

**AN ORDINANCE 2016-09-08-0684**

**AUTHORIZING THE SAN ANTONIO METROPOLITAN HEALTH DISTRICT TO CONTINUE IMPLEMENTATION OF THE MEDICAID 1115(A) DEMONSTRATION WAIVER PROGRAM-BABY CAFÉ BREASTFEEDING PROMOTION PROJECT FOR A PERIOD BEGINNING OCTOBER 1, 2016 THROUGH DECEMBER 31, 2017, SUBMIT INTERGOVERNMENTAL TRANSFERS (IGT) IN A CUMULATIVE AMOUNT UP TO \$1,088,328.10, ACCEPT REIMBURSEMENT OF THE IGT AND ADDITIONAL ACCEPTANCE OF UP TO \$1,450,342.54 FROM THE PROGRAM, FOR TOTAL CASH PAYMENTS OF \$2,538,670.64 AND AUTHORIZING A PROPOSED PROJECT BUDGET AND STAFFING COMPLEMENT.**

\* \* \* \* \*

**WHEREAS**, on January 31, 2013, City Council authorized the submission of six project proposals for consideration and funding as part of the “Texas Healthcare Transformation and Quality Improvement Program” or “1115 Medicaid Waiver Program”; and

**WHEREAS**, the 1115 Medicaid Waiver created two new funding pools in Texas for Uncompensated Care reimbursement for hospitals and a Delivery System Reform Incentive Payment (DSRIP) pool program; and

**WHEREAS**, the DSRIP program provides incentive payments for hospitals and other providers who make investments in delivery system reforms that increase access to healthcare, improve the quality of care, and enhance population health; and

**WHEREAS**, all six projects were approved by the Health and Human Services Commission (HHSC) for funding through the DSRIP pool in two phases of approvals in April and September of 2013; and

**WHEREAS**, projects submitted focused on innovative intervention strategies to improve health outcomes in Bexar County in the following areas: diabetes prevention, children’s oral health services, HIV and Syphilis prevention, breastfeeding promotion, teen pregnancy prevention and neighborhood health promotion; and

**WHEREAS**, with the initial demonstration period coming to an end on September 30, 2016, HHSC submitted a request to the Centers for Medicare and Medicaid Services (CMS) for a 15 month extension period to continue both the Uncompensated Care (UC) and DSRIP programs and allow additional time for continued negotiations regarding a full five year renewal of the 1115 Medicaid Waiver program; and

**WHEREAS**, CMS approved the 15 month extension period on May 2, 2016; and

**WHEREAS**, therefore, the San Antonio Metropolitan Health District (Metro Health) requests City Council authorization for Metro Health to continue its participation in the 1115 Medicaid Waiver program, submit intergovernmental funding transfers to the Program and receive reimbursement of submitted IGT and accept incentive payments for achieving milestone requirements set forth in the extension period; **NOW THEREFORE**:

**BE IT ORDAINED BY THE CITY COUNCIL OF THE CITY OF SAN ANTONIO:**

**SECTION 1.** The City Manager or her designee or the Director of the San Antonio Metropolitan Health District or his designee is authorized to continue implementation of the Medicaid 1115(a) Demonstration Waiver Program-Baby Café Breastfeeding Promotion Project for a period beginning October 1, 2016 through December 31, 2017, submit intergovernmental transfers (IGT) in a cumulative amount up to \$1,088,328.10, accept reimbursement of the IGT and additional acceptance of up to \$1,450,342.54 from the Program, for total cash payments of \$2,538,670.64.

**SECTION 2.** The City Manager or her designee or the Director of the San Antonio Metropolitan Health District or his designee is authorized to take all actions necessary to participate in the Program for the period beginning October 1, 2016 and ending December 31, 2017.

**SECTION 3.** The proposed budget which is attached hereto and incorporated herein for all purposes as **Attachment I** is approved and adopted for entry in the City books. A formal final budget which will include Internal Order numbers and General Ledger numbers will be submitted by the department upon acceptance of the award. The City Council of the City of San Antonio finds there is a public purpose served by the City's participation in this grant and authorizes incidental expenditures for grant program participants consistent with grant program parameters.

