 at 2:01 PM

To: Jesus Muniz <jesus.muniz@auditor.co.hidalgo.tx.us>, Merlen Muñoz <merlen.munoz@auditor.co.hidalgo.tx.us>, Rolando Garcia <rolando.garcia@co.hidalgo.tx.us>, Dairen Sarmiento <dairen.sarmiento@hchd.org>, Letty Chavez <letty.chavez@auditor.co.hidalgo.tx.us>, Eduardo Olivarez <eddie.olivarez@hchd.org>, James Hodge <james.hodge@co.hidalgo.tx.us>, Ray Morin <ray.morin@auditor.co.hidalgo.tx.us>, Alfredo Zamarripa <alfredo.zamarripa@co.hidalgo.tx.us>, Rey Salazar <rey.salazar@co.hidalgo.tx.us>, Valde Guerra <valde.guerra@co.hidalgo.tx.us>, Carolina Herrera <carolina.herrera@co.hidalgo.tx.us>, Reynaldo Cantu <reynaldo.cantu@auditor.co.hidalgo.tx.us>, Damaris San Miguel <Damaris.sanmiguel@co.hidalgo.tx.us>

Budget, County Treasurer and County Auditor Offices:

Please accept this as my request to transfer **\$952,180.95** from the **Local Provider Participation** for the GME Payment 2 FFY 2024.

The last day to submit the IGT into TexNet is **07/09/24** with a Settlement date of **07/10/24**.

County Auditor's office please prepare the certification of revenues (LPPF) in the amount of **\$952,180.95**.

Budget office please prepare the Appropriation of funds in the amount of **\$952,180.95**.

County Treasurer's department please select the "**GME**" bucket in TexNet LPPF Account when you enter the GME Payment 2 FFY 2024 amount of **\$952,180.95**.

Please send me a copy of the trace sheet once the transfer has been completed so that I may submit it to HHSC.

Should you have any questions please contact me at extension 7366 or Dairen Sarmiento at extension 7365.

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

Best Regards,
Lourdes Acevedo, MPA
Division Manager III
Hidalgo County Health and Human Services
1304 S. 25th Avenue
Edinburg, TX 78542
956-292-7000 ext. 7366

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AI-95899
CC REGULAR AGENDA SPECIAL MTG

Health & Human Services Dept. 19. E. 2.
Health Care Funding District

Meeting Date: 07/09/2024

Submitted For: Lourdes Acevedo, HEALTH & HUMAN SERVICES DEPT.

Submitted By: Lourdes Acevedo

Department: HEALTH & HUMAN SERVICES DEPT.

CAPTION

A. Discussion, consideration and approval to draw down funds for Graduate Medical Education Program (GME) Payment 2 of FFY2024 in the amount to be determined by Health & Human Services Commission (HHSC) instructions from the Local Provider Participation Fund (LPPF) with a transfer date of 07/09/2024 and a settlement date of 07/10/2024.

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

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

BACKGROUND

Fiscal Impact

Attachments

Instructions

Extension Request

Appropriation

Form Review

Inbox

Budget & Management

Final Approval

Form Started By: Lourdes Acevedo

Reviewed By

Melannie Rivera

Date

07/03/2024 10:41 AM

Started On: 07/03/2024 10:19 AM



Lourdes Acevedo <lourdes.acevedo@hchd.org>

Extension GME IGT Transfer Request Hidalgo County

4 messages

Lourdes Acevedo <lourdes.acevedo@hchd.org>
To: PFD_GME_Payments@hhs.texas.gov
Cc: Dairen Sarmiento <dairen.sarmiento@hchd.org>

Tue, Jun 25, 2024 at 10:22 AM

Good morning,

Please accept this as our request for a 1 day extension on the GME IGT transfer due on 7/8/2024, as Hidalgo County Commissioners Court will not meet again until July 9.

We are therefore requesting to move our transfer date to 7/09/24 and the settlement date to 7/10/24.

Thank you for your consideration. Have a great day.

Best Regards,
Lourdes Acevedo, MPA
Division Manager III
Hidalgo County Health and Human Services
1304 S. 25th Avenue
Edinburg, TX 78542
956-292-7000 ext. 7366

Lourdes Acevedo <lourdes.acevedo@hchd.org> Wed, Jun 26, 2024 at 8:43 AM
To: Alex Russell <alex@ahcv.com>, Colt Sullivan <colt@ahcv.com>, Corbin Pefanis <corbin@ahcv.com>, Dairen Sarmiento <dairen.sarmiento@hchd.org>, Justin Flores <justin@ahcv.com>

Please see message sent below.

Best Regards,
Lourdes Acevedo, MPA
Division Manager III
Hidalgo County Health and Human Services
1304 S. 25th Avenue
Edinburg, TX 78542
956-292-7000 ext. 7366

[Quoted text hidden]

Lourdes Acevedo <lourdes.acevedo@hchd.org> Mon, Jul 1, 2024 at 2:53 PM
To: PFD_GME_Payments@hhs.texas.gov, Alex Russell <alex@ahcv.com>, Colt Sullivan <colt@ahcv.com>, Corbin Pefanis <corbin@ahcv.com>, Justin Flores <justin@ahcv.com>
Cc: Dairen Sarmiento <dairen.sarmiento@hchd.org>

Good afternoon,

I am following up on this request. Please let me know if I may be of further assistance.

