



HIDALGO COUNTY AUDITOR'S OFFICE

2808 SOUTH BUSINESS HIGHWAY 281
EDINBURG, TEXAS 78539-6243

PHONE: (956) 318-2511 FAX: (956) 318-2577
www.hidalgocounty.us/294/Auditors-Office

August 19, 2025

The Honorable Richard F. Cortez, Hidalgo County Judge
The Honorable David Fuentes, Commissioner, Precinct No. 1
The Honorable Eduardo Cantu, Commissioner, Precinct No. 2
The Honorable Everardo 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 § 111.07076 SPECIAL BUDGET FOR GRANT OR AID MONEY:

The county auditor shall certify to the commissioners' court the receipt of all public or private grant or aid money that is available for disbursement in a fiscal year but not included in the budget for that fiscal year. On certification, the court shall adopt a special budget for the limited purpose of spending the grant or aid money for its intended purpose.

I, Letty Chavez, County Auditor of Hidalgo County, certify to the Hidalgo County Commissioners Court the receipt of an award from the Texas Department of State Health Services (TDSHS). These funds may now be made available by creating a new special budget or amending a current budget for its intended purposes.

AMOUNT	PURPOSE
427,128.00	TB/PC Tuberculosis Prevention and Control-Federal
916,443.00	TB/PC Tuberculosis Prevention and Control-State
<hr/>	<hr/>
\$1,343,571.00	Award No. HHS001437400022 Amend No.1

CERTIFIED BY:


Letty Chavez (Aug 17, 2025 12:20:46 CDT)
Letty Chavez
Hidalgo County Auditor

08/17/2025

Date

HIDALGO COUNTY DISTRICT JUDGES



HIDALGO COUNTY AUDITOR'S OFFICE

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The Honorable Richard F. Cortez, Hidalgo County Judge
The Honorable David Fuentes, Commissioner, Precinct No. 1
The Honorable Eduardo Cantu, Commissioner, Precinct No. 2
The Honorable Everardo 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 all public or private grant or aid money that is available for disbursement in a fiscal year but not included in the budget for that fiscal year. On certification, the court shall adopt a special budget for the limited purpose of spending the grant or aid money for its intended purpose.

I, Letty Chavez, County Auditor of Hidalgo County, certify to the Hidalgo County Commissioners Court program income in the amount of \$17,071 to be generated by the Hidalgo County Health & Human Services Department for the TB/PC Tuberculosis Prevention and Control -State Grant program. These funds may now be made available by creating a new special budget or amending a current budget for its intended purposes.

AMOUNT
17,071.00

PURPOSE
Award No. HHS001437400022 Amend No.1
TB/PC Tuberculosis Prevention and Control-State

CERTIFIED BY:

Letty Chavez (Aug 17, 2025 12:20:46 CDT)

Letty Chavez
Hidalgo County Auditor

08/17/2025

Date

HIDALGO COUNTY DISTRICT JUDGES

LUIS M. SINGLETERRY JUDGE, 92ND D.C. FERNANDO MANCIAS JUDGE, 93RD D.C. J. R. "BOBBY" FLORES JUDGE, 139TH D.C. ROSE GUERRA REYNA JUDGE, 206TH D.C. MARLA CUELLAR JUDGE, 275TH D.C. JUAN R. ALVAREZ JUDGE, 332ND D.C. NOE GONZALEZ JUDGE, 370TH D.C. LETICIA LOPEZ JUDGE, 389TH D.C. L. KENO VASQUEZ JUDGE, 398TH D.C. ORLANDO ESQUIVEL JUDGE, 430TH D.C. RENEE R. BETANCOURT JUDGE, 449TH D.C. JOSE "JOE" RAMIREZ JUDGE, 464TH D.C. NEREIDA LOPEZ-SINGLETERRY JUDGE, 476TH D.C.

AI-100368 ✓

Health & Human Services Dept. 28. B.

CC REGULAR AGENDA SPECIAL MTG

Meeting Date: 08/19/2025 ✓

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

Submitted By: Carlos Oliva

Department: HEALTH & HUMAN SERVICES DEPT.

CAPTION

TB Prevention & Control Grant (State):

1. Requesting approval of the Certification of Revenue in the amount of \$916,443.00 and to appropriate the same; and the appropriation of \$183,289.00 ✓ in local match funds.
2. Requesting approval of the Certification of Revenue in the amount of \$17,071.00 ✓ for the TB Control program income and appropriation of the same.

