



BOARD OF DIRECTORS REGULAR MEETING

**Health District of Northern Larimer County
Virtual Meeting
See connection details at end of agenda**

**Monday, December 13, 2021
4:00 p.m.**



AGENDA

BOARD OF DIRECTORS REGULAR MEETING

December 13, 2021

4:00 pm

Virtual Meeting (See connection details at end of agenda)

- 4:00 p.m. Call to Order; Introductions; Approval of Agenda.....Michael Liggett**
- 4:03 p.m. PUBLIC COMMENT**
Note: If you choose to comment, please follow the “Guidelines for Public Comment” provided on the back of the agenda.
- 4:10 p.m. BOARD ACTION**
- Budget Approval
 - Changes since the Draft Budget Carol Plock
 - Board Discussion, Decision..... Michael Liggett
 - Approvals
 - Resolution 2021-17 Adopt Budget
 - Resolution 2021-18 Set Mill Levies
 - Resolution 2021-19 Appropriate Sums of Money
 - Resolution 2021-20 Revenues to Reserve Account
 - Certification of Tax Levies
 - Approval of Executive Director Job Description RevisionsMichael Liggett
 - Cancel February 8 Special Meeting?.....Carol Plock
- 4:30 p.m. PRESENTATIONS & DISCUSSION**
- The Status of COVID-19; VaccinationsJames Stewart
 - COVID-19 and the Health District, Current Status..... Carol Plock
- 4:50 p.m. OTHER UPDATES & REPORTS**
- Other Executive Director Updates Carol Plock
 - Liaison to PVHS/UCHealth North Report Celeste Kling
- 5:05 p.m. PUBLIC COMMENT (2nd opportunity) See Note above.**
- 5:10 p.m. CONSENT AGENDA**
- Approval of the October 28, 2021 and November 9, 2021 Regular Meeting Minutes
 - September 2021 Financials
- 5:15 p.m. ANNOUNCEMENTS**
- January 25, 2022, 4:00 pm – Board of Directors Regular Meeting
 - February 7, 2022 8:00 am – Board of Directors Special Meeting (ED Search)
 - February 8, 2022, 4:00 pm – Board of Directors Special Meeting (CANCEL?)
 - February 21, 2022, 8:00 am – Board of Directors Special Meeting (ED Search)
 - February 22, 2022, 4:00 pm – Board of Directors Regular Meeting
- 5:20 p.m. ADJOURN**

Join Zoom Meeting

Registration is required. Click this link to register:

<https://healthdistrict.zoom.us/meeting/register/tZUsd-igqD0qG9LpfuT07dOKaWjv8EDqqnV>

After registering, you will receive a confirmation email containing information about joining the meeting.

GUIDELINES FOR PUBLIC COMMENT

The Health District of Northern Larimer County Board welcomes and invites comments from the public. **Public comments or input are taken only during the time on the agenda listed as 'Public Comment.'** If you choose to make comments about any agenda item or about any other topic not on the agenda, please use the following guidelines.

- **Before you begin your comments please:** Identify yourself – spell your name – state your address. Tell us whether you are addressing an agenda item, or another topic.
- **Limit your comments to five (5) minutes.**

■ MISSION ■

The Mission of the Health District of Northern Larimer County is to enhance the health of our community.

■ VISION ■

- ❑ District residents will live long and well.
- ❑ Our community will excel in health assessment, access, promotion and policy development.
 - Our practice of **assessment** will enable individuals and organizations to make informed decisions regarding health practices.
 - All Health District residents will have timely **access** to basic health services.
 - Our community will embrace the **promotion** of responsible, healthy lifestyles, detection of treatable disease, and the **prevention** of injury, disability and early death.
 - Citizens and leaders will be engaged in the creation and implementation of ongoing **systems and health policy development** at local, state, and national levels.
 - Like-minded communities across the country will emulate our successes.

■ STRATEGY ■

The Health District will take a leadership role to:

- ❑ Provide exceptional health services that address unmet needs and opportunities in our community,
- ❑ Systematically assess the health of our community, noting areas of highest priority for improvement,
- ❑ Facilitate community-wide planning and implementation of comprehensive programs,
- ❑ Educate the community and individuals about health issues,
- ❑ Use Health District funds and resources to leverage other funds and resources for prioritized projects, and avoid unnecessary duplication of services,
- ❑ Promote health policy and system improvements at the local, state and national level,
- ❑ Continuously evaluate its programs and services for quality, value, and impact on the health of the community,
- ❑ Share our approaches, strategies, and results, and
- ❑ Oversee and maintain the agreements between Poudre Valley Health System, University of Colorado Health and the Health District on behalf of the community.

■ VALUES ■

- ❑ Dignity and respect for all people
- ❑ Emphasis on innovation, prevention and education
- ❑ Shared responsibility and focused collaborative action to improve health
- ❑ Information-driven and evidence-based decision making
- ❑ Fiscal responsibility/stewardship
- ❑ An informed community makes better decisions concerning health

**SIGNIFICANT REVISIONS TO PROPOSED
2022 BUDGET**

| | Proposed Budget 10/15/21 | Proposed Budget 12/13/21 Final | Difference + / (-) |
|-------------------------------------|--------------------------------|---|-----------------------|
| OPERATING | | | |
| Revenue | | | |
| ■ Property Tax Revenue (net of TIF) | \$ 8,705,396 | \$ 8,700,766 | \$ (4,630) |
| Expenditures | | | |
| ■ Employee Wages | \$ 7,591,109 | \$ 7,599,649 | \$ 8,540 |
| ■ Employee Benefits | \$ 2,089,171 | \$ 2,083,042 | \$ (6,129) |
| ■ Program expenses | \$ 154,522 | \$ 146,888 | \$ (7,634) |
| | | | <u>\$ (5,223)</u> |
| RESERVES | | | |
| ■ Reserve Special Projects | \$ 3,072,940 | \$ 3,078,726 | \$ 5,786 |

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Budget Documents

For:

January 1 – December 31, 2022

Draft Budget for Adoption by the Board of Directors

December 13, 2021

HealthDistrict

OF NORTHERN LARIMER COUNTY

Budget for 2022 BUDGET MESSAGE

The Health District of Northern Larimer County in 2022 will continue to provide health services that fulfill its mission "to enhance the health of our community." It will provide health services from seven sites in Fort Collins - four owned facilities and one leased Health District space, as well as shared space with two other facilities where Health District staff work collaboratively with staff from other organizations, including Salud Family Health Centers and the Family Medicine Center.

The Health District's goal for 2022 and beyond is to focus on health programs and services that will have the greatest impact on improving health. In 2020, the Health District Board of Directors reviewed multiple factors that contribute most heavily to ill health and premature death among district residents during its triennial community health assessment process. Utilizing information from the Health District's 2019 Community Health Survey, vital statistics, and other sources, the factors were examined from a variety of perspectives. For key factors, the Board reviewed the relative burden on health; trends over time; gaps between our community's health indicators and the national Healthy People 2020 goals and other benchmarks; the level of need and demand in the community; evaluations of current services; and the potential and availability of effective and cost-effective interventions.

As a result of the 2020 review, the Health District set several priorities based on their potential to have significant impact on the health of the community. For 2022, the key focus areas include goals to: 1) Improve the ability of the community to effectively address mental illness and substance use disorders, including providing certain behavioral health services, connecting community members to other services, and organizing community partners to make long term improvements in MH/SUD services and approaches; 2) Maintain and boost the number of people who have health insurance, and help community members understand their health insurance options and what might work best for them; and 3) Provide dental care for those with low incomes. Other services will help people quit tobacco; identify and control risky blood pressure and cholesterol levels, and help people understand how to complete advance care directives in order that health care providers will understand their preferences at the end of life.

Given the continued significant impact of the COVID-19 pandemic on the community, the Health District will continue to provide time-limited COVID-related services as needed, including in areas such as providing COVID vaccinations; assisting the Larimer County Department of Health with contact tracing and case investigation; providing nurse health care coordination for people experiencing homelessness who are in need of isolation, recovery, and/or quarantine (IRQ) due to COVID; and providing enhanced Connections to address the increased need for assessments and connections to appropriate mental health and substance use services.

The Health District will also continue its focus on enhancing Equity, Diversity, and Inclusion (EDI) both internally and in our community. EDI work will include continued education and awareness, improving relationships and communications, updating policies and procedures, program adjustments, recruitment and retention, assessment of internal and community needs, and encouraging/assisting others to enhance the health of our community by giving everyone the opportunity to achieve their highest level of health.

In addition to the approaches listed above, the specific services to be provided by the Health District in 2022 will include the following:

Access to Health Care

The Health District will continue to address equity in part by promoting access to health care for those with low incomes. In particular, the Health District will directly provide the following services either solely or in partnership with other organizations and providers: family dental services; prescription assistance; psychiatric medication evaluations and consults; mental health and substance use assessments and treatment (which includes services at two primary care "safety net clinics" that serve residents with public insurance or who cannot afford the full cost of health care, as well as at Connections and CAYAC: Child, Adolescent, Young Adult Connections); assistance for those who suffer from co-occurring mental illness and substance use disorders; and a program that connects consumers to therapists and psychiatrists offering mental health care at reduced rates. Each program offers discounted care or sliding fee scales to help make health care more affordable.

For residents of all incomes in need of finding mental health and/or substance use services, or of understanding mental illness or substance use disorders, the Mental Health & Substance Use Connections program will offer assistance and enhanced information and referrals by phone, Internet or in person. Connections provides services for adults, and also focuses on youth through the CAYAC program, which places additional focus on early identification and intervention for children and youth ages 0-24 who are potentially impacted by mental illness or substance use disorders, working closely with their families, schools, and primary care providers to connect them to appropriate assessments and, when indicated, treatment. CAYAC assessment services include child and adolescent psychiatry and psychological testing, when indicated, which assists in determination of referrals to the most appropriate interventions.

For residents of all incomes who are in need of affordable health insurance, the Health District (through its Larimer Health Connect program) will offer health coverage assistance services to help residents understand their options for obtaining and keeping health insurance, and to help them apply for coverage and assistance when appropriate.

For those who have disabilities so severe that they must receive their dental care under general anesthesia (and who qualify for a relevant state Medicaid waiver), the Health District and a partnership of a variety of public and private partners will continue to offer limited care locally.

The Health District will continue to organize and participate in community-based planning aimed at restructuring local mental health and substance use disorder services, and to raise community awareness and action around mental illness and substance use disorders. In 2022, the Health District will work in partnership with Larimer County Behavioral Health Services and Summitstone Health Partners, along with a multitude of other partners (both organizations and consumers), to update and expand the community assessment of mental health and substance use service needs originally completed in 2016. This work is expected to lead to a new "Solutions to Behavioral Health Services Gaps" community plan. Work will also continue on helping our community advance in utilizing the most effective interventions for those with substance use disorders through training for behavioral health providers and criminal justice and human services professionals, as well as community awareness development.

Health Promotion

The Health District will provide the following general preventive care and treatment services: evidence-based services to help people quit using tobacco; and community screenings for high blood pressure, cholesterol, and glucose (as an indicator of diabetes) – focusing on populations at higher risk,

followed by intensive nurse counseling for those whose results indicate potential high health hazard. As needed, staff will assist in providing COVID-related services such as COVID-19 vaccinations and contact tracing and case investigation. In order to help maintain health by preventing the spread of COVID-19, the Health District anticipates using primarily grant funding to provide nurse health care coordinators and a shelter to assist people experiencing homelessness who need to be in isolation/recovery from COVID, who need to quarantine after an exposure, or, if a community solution emerges, are at high risk of complications from COVID and need a temporary shelter that provides adequate distancing.

Assessment

As noted above, the Health District is committed to making informed decisions based on the most current and relevant information and will continue to gather and share such information with the community. The Health District will perform its tenth triennial community health needs assessment in 2022, which includes a random-sample survey, community discussion groups and/or panels, and collection of a variety of data.