Best Regards,
Lourdes Acevedo, MPA
Division Manager III
Hidalgo County Health and Human Services
1304 S. 25th Avenue
Edinburg, TX 78542
956-292-7000 ext. 7366

[Quoted text hidden]

HHSC PFD GME Payments <PFD_GME_Payments@hhs.texas.gov>

Mon, Jul 1, 2024 at 3:03 PM

To: Lourdes Acevedo <lourdes.acevedo@hchd.org>

Cc: DAIREN SARMIENTO <dairen.sarmiento@hchd.org>, HHSC PFD GME Payments

<PFD_GME_Payments@hhs.texas.gov>, "Morgan,Frances (HHSC)" <Frances.Morgan@hhs.texas.gov>, "Means,Rianne E (HHSC)" <RianneE.Means@hhs.texas.gov>

Good Afternoon,

Thank you for reaching out to us. The extension request to move the transfer date from 7/8/2024 to 7/9/2024 (settlement date to 7/10/2024) has been granted.

Thank you,

Sarah Quintanilla

Reimbursement Analyst | LF Payments

Provider Finance Department

 Chat with me on Teams!



TEXAS
Health and Human Services

From: Lourdes Acevedo <lourdes.acevedo@hchd.org>

Sent: Tuesday, June 25, 2024 10:22 AM

To: HHSC PFD GME Payments <PFD_GME_Payments@hhs.texas.gov>

Cc: DAIREN SARMIENTO <dairen.sarmiento@hchd.org>

Subject: Extension GME IGT Transfer Request Hidalgo County

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[Quoted text hidden]

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Lourdes Acevedo <lourdes.acevedo@hchd.org>

Graduate Medical Education Program IGT Notification - Payment 2 of FFY 2024

9 messages

Texas Health and Human Services Commission <txhhs@public.govdelivery.com>
To: lourdes.acevedo@hchd.org

Mon, Jun 17, 2024 at 10:03 AM



Graduate Medical Education Program IGT Notification - Payment 2 of FFY 2024

HHSC is providing notification of the Intergovernmental Transfers (IGT) call for the Graduate Medical Education Program (GME) for payment 2 of Federal Fiscal Year 2024 (FFY 2024).

The IGT amounts for Private Hospitals can be found in **column W** on the "**Private GME FFY 2024**" tab of the [Suggested IGT file](#). This file was updated as of Thursday, December 21, 2023, and can be found under the "**Payment Files**" and "**Non-state Private Hospitals**" headings on [the Provider Finance GME website](#).

The IGT amounts for Public Hospitals can be found in **column Q** on the "**Public GME**" tab of the [Suggested IGT file](#). This file was updated as of Thursday, December 21, 2023, and can be found under the "**Payment Files**" and "**Non-state Public Hospitals**" headings on [the Provider Finance GME website](#).

The IGT must be entered into TexNet no later than close of business on Monday, July 8, 2024, with a settlement date of Tuesday, July 9, 2024.

- This settlement date is non-negotiable.
- The funds must be placed in the "GME" Bucket.

Please transfer funds through TexNet (instructions are available [on the Texas Comptroller's website](#)), and send an email with a screen shot or PDF of the confirmation/trace sheet to [the Provider Finance Department](#).

Balance Sheet Summary

Account Year: 24 Account Period: 07 Period End: 07/31/2024

Account	Account Description	Beginning Balance	Current Balance	YTD Balance	Ending Balance
Fund 1258	LOCAL PROVIDER PARTICIPATION FUND				
4-1258-101-00-000-000-0-000	LPPF-CASH	28,344,686.08	0.00	-21,551,435.43	6,793,250.65
4-1258-101-00-000-001-0-000	LPPF-1115 WAIVER CASH	18,103.81	0.00	0.00	18,103.81
4-1258-115-00-000-000-0-000	LPPF-SPEC ASSESS-ACCOUNTS RECEIVABLE	0.00	0.00	0.00	0.00
4-1258-126-20-000-000-0-000	LPPF-DUE FR STATE	0.00	0.00	0.00	0.00
4-1258-130-03-000-424-0-000	DUE FROM TAX OFFICE TRUST FUND	0.00	0.00	0.00	0.00
4-1258-130-01-000-100-0-000	DUE FROM GENERAL FUND	0.00	0.00	0.00	0.00
4-1258-130-01-000-246-0-000	DUE FROM TAC SP VEH INV	0.00	0.00	0.00	0.00
Total Assets:		\$28,362,789.89	\$0.00	-\$21,551,435.43	\$6,811,354.46