TB Prevention & Control Grant (Federal):

1. Requesting approval of the Certification of Revenue in the amount of \$427,128.00 and to appropriate the same; and the appropriation of \$85,431.00 ✓ in local match funds

BACKGROUND

03/18/2025 - AI-98677 - Request to submit renewal application

05/13/2025 - AI-99269 - Request approval of grant contract

Fiscal Impact

CALENDAR YEAR: 2025

ACCT. #: 5-1293-441-00-340-008-6-XXX ✓

FUNDS AVAILABLE Y/N?: Y

MATCHING FUNDS Y/N?: Y

BUDGETARY IMPACT:

Grant Award - \$916,443.00 ✓

Cash Match - \$183,289.00 ✓

Total Appropriation - \$1,099,732.00 ✓

CALENDAR YEAR: 2025

ACCT. #: 5-1293-441-10-340-008-6-XXX ✓

FUNDS AVAILABLE Y/N?: Y

MATCHING FUNDS Y/N?: Y

BUDGETARY IMPACT:

Appropriation of program income budget for FY 26 - \$17,071.00 ✓

CALENDAR YEAR: 2025

ACCT. #: 5-1293-441-00-340-011-6-XXX ✓

FUNDS AVAILABLE Y/N?: Y

MATCHING FUNDS Y/N?: Y

BUDGETARY IMPACT:

Grant Award - \$427,128.00 ✓

Cash Match - \$85,431.00 ✓

Total Appropriation - \$512,559.00 ✓

REVIEWED

By Maria.Munoz at 11:35 am, Aug 15, 2025

Attachments

Budget Appropriation
PI Budget Appropriation
Budget Appropriation
Grant Contract

Form Review

Inbox	Reviewed By	Date
Budget & Management	Veronica Ortiz	08/13/2025 02:55 PM
Final Approval		
Form Started By: Carlos Oliva		Started On: 08/11/2025 11:52 AM

REVIEWED
By Maria.Munoz at 11:35 am, Aug 15, 2025



Monica Valdez <monica.avaldez@auditor.co.hidalgo.tx.us>

Request for Certification of Revenue - Program 08 & 11

1 message

Carlos Oliva <carlos.oliva@hchd.org>

Tue, Aug 12, 2025 at 1:34 PM

To: Monica Valdez <monica.avaldez@auditor.co.hidalgo.tx.us>

Cc: Minerva Diaz <minerva.diaz@auditor.co.hidalgo.tx.us>, Maritza Guerra <maritza.guerra@hchd.org>

Good afternoon Monica,

Will you please help me with the following certifications of revenue:



- TB State FY 26 - \$1,099,732.00 ✓
- TB State PI FY 26 - \$17,071.00 ✓
- TB Fed FY 26 - \$512,559.00 ✓

AI-100368 has been created and will be presented to court on 08/19/2025.

If you have any questions please let me know.

Thank you,

--

Carlos Oliva

Accountant III

Hidalgo County Health Department

1304 S. 25th Avenue

Edinburg, Texas 78542

Phone: (956) 292-7000 Ext. 7241

carlos.oliva@hchd.org

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7 attachments

Fully Executed - HHS001437400022_A-1_Hidalgo_Signature_Document.docx.pdf
578K

TB State FY 26 Budget Template w_Face and Contact Page - REVISED 03,28,2025.xlsx
196K

TB State FY 26 BA.xlsx
127K

TB State FY 26 PI.xlsx
126K

TB Fed FY 26 Budget Sent to DSHS on 03,28,2025 - REVISED.xlsx
194K

TB Fed FY 26 BA.xlsx
126K

Program Income Projection FY 26.xlsx
78K

REVIEWED
By Maria.Munoz at 11:39 am, Aug 15, 2025

DATE: August 19, 2025

DEPARTMENT HEAD: Dairen Sarmiento Rangel

DEPARTMENT NAME: Health & Human Services

ACCOUNT NUMBER: 5-1293-441-00-340-008-6-XXX

Contact Person: Carlos Oliva Ph#: 7241

2025 Appropriation AI-100368



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).

Table with 3 columns: INCREASE ACCOUNT NUMBER(S), ACCOUNT (OBJECT) NAME, and AMOUNT. It lists various budget items such as 'T.B./PC STATE-REG F/T EMPLOYEES' and 'T.B./PC STATE-REVENUES' with their respective amounts and checkmarks.

REASON: Appropriation for TB CONTROL (STATE) FY 26 program that starts on 09/01/2025 and closes on 08/31/2026.

DEPARTMENT HEAD SIGNATURE

APPROVED COMMISSIONERS' COURT

DATE

REVIEWED By Maria.Munoz at 11:21 am, Aug 15, 2025

ATTEST COUNTY CLERK

DATE: August 19, 2025

2025
Appropriation
AI-100368



DEPARTMENT HEAD: Dairen Sarmiento Rangel

DEPARTMENT NAME: Health and Human Services Department

ACCOUNT NUMBER: 5-1293-441-00-340-011-6-XXX

Contact Person: Carlos Oliva Ph#: ext. 7241

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).