System-wide Improvements

The Health District continues to support system-wide changes that will significantly enhance the ability of local consumers and providers to improve the community's health status. In collaboration with partner agencies, it will work to maximize the impact of the state's Medicaid Accountable Care approach on the health of community residents and the delivery of cost-effective services, particularly in the midst of rapid change due to COVID-19 impacts. The Health District is also involved in monitoring changes (or potential changes) in health and health care brought about by policy changes at the national and state levels, and will continue to assist the community in adapting to changes. The Health District works with multiple partners in disaster preparedness planning and response.

Other

In 2022, the Health District plans a significant renovation of its building at 425 W. Mulberry, Fort Collins, which currently houses the Connections and CAYAC programs. The building will house Larimer Health Connect in the future.

In addition to providing health services, the Health District continues to have responsibility in two other areas: to fulfill its legal obligations as a Special District and as the owner of Poudre Valley Health System's (PVHS) portion of the University of Colorado Health (UCH) System's real estate and other assets. Revenue from lease payments from PVHS/UCH (the operators of the hospital and related health services) covers administrative expenses, and helps to provide local health services.

Revenues for providing health services are generated through property and special ownership taxes, fees, third party payers, lease payments, interest, contracts, and grants.

Budget

The attached Budget for the Health District of Northern Larimer County includes a three-year and one-year budget listing all proposed expenditures for administration, operations, maintenance, and capital projects; anticipated revenues for the budget year; and estimated beginning and ending fund balances. Attached are explanatory schedules, which give more detail on both revenues and expenditures.

The financial statements and records of the Health District of Northern Larimer County are prepared using the accrual basis of accounting. This budget has been prepared using the modified accrual basis of accounting.

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HEALTH DISTRICT OF NORTHERN LARIMER COUNTY

Budget

For:

January 1 – December 31, 2022

Health District of Northern Larimer County
2022 Budget

| | |
|--|----------------------|
| Revenues: | |
| Property & Specific Ownership Taxes | \$ 9,325,766 |
| Lease Revenue | 1,219,076 |
| Investment Income | 65,000 |
| Operating Revenue (fee income) | 1,115,294 |
| Grant and Partnership Revenue | 1,274,586 |
| Miscellaneous Income | 23,004 |
| Total Revenues | <u>\$ 13,022,725</u> |
| Beginning Balance | \$ 6,929,112 |
| Total Available Resources | <u>\$ 19,951,838</u> |
| Expenditures: | |
| Operating Expenditures | |
| Board Expenditures | \$ 47,118 |
| Election Expenditures | 32,000 |
| Administration | 952,280 |
| Program Operations: | |
| <i>Mental Health/Substance Issues Services</i> | 4,371,720 |
| - Connections: Mental Health/Substance Issues Services | 2,339,007 |
| - Integrated Care (MHSA/PC) | 1,275,292 |
| - Community Impact | \$ 757,422 |
| Dental Services | 3,894,293 |
| Health Care Access | 1,312,744 |
| Health Promotion | 854,448 |
| Assessment/Research/Evaluation | 269,530 |
| Resource Development | 195,262 |
| Mulberry Office | 178,020 |
| Grants, Partnerships and Special Projects | 4,385,168 |
| Total Operating Expenditures | <u>\$ 16,492,583</u> |
| Non-Operating Expenses | |
| Capital Expenditures | 1,290,987 |
| Contingency | 422,098 |
| Total Non-Operating Expenditures | <u>\$ 1,713,085</u> |
| Total Expenditures | <u>18,205,668</u> |
| Reserves | |
| Emergency & General (State Required) | 546,170 |
| Emergency & General (Board) | 1,000,000 |
| Capital Replacement (flexible) | 200,000 |
| Total Reserves | <u>\$ 1,746,170</u> |
| Total Expenditures & Reserves | <u>19,951,838</u> |

Health District of Northern Larimer County
Three Year Budget Summary 2022

| | Prior Year 2020 Actual * | Current Year 2021 Budget | 2022 Proposed Budget |
|--|-----------------------------|-----------------------------|-------------------------|
| Revenues: | | | |
| Property & Specific Ownership Taxes | \$ 7,827,327 | \$ 8,924,968 | \$ 9,325,766 |
| Lease Revenue | 1,083,135 | 1,183,569 | 1,219,076 |
| Investment Income | 164,678 | 130,000 | 65,000 |
| Operating Revenue (fee income) | 1,133,519 | 1,048,747 | 1,115,294 |
| Grant and Partnership Revenue | 947,040 | 1,428,883 | 1,274,586 |
| Miscellaneous Income | 35,004 | 20,225 | 23,004 |
| Total Revenues | \$ 11,190,703 | \$ 12,736,392 | \$ 13,022,725 |
| Beginning Balance | \$ 6,343,442 | \$ 8,200,429 | \$ 6,929,112 |
| Total Available Resources | \$ 17,534,145 | \$ 20,936,821 | \$ 19,951,838 |
| Expenditures: | | | |
| Operating Expenditures | | | |
| Board Expenditures | \$ 29,515 | \$ 46,523 | \$ 47,118 |
| Election Expenditures | 297 | 29,000 | 32,000 |
| Administration | 781,674 | 931,470 | 952,280 |
| Program Operations: | | | |
| <i>Mental Health/Substance Issues Services</i> | | 4,055,483 | 4,371,720 |
| - Connections: Mental Health/Substance Issues Services | 1,351,460 | 2,122,111 | 2,339,007 |
| - Integrated Care (MHSA/PC) | 995,836 | 1,219,791 | 1,275,292 |
| - Community Impact | 599,305 | 713,580 | 757,422 |
| Dental Services | 3,491,207 | 3,865,495 | 3,894,293 |
| Health Care Access | 985,568 | 1,198,739 | 1,312,744 |
| Health Promotion | 739,561 | 865,158 | 854,448 |
| Assessment/Research/Evaluation | 198,061 | 265,194 | 269,530 |
| HealthInfoSource | 73,455 | - | - |
| Resource Development | 153,425 | 193,262 | 195,262 |
| Mulberry Office | | 191,529 | 178,020 |
| Grants, Partnerships and Special Projects | 1,596,562 | 4,137,418 | 4,385,168 |
| Total Operating Expenditures | \$ 10,995,926 | \$ 15,779,271 | \$ 16,492,583 |
| Non-Operating Expenditures | | | |
| Capital | \$ 32,030 | \$ 3,072,275 | \$ 1,290,987 |
| Contingency | - | 310,416 | 422,098 |
| Total Non-Operating Expenditures | \$ 32,030 | \$ 3,382,691 | \$ 1,713,085 |
| Total Expenditures | \$ 11,027,956 | \$ 19,161,962 | \$ 18,205,668 |
| Reserves | | | |
| Emergency & General (State Required) | \$ 536,180 | \$ 574,859 | \$ 546,170 |
| Emergency & General (Board) | 1,150,000 | 1,000,000 | 1,000,000 |
| Capital Replacement (flexible) | 200,000 | 200,000 | 200,000 |
| Total Reserves | \$ 1,886,180 | \$ 1,774,859 | \$ 1,746,170 |
| Total Expenditures & Reserves | \$ 12,914,136 | \$ 20,936,821 | \$ 19,951,838 |

*Based on year-end audited financial statements

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HEALTH DISTRICT OF NORTHERN LARIMER COUNTY

Explanatory Schedules

For:

January 1 – December 31, 2022

**Health District of Northern Larimer County
Annual Operating and Reserve Expenditure Summary
2022**

**Summary of Revenues Used for Operating Expenditures
(Non-GAAP)**

Sources of Revenue

| | | |
|-------------------------------------|----|-------------------|
| Property & Specific Ownership Taxes | \$ | 9,325,766 |
| Lease Revenue | | 1,219,076 |
| Fee for Service Income | | 1,115,294 |
| Grant Revenue | | 1,246,442 |
| Anticipated grant revenue | \$ | 746,442 |
| Potential grant revenue | | 500,000 |
| | | |
| Partnership Revenue | | 28,144 |
| Investment Income | | 65,000 |
| Miscellaneous Income | | 23,004 |
| | | |
| Total Revenues | \$ | <u>13,022,725</u> |

A Operating Expenditures

| | | |
|---------------------------------|----|-------------------|
| Board Expenditures | \$ | 47,118 |
| Election Expenditures | | 32,000 |
| Administration | | 929,901 |
| Program Operations | | 10,679,121 |
| Special Projects - Operations | | 60,000 |
| Special Projects - Partnerships | | 28,144 |
| Grant Expenditures | | 1,246,442 |
| | | |
| Total Operating Expenditures | \$ | <u>13,022,725</u> |

| | | | |
|----------|---|----|-------------------|
| B | Expenditures From Reserves | \$ | 3,469,858 |
| | Special Projects | \$ | 3,050,582 |
| | Operations | \$ | 419,276 |
| | | | |
| C | Total Expenditures (A + B) | \$ | <u>16,492,583</u> |
| | | | |
| D | Capital Expenditures (Reserve) | | 1,290,987 |
| | | | |
| E | Total Reserve Expenditures (B + D) | \$ | <u>4,760,845</u> |

Health District of Northern Larimer County

2022 Capital Expenditures

| | | |
|---------------------------------------|-------|---------------------|
| 120 Bldg 1st Floor Reconfiguration | \$ | 30,000 |
| Mulberry Office Building Improvements | | |
| Elevator | | 340,000 |
| Restroom (ADA compliance) | | 160,000 |
| Office Space Reconfiguration | | 524,500 |
| New rooftop HVAC Units | | 66,000 |
| Mulberry Office Exterior signs | | 18,000 |
| 120/202 building signs | | 28,000 |
| Equipment/Software | | 74,487 |
| Contingency | | 50,000 |
| | | |
| | TOTAL | <u>\$ 1,290,987</u> |

Non-Capital Improvements from Reserves

| | | |
|----------------------------|-------|-------------------|
| Technology | \$ | 132,840 |
| Office Furniture/Equipment | | 41,346 |
| Building Improvements | | 108,100 |
| Software | | 116,990 |
| Contingency | | 20,000 |
| | | |
| | TOTAL | <u>\$ 419,276</u> |

