



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

November 25, 2025

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 from the assessment of mandatory payments from the respective hospitals for Health Care Funding District in amount of \$203,668.18 for the DY10 UC Redistribution Payment. 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

11/25/2025

Date

HIDALGO COUNTY DISTRICT JUDGES



AI-101578

Miranda Vela <miranda.vela@hchd.org>

Thu, Nov 20, 2025 at 10:52 AM

To: Lizbeth Rocha <lizbeth.rocha@auditor.co.hidalgo.tx.us>, Fidencio Alvarez <fidencio.alvarez@auditor.co.hidalgo.tx.us>, Sandra Jara <sandra.jara@co.hidalgo.tx.us>, Rey Salazar <rey.salazar@co.hidalgo.tx.us>, Merlen Munoz <merlen.munoz@auditor.co.hidalgo.tx.us>, Dairen Sarmiento <dairen.sarmiento@hchd.org>, Valde Guerra <valde.guerra@co.hidalgo.tx.us>, Audrey Ochoa <audrey.ochoa@co.hidalgo.tx.us>, Carolina Herrera <carolina.herrera@co.hidalgo.tx.us>, James Hodge <james.hodge@co.hidalgo.tx.us>, Reynaldo Cantu <reynaldo.cantu@auditor.co.hidalgo.tx.us>, Dan Li <dan.li@auditor.co.hidalgo.tx.us>, Ray Morin <ray.morin@auditor.co.hidalgo.tx.us>, Letty Chavez <letty.chavez@auditor.co.hidalgo.tx.us>, Lita Leo <lita.leo@co.hidalgo.tx.us>, Lourdes Acevedo <lulu.acevedo@hchd.org>, Damaris San Miguel <Damaris.sanmiguel@co.hidalgo.tx.us>

Cc: Darlene Villarreal <darlene.villarreal@hchd.org>

Budget, County Treasurer and County Auditor Offices:

Please accept this as my request to transfer **\$203,668.18** from the Local Provider Participation for the DY10 UC Redistribution Payment.

The last day to submit the IGT into TexNet is **12/01/2025** with a Settlement date of **12/02/2025**.

County Auditor's office please prepare the certification of revenues (LPPF) in the amount of **\$203,668.18**.

Budget office please prepare the Appropriation of funds (LPPF) in the amount of **\$203,668.18**.

County Treasurer's department please select the **"UC Hospital"** bucket in TexNet when you enter the DY 10 UC Redistribution Payment amount of **\$203,668.18** from the LPPF Account.

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

Should you have any questions please contact me at extension 7363 or Lourdes Acevedo at extension 7366.

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

Thank you,
Miranda E. Vela
Human Services Coordinator III
Hidalgo County Health and Human Services
1304 S. 25th Ave
Edinburg, TX 78542
956-318-2011 ext. 7372
956-318-2019 fax

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AI-101578

Health & Human Services Dept. 16. C. 1.

CC REGULAR AGENDA SPECIAL MTG

Health Care Funding District

Meeting Date: 11/25/2025

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

Submitted By: Darlene Villarreal

Department: HEALTH & HUMAN SERVICES DEPT.

CAPTION

A. Discussion, consideration and approval to draw down funds for Demonstration Year 10 UC Redistribution Payment and IGT in the amount to be determined by HHSC instructions from the Local Provider Participation Fund (LPPF) with a transfer date of 12/01/2025 and a settlement date of 12/02/2025.

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

BACKGROUND

Fiscal Impact

Attachments

Instructions

Form Review

| Inbox | Reviewed By | Date |
|-------------------------------------|--------------------|---------------------------------|
| Budget & Management | Veronica Ortiz | 11/17/2025 02:49 PM |
| Final Approval | Monica Salinas | 11/19/2025 04:36 PM |
| Form Started By: Darlene Villarreal | | Started On: 11/17/2025 02:09 PM |
| Final Approval Date: 11/19/2025 | | |

From: Texas Health and Human Services Commission <txhhs@public.govdelivery.com>

Sent: Thursday, November 13, 2025 11:58 AM

To: James Flores <jamesflores@ahcv.com>

Subject: UC DY10 Post Audit Redistribution Payment and IGT Call

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UC DY10 Post Audit Redistribution Payment and IGT Call

The HHSC has identified additional funds available for Uncompensated Care (UC) Demonstration Year (DY) 10 (FFY 2021), totaling approximately \$88 million, all funds. These additional funds are the result of recoupments from overpaid providers that have now been collected.

