

ALAMEDA COUNTY  
**HEALTH CARE SERVICES**

AGENCY  
COLLEEN CHAWLA, Director



AGENDA \_\_\_\_\_ February 9, 2021

**OFFICE OF THE AGENCY DIRECTOR**  
1000 San Leandro Boulevard, Suite 300  
San Leandro, CA 94577  
TEL (510) 618-3452  
FAX (510) 351-1367

February 2, 2021

The Honorable Board of Supervisors  
County Administration Building  
1221 Oak Street  
Oakland, CA 94612

Dear Board Members:

**SUBJECT: ADOPT A RESOLUTION AUTHORIZING THE HEALTH CARE SERVICES AGENCY DIRECTOR OR HER DESIGNEE TO ENTER INTO AN INTERGOVERNMENTAL TRANSFER PROGRAM CERTIFICATION WITH CALIFORNIA DEPARTMENT OF HEALTH SERVICES TO BENEFIT UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND FOR THE SB1100 PRIVATE HOSPITAL SUPPLEMENTAL FUND INTERGOVERNMENTAL TRANSFER FISCAL YEAR 2020-2021**

**RECOMMENDATION**

Adopt a resolution authorizing the Health Care Services Agency Director or her designee to enter into an intergovernmental transfer program certification with the California Department of Health Services to benefit University of California San Francisco Benioff Children's Hospital Oakland, utilizing Fiscal Year 2020-21 Measure A base allocation in the amount of \$2,000,000

**SUMMARY/DISCUSSION**

Intergovernmental transfers (IGTs) are a mechanism used to draw down federal matching funds of eligible Medi-Cal expenses. Historically, Alameda County has participated in a variety of IGT programs, including the Senate Bill (SB) 1100 Private Hospital Supplemental Fund (PHSF), Managed Care Rate, and the Trauma State Plan Amendment, which are administered by the California Department of Health Care Services' (DHCS) Safety Net Financing Division.

Since Fiscal Year (FY) 2004-05, Health Care Services Agency (HCSA) and University of California San Francisco Benioff Children's Hospital Oakland (Children's Hospital) have participated in the PHSF IGT Program, which provides supplemental Medicaid payments to private hospitals to benefit Medicaid beneficiaries. At this time, we are requesting approval to sign a resolution for the FY 2020-21 certification.

As part of the IGT transaction, DHCS requires the HCSA Director to sign the certification of available funds and submit the form to the State. Approval of this recommendation would subsequently allow HCSA to send \$2,000,000 to DHCS to benefit Children's Hospital. Normally, based on the Federal Medical Assistance Percentage (FMAP), which determines the local and federal share of Medicaid, upon receipt of the \$2,000,000 county contribution, the State will send a 1:1 federal match and Children's Hospital will receive a \$4,000,000 net benefit.

During the COVID-19 pandemic, the federal government provided authorization for the State of California to implement an enhanced FMAP, which increased the federal share from 50% to 56.2% effective January 1, 2020, currently through June 30, 2021 and decreased the local requirement for the entire FY 2020-21 to 43.8%.

When the State receives the \$2,000,000 funding, Children's Hospital will obtain a net benefit of \$4,566,210.05 (the county contribution of \$2,000,000 plus 56.2% of federal share, or \$2,566,210.05) that will be sent directly by the State to Children's Hospital. The table below illustrates the county contribution's impact benefitting Children's Hospital.

| <b>\$2M County Contribution Net Benefit to Children's Hospital</b> |                      |                            |
|--|----------------------|----------------------------|
|  | <b>Federal Share</b> | <b>County Contribution</b> |
| July 2020-June 2021  | <b>56.2%</b>         | <b>43.8%</b>               |
|  | \$ 2,566,210.05      | \$ 2,000,000.00            |
| <b>Net Benefit to Children's Hospital</b>                          |                      | <b>\$ 4,566,210.05</b>     |


### **FINANCING**

Funding to support Children's Hospital (\$2.0 million) comes from the FY 2020-21 Measure A base allocation that is included in the HCSA FY 2020-21 Final Approved Budget. Approval of this recommendation will have no impact on Net County Costs.