**Health District of Northern Larimer County
2022 Program Revenues & Expenditures**

| | 50 | 51 | 53 | 56 | 58 | 59 | 61 | 62 | 65 | 72 | 90 | | 2021 | % | \$ | |
|----------------------------------|-------------------|--------------------|-----------------------|---------------------|---------------------|-------------------|---------------------|-------------------|-----------------------|-------------------|--------------------|-------------|----------------------|-----------------------|--------------|-------------------|
| | Admin. | Board/ Election | Connections: MH/SI | Dental | MH/SA/PC | Health Promo | Community Impact | Prog. Eval. | Health Care Access | Res Dev | Mulberry Office | | Total | Operational Budget | Change | Change |
| Revenues: | | | | | | | | | | | | | | | | |
| Fee for Service | \$ - | \$ - | \$ 37,000 | \$ 129,271 | \$ - | \$ 750 | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ 167,021 | \$ 167,081 | -0.04% | (60) |
| 3rd Party Payments | - | - | - | 598,661 | 231,419 | 1,720 | - | - | - | - | 116,473 | - | \$ 948,273 | \$ 881,666 | 7.55% | 66,607 |
| Sponsorships/Fundraising | - | - | - | - | - | - | - | - | - | - | - | - | \$ - | \$ - | - | - |
| Misc Income | 10,500 | - | - | 12,204 | - | 300 | - | - | - | - | - | - | \$ 23,004 | \$ 20,225 | 13.74% | 2,779 |
| TOTAL REVENUE | \$ 10,500 | \$ - | \$ 37,000 | \$ 740,136 | \$ 231,419 | \$ 2,770 | \$ - | \$ - | \$ - | \$ - | \$ 116,473 | \$ - | \$ 1,138,298 | \$ 1,068,972 | 6.49% | \$ 69,326 |
| Expenditures: | | | | | | | | | | | | | | | | |
| Salaries & Wages | \$ 467,161 | \$ 8,000 | \$ 1,546,314 | \$ 2,439,536 | \$ 904,650 | \$ 531,935 | \$ 516,472 | \$ 186,354 | \$ 838,266 | \$ 133,142 | \$ 27,818 | \$ - | \$ 7,599,649 | \$ 7,251,322 | 4.80% | 348,327 |
| Benefits & Taxes | 119,418 | 612 | 415,866 | 694,881 | 229,223 | 151,322 | 142,601 | 47,374 | 238,577 | 36,293 | 6,876 | \$ - | \$ 2,083,042 | \$ 2,018,514 | 3.20% | 64,528 |
| Recruitment/Infection Control | 7,500 | - | 8,000 | 4,000 | 6,000 | 7,523 | 4,000 | 2,000 | 4,500 | 1,550 | - | \$ - | \$ 45,073 | \$ 36,479 | 23.56% | 8,594 |
| Temporary Help | - | 5,000 | - | 4,961 | - | - | - | - | - | - | - | \$ - | \$ 9,961 | \$ 15,107 | -34.06% | (5,146) |
| Interns & Residents | - | - | 4,500 | - | 1,000 | - | 4,500 | 1,500 | - | - | - | \$ - | \$ 11,500 | \$ 12,000 | -4.17% | (500) |
| Consultants & Contracted Dr.s | 59,858 | 4,000 | 45,825 | 17,974 | 4,980 | 5,922 | 2,722 | 826 | 16,691 | 684 | - | \$ - | \$ 159,482 | \$ 148,285 | 7.55% | 11,197 |
| Mileage | 1,200 | 100 | 1,700 | 800 | 1,000 | 100 | 2,500 | 120 | 5,900 | 200 | - | \$ - | \$ 13,620 | \$ 14,175 | -3.92% | (555) |
| Staff Training | 7,688 | - | 12,370 | 17,436 | 5,074 | 3,792 | 3,471 | 1,053 | 6,282 | 872 | - | \$ - | \$ 58,038 | \$ 49,351 | 17.60% | 8,687 |
| Conferences/Retreats/Fundraising | 19,409 | 13,674 | 7,076 | 10,555 | 11,977 | 9,750 | 7,024 | 4,108 | 8,694 | 4,716 | - | \$ - | \$ 96,984 | \$ 108,481 | -10.60% | (11,497) |
| Membership/Dues/Licenses | 10,630 | 1,025 | 13,175 | 11,728 | 7,575 | 927 | 1,560 | 1,580 | 1,735 | 295 | - | \$ - | \$ 50,230 | \$ 55,434 | -9.39% | (5,204) |
| Publications/Subscriptions | 2,358 | 300 | 11,182 | 1,550 | 600 | 968 | 1,150 | 3,240 | 3,631 | 1,000 | - | \$ - | \$ 25,979 | \$ 26,611 | -2.37% | (632) |
| Meetings | 1,500 | 4,800 | 15,000 | 1,000 | 600 | 1,250 | 2,500 | 300 | 2,950 | 280 | - | \$ - | \$ 30,180 | \$ 28,550 | 5.71% | 1,630 |
| Wellness/Recognition | 1,155 | - | 4,231 | 7,490 | 2,180 | 1,629 | 1,491 | 452 | 2,570 | 375 | - | \$ - | \$ 21,573 | \$ 20,455 | 5.46% | 1,118 |
| Volunteer Recognition | 53 | 600 | 1,696 | 2,046 | 101 | 225 | 369 | 21 | 494 | 17 | - | \$ - | \$ 5,622 | \$ 5,550 | 1.30% | 72 |
| Rent & Lease Payments | 747 | - | 2,738 | 4,847 | 1,411 | 1,054 | 965 | 293 | 1,663 | 242 | - | \$ - | \$ 13,959 | \$ 16,500 | -15.40% | (2,541) |
| Utilities | 3,567 | - | 1,625 | 26,785 | 6,260 | 5,461 | 4,948 | 1,171 | 3,000 | 827 | 8,231 | \$ - | \$ 61,875 | \$ 85,930 | -27.99% | (24,055) |
| Custodial Services | 4,289 | - | - | 32,208 | 7,527 | 6,567 | 5,950 | 1,408 | 8,400 | 994 | 22,000 | \$ - | \$ 89,343 | \$ 76,736 | 16.43% | 12,607 |
| Leased Space Operational Costs | - | - | - | - | - | - | - | - | - | - | - | \$ - | \$ - | \$ - | - | - |
| Insurance | 3,118 | 7,957 | 14,690 | 25,230 | 10,158 | 4,966 | 3,744 | 2,089 | 6,823 | 916 | 4,610 | \$ - | \$ 84,299 | \$ 83,966 | 0.40% | 333 |
| Office Supplies | 2,500 | 700 | 7,800 | 5,842 | 1,500 | 1,500 | 1,500 | 300 | 2,600 | 320 | - | \$ - | \$ 24,562 | \$ 24,690 | -0.52% | (128) |
| Office Equipment | - | - | - | - | - | - | - | - | - | - | - | \$ - | \$ - | \$ 250 | -100.00% | (250) |
| Office Furniture | - | - | - | - | - | - | - | - | - | - | - | \$ - | \$ - | \$ - | - | - |
| Computer Equipment | - | - | - | - | - | - | - | - | - | - | - | \$ - | \$ - | \$ - | - | - |
| Computer Software | - | - | 15,900 | - | - | - | - | - | - | - | - | \$ - | \$ 15,900 | \$ 16,912 | -5.98% | (1,012) |
| Telephone, E-mail & Internet | 4,141 | - | 16,950 | 26,701 | 6,119 | 6,041 | 5,151 | 1,148 | 11,967 | 814 | - | \$ - | \$ 79,032 | \$ 71,462 | 10.59% | 7,571 |
| Postage | 1,300 | 250 | 1,250 | 1,000 | 100 | 2,816 | 300 | 100 | 1,600 | 750 | - | \$ - | \$ 9,466 | \$ 10,820 | -12.51% | (1,354) |
| Printing/Copying/Binding | 1,200 | 100 | 4,000 | 500 | 615 | 3,174 | 1,000 | 200 | 6,275 | 300 | - | \$ - | \$ 17,364 | \$ 19,121 | -9.19% | (1,757) |
| Community Education | 8,061 | - | 79,459 | 59,450 | 11,025 | 32,492 | 7,857 | 3,080 | 43,367 | 1,722 | - | \$ - | \$ 246,512 | \$ 204,201 | 20.72% | 42,311 |
| Repair & Maintenance | 5,231 | - | 19,165 | 33,926 | 9,874 | 8,379 | 6,753 | 2,049 | 13,559 | 1,696 | 23,383 | \$ - | \$ 124,016 | \$ 136,254 | -8.98% | (12,238) |
| Building Upgrades | - | - | - | - | - | - | - | - | - | - | 60,000 | \$ - | \$ 60,000 | \$ 98,500 | -39.09% | - |
| Medical Supplies | - | - | - | 127,000 | - | 13,855 | - | - | - | - | - | \$ - | \$ 140,855 | \$ 120,991 | 16.42% | 19,864 |
| Medical Equipment | - | - | - | - | - | 240 | - | - | - | - | - | \$ - | \$ 240 | \$ 240 | 0.00% | - |
| Prescriptions | - | - | - | - | 2,000 | 19,000 | - | - | 28,904 | - | - | \$ - | \$ 49,904 | \$ 52,000 | -4.03% | (2,096) |
| Lab & X-ray Fees | - | - | - | 133,500 | - | - | - | - | - | - | - | \$ - | \$ 133,500 | \$ 119,000 | 12.18% | 14,500 |
| Client Assistance | - | - | 4,500 | 12,500 | 1,500 | 1,890 | - | - | 4,500 | - | - | \$ - | \$ 24,890 | \$ 23,220 | 7.19% | 1,670 |
| Follow-up Care | - | - | - | 35,000 | - | - | - | - | - | - | - | \$ - | \$ 35,000 | \$ 35,000 | 0.00% | - |
| Bad Debt | - | - | 2,000 | 9,049 | - | 100 | - | - | - | - | - | \$ - | \$ 11,149 | \$ 13,256 | -15.89% | (2,107) |
| Fees & Exp. | 11,300 | - | - | 1,650 | - | - | - | - | - | - | - | \$ - | \$ 12,950 | \$ 12,950 | 0.00% | - |
| Treasurer Fees | 186,515 | - | - | - | - | - | - | - | - | - | 23,874 | \$ - | \$ 210,389 | \$ 206,196 | 2.03% | 4,193 |
| Reserve Expenditures ** | 22,379 | - | 81,996 | 145,148 | 42,243 | 31,570 | 28,893 | 8,765 | 49,796 | 7,258 | 1,229 | \$ - | \$ 419,276 | \$ 394,344 | 6.32% | 24,932 |
| Election Expenses | - | 32,000 | - | - | - | - | - | - | - | - | - | \$ - | \$ 32,000 | \$ 29,000 | 10.34% | 3,000 |
| TOTAL EXPENDITURES | \$ 952,280 | \$ 79,118 | \$ 2,339,007 | \$ 3,894,293 | \$ 1,275,292 | \$ 854,448 | \$ 757,422 | \$ 269,530 | \$ 1,312,744 | \$ 195,262 | \$ 178,020 | \$ - | \$ 12,107,415 | \$ 11,641,853 | 4.00% | \$ 504,063 |
| Net Expenditure | \$ 941,780 | \$ 79,118 | \$ 2,302,007 | \$ 3,154,157 | \$ 1,043,873 | \$ 851,678 | \$ 757,422 | \$ 269,530 | \$ 1,312,744 | \$ 195,262 | \$ 61,547 | \$ - | \$ 10,969,117 | \$ 10,572,881 | 3.75% | \$ 434,737 |

**To be spent from reserves

FTE by Program - 2022

| Program/Department | Authorized Regular Positions | | |
|--|------------------------------|----------------|----------------|
| | 2021 Authorized | 2022 Budget | 2022 Change |
| Administration | 5.479 | 5.464 | (0.015) |
| Mental Health Connections | 18.920 | 20.020 | 1.100 |
| Dental | 36.374 | 35.439 | (0.935) |
| Mental Health/Substance Abuse/Primary Care | 10.064 | 10.314 | 0.250 |
| Health Promotion | 8.018 | 7.708 | (0.310) |
| Community Impact | 6.705 | 7.055 | 0.349 |
| Program Evaluation | 2.130 | 2.140 | 0.010 |
| Health Care Access/Policy | 11.458 | 12.158 | 0.700 |
| Resource Development | 1.792 | 1.772 | (0.020) |
| Mulberry Offices | - | 0.300 | |
| | 100.940 | 102.370 | 1.129 |