To fund this payment, an additional Intergovernmental Transfer (IGT) is required. IGT will be collected based on the enhanced Federal Medical Assistance Percentage (FMAP) of 68.01% for the period from October 2019 through September 2020, which was used during program year 2021. Additional payments and IGT are included in the "UC DY10 Redistribution" tab of the UC DY 10 Final Reconciliation Redistribution File. The IGT file is updated as of Nov. 10, 2025, and is available for review on the [Provider Finance Department \(PFD\) website](#). If the payments are not fully funded, HHSC may be required to adjust payments proportionately.

To ensure that all government entities receive this notification, HHSC strongly encourages providers to send this information to any government entity submitting IGT on their behalf.

The pertinent dates associated with the UC Redistribution payment are listed below:

- Dec. 1: Last date to schedule transfer in TexNet
- Dec. 2: IGT settlement date

- Dec. 15: State-owned Hospitals submit Journal Entry
- Dec. 30: Payments Expected to Providers

Late IGTs will not be accepted.

Select the UC bucket in TexNet when entering your IGT. You must send a screenshot or a PDF copy of the confirmation/trace sheet from TexNet or an email with the confirmation number to the [PFD UC Payments team](#). Additional information regarding the TexNet process can be found on the [Comptroller's website](#).

State-owned hospitals must send a copy of their Journal Entry (JE) to the [PFD UC Payments team](#).

Include two contacts and their phone numbers and email addresses in case HHSC has any questions regarding the TexNet/JE received.

If you have questions regarding the UC payment process, email the [PFD UC Payments team](#).

You have subscribed to get updates about Texas Health and Human Services (HHS). For more information about HHS, [please visit our website](#).

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(en español)

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This email was sent to jamesflores@ahcv.com using govDelivery Communications Cloud on behalf of: Texas Health and Human Services Commission · [707 17th St, Suite 4000 · Denver, CO 80202](#)



Balance Sheet Summary

Account Year: 25 Account Period: 13 Period End: 01/31/2026

| Account | Account Description | Beginning Balance | Current Balance | YTD Balance | Ending Balance |
|-----------------------------|--|------------------------|-----------------|-------------------------|------------------------|
| Fund 1258 | LOCAL PROVIDER PARTICIPATION FUND | | | | |
| 5-1258-201-00-000-000-0-000 | LPPF-ACCR SALARY, WAGES & FRINGE BENEFIT | 0.00 | 0.00 | 0.00 | 0.00 |
| 5-1258-202-00-000-000-0-000 | LPPF-ACCOUNTS PAYABLE | 0.00 | 0.00 | 0.00 | 0.00 |
| 5-1258-202-00-000-001-0-000 | LPPF-A/P 1115 WAIVER | 0.00 | 0.00 | 0.00 | 0.00 |
| 5-1258-223-00-000-000-0-000 | LPPF-UNEARNED REVENUE | 0.00 | 0.00 | 0.00 | 0.00 |
| 5-1258-241-00-000-000-0-000 | LPPF-UNAVAILABLE REVENUE | 0.00 | 0.00 | 0.00 | 0.00 |
| 5-1258-208-01-000-100-0-000 | DUE TO GENERAL FUND | 647.84 | 0.00 | -647.84 | 0.00 |
| | Total Liabilities: | \$647.84 | \$0.00 | -\$647.84 | \$0.00 |
| 5-1258-270-00-000-000-0-000 | LPPF-BUDGETED FUND BALANCE | 0.00 | 0.00 | -17,167,326.78 | -17,167,326.78 |
| 5-1258-258-00-000-000-0-000 | LPPF-UNASSIGNED FUND BALANCE | 17,167,326.78 | 0.00 | 0.00 | 17,167,326.78 |
| | Total Equity: | \$17,167,326.78 | \$0.00 | -\$17,167,326.78 | \$0.00 |
| 5-1258-275-00-000-000-0-000 | LPPF-ESTIMATED REVENUES | 0.00 | 0.00 | -188,787,556.11 | -188,787,556.11 |
| 5-1258-276-00-000-000-0-000 | LPPF-REVENUE CONTROL | 0.00 | 0.00 | 189,489,745.71 | 189,489,745.71 |
| 5-1258-271-00-000-000-0-000 | LPPF-APPROPRIATIONS | 0.00 | 0.00 | 205,954,882.89 | 205,954,882.89 |
| 5-1258-272-00-000-000-0-000 | LPPF-EXPENDITURE CONTROL | 0.00 | 0.00 | -115,293,917.14 | -115,293,917.14 |
| 5-1258-273-00-000-000-0-000 | LPPF-ENCUMBRANCE CONTROL | 0.00 | 0.00 | 0.00 | 0.00 |
| 5-1258-274-00-000-000-0-000 | LPPF-RESERVED FOR ENCUMBRANCES | 0.00 | 0.00 | 0.00 | 0.00 |
| | Total Controls: | \$0.00 | \$0.00 | \$91,363,155.35 | \$91,363,155.35 |
| | Total Equity and Controls: | \$17,167,326.78 | \$0.00 | \$74,195,828.57 | \$91,363,155.35 |
| | Total Liabilities, Equity and Controls: | \$17,167,974.62 | \$0.00 | \$74,195,180.73 | \$91,363,155.35 |

