



**Health & Human Services  
Agency  
COUNTY OF TULARE  
AGENDA ITEM**

**BOARD OF SUPERVISORS**

ALLEN ISHIDA  
District One

PETE VANDER POEL  
District Two

PHILLIP A. COX  
District Three

J. STEVEN WORTHLEY  
District Four

MIKE ENNIS  
District Five

**AGENDA DATE:** June 23, 2009

Public Hearing Required	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
Scheduled Public Hearing w/Clerk	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
Published Notice Required	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
Advertised Published Notice	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
Meet & Confer Required	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
Electronic file(s) has been sent	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
Budget Transfer (Aud 308) attached	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
Personnel Resolution attached	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
Resolution, Ordinance or Agreements are attached and signature line for Chairman is marked with tab(s)/flag(s) Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>			

CONTACT PERSON: Noah Whitaker PHONE: 737-4660

**SUBJECT:** California Healthcare for Indigents Program (CHIP) for Fiscal Year 2008/2009.

**REQUEST(S):**

That the Board of Supervisors:

1. Ratify and approve the application/agreement for the receipt of funding for the California Healthcare for Indigents Program (CHIP) for Fiscal Year 2008/2009, per the Fiscal Year 2008/2009 County Allocation letter dated October 30, 2008, retroactive to July 1, 2008 through June 30, 2009. This application/agreement is retroactive due to having received the notification of the availability of funding after July 1, 2008. It was impracticable for the Board to take action before July 1, 2008 due to having received this notification of funding after July 1, 2008 and the time needed to process, prepare, and submit the agenda item;
2. Find that the Board had authority to approve and sign the application/agreement as of July 1, 2008 and that it was in the County's best interest to approve the application/agreement on that date;
3. Approve the necessary budget adjustments per the attached AUD 308 (4/5ths vote required); and
4. Authorize the Chairman of the Board to sign three (3) copies of the application/agreement.

**SUBJECT:** California Healthcare for Indigents Program (CHIP) for Fiscal Year 2008/2009.  
**DATE:** June 23, 2009

**SUMMARY:**

CHIP is the indigent care component of the Tobacco Tax and Health Improvement Act of 1988 (Prop 99). The funds allow the Health & Human Services Agency, Health Services Branch, to continue to compensate medical providers for care which otherwise would have been provided by them at no compensation (bad debt claims). This program is scheduled to be eliminated in Fiscal Year 2009/2010.

The California Healthcare for Indigents Program Agreement No. 23423 for Fiscal Year 2007/2008 was approved as to form by County Counsel and was approved by the Board of Supervisors on February 12, 2008. The purpose of this application/agreement is to authorize the receipt of funding for Fiscal Year 2008/2009.

**FISCAL IMPACT/FINANCING:**

No General Funds are involved. Funding is from the Tobacco Tax and Health Improvement Act of 1988 (Prop 99). Tulare County's Fiscal Year 2008/2009 California Healthcare for Indigents Program (CHIP) allocation is \$49,624. We are requesting the Board's approval of the attached AUD 308 to increase the Fiscal Year 2008/2009 budget to include the CHIP funding.

**LINKAGE TO THE COUNTY OF TULARE STRATEGIC BUSINESS PLAN:**

The County's five-year strategic plan includes the Quality of Life Initiative that encourages innovative provision of quality supportive services for at-risk adults, youth and children in state and federally mandated programs. This application/agreement increases the ability to fulfill that obligation.

**ALTERNATIVES:**

To not apply for and receive the funding, thereby denying local healthcare provider's relief from bad debt for emergency services provided.

**INVOLVEMENT OF OTHER DEPARTMENTS OR AGENCIES:**

N/A

**SUBJECT:** California Healthcare for Indigents Program (CHIP) for Fiscal Year 2008/2009.

**DATE:** June 23, 2009

**ADMINISTRATIVE SIGN-OFF:**

  
Ray Bullick  
Director Health Services

Cc: Auditor/Controller  
County Counsel  
County Administrative Office (3)

Attachment A – Application/Agreement

Attachment B – AUD 308 Budget Adjustment Form

**BEFORE THE BOARD OF SUPERVISORS  
COUNTY OF TULARE, STATE OF CALIFORNIA**

IN THE MATTER OF: )  
California Healthcare for Indigents )  
Program (CHIP) for Fiscal Year )  
2008/2009. )

RESOLUTION NO. \_\_\_\_\_  
AGREEMENT NO. \_\_\_\_\_

UPON MOTION OF SUPERVISOR \_\_\_\_\_, SECONDED BY  
SUPERVISOR \_\_\_\_\_, THE FOLLOWING WAS ADOPTED BY THE  
BOARD OF SUPERVISORS, AT AN OFFICIAL MEETING HELD \_\_\_\_\_  
\_\_\_\_\_, BY THE FOLLOWING VOTE:

AYES:  
NOES:  
ABSTAIN:  
ABSENT:

ATTEST: JEAN M. ROUSSEAU  
COUNTY ADMINISTRATIVE OFFICER/  
CLERK, BOARD OF SUPERVISORS

BY: \_\_\_\_\_  
Deputy Clerk

\* \* \* \* \*

1. Ratified and approved the application/agreement for the receipt of funding for the California Healthcare for Indigents Program (CHIP) for Fiscal Year 2008/2009, per the Fiscal Year 2008/2009 County Allocation letter dated October 30, 2008, retroactive to July 1, 2008 through June 30, 2009. This application/agreement is retroactive due to having received the notification of the availability of funding after July 1, 2008. It was impracticable for the Board to take action before July 1, 2008 due to having received this notification of funding after July 1, 2008 and the time needed to process, prepare, and submit the agenda item;
2. Found that the Board had authority to approve and sign the application/agreement as of July 1, 2008 and that it was in the County's best interest to approve the application/agreement on that date;

3. Approved the necessary budget adjustments per the attached AUD 308 (4/5ths vote required); and
4. Authorized the Chairman of the Board to sign three (3) copies of the application/agreement.

09

Date \_\_\_\_\_

Doc ID

APRD 100 100 100 100

**Budget FY-yy**

NOAH  
WHITAKER 737-4660 EXT.2610

Agency Name

**Contact Person**

# Phone

图

### Line Totals

**Each fund must balance**

Total in December must be zero

99,248

Reason for Adjustment (To Avoid Correspondence, State Reason in Detail)

**Perform a SMART BUDGET ROLL-UP before VALIDATING.**

It was believed that the CHIP funds were eliminated, therefore, the CHIP funds were not budgeted into the FY 08/09 County Budget. However, Tulare County recieved a letter from the State on October 30, 2008 indicating that Tulare County was allocated \$49,624 for FY2008-2009.

**Auditor and CAO Use Only**

Checked By

County Executive Office Action	No.	Date
--------------------------------	-----	------

☐ Approved ☐ Disapproved

By

Board of Supervisors Action No.

Date \_\_\_\_\_

**Auditor Use Only**

Entered By

**Paie**

**Distribution** MPBOS/CAO/Audio