**Health District of Northern Larimer County
2022**

Special Projects - Reserves

| | HD | Partnerships | Total |
|--|---------------------|---------------------|---------------------|
| MHSU Connections | \$ 40,200 | | \$ 40,200 |
| Psychiatric Services | \$ 90,022 | | \$ 90,022 |
| BHP Adult Connections (.8 FTE; 2 FTE in ops) | \$ 67,927 | | \$ 67,927 |
| Connections Program Assistant - Adult (.5 FTE; .5 FTE in ops) | \$ 32,750 | | \$ 32,750 |
| BHP (Connections, Bilingual) (1.0 FTE) | \$ 84,046 | | \$ 84,046 |
| Adult Team Care Coordinator (.75 FTE) | \$ 55,360 | | \$ 55,360 |
| Psychologist (CAYAC) (.65 FTE or 1.0 FTE post grad) | \$ 78,350 | | \$ 78,350 |
| Marketing Search Engine Optimization | \$ 65,000 | | \$ 65,000 |
| Web improvements | \$ 27,500 | | \$ 27,500 |
| Evaluation Consulting | \$ 25,000 | | \$ 25,000 |
| MHSU Expansion of Critical Behavioral Health Services | \$ 125,400 | | \$ 125,400 |
| MHSU SUD Transformation Project (Providers) | \$ 32,000 | | \$ 32,000 |
| Community Mental Health/SU (ED Discretionary) | \$ 65,000 | | \$ 65,000 |
| Community Mental Health/SU Alliance - HD | \$ 65,000 | | \$ 65,000 |
| Community Mental Health/SU Alliance - Partners | \$ - | \$ 28,144 | \$ 28,144 |
| SUD Public Awareness Campaign | \$ 51,000 | | \$ 51,000 |
| Health Clinic for PEH | \$ 15,000 | | \$ 15,000 |
| MHSU Pay for Success/Frequent Utilizer Approach | \$ 5,000 | | \$ 5,000 |
| MHSU Crisis Intervention Training, Law Enforcement | \$ 3,000 | | \$ 3,000 |
| Pain Management Project | \$ 5,000 | | \$ 5,000 |
| Oral Surgeon/Endo | \$ 15,000 | | \$ 15,000 |
| OAP Dental Client Assistance (Restricted) | \$ 16,498 | | \$ 16,498 |
| Dentist loan repayment | \$ 10,000 | | \$ 10,000 |
| Meaningful Use (future Dental MU expenses) | \$ 97,500 | | \$ 97,500 |
| Targeted Program Outreach | \$ 60,000 | | \$ 60,000 |
| Larimer Health Connect | \$ 199,666 | | \$ 199,666 |
| Health Equity Initiative | \$ 20,000 | | \$ 20,000 |
| Health Equity Implementation Manager (.75 FTE; .25 FTE in ops) | \$ 69,763 | | \$ 69,763 |
| Mental Health Special Legal Consultation | \$ 3,500 | | \$ 3,500 |
| IC Behavioral Health Provider - FMC (.3 FTE; .7 FTE in ops) | \$ 25,350 | | \$ 25,350 |
| CDDT/ACT Facility Repairs/Contingency | \$ 10,000 | | \$ 10,000 |
| AD Project Manager/Consultant | \$ 31,800 | | \$ 31,800 |
| Connect for Health Colorado Indirects | \$ 12,950 | | \$ 12,950 |
| Advance Care Planning Project | \$ 37,153 | | \$ 37,153 |
| Policy Specialist (.5 FTE - 5 months) | \$ 14,500 | | \$ 14,500 |
| Accountant (.4 FTE; .6 FTE in ops) | \$ 32,500 | | \$ 32,500 |
| HPSA | \$ 7,000 | | \$ 7,000 |
| Microsoft Dynamics Consultant - HR Module | \$ 4,000 | | \$ 4,000 |
| HR Consultants (e.g. HR audits/investigations/Sharepoint) | \$ 16,000 | | \$ 16,000 |
| Contracts/Compliance Consultant | \$ 20,000 | | \$ 20,000 |
| Community Health Needs Assessment | \$ 166,693 | | \$ 166,693 |
| Transition Management | \$ 136,634 | | \$ 136,634 |
| Assisant to ED for Special Projects | \$ 133,966 | | \$ 133,966 |
| Specialized program training/health care reform training | \$ 106,521 | | \$ 106,521 |
| Health Information Sharing & Health Reform Changes (ED) | \$ 10,000 | | \$ 10,000 |
| Implementation of Community/New Projects Process & Plans (ED) | \$ 25,000 | | \$ 25,000 |
| Unforeseen Community Health Needs | \$ 200,000 | | \$ 200,000 |
| RIHEL - Leadership Institute (2 attendees) | \$ 12,000 | | \$ 12,000 |
| Emergency Preparedness | \$ 10,000 | | \$ 10,000 |
| Intermediate Medical Leave | \$ 25,000 | | \$ 25,000 |
| New intensive staff recruitment and relocation costs | \$ 250,000 | | \$ 250,000 |
| Wellness Program | \$ 6,000 | | \$ 6,000 |
| Public Awareness & Name Changes | \$ 65,000 | | \$ 65,000 |
| Health District websites redevelopment | \$ 45,000 | | \$ 45,000 |
| Communication Specialist (.25) | \$ 15,968 | | \$ 15,968 |
| New Community Health Data Project | \$ 30,000 | | \$ 30,000 |
| Evaluation Services for Grants/Projects | \$ 27,065 | | \$ 27,065 |
| COVID Related Needs | \$ 150,000 | | \$ 150,000 |
| Total | \$ 3,050,582 | \$ 28,144 | \$ 3,078,726 |

Grants

| | Grants | Total |
|---|---------------------|---------------------|
| DC Fundraising (OOD) | \$ 4,968 | \$ 4,968 |
| Dental Client Assistance - Children | \$ 7,692 | \$ 7,692 |
| Dental Client Assistance - Adults | \$ 27,169 | \$ 27,169 |
| Project Smile | \$ 474 | \$ 474 |
| Lion's Club Diabetes Program | \$ 3,249 | \$ 3,249 |
| Connect for Health FY 22 | \$ 98,100 | \$ 98,100 |
| Connect for Health (new) FY 23 | \$ 112,041 | \$ 112,041 |
| ACP Partner/Fundraising | \$ 4,679 | \$ 4,679 |
| RWJF Culture of Health Leaders - Health Equity YR 3 | \$ 20,000 | \$ 20,000 |
| Denver Foundation MAT YR 3 | \$ 117,832 | \$ 117,832 |
| Delta Dental Specialty Care YR 3 | \$ 28,282 | \$ 28,282 |
| Expanding Connections/CAYAC Svcs Countywide (1A) | \$ 75,555 | \$ 75,555 |
| United US | \$ 4,000 | \$ 4,000 |
| United CO | \$ 5,000 | \$ 5,000 |
| Quit Tobacco - Out of District | \$ 1,600 | \$ 1,600 |
| Larimer County BHS Solutions 2.0 | \$ 150,000 | \$ 150,000 |
| ARPA Funding | \$ 60,000 | \$ 60,000 |
| Potential Grants | \$ 500,000 | \$ 500,000 |
| Total | \$ 1,246,442 | \$ 1,246,442 |

Special Projects - Operations

| | Health District | Grants | Partnerships | Total |
|------------------------------|------------------------|---------------|---------------------|------------------|
| Special Projects Contingency | \$ 60,000 | | | \$ 60,000 |
| Operational Contingency | \$ - | | | \$ - |
| Total | \$ 60,000 | \$ - | | \$ 60,000 |

***Bold** indicates expenditures requiring Board approval of special projects proposals



Resolution 2021-17

RESOLUTION TO ADOPT BUDGET

A RESOLUTION SUMMARIZING EXPENDITURES AND REVENUES FOR EACH FUND AND ADOPTING A BUDGET FOR THE HEALTH DISTRICT OF NORTHERN LARIMER COUNTY, COLORADO, FOR THE CALENDAR YEAR BEGINNING ON THE FIRST DAY OF JANUARY, 2022 AND ENDING ON THE LAST DAY OF DECEMBER, 2022.

WHEREAS, the Board of Directors of the Health District of Northern Larimer County has appointed Carol Plock, Executive Director, to prepare and submit a proposed budget to said governing body at the proper time; and

WHEREAS, Carol Plock, Executive Director has submitted a proposed budget to this governing body on October 15, 2021 for its consideration; and

WHEREAS, upon due and proper notice, published or posted in accordance with the law, said proposed budget was open for inspection by the public at a designated place, a public hearing was held on November 9, 2021, and interested taxpayers were given the opportunity to file or register any objection to said proposed budget, and,

WHEREAS, whatever increases may have been made in expenditures, like increases were added to the revenues so that the budget remains in balance, as required by law.

NOW, THEREFORE, BE IT RESOLVED BY THE Board of Directors of the Health District of Northern Larimer County, Fort Collins, Colorado:

Section 1. That the budget as submitted, amended, and summarized by fund, hereby is approved and adopted as the budget of the Health District of Northern Larimer County for the year stated above.

Section 2. That the budget hereby approved and adopted shall be signed by the members of the Board of Directors and made a part of the public records of the District.

ADOPTED, this 13th day of December, A.D., 2021

Attested by:

Michael D. Liggett, Esq., President

Molly Gutilla, MS, DPH, Vice President

Joseph Prows, MD, MPH, Treasurer

Johanna Ulloa Giron, PsyM, MSW, Secretary

Celeste Kling, JD
UCHealth-North/PVHS Board Liaison



Resolution 2021-18

RESOLUTION TO SET MILL LEVIES

A RESOLUTION LEVYING GENERAL PROPERTY TAXES FOR THE YEAR 2022 TO HELP DEFRAY THE COSTS OF GOVERNMENT FOR THE HEALTH DISTRICT OF NORTHERN LARIMER COUNTY, FORT COLLINS, COLORADO FOR THE 2022 BUDGET YEAR.

WHEREAS, the Board of Directors of the Health District of Northern Larimer County has adopted the annual budget in accordance with the Local Government Budget Law, on December 13, 2021; and

WHEREAS, the amount of money necessary to balance the budget for general operating purposes from property tax revenue is \$8,700,766; and

WHEREAS, the 2022 net valuation for assessment for the Health District as certified by the County Assessor is \$4,015,120,446.

NOW, THEREFORE, BE IT RESOLVED BY THE Board of Directors of the Health District of Northern Larimer County, Fort Collins, Colorado:

Section 1. That for the purpose of meeting all proposed expenditures within the general operating budget of the Health District during the 2022 budget year, there is hereby levied a tax of 2.167 mills upon each dollar of the total valuation for assessment of all taxable property within the district for the year 2022.

Section 2. That the Executive Director is hereby authorized and directed to immediately certify to the County Commissions of Larimer County, Colorado, the mill levies for the Health District as herein above determined and set.

ADOPTED, this 13th day of December, A.D., 2021

Attested by:

Michael D. Liggett, Esq., President

Molly Gutilla, MS, DPH, Vice President

Joseph Prows, MD, MPH, Treasurer

Johanna Ulloa Giron, PsyM, MSW, Secretary

Celeste Kling, JD
UCHealth-North/PVHS Board Liaison



Resolution 2021-19

RESOLUTION TO APPROPRIATE SUMS OF MONEY

A RESOLUTION APPROPRIATING SUMS OF MONEY TO THE VARIOUS FUNDS IN THE AMOUNT AND FOR THE PURPOSE AS SET FORTH BELOW, FOR THE HEALTH DISTRICT OF NORTHERN LARIMER COUNTY, FORT COLLINS, COLORADO, FOR THE 2022 BUDGET YEAR.

WHEREAS, the Board of Directors of the Health District of Northern Larimer County (Health District) has adopted the annual budget in accordance with the Local Government Budget Law, on December 13, 2021 and

WHEREAS, the Board of Directors has made provision therein for revenues in an amount equal to or greater than the total proposed expenditures as set forth in said budget; and

WHEREAS, it is not only required by law, but also necessary to appropriate the revenues and reserves or fund balances provided in the budget to and for the purposes described below, thereby establishing a limitation on expenditures for the operations of the Health District.

NOW, THEREFORE, BE IT RESOLVED BY THE Board of Directors of the Health District of Northern Larimer County, Fort Collins, Colorado:

Section 1. That the following sum of \$19,951,838 is hereby appropriated from the revenue of the general fund, to the general fund.

ADOPTED, this 13th day of December, A.D., 2021.

Attest:

Michael D. Liggett, President

Molly J. Gutilla, Vice President

Johanna Ulloa Giron, Secretary

Joseph W. Prows, Treasurer

Celeste Kling
UC Health-North/PVHS Board Liaison



Resolution 2021-20

RESOLUTION OF THE BOARD OF DIRECTORS OF THE HEALTH DISTRICT OF NORTHERN LARIMER COUNTY CREATING, AND SPENDING 2021 REVENUES INTO RESERVE ACCOUNTS IN CONFORMANCE WITH THE PROVISIONS OF ART. X §20 OF THE COLORADO CONSTITUTION

WHEREAS, the Board of Directors of the Health District of Northern Larimer County (Health District) is charged with the duty to budget and spend the revenues and monies of the Health District in conformance with the provisions of the Colorado Constitution and applicable Colorado statutes; and

WHEREAS, the Health District wishes to establish reserve accounts, as authorized and contemplated by ART. X §20 of the Colorado Constitution, in order to earmark and set aside for subsequent spending those funds which are available to the District for lawful expenditure during fiscal year 2022; and

WHEREAS, the Board of Directors of the Health District wishes to set forth in full its creation of an authorized reserve account, and to authorize the expenditure of the funds appropriated into such reserve account hereby, whether the actual expenditure of such funds for the purposes identified herein shall occur during 2022 or in subsequent years.