Table with 3 columns: INCREASE ACCOUNT NUMBER(S), ACCOUNT (OBJECT) NAME, and AMOUNT. Rows include Personnel, Fringes, and various federal grants and revenues, totaling a budget increase of 512,559.00.

REASON: To appropriate the budget for the TB/PC Federal grant program FY 26 to run from 09/01/2025 to 08/31/2026. Budgeted amounts include grant and local match amounts.

DEPARTMENT HEAD SIGNATURE

APPROVED COMMISSIONERS' COURT

DATE

REVIEWED
By Maria.Munoz at 11:21 am, Aug 15, 2025

ATTEST COUNTY CLERK

**DEPARTMENT OF STATE HEALTH SERVICES
CONTRACT NO. HHS001437400022
AMENDMENT NO. 1**

The **DEPARTMENT OF STATE HEALTH SERVICES** (“System Agency”) and **HIDALGO COUNTY** (“Grantee”), who are collectively referred to herein as the “Parties,” to that certain contract to provide federal and state funding for Tuberculosis Prevention and Control services, effective September 1, 2024, and denominated DSHS Contract No. HHS001437400022, now desire to amend the Contract.

WHEREAS, to exercise their option to renew the Contract for an additional one-year term for State Fiscal Year 2026, representing the first of four one-year extension options (“First Renewal Period”);

WHEREAS, the Parties desire to update the Statement of Work, Contract Affirmations, and Uniform Terms and Conditions of the Contract;

WHEREAS, the Parties desire to add funds to the Contract for State Fiscal Year 2026 and clarify the not-to-exceed amount of the Contract;

WHEREAS, Grantee agrees to complete the annual Fiscal Federal Funding Accountability and Transparency Act (“FFATA”) Certification; and

WHEREAS, System Agency desires to revise its contact information.

NOW, THEREFORE, the Parties amend the Contract as follows:

1. **ARTICLE I, PARTIES**, of the Contract is amended to replace the System Agency contact information as follows:

System Agency

Department of State Health Services
Attention: Gabby Lara
1100 W. 49th Street, MC 1990
Austin, Texas 78756
Gabby.Lara@dshs.texas.gov

2. **ARTICLE III, CONTRACT PERIOD AND RENEWAL**, of the Contract is hereby amended to extend the Contract expiration date to August 31, 2026.

3. **ARTICLE V, CONTRACT AMOUNT AND PAYMENT FOR SERVICES**, of the Contract is amended to add funding in the amount of \$1,612,291.00 for the First Renewal Period. This amount includes federal funds in the amount of \$512,559.00, which includes System Agency’s federal share of \$427,128.00 plus Grantee’s required federal match amount of \$85,431.00; and state funds in the amount of \$1,099,732.00, which includes System Agency’s state share of \$916,443.00 plus Grantee’s required state match amount of \$183,289.00. The new not-to-

exceed Contract amount is \$3,224,582.00. All expenditures under the Contract shall be in accordance with **ATTACHMENT B-1, FY26 BUDGET**.

4. **ATTACHMENT A, STATEMENT OF WORK**, is deleted in its entirety and replaced with **ATTACHMENT A-1, FY26 STATEMENT OF WORK**.
5. **ATTACHMENT B, FY25 BUDGET**, is deleted in its entirety and replaced with **ATTACHMENT B-1, FY26 BUDGET**.
6. **ATTACHMENT C, HHS UNIFORM TERMS AND CONDITIONS – GRANT, v. 3.3 (NOVEMBER 2023)**, is deleted in its entirety and replaced with **ATTACHMENT C-1, HHS UNIFORM TERMS AND CONDITIONS – GRANT, v. 3.5 (SEPTEMBER 2024)**, which is attached to this Amendment and incorporated by reference and made part of the Contract for all purposes.
7. **ATTACHMENT D, CONTRACT AFFIRMATIONS v. 2.3 (AUGUST 2023)**, is deleted in its entirety and replaced with **ATTACHMENT D-1, CONTRACT AFFIRMATIONS v. 2.5 (NOVEMBER 2024)**, which is attached to this Amendment and incorporated by reference and made part of the Contract for all purposes.
8. **ATTACHMENT G-1, FFATA CERTIFICATION FORM**, is attached to this Amendment No. 1 and incorporated into the Contract.
9. This Amendment is effective immediately upon execution by the last Party to sign below. Operations and funding for Fiscal Year 2026 begin on September 1, 2025. Except as modified by this Amendment, all existing terms of the Contract, including the current Statement of Work, shall remain in full force and effect until and unless further modified by written agreement of the Parties.
10. Except as amended and modified by this Amendment No. 1, all terms and conditions of the Contract shall remain in full force and effect.
11. Any further revisions to the Contract shall be by written agreement of the Parties.

