FISCAL YEAR 2009 APPROPRIATIONS REQUESTS

GENERAL QUESTIONNAIRE -- REP. Michael Burgess (TX-26)

Must be completed and submitted NO LATER than COB March 7, 2008

Please submit completed questionnaire to josh.martin@mail.house.gov

PLEASE NOTE: ALL REQUESTS MUST INCLUDE A FORMAL LETTER OF REQUEST ON OFFICIAL LETTERHEAD EXPLAINING THE PROJECT. THIS QUESTIONNAIRE SHOULD ACCOMPANY, NOT REPLACE, A FORMAL LETTER OF REQUEST AND ANY OTHER QUESTIONNAIRE

I. PROJECT BACKGROUND & PURPOSE

1. Please provide a formal name for this project:

Parkland Health and Hospital System (PHHS) Community Oriented Primary Care (COPC) Mobile Medical Suite

2. Please describe the project and its purpose:

PHHS seeks to purchase a mobile medical suite to provide Texas Health Steps medical screenings and link hard to reach populations with a medical home. In addition, during the construction of new health centers the mobile suite would begin to offer primary care services to the children of the community.

3. Please outline the project plan, including the finance plan:

PHHS seeks to purchase a mobile medical suite to provide Texas Health Steps medical screenings and link hard to reach populations with a medical home. In addition, during the construction of new health centers the mobile suite would begin to offer primary care services to the children of the community.

The 40 foot Mobile Medical Suite will come equipped with two exam rooms, a nursing area, a patient registration area, and air suspension allowing COPCs to treat roughly twenty patients a day for primary care - approximately 4,500 patients in a given year.

The total cast of the project, inclusive of salaries, supplies and operating expenses is \$660,000 over a two year period. Parkland will fund \$285,000 of the total cost. No other entity will be funding this project.

| | First Year | Second Year | Total |
|---------------------|--|-------------|-----------|
| Mobile Medical | \$375,000 | 0 | \$375,000 |
| Suite (2 exam | | | |
| rooms, nursing | | | |
| area, registration | | | |
| area, air | | | |
| suspension, 40 ft. | The state of the s | | |
| long) | | | |
| Nurse practitioner, | \$140,000 | \$70,000 | \$210,000 |
| nurse, driver | | | |
| Supplies and | \$50,000 | \$25,000 | \$75,000 |
| laboratory | | | |
| equipment | | | |
| Total | \$565,000 | \$95,000 | \$660,000 |

II. BENEFIT TO THE 26th DISTRICT AND/OR THE UNITED STATES OF AMERICA

1. Please explain how this project will improve life, the economy or the general welfare of the 26th District and/or the country at-large. Please be specific (i.e. outline number of jobs created, savings to economy or taxpayers, improve national security):

This project will improve the health, safety and welfare of Dallas County residents and in the general public's interest. This project falls within the goals of the Health Resources and Services Administrations' FY2005-2010 Strategic Plan meeting the objectives to improve access to and quality of health care and eliminate health disparities (ftp://ftp.hrsa.gov/about/strategicplan2005.pdf).

Furthermore, we believe the PHHS COPC Mobile Medical Suite is appropriately funded through HRSA's Health Facilities Construction and Equipment sub-account. Federal funding for this project will help fulfill HRSA's mission to improve quality of life in the State of Texas.

In 2006, 172,030 children under 19 years old in Dallas County were eligible for Texas Health Steps services. A mobile suite could be used to offer Texas Health Steps screenings at schools far removed from the clinics and health centers. Once the screening was complete the families would receive information about the school-based clinics and encouraged to use them as a medical home.

In addition, during the construction new health centers the mobile suite would begin to offer primary care services to the children of the community. Following the center's completion, an established panel of patients would begin receiving services in their new medical home and the van would then be deployed to another area.

In FY 2007, Parkland had more than 260,000 unique inpatients in addition to roughly 150,000 emergency department visits. During the same time period, Parkland treated 2,448 unique inpatients from the 26th Congressional district.

2. Please explain why this project should be considered a priority:

In 2006, 172,030 children under 19 years old in Dallas County were eligible for Texas Health Steps services. A mobile suite could be used to offer Texas Health Steps screenings at schools far removed from the clinics and health centers.

