



AGENDA MEMORANDUM

Future Item for the City Council Meeting of September 12, 2017
Action Item for the City Council Meeting of September 19, 2017

DATE: September 1, 2017

TO: Margie C. Rose, MPA, City Manager

THRU: Annette Rodriguez, M.P.H., Director of Public Health
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FROM: William Milan Uhlarik, M.B.A., A.R.M., Assistant Director of Public Health
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Approving funds subject to reimbursement for services provided by Texas A&M Health Science Center (Coastal Bend Health Education Center) [CBHEC] utilizing Diabetes Care Team for the Corpus Christi-Nueces County Public Health District (CCNCPHD). Nueces County to reimburse full amount of paid funds per interlocal agreement.

CAPTION:

Motion approving up to but not to exceed \$250,000.00 to pay for services provided by Texas A&M Health Science Center (Coastal Bend Health Education Center) [CBHEC] utilizing Diabetes Care Team for the Corpus Christi-Nueces County Public Health District (CCNCPHD) for the City contract period that ended May 2, 2017 and invoices between the City contract and the County contract that begins in August 1, 2017. Nueces County to reimburse full amount of paid funds per interlocal agreement.

PURPOSE: To pay outstanding invoices billed by the Coastal Bend Health Education Center [CBHEC] Corpus Christi Texas, Diabetes Care Team for providing services that assisted the CCNCPHD in meeting its 1115 Waiver Program yearly metrics.

BACKGROUND AND FINDINGS: CBHEC was awarded a contract through the process of RFP BI-0020-14 in May of 2014. CBHEC provided diabetes classes for the CCNCPHD 1115 Waiver Program from FY15-17. Because of the exceptional service that the CCNCPHD provided, all the program metric requirements were satisfied so that the CCNCPHD received full funding in the amount of \$1.7M from the Health and Human Services, and was awarded another 3 years of funding. For the CCNCPHD to continue to meet program metrics, CBHEC has continued to provide services under the original City contract with CBHEC under a month to month provision in the contract. Therefore, the CCNCPHD requests the City Council to approve the payment of invoices due to CBHEC in an amount up to but not exceeding \$250,000 so that the CCNCPHD can meet its program metric requirements under the current month-to-month City contract with CBHEC, until the CCNCPHD can put in place a new contract between CBHEC and Nueces County to continue services for the CCNCPHD.

ALTERNATIVES:

These are County pass through funds. If payment of funds is not approved, services under the CCNCPHD County program will be negatively affected.

OTHER CONSIDERATIONS:

None

CONFORMITY TO CITY POLICY:

This agreement conforms to the purchasing process requirements of the City-County Health District interlocal agreement.

EMERGENCY / NON-EMERGENCY:

Non-Emergency.

DEPARTMENTAL CLEARANCES:

Corpus Christi-Nueces County Public Health District
Legal Department

FINANCIAL IMPACT:

X Operating ☐ Revenue ☐ Capital ☐ Not applicable

Fiscal Year: 2015-2017	Project to Date Expenditures (CIP only)	FY 2016-2017 Current Year	TOTALS
Line Item Budget – Original Estimate Approved by Council		\$ 840,000	\$ 840,000
Expended Amount (Nueces County Funds)		(852,320)	(852,320)
Outstanding Invoices to be Paid		(193,760)	(193,760)
This item		250,000	250,000
BALANCE		\$ 43,920	\$ 43,920

Fund(s): Medicaid 1115 waiver funds

Comments:

None

RECOMMENDATION:

Staff recommends approval of this motion as presented.

LIST OF SUPPORTING DOCUMENTS:

N/A