**SECTION 4.** The proposed personnel complement of eight (8) positions which is attached hereto and incorporated herein as **Attachment I** is hereby approved. Should funding be awarded, the personnel complement is approved. The Director of the San Antonio Metropolitan Health District or his designee is further authorized to change personnel complement classifications within the approved personnel complement number so long as there is no increase to the overall budget.

**SECTION 5.** Funding for Breastfeeding Promotion in the amount of \$604,905.00 for this ordinance is authorized to be appropriated in Fund 29658000 and Internal Order 8360000000XX, per the table below and is contingent upon receipt of funds from Medicaid.

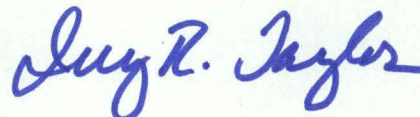
Amount	General Ledger
-\$604,905.00	4501000
\$267,996.00	5101010
\$240.00	5101050
\$20,857.00	5103005
\$273.00	5103010
\$4,400.00	5103035
\$42,983.00	5170040
\$28,245.00	5105010

Amount	General Ledger
\$2,500.00	5201025
\$3,250.00	5203050
\$5,000.00	5203060
\$3,500.00	5203090
\$500.00	5204050
\$3,000.00	5205010
\$3,000.00	5205020
\$70,000.00	5206010
\$12,000.00	5207010
\$2,000.00	5208530
\$7,000.00	5302010
\$1,500.00	5303010
\$12,500.00	5304010
\$25,000.00	5304080
\$1,800.00	5403040
\$1,000.00	5403510
\$1,500.00	5405020
\$84,861.00	5406530

**SECTION 6.** The financial allocations in this Ordinance are subject to approval by the Director of Finance, City of San Antonio. The Director of Finance may, subject to concurrence by the City Manager or the City Manager's designee, correct allocations to specific SAP Fund Numbers, SAP Project Definitions, SAP WBS Elements, SAP Internal Orders, SAP Fund Centers, SAP Cost Centers, SAP Functional Areas, SAP Funds Reservation Document Numbers, and SAP GL Accounts as necessary to carry out the purpose of this Ordinance.

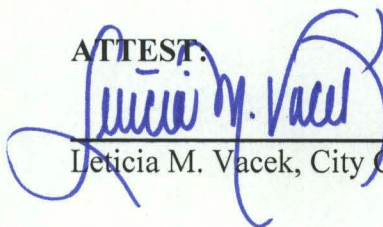
**SECTION 7.** This Ordinance is effective immediately upon the receipt of eight affirmative votes; otherwise, it is effective ten days after passage.

**PASSED AND APPROVED** this 8th day of September, 2016.



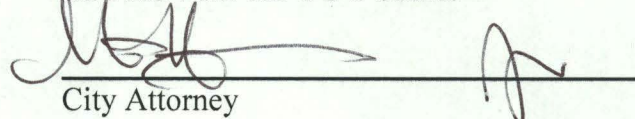
**M A Y O R**  
Ivy R. Taylor

**ATTEST:**



Leticia M. Vacek, City Clerk

**APPROVED AS TO FORM:**



City Attorney

<b>Agenda Item:</b>	<b>11D ( in consent vote: 5, 6, 7, 8, 9, 11, 11A, 11B, 11C, 11D, 11E, 11F, 11G, 12, 14, 15, 16, 16A, 16B )</b>
<b>Date:</b>	09/08/2016
<b>Time:</b>	09:17:27 AM
<b>Vote Type:</b>	Motion to Approve
<b>Description:</b>	An Ordinance authorizing the San Antonio Metropolitan Health District to continue implementation of the Medicaid 1115(a) Demonstration Waiver Program-Baby Café Breastfeeding Promotion Project for a period beginning October 1, 2016 through December 31, 2017, submit intergovernmental transfers (IGT) in a cumulative amount up to \$1,088,328.10, accept reimbursement of the IGT and additional acceptance of up to \$1,450,342.54 from the Program, for total cash payments of \$2,538,670.64 and authorizing a proposed project budget and staffing complement.
<b>Result:</b>	Passed