### **VISION 2026 GOAL**

Maintaining critical safety net medical services for children in Alameda County meets the 10X goal pathway of **Healthcare for All** in support of our shared vision of **Thriving and Resilient Population**.

Sincerely,

DocuSigned by:  


CB284AE84C50405...  
Colleen Chawla, Director  
Health Care Services Agency

**A RESOLUTION AUTHORIZING THE HEALTH CARE SERVICES AGENCY DIRECTOR TO ENTER INTO AN INTERGOVERNMENTAL TRANSFER PROGRAM CERTIFICATION WITH THE CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES**

RESOLUTION NUMBER R-2021 - 58

WHEREAS, the Health Care Services Agency for the County of Alameda ("Agency") seeks to make an intergovernmental transfer ("IGT") to the California Department of Health Care Services ("Department") pursuant to California Welfare and Institutions Code section 14166.12; and

WHEREAS, the Agency's IGT will be in the amount of \$2,000,000.00 to the Department; for SFY 2020-21; and

WHEREAS, the Agency will designate UCSF Benioff Children's Hospital Oakland ("Children's Hospital") as the hospital to receive supplemental Medi-Cal payments funded by this IGT; and

WHEREAS, Children's Hospital has certified and acknowledged that it is eligible to receive the supplemental Medi-Cal payments and satisfies the eligibility requirements of Welfare and Institutions Code section 14166.12; and

WHEREAS, the source of the funds to be submitted to the Department for the IGT is derived from allowable state or local funds as permitted under federal law; and

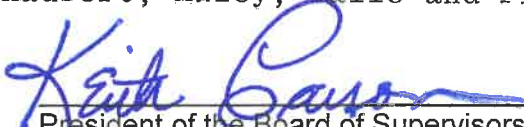
WHEREAS, the Department's IGT certification form (attached to this resolution as Exhibit A) for the IGT program requires that the signor be duly authorized to sign on behalf of the County:

NOW, THEREFORE, BE IT RESOLVED as follows:

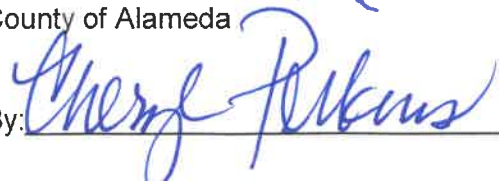
1. The findings stated in the recitals to this Resolution are restated in full and adopted by reference.
2. The Agency Director, or her designee, is authorized to sign, on behalf of the County of Alameda, the Department's Private Hospital Supplemental Fund Intergovernmental Transfer Program Certification Form SFY 2020-21.

Adopted by the Board of Supervisors of the County of Alameda, State of California, on February 9, 2021 by the following called vote:

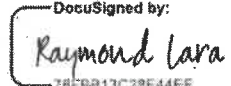
AYES: Supervisors Chan, Haubert, Miley, Valle and President Carson  
NOES: None  
EXCUSED: None

  
\_\_\_\_\_  
President of the Board of Supervisors  
County of Alameda, State of California

ATTEST:  
Clerk of the Board of Supervisors,  
County of Alameda

By:   
\_\_\_\_\_

APPROVED AS TO FORM:  
Donna Ziegler, County Counsel

By:   
\_\_\_\_\_  
Raymond Lara,  
Senior Deputy County Counsel

DEPARTMENT OF HEALTH CARE SERVICES  
SAFETY NET FINANCING DIVISION / MEDI-CAL SUPPLEMENTAL PAYMENTS UNIT  
PRIVATE HOSPITAL SUPPLEMENTAL FUND  
INTERGOVERNMENTAL TRANSFER PROGRAM  
CERTIFICATION FORM  
SFY 2020-21

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I, the undersigned, state the following:

As a public administrator, a public officer, or other public individual duly authorized to sign on behalf of Alameda County (Public Agency), I am authorized or designated to make this Certification, and declare that this Certification is true and correct. I understand that knowingly filing a false or fraudulent claim or making false statements in support of a claim may violate the Federal False Claims Act or other applicable statute and federal law, and be punishable thereunder.