NOW, THEREFORE, BE IT RESOLVED BY THE Board of Directors of the Health District of Northern Larimer County, Fort Collins, Colorado:

Section 1. All revenues and monies of the Health District, which remain unexpended at the close of business on December 31, 2021, are hereby appropriated and “spent” into a general reserve account to be used for any lawful purpose that the Board of Directors deems appropriate.

ADOPTED, this 13th day of December, A.D., 2021

Attested by:

Michael D. Liggett, Esq., President

Molly Gutilla, MS, DPH, Vice President

Joseph Prows, MD, MPH, Treasurer

Johanna Ulloa Giron, PsyM, MSW, Secretary

Celeste Kling, JD
UCHealth-North/PVHS Board Liaison

CERTIFICATION OF TAX LEVIES for NON-SCHOOL Governments

TO: County Commissioners¹ of _____, Colorado.

On behalf of the _____,
(taxing entity)^A

the _____,
(governing body)^B

of the _____,
(local government)^C

Hereby officially certifies the following mills to be levied against the taxing entity's GROSS \$ _____ assessed valuation of: _____
(GROSS^D assessed valuation, Line 2 of the Certification of Valuation Form DLG 57^E)

Note: If the assessor certified a NET assessed valuation (AV) different than the GROSS AV due to a Tax Increment Financing (TIF) Area^F the tax levies must be calculated using the NET AV. The taxing entity's total property tax revenue will be derived from the mill levy multiplied against the NET assessed valuation of: \$ _____
(NET^G assessed valuation, Line 4 of the Certification of Valuation Form DLG 57)
USE VALUE FROM FINAL CERTIFICATION OF VALUATION PROVIDED BY ASSESSOR NO LATER THAN DECEMBER 10

Submitted: _____ for budget/fiscal year _____.
(no later than Dec. 15) (mm/dd/yyyy) (yyyy)

| PURPOSE (see end notes for definitions and examples) | LEVY² | REVENUE² |
|--|----------------------------|----------------------------|
| 1. General Operating Expenses ^H | _____ mills | \$ _____ |
| 2. <Minus> Temporary General Property Tax Credit/ Temporary Mill Levy Rate Reduction ^I | < _____ > mills | \$ < _____ > |
| SUBTOTAL FOR GENERAL OPERATING: | <input type="text"/> mills | \$ <input type="text"/> |
| 3. General Obligation Bonds and Interest ^J | _____ mills | \$ _____ |
| 4. Contractual Obligations ^K | _____ mills | \$ _____ |
| 5. Capital Expenditures ^L | _____ mills | \$ _____ |
| 6. Refunds/Abatements ^M | _____ mills | \$ _____ |
| 7. Other ^N (specify): _____ | _____ mills | \$ _____ |
| | _____ mills | \$ _____ |
| TOTAL: [Sum of General Operating Subtotal and Lines 3 to 7] | <input type="text"/> mills | \$ <input type="text"/> |

Contact person: _____ Daytime phone: () _____
(print)

Signed: _____ Title: _____

Include one copy of this tax entity's completed form when filing the local government's budget by January 31st, per 29-1-113 C.R.S., with the Division of Local Government (DLG), Room 521, 1313 Sherman Street, Denver, CO 80203. Questions? Call DLG at (303) 864-7720.

¹ If the *taxing entity's* boundaries include more than one county, you must certify the levies to each county. Use a separate form for each county and certify the same levies uniformly to each county per Article X, Section 3 of the Colorado Constitution.

² Levies must be rounded to three decimal places and revenue must be calculated from the total NET assessed valuation (Line 4 of Form DLG57 on the County Assessor's **FINAL** certification of valuation).

Health District

OF NORTHERN LARIMER COUNTY

JOB DESCRIPTION

| | |
|----------------------------|---|
| POSITION TITLE | Executive Director |
| DEPARTMENT | Administration |
| POSITION NUMBER | 50-001 |
| HOURS | Regular Full-time 40 hours per week Requires some flexibility in scheduling, including occasional night meetings, weekend events, and local or out of town travel, which may include overnight trips. |
| POSITION GRADE | Grade <u>210</u> Salary determined by the Health District Board |
| FLSA CLASSIFICATION | Exempt status |

REPORTS TO **Health District of Northern Larimer County Board of Directors**

The Health District is authorized under Colorado State Statutes to establish and operate facilities providing health (and personal) care services. The Mission of the Health District is to enhance the health of the community.

GENERAL DUTIES/PURPOSE

Assures that the Health District of Northern Larimer County is fulfilling its mission to improve the health status of the community by managing the organization in a way so as to implement the [priorities and policies set by the Board of Directors, monitoring the achievement of goals. Leads a dynamic local public organization providing a unique mix of health and health care services; and assists the organization and community in understanding and addressing key barriers to health, and adjusting to the ever-changing challenges and opportunities that impact health and health care. including end goals and monitors. Helps to move the organization and community towards improved health equity in a variety of ways, including but not limited to focusing on greater diversity and inclusion and reducing racism.](#) Works with the Board to keep policies relevant, realistic and updated. Provides positive, effective leadership to the Board, staff and community.

BUDGET RESPONSIBILITY

The Executive Director is responsible for the development of the agency's operational, reserve, and capital budget and presentation to the Board of Directors for approval. In 20220, the Health District budget was ~~approximately about~~ [\\$19.720](#) million, of which ~~about~~ [\\$16.5](#) million was budgeted for operational expenditures [\(with \\$12.1 million in ongoing operational revenues\)](#).

SUPERVISORY RESPONSIBILITY

Directly supervises approximately nine Directors and one Executive Assistant, for a total of ten individuals. Responsible for the entire staff of the organization, which includes [just over 100](#)~~approximately 120~~ staff members, [plus PRNs, interns, and volunteers.](#)

Health District of Northern Larimer County

Executive Director

SPECIFIC DUTIES

1) Board of Directors Responsibilities

- a) Works directly with the Board of Directors, assisting them in their role as policymakers, developing policy, ~~priorities, and measurements of success, which includes end goals and monitors~~. Serves as professional advisor to the Board. Helps focus the Board attention on the mission to preserve and improve the health status of the community. Keeps the Board members informed of the organization's issues, programs and progress; and of current theory and research relating to health status improvement.

2) General Leadership Responsibilities

- a) Has overall responsibility for the operation of the organization and the implementation of policies set by the Board. Provides leadership in all aspects of agency functioning.
- b) Establishes national, state, and local linkages to information resources for the purpose of helping to inform decisions on the best *practices* for assessing and impacting the health status of the community. Leads the organization in *assessing* the community's current health status, and works with the Board as they *prioritize* barriers to health. Searches for and recommends effective *strategies* for reducing prioritized barriers. Works with the Board to develop a periodic Strategic Plan; implements plan.
- c) Develops community awareness of and support for health status improvement. Creates positive working relationships with other organizations (health, government, not-for-profit, etc.), businesses and the community. Employs community development strategies to involve the community in reducing barriers to health.

3) Programming Responsibilities

- a) Develops and implements specific procedures, programs, and/or projects to fulfill the goals and criteria created by the Board in policy and planning. Assures that community health intervention projects will be measured for value to the community, ~~including impact on health status and financial return~~. Reports to the Board the level of success in accomplishing specific goals and objectives. Responsible for meeting the goals and objectives set by the Board, or negotiating changes in goals and objectives with the Board as needed.

4) Staffing Responsibilities

- a) Responsible for the recruiting, hiring, supervision, evaluation and termination of staff. Implements non-discrimination policy. Develops professional competency and teamwork.

5) Fiscal, Legal and Contractual Responsibilities

- a) Develops budget and presents to the Board of Directors. Assures compliance with government regulations and standards. Supervises the financial management of the organization, including receipt and disbursement of funds, deposits, investments, and monthly reports to the Board. Arranges for annual audit. In consultation with legal counsel, develops, monitors, and signs contracts with vendors, consultants, and service providers.

Health District of Northern Larimer County Executive Director

6) Technology Skills

a) Strong computer skills, including Windows operating system, Outlook email, Microsoft Office Suite word processing (Word), spreadsheet applications (Excel), PowerPoint presentations, and ability to understand and work in databases

b) Equipment used includes basic business equipment such as computers, phones, copy machines, etc.

~~a) General office equipment, which includes telephones, calculators, personal computers, copier, printer, and facsimile machine.~~

~~b) Intermediate computer, keyboarding, and word processing skills~~

7) Requires Reliable Vehicle; Valid Driver's License and Auto Insurance

8) Working Environment/Physical Requirements

a) The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

- Must have close visual acuity to perform activities such as: preparing and analyzing data and figures, viewing a computer monitor, extensive reading.
- Must be able to sit or stand for prolonged periods.
- Must have eye-hand coordination and manual dexterity sufficient to operate a computer keyboard, telephone, photocopier and other office equipment.
- Must have normal physical mobility, which includes movement from place to place on the job.
- Must have the ability to communicate information and ideas verbally so others will understand.
- Position requires frequent travel using personal vehicle and occasional airplane travel.

The above job definition information has been designed to indicate the general nature and level of work performed by employees within this classification. It is not designed to contain or be interpreted as a comprehensive inventory of all duties, responsibilities, and qualifications required of employees assigned to this job. Job duties and responsibilities are subject to change based on changing business needs and conditions.

Health District
OF NORTHERN LARIMER COUNTY
BOARD OF DIRECTORS
REGULAR MEETING
October 28, 2021

Health District Office Building
120 Bristlecone Drive, Fort Collins
Remote

MINUTES

BOARD MEMBERS PRESENT: Michael D. Liggett, Esq., Board President
Joseph Prows, MD MPH, Board Treasurer
Celeste Kling, J.D., Liaison to UCH-North/PVH
Molly Gutilla, MS DrPH, Board Vice President
Johanna Ulloa Giron, Psy.M., MSW, Board Secretary

Staff Present:

Carol Plock, Executive Director
Chris Sheafor, Support Services Director
Dana Turner, Dental Services Director
James Stewart, Medical Director
Jose Madera, Dental Assistant
Karen Spink, Assistant Director
Kristen Cochran-Ward, MH/SU Director
Laura Mai, Finance Director
Leith Rupp, Lead Dentist
Lin Wilder, Special Projects Director
Lorraine Haywood, Ret. Finance Director

Staff Present:

MJ Jorgensen, Project Implementation Coord.
Richard Cox, Communications Director
Sue Hewitt, Evaluation Coordinator
Suman Mathur, Evaluator & Data Analyst
Xochitl Fragoso, Accounts Receivable
Anita Benavidez, Executive Assistant

Guest Speaker:

Alyson Williams

Public Present:

Diana Dwyer

CALL TO ORDER; INTRODUCTIONS & APPROVAL OF AGENDA

Director Michael Liggett called the meeting to order at 4:02 p.m.

The agenda was amended to remove the July 27 and September 28, 2021 Board of Directors Meeting Minutes from the Consent Agenda.

**MOTION: To approve the agenda as Amended
Moved/Seconded/Carried Unanimously**

PUBLIC COMMENT

None

PRESENTATIONS & DISCUSSION

Dental Clinic Update:

Dental Services Director Dana Turner gave an update on the Dental Clinic. There is a disparity in access to dental care for those with low incomes and other challenges, which our clinic seeks to address. Financially, 72% of the dental clinic patients are below 133% FPL and 6% are experiencing homelessness. Transportation can be an issue; some walk to the clinic and others take multiple buses. There are only six other dental clinics that take Medicaid and are currently accepting new adult patients with 48,799 Larimer County adults enrolled in Medicaid. We are currently the only place offering income based discounts for out of pocket expenses except for Salud, which is currently not taking patients outside of their clinic. Only two dental specialists currently take Medicaid.