Voter	Group	Not Present	Yea	Nay	Abstain	Motion	Second
Ivy R. Taylor	Mayor		x				
Roberto C. Treviño	District 1		x			x	
Alan Warrick	District 2		x				x
Rebecca Viagran	District 3		x				
Rey Saldaña	District 4	x					
Shirley Gonzales	District 5		x				
Ray Lopez	District 6		x				
Cris Medina	District 7		x				
Ron Nirenberg	District 8		x				
Joe Krier	District 9		x				
Michael Gallagher	District 10		x				

**ATTACHMENT I**  
**Medicaid Waiver 1115**  
**Fund 29658000**  
**Functional Area 3600000000080001**  
**Proposed Budget for Period: 10/01/2016 to 9/30/2017**  
**Breastfeeding Promotion**

<u>ESTIMATED REVENUES</u>	<u>SAP GL</u> <u>No.</u>	<u>ORIG</u> <u>BUDGET</u>
Medicaid Waiver 1115	4501000	\$ 604,905
Total Estimated Revenues		<u>\$ 604,905</u>

**APPROPRIATIONS**

Medicaid Waiver 1115

Period: 10/01/2016 - 9/30/2017

Cost Center 3606110001

Internal Order 836000000xxx

		<u>ORIG</u> <u>BUDGET</u>
1	Regular Salaries & Wages	267,997
1	Temporary Salaries	-
1	Language Skill Pay	240
1	Retiree Payout Salary	-
2	Social Security/FICA	20,857
2	Temporary Soc Sec/FICA	-
2	Life Insurance	273
1	Personal Leave Buy Back Pay	4,400
1	Transportation Allowance	-
2	Group Health Insurance	42,983
2	TMRS	28,245
6	Education	2,500
5	Fees to Professional Contractors	-
5	Contractual	0
5	Other Contractual	-
5	Advertising and Publication	-
6	Membership Dues	3,250
6	Binding, Printing, and Reproduction	5,000
3	Transportation Fees	3,500
6	Maintenance - Buildings	500
6	Maintenance and Repair Automotive	-
6	Mail and Parcel Post Service	3,000
6	Rental of office equipment	3,000
6	Rental of Facilities	70,000
3	Travel - Official	12,000
6	Alarm & Security Svc	2,000
6	Maintenance and Repair Parts - Automot	-
4	Office Supplies	7,000
4	Janitorial Supplies	1,500
6	Food	12,500
4	Chems Meds & Drugs	-
6	Software	-
4	Other Commodities	25,000
6	Procurement Fee	-
6	Cellular Phones	1,800
6	Wireless Data Communications	1,000
6	Motor Fuel & Lubricants	-
6	Gas & Electricity	-
6	Water/Sewer	-
1	Workers Disability Comp	1,500
8	Indirect Cost	84,861
6	Rent of City Rolling Equipment	-
7	Computer Equipment	-
7	Machinery & Equipment	-
7	Phones	-
7	Vehicles	-
7	Furniture & Fixtures	-
<b>Total</b>		<b>604,905</b>

Categorical Budget	
1 Personnel	274,137
2 Fringe Benefits	92,357
3 Travel	15,500
7 Equipment	-
4 Supplies	33,500
5 Contractual	-
6 Other	104,550
Total Direct Charges	<b>520,044</b>
8 Indirect Cost	84,861
Total Grant Request	<b>604,905</b>

PERSONNEL COMPLEMENT:

<u>Class No.</u>	<u>Title</u>	<u>Positions</u>
Activity 36-06-11		
Cost Center 3606110001		
Internal Order 836000000xxx		
0206	Health Program Manager (.05 FTE)	1.00
0908	Asst Social Services Mgr (.35 FTE)	1.00
0999	Senior Management Analyst (1.0 FTE)	2.00
0288	Registered Dietician (1.0 FTE)	1.00
2063	Admin Associate (1.0 FTE)	1.00
0222	Peer Counselor (1.0 FTE)	2.00
	36-06-11	<u>8.00</u>