Balance Sheet Summary

Account Year: 24

Account Period: 07

Period End: 07/31/2024

Account	Account Description	Beginning Balance	Current Balance	YTD Balance	Ending Balance
Fund 1258	LOCAL PROVIDER PARTICIPATION FUND				
4-1258-201-00-000-000-0-000	LPPF-ACCR SALARY, WAGES & FRINGE BENEFIT	0.00	0.00	0.00	0.00
4-1258-202-00-000-000-0-000	LPPF-ACCOUNTS PAYABLE	0.00	0.00	0.00	0.00
4-1258-202-00-000-001-0-000	LPPF-A/P 1115 WAIVER	0.00	0.00	0.00	0.00
4-1258-223-00-000-000-0-000	LPPF-UNEARNED REVENUE	0.00	0.00	0.00	0.00
4-1258-241-00-000-000-0-000	LPPF-UNAVAILABLE REVENUE	11,822,981.06	0.00	-11,822,981.06	0.00
Total Liabilities:		\$11,822,981.06	\$0.00	-\$11,822,981.06	\$0.00
4-1258-270-00-000-000-0-000	LPPF-BUDGETED FUND BALANCE	0.00	0.00	-16,539,808.83	-16,539,808.83
4-1258-258-00-000-000-0-000	LPPF-UNASSIGNED FUND BALANCE	16,539,808.83	0.00	0.00	16,539,808.83
Total Equity:		\$16,539,808.83	\$0.00	-\$16,539,808.83	\$0.00
4-1258-275-00-000-000-0-000	LPPF-ESTIMATED REVENUES	0.00	0.00	-49,876,007.22	-49,876,007.22
4-1258-276-00-000-000-0-000	LPPF-REVENUE CONTROL	0.00	0.00	56,687,361.68	56,687,361.68
4-1258-271-00-000-000-0-000	LPPF-APPROPRIATIONS	0.00	0.00	66,415,816.05	66,415,816.05
4-1258-272-00-000-000-0-000	LPPF-EXPENDITURE CONTROL	0.00	0.00	-66,415,816.05	-66,415,816.05
4-1258-273-00-000-000-0-000	LPPF-ENCUMBRANCE CONTROL	0.00	0.00	0.00	0.00
4-1258-274-00-000-000-0-000	LPPF-RESERVED FOR ENCUMBRANCES	0.00	0.00	0.00	0.00
Total Controls:		\$0.00	\$0.00	\$6,811,354.46	\$6,811,354.46
Total Equity and Controls:		\$16,539,808.83	\$0.00	-\$9,728,454.37	\$6,811,354.46
Total Liabilities, Equity and Controls:		\$28,362,789.89	\$0.00	-\$21,551,435.43	\$6,811,354.46

Fund is in balance 0.00

+ 16,539,808.83	UNASSIGNED FB		
+ 56,687,361.68	REV	+ 952,180.95	GME 2 FFY PYMT
- 66,415,816.05	EXPEND	+ 0.00	AVAIL FB
<hr/>		<hr/>	
+ 6,811,354.46	EST. AVAIL FB	+ 952,180.95	PEND CERT OF REV

Balance Sheet Summary

Hidalgo County

Account Year: 24

Account Period: 07

Period End: 07/31/2024

FJBAS01A

(build 24.4.6.1)

Selection Criteria

Account Year	24
Begin Fund	1258
End Fund	1258
Account Period	07
Show Other Sources & Uses	No
Role ID	INQUIRY

DATE: July 9, 2024

DEPARTMENT HEAD: Dagoberto Soto

2024
Appropriation
AI-95889



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

ACCOUNT NUMBER: 4-1258-3XX-X0-240-00X-0-000

Contact Person: Carolina Herrera Ph#: (956) 292-7025 ext. 5405

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
4-1258-444-00-240-006-3-843	LPPF- Aid to Nongovt	952,180.95
4-1258-355-20-240-001-0-000	LPPF-SPEC ASSESS-COLUMBIA RIO GRANDE	216,486.89
4-1258-355-20-240-002-0-000	LPPF-SPEC ASSESS-CORNERSTONE REGIONAL	12,648.40
4-1258-355-20-240-003-0-000	LPPF-SPEC ASSESS-DOCTORS HOSPITAL AT REN	366,601.68
4-1258-355-20-240-004-0-000	LPPF-SPEC ASSESS-KNAPP MEDICAL CENTER	22,301.14
4-1258-355-20-240-006-0-000	LPPF-SPEC ASSESS-EDINBURG REGIONAL MED	236,906.74
4-1258-355-20-240-007-0-000	LPPF-SPEC ASSESS-MISSION HOSPITAL	70,636.64
4-1258-355-20-240-008-0-000	LPPF-SPEC ASSESS-SOLERA HOSPITAL MCALLEN	19,923.95
4-1258-355-20-240-009-0-000	LPPF-SPEC ASSESS-WESLACO REHAB HOSPITAL	6,675.51
TOTAL BUDGET INCREASE (DECREAS		952,180.95

REASON: Appropriation of funds in relation for approval to draw down funds for Graduate Medical Education Program (GME) Payment 2 of FFY2024 in the amount to be determined by Health & Human Services Commission (HHSC) instructions from the Local Provider Participation Fund (LPPF) with a transfer date of 07/09/2024 and a settlement date of 07/10/2024.

DEPARTMENT HEAD SIGNATURE

APPROVED COMMISSIONERS' COURT

_____/_____/_____
DATE

ATTEST COUNTY CLERK