The clinic's current capacity remains very much affected by COVID adaptations; staff have worked to creatively improve processes, leading to the use of one chair now being nearly as effective (94.4%) as two chairs. The dental staff works hard to support those with language or mobility barriers, with at least one staff person who is bilingual (English/Spanish) in all areas. The recent purchase of wheel chair tilts provide adaptability that allows the patient to remain seated.

Staff continues to evaluate and improve processes that may unintentionally create barriers, and is working toward implementing a care coordination model – such models are becoming key to identifying and overcoming barriers and ensuring oral health is achieved. Staff is implementing the Health Resources and Service Administration's recommended Phase 1 Dental Treatment plan, finding our baseline and tracking and measuring our progress, with the goal of eliminating dental disease. The clinic is a comprehensive care clinic, focused on getting patients to a state of oral health, and keeping it there, rather than operating on an emergent model. Treatment plan completion rates are one of the best measures of how well we are serving our community, so the process is to establish our baseline, then set an initial goal of treatment completion. HRSA recommends an initial goal of 33% of treatment completion, with 5% increases each year up to 75%.

Jose Madera, a dental assistant with 8+ years of experience who joined the Health District two years ago, spoke about the sense of purpose and joy he feels knowing that the work he does at the Health District makes a real difference in the quality of people's lives. Patients are treated with dignity and compassion while providing excellent affordable dental care. He has witnessed the incredible changes proper dental care can make.

Dr. Leith Rupp, Lead Dentist, commented on the unique position the Health District has within the community to address cases others only hear about. The need is constantly high: the clinic provided 11,347 appointments; 1,232 of those dental emergencies, and 24,943 dental procedures including 1,367 extractions and 43 people sent for specialty care. In addition to more routine dental care, Dr. Rupp presented four particularly devastating case examples that make visible the situations that people live with, and the difference the dental clinic regularly makes. In cases where people had severe dental disease, they have seen situations where the situation went on so long that people have used superglue, placed cotton backing behind their teeth to stabilize them that hardened and became full of bacteria, have discovered carcinomas, treated major jaw issues, and helped stop rapidly deteriorating teeth. They are regularly faced with unusual, difficult cases that require innovative approaches.

COVID-19 Update

Larimer County continues to struggle with the impact of COVID and the Delta variant. In the last week, there has been an increase of 21.6% in cases – up to 339 per 7 days per 100k - and an 8% increase in 7-day positivity rates. While hospitalizations are currently flat, ICU occupancy is high, slightly up and at a very stressful level. 45% of patients in the ICU are COVID+ with 86% of those unvaccinated. MCR has had an incredible caseload in ICU, where they turned normal hospital beds into ICU beds.

Unfortunately, Larimer County moved from yellow to orange this week, with a new public order for masking in public indoor places on October 20. All counties in Colorado are moving in the wrong direction. Nationally, Colorado is a bit of an outlier with a 5% total increase over the last two weeks. Throughout the month of October, cases have trended upward. The state boasts 70.3% of residents are fully vaccinated but that still leaves 13% in the 70+ age range without any doses and 17% of those between 60 and 69 years old.

There are several reasons for hope: the FDA recently authorized Pfizer for 5- to 11-year olds, and Merck has an oral antiviral that ended its trial early due to "compelling efficacy". Early indications are that

fluvoxamine, an oral antidepressant, has shown a reduction in hospitalization with a 10-day treatment. In addition to COVID, Dr. Stewart noted a hospitalization increase in respiratory cases including RSV and parainfluenza. The Health District will ramp up for Moderna boosters and is still providing 1st and 2nd doses.

2022 Budget: Key Factors

Executive Director Carol Plock presented some key elements from the 2022 budget. The net estimated tax revenue to the Health District will increase by about 4.5%; when other revenue sources are added; there will be an expected increase of about \$437,152 over last year, or a 3.93% increase. In determining how to allocate those funds, the first step is to take out fixed costs. Next, the budget includes a recommended fixed pay increase of 2.5% for staff. After those expenditures are calculated, about \$184,000 remained for other priorities. Potential future challenges in budgeting and needs include the uncertainty around the continuation of COVID-19, the Delta variant or other variants; and the property tax reductions included in SB-293, and potentially Proposition 120, should it pass.

Top focus areas for the 2022 budget year include: (1) maintaining key health services with limited expansion in areas deemed critical for the community; (2) assuring quality staffing; (3) specific funding to be allocated to Equity, Diversity, and Inclusion; (4) limited funding from reserves for time-limited work to impact health in ways related to COVID-19; (5) completing the renovation at 425 Mulberry; and (6) maintain enough in reserves to assist in weathering economic downturn, if necessary.

Ms. Plock presented some of the key programmatic changes included in the budget. The Board's highest priority is Connections and CAYAC. In Adult Connections, increasing demands are driving the need for a program assistant, and increased FTE in the care coordinator position. Supervisory FTE increase slightly in both Adult and CAYAC. The budget also includes an FTE for a bilingual behavioral health provider, along with funds to engage a search firm to help recruit one; those funds will also assist Integrated Care, which needs to fill an open bilingual position. IC will also have a slight expansion of FTE.

In Larimer Health Connect, the budget for outreach has been increased due to anticipated need to assist people who currently remain in Medicaid regardless of income changes, but will see an end to their coverage when the declaration of emergency is over. Prescription assistance has the unique opportunity to close help a gap in the criminal justice system by providing long-acting injectable alcohol use disorder treatment, providing enough time for parolees to connect with other resources (funding in reserves).

In the Community Impact Team and Mental Health and Substance Use Alliance (MHSUA), funding is increased for the Substance Use Disorder Transformation Project, assisting in getting providers more training on identifying and treating SUD, and impacting community understanding of SUD. The MHSA Alliance, in conjunction with Summit Stone, has been asked by the county to do another community mental health and substance use disorders needs assessment – one time-limited position has been added for that process. There are also funds to research health clinic models for people experiencing homelessness.

There are funds in Dental to implement the patient care coordination approach discussed earlier, and some placeholder funds have been scaled back from dental in order to reallocate funds to other priorities. In Health Promotion, changes relating to staff reorganization with the retirement of the clinical nurse manager are included. Fees were eliminated for the tobacco cessation program, reducing revenues slightly. If grant funding is received, 1.5 FTE may be available for nurse care managers to work directly with people experiencing homelessness as it relates to COVID.

Assessment, Evaluation & Research will be conducting the triennial community health needs assessment, including a random sample survey, discussion groups, and the possibility of a more in-depth survey follow-up. An Equity Implementation Manager will be hired and the health equity initiative budget has been increased.

In other areas, there is funding for completing the renovations at 425 Mulberry. In order to add focus to programs that need extra attention, rebalance workload, and reduce the burden on the ED and AD, funds are included for a new Director of External Affairs, who would have responsibility for communications, CIT, policy, and advance care planning

The budget process: The first budget deadline has been completed: The Board received the draft budget by October 15th. A public hearing is announced, and will be conducted on November 9, with an invitation for public comments. Any questions from the Board should be submitted prior to the November 9th meeting so that they can be addressed prior to the public hearing; the Board will also have the opportunity to discuss the budget at the November 9 meeting. By the end of that meeting, any board instructions to staff should be given, since the final budget has to be approved on December 13.

Potential Implication of Proposition 120 on Health District

Alyson Williams joined the meeting to give insight on the potential impact of SB21-293/Prop 120 on the Health District. SB21-293 reduces property tax assessment rates for residential, agricultural, and renewable energy production for 2022 and 2023. Most residential taxes will move from 7.15% to 6.95%; multi-family from 7.15% to 6.8%. The Colorado Fiscal Institute (CFI) estimates a 1.7% drop in assessed value, correlating to a loss of about \$152,000 per year to the Health District. Everything changes if Proposition 120 passes, and particularly if it is found to negate SB21-293. Proposition 120 drops rates permanently; from 7.15% to 6.5% for single-family and multi-family residential, and from 29% to 26.4% for other categories, such as commercial and agricultural. The impact to the Health District would be considerably higher and would be ongoing. If SB21-293 stays in effect and Prop 120 gets passed, the estimated loss of revenue to Larimer County would be \$8,312,301, but if litigation was successful and SB21-293 is overturned, those losses would increase to a \$68,519,194 loss for Larimer County.

New Community Solution to COVID IRQ needs for those experiencing homelessness

When the Myrtle houses closed, the assumption was that local shelters would take on all the functions of an IRQ. However, they are running out of funds and their staff is overwhelmed. Homeless providers are finding themselves swamped with no stable solution to the Isolation, Recovery, and Quarantine issue. Shelters were trying to isolate people within their facility but the Rescue Mission has recently been told they cannot do that.

The Health District doesn't have the staff availability to run an IRQ that we had last time, but our facilities staff can get the facility ready again. Conversations are preliminary, but the County may provide funding to run the IRQ, if the Health District gets the facility set up. There will be a need to increase security, hire a site coordinator and two staff members, and a nurse care manager (supervised by Dr. Stewart). The initial thought is to have Lin Wilder supervise the coordinator in the near-term; county staff are likely to assist with some tasks. A Board member noted that having a local supervisor would be important; Ms. Plock will reconsider who would do that. The Board was comfortable with providing the facility but concerned that the IRQ not be run by existing staff. All agreed that the Health District needs to be a part of the solution, but also needs to be very cautious about donating staff time. CIT will assist with training, but will not staff the IRQ. Another board concern was whether the Health District will be expected to run the shelter from now on; staff responded that there is currently a major planning effort to develop long-term shelter and services, and the particular need of space for those with infectious diseases, is now a distinct part of the planning. The City and County have both hired staff who are working on the long-term shelter and services planning.

DISCUSSION AND ACTIONS

2021 Staff Bonus Proposal

Revenue remained flat from 2020 to 2021, limiting the Health District's capacity to increase wages. The Health District was not a recipient of some of the federal funding that other organizations such as FQHCs

and CBHCs received to assist in staff wages. Due to lower than anticipated expenditures, the Health District does have funds for a one-time bonus, which would make a big difference for staff. Staff are proposing a one-time \$4,000/employee bonus, with proration for FTE and the percent of 2021 worked. One Board comment was in support of the concept that the amount was the same for all employees.

MOTION: To approve the 2021 staff bonus
Moved/Seconded/Carried Unanimously

OTHER UPDATES & REPORTS

Executive Director Update

Ms. Plock noted that the deadline for staff vaccination is coming up, with 95% of employees vaccinated. The Health District will offer vaccination boosters beginning in November.

Liaison to PVHS/UCHealth North Report

Recent meetings were focused on COVID, with UCHealth experiencing 106% ICU occupancy last week. UCHealth is the largest Medicaid provider in the state of Colorado and 92% of Medicaid COVID patients in their system are unvaccinated. Mortality has gone up and there is a sense that the public is unaware. Of those COVID patients in the hospital, 16% are in the ICU and 30% are on ventilators.

PUBLIC COMMENT (2nd opportunity)

Diana Dwyer commented that the presentation by the dental staff was very impactful, and wondered whether they accept private donations. Staff responded that the dental clinic can accept private donations, and that anyone interested should contact Jessica Shannon at the Health District.

CONSENT AGENDA

- August 2021 Financials

MOTION: To approve the consent agenda as amended
Moved/Seconded/Carried Unanimously

ANNOUNCEMENTS

- November 9, 2021, 4:00 pm – Board of Directors Regular Meeting and Budget Hearing
- November 15, 2021, 4:00 pm – Possible Board of Directors Work Session/Special Meeting
- December 13, 2021, 4:00 pm – Board of Directors Regular Meeting and Budget Approval

It was noted that an early December meeting may be needed to approve the brochure.

ADJOURN REGULAR MEETING; MOVE INTO WORK SESSION

A motion was made to adjourn and go into a Work Session.