This Certification is made under the penalty of perjury.

1. The Public Agency making this intergovernmental transfer (IGT) to the Department of Health Care Service (DHCS) qualifies as an eligible transferring entity under Welfare and Institutions Code section 14166.12, subdivisions (d)(4), (e), and (f). The private hospital(s), identified as the entity to receive supplemental Medi-Cal payments funded by this IGT pursuant to Welfare and Institutions Code section 14166.12, subdivision (o), satisfies the eligibility requirements in Welfare and Institutions Code section 14166.12, subdivision (s).
2. The Public Agency will maintain documentation supporting the allowable funding source of these IGTs. This documentation must include all fiscal records required for Medi-Cal field audits.
3. The source of funds submitted to DHCS for the IGT is derived from state or local bonds, tax revenue, or other funds as permitted for claiming federal financial participation (FFP) by Section 1903(w) of the Social Security Act and Subpart B of Part 433 of Title 42 of the Code of Federal Regulations. The source of funds excludes any impermissible source, such as, federal funds excluded from use as the non-federal share, impermissible taxes, and non-bona fide provider-related donations in cash or in kind. The Public Agency attests that these IGT funds are not earmarked for any purpose other than for Medi-Cal eligible services, and acknowledges that 100 percent of the IGT amount specified below is to be used by DHCS as the non-federal share funding of the supplemental payment made pursuant to Supplement 4 to Attachment 4.19-A of the State Plan, and Welfare and Institutions Code sections 14166.12 and 14166.125.
4. The Public Agency's IGTs have not previously been, nor will they be, claimed at any other time as claims to receive FFP under Medi-Cal or any other federal program.
5. The Public Agency acknowledges that the IGT is to be used by DHCS for filing of a claim with the federal government for federal funds and understands that misrepresentation of the IGT constitutes violation of federal and state law.

DEPARTMENT OF HEALTH CARE SERVICES  
SAFETY NET FINANCING DIVISION / MEDI-CAL SUPPLEMENTAL PAYMENTS UNIT  
PRIVATE HOSPITAL SUPPLEMENTAL FUND  
INTERGOVERNMENTAL TRANSFER PROGRAM  
CERTIFICATION FORM  
SFY 2020-21

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6. The Public Agency acknowledges that all records of funds transferred are subject to review and audit by DHCS.
7. The Public Agency understands that DHCS must deny payment under Welfare and Institutions Code sections 14166.12 and 14166.125 if it is determined that the IGT, the certification, or both is not adequately supported for purposes of claiming FFP.
8. The Public Agency's funds transferred represent a voluntary contribution to the non-federal share of Medi-Cal expenditures for purposes of Section 10201(c) of the Patient Protection and Affordable Care Act (Public Law No. 111-148). DHCS is in no way requiring the Public Agency to provide the IGT funding.
9. The Medi-Cal payments made pursuant to this IGT will be distributed to the private hospital(s) identified in this certification, and not the Public Agency that submitted the IGTs. In addition, the Private Hospital Supplemental Fund Medi-Cal payments funded by the IGT will be retained by the private hospital(s) for its use and not returned to any public agency or unit of government.
10. Upon notice from the federal government of a disallowance or deferral related to this IGT, the Public Agency responsible for this IGT shall be the entity responsible for the federal portion of that expenditure.

Signed: \_\_\_\_\_

Name: Rebecca Gebhart

Title: Finance Director

Name of Public Agency: Health Care Services Agency, Alameda County

Name of Private Hospital(s) Receiving Payment:

UCSF Benioff Children's Hospital Oakland

Amount of IGT for Payment: \$2,000,000

Date: \_\_\_\_\_