SIGNATURE PAGE FOLLOWS

**SIGNATURE PAGE FOR AMENDMENT NO. 1
DSHS CONTRACT NO. HHS001437400022**

DEPARTMENT OF STATE HEALTH SERVICES HIDALGO COUNTY

By: 
Name: Imelda Garcia
Title: Chief Deputy Commissioner
Date of Signature: June 12, 2025

By: 
Name: Richard F. Cortez
Title: Hidalgo County Judge
Date of Signature: June 10, 2025

THE FOLLOWING ATTACHMENTS ARE ATTACHED AND INCORPORATED AS PART OF THE CONTRACT:

- ATTACHMENT A-1 FY26 STATEMENT OF WORK**
- ATTACHMENT B-1 FY26 BUDGET**
- ATTACHMENT C-1 HHS UNIFORM TERMS AND CONDITIONS – GRANT, v. 3.5 (SEPTEMBER 2024)**
- ATTACHMENT D-1 CONTRACT AFFIRMATIONS v. 2.5 (NOVEMBER 2024)**
- ATTACHMENT G-1 FFATA CERTIFICATION FORM**

ATTACHMENT A-1 FY26 STATEMENT OF WORK

I. Grantee Responsibilities

Grantee will:

- A. Establish parameters in which local health departments (LHDs) receiving state funds will deliver services to maintain an effective infrastructure that promotes consistent public health practices for the health and well-being of Texans.
- B. Comply with all applicable federal and state statutes and regulations, policies, and guidelines, as revised.
- C. Comply with the most current version of the DSHS Tuberculosis Work Plan that is available online and can be accessed at:
<https://www.dshs.texas.gov/disease/tb/programs.shtm#workplan>.
- D. Provide matching funds of no less than **20%** of the total budget reflected in the Contract.
- E. Provide match at the required percentage or DSHS may withhold payments, use administrative offsets, or request a refund from Grantee until such time as the required match ratio is met. No federal or other grant funds can be used as part of meeting the match requirement.
- F. Ensure no DSHS funds or matching funds are used for:
 - 1. Entertainment, or
 - 2. Sectarian worship, instruction, or proselytization.
- G. Not lapse more than **1%** of the total funded amount on both state and federal funds of the Contract. During the term of this Contract, DSHS reserves the right to decrease funding amounts as a result of the Grantee's budgetary shortfalls and/or due to the Grantee lapsing more than **1%** of total funds.
- H. Maintain and adjust the spending plan throughout the Contract term to avoid lapsing funds.
- I. Maintain staffing levels to meet required activities of the Contract and to ensure all funds in the personnel category are expended.
- J. Agree to read the Texas Grant Management Standards (TxGMS), which is currently available online and can be accessed at: <https://comptroller.texas.gov/purchasing/grant-management/>, and work with DSHS staff regarding the management of funds received under this Contract.
- K. Enter all collected TB information into the DSHS-designated state TB information system, including all data fields on the Report of Verified Case of Tuberculosis (TB340), any laboratory results received locally, and any additional clinical information, according to documented timelines and specifications. Data entered into DSHS data systems will be

considered submitted to DSHS.

II. Federal Requirements

Grantee will use federal funds under this Contract to support any of the following core TB control front-line activities:

1. Directly Observed Therapy (DOT);
2. Outpatient services (tuberculin skin testing, chest radiography, medical evaluation, treatment);
3. Class B immigrant evaluation and treatment;
4. Contact Investigation, evaluation and treatment;
5. Cohort Review;
6. Active Surveillance;
7. Timely reporting in NEDSS;
8. Data analyses;
9. Cluster investigations;
10. Provider education and training; and
11. Patient incentives.

Grantee will ensure **no** federal funds or matching funds are used for:

1. Medication purchases
2. Inpatient clinical care (hospitalization services or clinical services)
3. Entertainment
4. Furniture
5. Equipment
6. Sectarian worship, instruction, or proselytization

III. Performance Measures

DSHS will monitor the Grantee's performance of the requirements set forth within the Statement of Work (**Attachment A-1**) and compliance with the Contract's terms and conditions.

If Grantee fails to meet any of the performance measures, Grantee will respond to any finding in a written narrative explaining the barriers and the plan to address those barriers. This requirement does not excuse any violation of this Contract, nor does it limit DSHS as to any options available under the Contract regarding breach.