MOTION: To adjourn the regular meeting, with a brief break, before returning for the Work Session.
Moved/Seconded/Carried Unanimously

Ms. Plock announced that the professional recruiter has had a family emergency. She sent survey questions for both internal and external feedback this afternoon. Ms. Plock will email the surveys to the Board for a brief review before the Work Session, which will convene at 6:30 p.m.

Respectfully submitted:

Anita K. Benavidez

Anita Benavidez, Assistant to the Board of Directors

Michael D. Liggett, Esq., Board President

Molly Gutilla, MS DrPH, Board Vice President

Celeste Kling, J.D., Liaison to UCH-North and PVHS Board

Joseph Prows, MD MPH, Board Treasurer

Johanna Ulloa Giron, Psy.M., MSW, Board Secretary

HEALTH DISTRICT
of Northern Larimer County
September 2021
Summary Financial Narrative

Revenues

The Health District is 0.5% ahead of year-to-date tax revenue projections. Interest income is 85.9% behind year-to-date projections. Lease revenue is at year-to-date projections. Yield rates on investment earnings decreases slightly from 0.20% to 0.18% (based on the weighted average of all investments). Fee for service revenue from clients is 6.5% behind year-to-date projections and revenue from third party reimbursements is 10.1% ahead of year-to-date projections. Total operating revenues for the Health District (excluding grants and special projects) are 0.3% ahead of year-to-date projections.

Expenditures

Operating expenditures (excluding grants and special projects) are 19.3% behind year-to-date projections. Program variances are as follows: Administration 11.4%; Board 51.5%; Connections: Mental Health/Substance Issues Services 22.4%; Dental Services 17.4%; MH/SUD/Primary Care 20.0%; Health Promotion 16.5%; Community Impact 24.9%; Program Assessment and Evaluation 13.0%; Health Care Access 18.8%; and Resource Development 12.2%.

Capital Outlay

Capital expenditures are 4.4% behind year-to-date projections.

HEALTH DISTRICT OF NORTHERN LARIMER COUNTY
BALANCE SHEET
As of 9/30/2021

ASSETS

| | |
|-------------------------------------|-------------|
| Current Assets: | |
| Cash & Investments | \$8,189,677 |
| Accounts Receivable | 199,737 |
| Property Taxes Receivable | 80,357 |
| Specific Ownership Tax Receivable | 57,521 |
| Prepaid Expenses | 20,765 |
| Total Current Assets | 8,548,056 |
| Property and Equipment | |
| Land | 4,592,595 |
| Building and Leasehold Improvements | 7,174,711 |
| Equipment | 1,234,489 |
| Accumulated Depreciation | (3,096,994) |
| Total Property and Equipment | 9,904,801 |
| Total Assets | 18,452,857 |

LIABILITIES AND EQUITY

| | |
|---|------------|
| Current Liabilities: | |
| Accounts Payable | 803,327 |
| Deposits | 8,332 |
| Deferred Revenue | 938,554 |
| Total Current Liabilities | 1,750,213 |
| Long-term Liabilities: | |
| Compensated Absences Payable | 43,730 |
| Total Long-term Liabilities | 43,730 |
| Deferred Inflows of Resources | |
| Deferred Property Tax Revenue | 60,999 |
| Total Deferred Inflows of Revenues | 60,999 |
| Total Liabilities & Deferred Inflows of Resources | 1,854,942 |
| EQUITY | |
| Retained Earnings | 13,900,525 |
| Net Income | 2,697,390 |
| TOTAL EQUITY | 16,597,916 |
| TOTAL LIABILITIES AND EQUITY | 18,452,857 |

HEALTH DISTRICT OF NORTHERN LARIMER COUNTY
STATEMENT OF REVENUES AND EXPENSES
As of 9/30/2021

| | <u>Current Month</u> | <u>Year to Date</u> |
|--|----------------------|---------------------|
| Revenue | | |
| Property Taxes | 19,358 | 8,213,969 |
| Specific Ownership Taxes | 57,520 | 501,540 |
| Lease Revenue | 99,598 | 884,776 |
| Interest Income | 970 | 12,090 |
| Fee For Service Income | 13,689 | 117,111 |
| Third Party Income | 94,410 | 728,007 |
| Grant Income | 62,855 | 514,061 |
| Special Projects | 0 | 3,332 |
| Miscellaneous Income | 967 | 18,953 |
| Total Revenue | <u>349,367</u> | <u>10,993,839</u> |
| Expenses: | | |
| Operating Expenses | | |
| Administration | 50,136 | 655,881 |
| Board Expenses | 3,129 | 21,577 |
| Connections: Mental Health/Substance Issues Svcs | 150,851 | 1,233,164 |
| Dental Services | 269,528 | 2,390,249 |
| Integrated Care (MHSA/PC) | 81,225 | 731,494 |
| Health Promotion | 62,599 | 540,689 |
| Community Impact | 35,460 | 401,849 |
| Program Assessment & Evaluation | 18,485 | 172,984 |
| Health Care Access | 73,113 | 729,519 |
| Resource Development | 14,380 | 127,193 |
| Mulberry Offices | 3,889 | 54,245 |
| Special Projects | 69,465 | 677,233 |
| Grant Projects | 16,822 | 380,465 |
| Total Operating Expenses | <u>849,081</u> | <u>8,116,543</u> |
| Depreciation and Amortization | | |
| Depreciation Expense | <u>20,496</u> | <u>179,905</u> |
| Total Depreciation and Amortization | <u>20,496</u> | <u>179,905</u> |
| Total Expenses | <u>869,577</u> | <u>8,296,449</u> |
| Net Inome | <u>(520,210)</u> | <u>2,697,390</u> |

HEALTH DISTRICT OF NORTHERN LARIMER COUNTY
Statement of Revenues and Expenditures - Budget and Actual
As of 9/30/2021

| | Current Month | | | Year to Date | | | Annual Budget | Remaining Funds |
|--|--------------------|--------------------|--------------------|---------------------|---------------------|--------------------|----------------------|----------------------|
| | Budget | Actual | Variance | Budget | Actual | Variance | | |
| Revenue: | | | | | | | | |
| Property Taxes | \$68,340 | \$19,358 | (\$48,982) | \$8,191,010 | \$8,213,969 | \$22,959 | \$8,274,968 | \$60,999 |
| Specific Ownership Taxes | 60,172 | 57,520 | (2,652) | 478,238 | 501,540 | 23,302 | 650,000 | 148,460 |
| Lease Revenue | 99,598 | 99,598 | 0 | 884,776 | 884,776 | 0 | 1,183,569 | 298,793 |
| Interest Income | 8,000 | 970 | (7,030) | 86,000 | 12,090 | (73,910) | 130,000 | 117,910 |
| Sales Revenue | 50 | 0 | (50) | 450 | 0 | (450) | 600 | 600 |
| Fee for Services Income | 13,923 | 13,689 | (234) | 125,311 | 117,111 | (8,200) | 167,081 | 49,970 |
| Third Party Reimbursements | 107,685 | 94,410 | (13,275) | 661,250 | 728,007 | 66,758 | 881,666 | 153,659 |
| Grant Revenue | 70,755 | 62,855 | (7,900) | 626,679 | 514,061 | (112,618) | 1,404,188 | 890,127 |
| Partnership Revenue | 2,058 | 0 | (2,058) | 18,521 | 3,332 | (15,189) | 24,695 | 21,363 |
| Miscellaneous Income | 1,635 | 967 | (669) | 14,719 | 18,953 | 4,234 | 19,625 | 672 |
| Total Revenue | \$432,216 | \$349,367 | (\$82,849) | \$11,086,953 | \$10,993,839 | (\$93,114) | \$12,736,392 | \$1,742,553 |
| Expenditures: | | | | | | | | |
| Operating Expenditures | | | | | | | | |
| Administration | \$61,538 | \$50,136 | \$11,402 | \$740,331 | \$655,881 | \$84,450 | \$922,767 | \$266,886 |
| Board Expenses | 2,468 | 3,129 | (662) | 44,520 | 21,577 | 22,943 | 75,523 | 53,946 |
| Connections: Mental Health/Substance Issues Svcs | 175,207 | 150,851 | 24,356 | 1,588,763 | 1,233,164 | 355,599 | 2,121,411 | 888,247 |
| Dental Services | 321,281 | 269,528 | 51,753 | 2,894,435 | 2,390,249 | 504,186 | 3,864,795 | 1,474,546 |
| Integrated Care (MH/SUD/PC) | 100,968 | 81,225 | 19,743 | 914,802 | 731,494 | 183,309 | 1,219,791 | 488,297 |
| Health Promotion | 71,105 | 62,599 | 8,506 | 647,684 | 540,689 | 106,994 | 865,158 | 324,469 |
| Community Impact | 59,072 | 35,460 | 23,612 | 535,208 | 401,849 | 133,358 | 713,580 | 311,731 |
| Program Assessment & Evaluation | 21,977 | 18,485 | 3,491 | 198,920 | 172,984 | 25,936 | 265,194 | 92,210 |
| Health Care Access | 98,257 | 73,113 | 25,144 | 898,623 | 729,519 | 169,104 | 1,208,842 | 479,323 |
| Resource Development | 16,105 | 14,380 | 1,725 | 144,947 | 127,193 | 17,754 | 193,262 | 66,069 |
| Mulberry Office | 15,961 | 3,889 | 12,072 | 143,647 | 54,245 | 89,401 | 191,529 | 137,284 |
| Contingency (Operations) | 0 | 0 | 0 | 0 | 0 | 0 | 60,000 | 60,000 |
| Special Projects | 227,482 | 69,465 | 158,018 | 1,514,066 | 677,233 | 836,833 | 2,673,230 | 1,995,997 |
| Grant Projects | 67,810 | 16,822 | 50,989 | 587,703 | 380,465 | 207,238 | 1,404,188 | 1,023,723 |
| Total Operating Expenditures | \$1,239,230 | \$849,081 | \$390,149 | \$10,853,650 | \$8,116,543 | \$2,737,106 | \$15,779,270 | \$7,662,727 |
| Net Income | (\$807,014) | (\$499,714) | \$307,300 | \$233,304 | \$2,877,296 | \$2,643,992 | (\$3,042,878) | (\$5,920,174) |

HEALTH DISTRICT OF NORTHERN LARIMER COUNTY

STATEMENT OF NON OPERATIONAL EXPENDITURES - BUDGET TO ACTUAL

For 9/1/2021 to 9/30/2021

| | <u>Current Month</u> <u>Budget</u> | <u>Current Month</u> <u>Actual</u> | <u>Current Month</u> <u>Variance</u> | <u>Year to Date</u> <u>Budget</u> | <u>Year to Date</u> <u>Actual</u> | <u>Year to Date</u> <u>Variance</u> | <u>Annual Budget</u> | <u>Annual Funds</u> <u>Remaining</u> |
|----------------------------------|---------------------------------------|---------------------------------------|---|--------------------------------------|--------------------------------------|--|----------------------|---|
| Non-Operating Expenditures | | | | | | | | |
| Building | 10,000 | - | 10,000 | 2,807,000 | 2,750,131 | 56,869 | 2,818,500 | 68,369 |
| Construction in Progress | - | 1,984 | (1,984) | - | 3,464 | | | |
| Capital Equipment | 4,300 | - | 4,300 | 14,300 | - | 14,300 | 14,300 | 14,300 |
| General Office Equipment | - | - | - | 5,000 | - | 5,000 | 60,000 | 60,000 |
| Medical & Dental Equipment | 44,000 | - | 44,000 | 121,775 | 80,626 | 41,149 | 121,775 | 41,149 |
| Computer Equipment | - | - | - | - | - | - | - | - |
| Computer Software | - | - | - | - | - | - | - | - |
| Equipment for Building | 12,000 | 9,059 | 2,941 | 29,700 | 14,729 | 14,971 | 57,700 | 42,971 |
| Total Non-Operating Expenditures | <u>\$ 70,300</u> | <u>\$ 11,043</u> | <u>\$ 59,257</u> | <u>\$ 2,977,775</u> | <u>\$ 2,848,950</u> | <u>\$ 132,289</u> | <u>\$ 3,072,275</u> | <u>\$ 226,789</u> |

