

GRANT ANALYSIS FORM
OPERATING & CAPITAL GRANT PROJECTS/PROGRAMS

Department/Division: Health/ Healthy Behaviors Healthcare Access

Contact Person & Phone No: Gerry Schroeder, Healthcare Access and Services Manager, #2950

Category of Request

New Grant

Grant Continuation

Previous Council File No. 040756

Change in Previously Approved Grant

Previous Council File No.

Project/Program Title: Federally Qualified Health Center Program (FQHC)

Grantor Agency: Human Resources and Services Administration of the U.S. Department of Health and Human Services

Grant Application Date: 06/30/05

Anticipated Award Date: 09/15/05

Please provide the following information:

1. Description of Grant Project/Program (Include Target Locations and Populations):

- FQHC Look-alike Health Center located at the Johnston Community Health Center.
- The program is federally funded to serve the medically underserved areas of Milwaukee and most at-risk community members
- The primary zip codes served are 53207, 53221, 53215, and 53204
- This is a federal reimbursement program for provider incurred expenses. The specific provider is Aurora Health Care at the above location.

2. Relationship to City-wide Strategic Goals and Departmental Objectives:

- The Milwaukee Health Department is the applicant and fiscal agent.
- Our 2010 strategic goal is to provide 95% healthcare services to 95% of City residents.
- Our current commitment is promoting healthy behaviors and healthcare access.
- Aurora is the medical provider of services
- The FQHC Look Alike Board is the governing body.

3. Need for Grant Funds and Impact on Other Departmental Operations (Applies only to Programs):

The FQHC Look Alike Board provides for an Executive Director and the board's operational needs. The grant budget consolidates both the Board costs and Provider costs. The recertification process for this federally funded program is required yearly.

4. Results Measurement/Progress Report (Applies only to Programs):

- Quarterly patient services report
- Annual recertification report
- Expenditures report
- Milwaukee Health Department fiscal oversight and payment authorization.

5. Grant Period, Timetable and Program Phase-out Plan:

The grant period of September 16, 2005 through September 15, 2006 coincides with the recertification timeframe.

6. Provide a List of Subgrantees:

N/A

7. If Possible, Complete Grant Budget Form and Attach to Back.

Attached FQHC Program Information Notice – Attachments, appendices and forms available upon request.

CITY OF MILWAUKEE OPERATING GRANT BUDGET

PROJECT/PROGRAM TITLE: Federally Qualified Health Center Grant
 CONTACT PERSON: Janet Nell

PROJECT/PROGRAM YEAR: 2005-2006

NUMBER OF POSITIONS		LINE DESCRIPTION	PAY RANGE NO.	GRANTOR SHARE	IN-KIND SHARE	CASH MATCH A/C #	TOTAL
NEW	EXISTING						
		SUPPLIES AND MATERIALS					
		Office Supplies		1,000			1,000
		TOTAL SUPPLIES AND MATERIALS		1,000			1,000
		SERVICES					
		Legal Fees		15,000			15,000
		Printing		1,000			1,000
		Temporary Administrative Support		3,000			3,000
		Travel and Training		5,840			5,840
		Meeting Expenses		500			500
		Phones		500			500
		TOTAL SERVICES		25,840			25,840
		CONTRACTUAL SERVICES					
		Pass Through to Sinai Samaritan/Aurora of FQHC funds		1,000,000			1,000,000
		Contract for Executive Director		77,500			77,500
		Audit Contract		10,000			10,000
		TOTAL CONTRACTUAL SERVICES		1,087,500			1,087,500
		TOTAL COSTS		1,114,340	0		1,114,340