IV. Invoice and Payment

- A. Grantee will request payments using the State of Texas Purchase Voucher (FormB-13) located at <http://www.dshs.texas.gov/grants/forms/b13form.doc>. The voucher and any supporting documentation will be mailed or submitted by fax or electronic mail to the address/number below.

Department of State Health Services
Claims Processing Unit, MC 1940
1100 West 49th Street
P.O. Box 149347

Austin, TX 78714-9347
 FAX: (512) 458-7442
 EMAIL: invoices@dshs.texas.gov and CMSinvoices@dshs.texas.gov

- B.** Grantee will be paid on a cost reimbursement basis and in accordance with the Budget in **Attachment B-1** of this Contract.
- C.** Grantee will maintain all documentation that substantiates invoices and make that documentation available to System Agency upon request. In the event a cost reimbursed under the Contract is later determined to be unallowable, the Grantee will reimburse System Agency for that cost. Support documents must align with the approved budget in all cost categories.
- D.** Invoices must be submitted monthly to prevent delays in subsequent months. If Grantee does not incur expenses for a month, Grantee is still required to submit a timely “zero dollar” invoice. Grantee must submit a final close-out invoice no later than thirty (30) days following the end of the State Fiscal Year. Invoices received more than thirty (30) days following the end of the State Fiscal Year are subject to denial of payment.
- E.** Grantee must submit final Financial Status Report (FSR) and final reimbursement or payment request no later than thirty (30) calendar days following the end of the Contract term.

V. Reporting Requirements

Report Name	Frequency	Period Begin	Period End	Due Date
Annual Progress Report	Annually	Sept. 1, 2025	Aug. 31, 2026	April 1, 2026
Financial Status Report (FSR)	Biannually	Sept. 1, 2025	Feb. 28, 2026	March 31, 2026
Final FSR	Biannually	March 1, 2026	Aug. 31, 2026	Sept. 30, 2026
Final Quarter-Match Reimbursement / Certification Form (“Form B-13A”)	Annually	June 1, 2026	Aug. 31, 2026	Sept. 30, 2026
Contractor’s Property Inventory Report (GC-11)	Annually	Sept. 1, 2025	Aug. 31, 2026	Oct. 15, 2026
These forms can be found at Contractor Forms Texas DSHS https://www.dshs.texas.gov/contractor-forms				

Submission Instructions:

Annual Report: Submit program reports to the TB Reporting Mailbox:
TBContractReporting@dshs.texas.gov

Financial Reports (FSRs, B-13s, and B-13A)

Department of State Health Services
Claims Processing Unit, MC 1940
1100 West 49th Street
P.O. Box 149347
Austin, Texas 78714-9347
Fax: (512) 458-7442
Email: invoices@dshs.texas.gov and CMSinvoices@dshs.texas.gov

Contractor Property Inventory Report (GC-11)

Submit to DSHS Fiscal Support and Oversight Email: FSOequip@dshs.texas.gov

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**ATTACHMENT B-1
FY26 BUDGET**

Budget FY26			
Budget Category	DSHS Funds	Cash Match	Category Total
Personnel	\$924,575.00	\$186,550.00	\$1,111,125.00
Fringe Benefits	\$404,872.00	\$81,690.00	\$486,562.00
Travel	\$3,328.00	\$0.00	\$3,328.00
Equipment	\$0.00	\$0.00	\$0.00
Supplies	\$3,896.00	\$480.00	\$4,376.00
Contractual	\$0.00	\$0.00	\$0.00
Other	\$6,900.00	\$0.00	\$6,900.00
Total Direct Costs	\$1,343,571.00	\$268,720.00	\$1,612,291.00
Indirect Costs	\$0.00	\$0.00	\$0.00
Totals:	\$1,343,571.00	\$268,720.00	\$1,612,291.00






AI-100368 COR PRG008&011 FY26

Final Audit Report

2025-08-17

Created:	2025-08-15
By:	Maria A Munoz (maria.munoz@auditor.co.hidalgo.tx.us)
Status:	Approved
Transaction ID:	CBJCHBCAABAAtI-y9oYam4LOjbYLZPB-c2PM4_zrE3hB

"AI-100368 COR PRG008&011 FY26" History

-  Document created by Maria A Munoz (maria.munoz@auditor.co.hidalgo.tx.us)
2025-08-15 - 4:45:38 PM GMT
-  Document emailed to Letty Chavez (letty.chavez@auditor.co.hidalgo.tx.us) for approval
2025-08-15 - 4:57:21 PM GMT
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