HEALTH DISTRICT OF NORTHERN LARIMER COUNTY
Statement of Program Revenues and Expenditures - Budget and Actual
As of 9/30/2021

| | Current Month | | | Year to Date | | | Annual Budget | Remaining Funds |
|---|---------------|---------|----------|--------------|-----------|----------|---------------|-----------------|
| | Budget | Actual | Variance | Budget | Actual | Variance | | |
| Administration | | | | | | | | |
| Revenue: | | | | | | | | |
| Miscellaneous Income | \$875 | \$11 | (\$864) | \$7,875 | \$7,463 | (\$412) | \$10,500 | \$3,037 |
| Total Revenue | 875 | 11 | (864) | 7,875 | 7,463 | (412) | 10,500 | 3,037 |
| Expenditures: | | | | | | | | |
| Salaries and Benefits | 47,970 | 44,396 | 3,574 | 431,729 | 399,812 | 31,917 | 575,638 | 175,826 |
| Supplies and Purchased Services | 13,568 | 5,740 | 7,828 | 308,603 | 256,070 | 52,533 | 347,129 | 91,059 |
| Total Expenditures | 61,538 | 50,136 | 11,402 | 740,331 | 655,881 | 84,450 | 922,767 | 266,886 |
| Board of Directors | | | | | | | | |
| Expenditures: | | | | | | | | |
| Salaries and Benefits | 0 | 0 | 0 | 8,612 | 8,120 | 493 | 8,612 | 493 |
| Supplies and Purchased Services | 2,468 | 3,129 | (662) | 29,908 | 13,458 | 16,450 | 37,911 | 24,453 |
| Election Expenses | 0 | 0 | 0 | 6,000 | 0 | 6,000 | 29,000 | 29,000 |
| Total Expenditures | 2,468 | 3,129 | (662) | 44,520 | 21,577 | 22,943 | 75,523 | 53,946 |
| Connections: Mental Health/substance Issue | | | | | | | | |
| Revenue: | | | | | | | | |
| Fees, Reimbursements & Other Income | 2,083 | 3,106 | 1,023 | 18,750 | 25,462 | 6,712 | 25,000 | (462) |
| Total Revenue | 2,083 | 3,106 | 1,023 | 18,750 | 25,462 | 6,712 | 25,000 | (462) |
| Expenditures: | | | | | | | | |
| Salaries and Benefits | 149,724 | 137,820 | 11,904 | 1,347,515 | 1,114,546 | 232,969 | 1,796,687 | 682,141 |
| Supplies and Purchased Services | 25,483 | 13,030 | 12,452 | 241,248 | 118,618 | 122,630 | 324,724 | 206,106 |
| Total Expenditures | 175,207 | 150,851 | 24,356 | 1,588,763 | 1,233,164 | 355,599 | 2,121,411 | 888,247 |
| Dental Services | | | | | | | | |
| Revenue: | | | | | | | | |
| Fees, Reimbursements & Other Income | 54,982 | 87,783 | 32,801 | 494,834 | 593,088 | 98,254 | 659,779 | 66,691 |
| Total Revenue | 54,982 | 87,783 | 32,801 | 494,834 | 593,088 | 98,254 | 659,779 | 66,691 |
| Expenditures: | | | | | | | | |
| Salaries and Benefits | 260,167 | 217,154 | 43,013 | 2,341,507 | 2,000,740 | 340,767 | 3,122,009 | 1,121,269 |
| Supplies and Purchased Services | 61,114 | 52,374 | 8,740 | 552,929 | 389,509 | 163,419 | 742,786 | 353,277 |
| Total Expenditures | 321,281 | 269,528 | 51,753 | 2,894,435 | 2,390,249 | 504,186 | 3,864,795 | 1,474,546 |

HEALTH DISTRICT OF NORTHERN LARIMER COUNTY
Statement of Program Revenues and Expenditures - Budget and Actual
As of 9/30/2021

| | Current Month | | | Year to Date | | | Annual Budget | Remaining Funds |
|---|---------------|--------|----------|--------------|---------|----------|---------------|-----------------|
| | Budget | Actual | Variance | Budget | Actual | Variance | | |
| <u>Integrated Care (MHSA/PC)</u> | | | | | | | | |
| Revenue: | | | | | | | | |
| Fees, Reimbursements & Other Income | 51,319 | 7,416 | (43,903) | 153,956 | 106,586 | (47,371) | 205,275 | 98,689 |
| Total Revenue | 51,319 | 7,416 | (43,903) | 153,956 | 106,586 | (47,371) | 205,275 | 98,689 |
| Expenditures: | | | | | | | | |
| Salaries and Benefits | 90,153 | 74,136 | 16,017 | 811,375 | 673,767 | 137,609 | 1,081,834 | 408,067 |
| Supplies and Purchased Services | 10,815 | 7,089 | 3,726 | 103,427 | 57,727 | 45,700 | 137,957 | 80,230 |
| Total Expenditures | 100,968 | 81,225 | 19,743 | 914,802 | 731,494 | 183,309 | 1,219,791 | 488,297 |
| <u>Community Impact</u> | | | | | | | | |
| Revenue: | | | | | | | | |
| Fees, Reimbursements & Other Income | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Total Revenue | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Expenditures: | | | | | | | | |
| Salaries and Benefits | 51,732 | 32,371 | 19,361 | 465,592 | 373,071 | 92,521 | 620,789 | 247,718 |
| Supplies and Purchased Services | 7,340 | 3,089 | 4,251 | 69,616 | 28,779 | 40,837 | 92,791 | 64,012 |
| Total Expenditures | 59,072 | 35,460 | 23,612 | 535,208 | 401,849 | 133,358 | 713,580 | 311,731 |
| <u>Program Assessment & Evaluation</u> | | | | | | | | |
| Revenue: | | | | | | | | |
| Fees, Reimbursements & Other Income | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Total Revenue | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Expenditures: | | | | | | | | |
| Salaries and Benefits | 18,778 | 16,932 | 1,846 | 169,000 | 156,602 | 12,398 | 225,333 | 68,731 |
| Supplies and Purchased Services | 3,199 | 1,553 | 1,646 | 29,920 | 16,381 | 13,539 | 39,861 | 23,480 |
| Total Expenditures | 21,977 | 18,485 | 3,491 | 198,920 | 172,984 | 25,936 | 265,194 | 92,210 |
| <u>Health Promotion</u> | | | | | | | | |
| Revenue: | | | | | | | | |
| Fees, Reimbursements & Other Income | 700 | 30 | (670) | 6,302 | 695 | (5,607) | 8,402 | 7,707 |
| Total Revenue | 700 | 30 | (670) | 6,302 | 695 | (5,607) | 8,402 | 7,707 |
| Expenditures: | | | | | | | | |
| Salaries and Benefits | 57,328 | 53,722 | 3,606 | 515,952 | 466,968 | 48,984 | 687,936 | 220,968 |
| Supplies and Purchased Services | 13,777 | 8,877 | 4,899 | 131,732 | 73,721 | 58,010 | 177,222 | 103,501 |
| Total Expenditures | 71,105 | 62,599 | 8,506 | 647,684 | 540,689 | 106,994 | 865,158 | 324,469 |

HEALTH DISTRICT OF NORTHERN LARIMER COUNTY
Statement of Program Revenues and Expenditures - Budget and Actual
As of 9/30/2021

| | Current Month | | | Year to Date | | | Annual Budget | Remaining Funds |
|-------------------------------------|---------------|---------------|------------------|----------------|----------------|----------------|------------------|-----------------|
| | Budget | Actual | Variance | Budget | Actual | Variance | | |
| Health Care Access | | | | | | | | |
| Revenue: | | | | | | | | |
| Fees, Reimbursements & Other Income | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Total Revenue | <u>0</u> | <u>0</u> | <u>0</u> | <u>0</u> | <u>0</u> | <u>0</u> | <u>0</u> | <u>0</u> |
| Expenditures: | | | | | | | | |
| Salaries and Benefits | 81,971 | 67,204 | 14,767 | 737,735 | 648,341 | 89,394 | 983,647 | 335,306 |
| Supplies and Purchased Services | 16,286 | 5,909 | 10,377 | 160,888 | 81,179 | 79,709 | 225,195 | 144,016 |
| Total Expenditures | <u>98,257</u> | <u>73,113</u> | <u>25,144</u> | <u>898,623</u> | <u>729,519</u> | <u>169,104</u> | <u>1,208,842</u> | <u>479,323</u> |
| Resource Development | | | | | | | | |
| Revenue: | | | | | | | | |
| Fees, Reimbursements & Other Income | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Total Revenue | <u>0</u> | <u>0</u> | <u>0</u> | <u>0</u> | <u>0</u> | <u>0</u> | <u>0</u> | <u>0</u> |
| Expenditures: | | | | | | | | |
| Salaries and Benefits | 13,946 | 13,182 | 764 | 125,514 | 118,777 | 6,737 | 167,352 | 48,575 |
| Supplies and Purchased Services | 2,159 | 1,199 | 961 | 19,433 | 8,416 | 11,016 | 25,910 | 17,494 |
| Total Expenditures | <u>16,105</u> | <u>14,380</u> | <u>1,725</u> | <u>144,947</u> | <u>127,193</u> | <u>17,754</u> | <u>193,262</u> | <u>66,069</u> |
| Mulberry Offices | | | | | | | | |
| Revenue: | | | | | | | | |
| Fees, Reimbursements & Other Income | 13,335 | 10,720 | (2,615) | 120,012 | 127,825 | 7,813 | 160,016 | 32,191 |
| Total Revenue | <u>13,335</u> | <u>10,720</u> | <u>(2,615)</u> | <u>120,012</u> | <u>127,825</u> | <u>7,813</u> | <u>160,016</u> | <u>32,191</u> |
| Expenditures: | | | | | | | | |
| Salaries and Benefits | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Supplies and Purchased Services | 15,961 | 3,889 | 12,072 | 143,647 | 54,245 | 89,401 | 191,529 | 137,284 |
| Total Revenue | <u>15,961</u> | <u>3,889</u> | <u>12,072</u> | <u>143,647</u> | <u>54,245</u> | <u>89,401</u> | <u>191,529</u> | <u>137,284</u> |

Health District of Northern Larimer County

Investment Schedule September 2021

| Investment | Institution | Current Value | % | Current Yield | Maturity |
|----------------------------------|---------------------|---------------|----------|---------------|------------|
| Local Government Investment Pool | COLOTRUST | \$ 1,383 | 0.017% | 0.01% | N/A |
| Local Government Investment Pool | COLOTRUST | \$ 6,498,440 | 81.137% | 0.02% | N/A |
| Flex Savings Account | First National Bank | \$ 238,497 | 2.978% | 0.05% | N/A |
| Certificate of Deposit | Advantage Bank | \$ 141,788 | 1.770% | 1.60% | 12/27/2021 |
| Certificate of Deposit | Advantage Bank | \$ 114,992 | 1.436% | 0.25% | 9/2/2022 |
| Certificate of Deposit | Points West | \$ 115,729 | 1.445% | 0.70% | 12/12/2021 |
| Certificate of Deposit | Points West | \$ 156,922 | 1.959% | 1.00% | 4/2/2022 |
| Certificate of Deposit | Adams State Bank | \$ 240,964 | 3.009% | 1.59% | 10/7/2021 |
| Certificate of Deposit | Cache Bank & Trust | \$ 250,000 | 3.121% | 1.01% | 1/9/2022 |
| Certificate of Deposit | Farmers Bank | \$ 250,548 | 3.128% | 0.65% | 6/27/2022 |
| Total/Weighted Average | | \$ 8,009,264 | 100.000% | 0.18% | |

Notes:

The local government investment pool invests in U.S. Treasury securities, U.S. Government agency securities, certificate of deposits, commercial paper, money market funds and repurchase agreements backed by these same securities.