Fund is in balance 0.00

+ 91,363,155.35
 - 90,621,555.34 AI101283 CHIRP
 - 39,410.41 AI101283 TIPPS
 - 203,668.18 AI101578 DY10 UC

 + 498,521.42

DATE: November 25, 2025

DEPARTMENT HEAD Dagoberto Soto, Budget Officer

2025
Appropriation
AI-101578



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

ACCOUNT NUMBER: 5-1258-3XX-XX-240-00X-0-000

Contact Person: Sandra Jara Ph#: (956) 292-7025 ext. 5408

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 |
|---|--|-------------------|
| 5-1258-444-00-240-006-3-843 | LPPF- Aid to Nongovt | 203,668.18 |
| 5-1258-355-20-240-001-0-000 | LPPF-SPEC ASSESS-COLUMBIA RIO GRANDE | 9,482.81 |
| 5-1258-355-20-240-002-0-000 | LPPF-SPEC ASSESS-CORNERSTONE REGIONAL | 109.61 |
| 5-1258-355-20-240-003-0-000 | LPPF-SPEC ASSESS-DOCTORS HOSPITAL AT REN | 24,277.89 |
| 5-1258-355-20-240-004-0-000 | LPPF-SPEC ASSESS-KNAPP MEDICAL CENTER | 2,924.67 |
| 5-1258-355-20-240-006-0-000 | LPPF-SPEC ASSESS-EDINBURG REGIONAL MED | 18,272.24 |
| 5-1258-355-20-240-007-0-000 | LPPF-SPEC ASSESS-MISSION HOSPITAL | 4,066.98 |
| 5-1258-355-20-240-008-0-000 | LPPF-SPEC ASSESS-SOLERA HOSPITAL MCALLEN | 124,653.57 |
| 5-1258-355-20-240-009-0-000 | LPPF-SPEC ASSESS-WESLACO REHAB HOSPITAL | 158.02 |
| 5-1258-355-20-240-010-0-000 | LPPF-SPEC ASSESS-DRISCOLL CHILDRENS HOSPITAL | 19,722.39 |
| 5-1258-360-00-240-000-0-000 | LPPF-MISCELLANEOUS REVENUE | - |
| TOTAL BUDGET INCREASE (DECREASE) | | 203,668.18 |

REASON: Appropriation of funds in relation for approval to draw down funds for Demonstration Year 10 UC Redistribution Payment and IGT in the amount to be determined by HHSC instructions from the Local Provider Participation Fund (LPPF) with a transfer date of 12/01/2025 and a settlement date of 12/02/2025.

DEPARTMENT HEAD SIGNATURE

APPROVED COMMISSIONERS' COURT

DATE

ATTEST COUNTY CLERK

+ 9,482.81
 + 109.61
 + 24,277.89
 + 2,924.67
 + 18,272.24
 + 4,066.98
 + 124,653.57
 + 158.02
 + 19,722.39

 + 203,668.18