III. REQUEST

1. Amount of money you are requesting:

\$375,000

2. Agency from which you are requesting funds:

HHS - Health Resources and Services Administration (HRSA)

3. Account from which you are requesting funds:

Health Facilities Construction and Equipment

1. What is the total project cost and can you provide a federal-state/local-other funding breakdown?

The total cast of the project, inclusive of salaries, supplies and operating expenses is \$660,000 over a two year period. Parkland will fund \$285,000 of the total cost. No other entity will be funding this project.

| Total | \$565,000 | \$95,000 | \$660,000 |
|--|------------|-------------|-----------|
| equipment | | | |
| laboratory | | | |
| Supplies and | \$50,000 | \$25,000 | \$75,000 |
| Nurse practitioner, nurse, driver | \$140,000 | \$70,000 | \$210,000 |
| rooms, nursing area, registration area, air suspension, 40 ft. long) | \$140,000 | \$70,000 | £210.000 |
| Mobile Medical Suite (2 exam | \$375,000 | 0 | \$375,000 |
| X 1 1 1 X 1 1 1 | First Year | Second Year | Total |

| 2. Has the project ever received federal funds before? If so, please elaborate. |
|---|
| No |
| 3. Has the project received state, local or private funds before? If so, please elaborate. |
| Parkland's COPC program has received several grants from foundations and federal programs. In 2005, the Crystal Charity Ball provided \$375,000 for a MMS. A second, refurbished suite was also purchased in 2005 with funds from the Children's Health Fund and private donations. In 2000, the program received a \$486,000 Expanded Medical Capacity grant for Healthcare for the Homeless (HRSA), with \$150,000 earmarked for a MMS. An anonymous donation of \$225,000 in 1997 and a \$130,000 grant from the Dallas Foundation in 1990 have also provided funding for the mobile suites. |
| 4. Can you demonstrate a commitment for future funds from state, local, or private sectors? If so, please elaborate to the extent possible. |
| Once the mobile suite is purchased, it is not anticipated that there will be future appropriation requests for this project |
| |
| 5. How do you intend to spend federal funds for this project (operating, construction, studies, equipment purchase, salaries, other)? |

The federal funds will be spent on the Mobile Medical Suite equipment. Other costs, salaries, supplies and operating

expenses, will be paid for by Parkland.

| 6. Does the project request stem from a currently-funded federal program (i.e., an already existing congressional authorization)? If so, please explain and be as specific as possible. No. |
|---|
| V. PROJECT HISTORY |
| 1. Please <u>briefly</u> explain the level of support for the project in the local and any other community (if letters of support exist, please attach to this form). |
| Local support for this project can be seen though the private donations from local foundations. Letters of support are available upon request. |
| 2. Has the project encountered any objections within the local or other interested communities? If so, please describe (if letters or official records exist noting objections to the project, please attach to this form). |
| No. |
| 3. Please <u>briefly</u> explain the current stage and expected timeline of the project in a great a detail as possible. |
| Funds can be expended immediately upon receipt and it is expected that all federal funds will be dispersed within six months. |
| VI. CONTACTS |
| 1. Who is the primary point of contact for the request? |
| Steven Bristow Director, Legislative Affairs |
| 2. Contact information (telephone and e-mail): |
| 214-590-6182 sbrist@parknet.pmh.org |
| 3. Mailing address of entity that would receive the funding? |
| 5201 Harry Hines Blvd Dallas, TX 75235 |
| VII. TRANSPORTATION PROJECTS |

1. How much of this request can be spent in fiscal year 2009?

| 2. If this is a highway, transit, rail, or aviation request, did you check eligibility with the state DOT, FTA, FRA, or FAA? |
|--|
| 2a. If yes, did the agency indicate the project is eligible under the account requested? |
| 3. If this is an FHWA request, is the project considered by the state and/or regional transportation officials as critical to their needs? |
| 4. If a highway request, is the project on the state's transportation improvement plan? |
| |

| PRIORITI PROJECT REQUEST CRITERIA |
|---|
| CERTIFICATION: |
| I, <u>Dr. Ron J. Anderson</u> , ATTEST THAT THIS PROJECT REQUEST MADE ON BEHALF OF |
| Parkland Health and Hospital System MEETS THE FOLLOWING CRITERIA: |
| All appropriations requests must be a priority for the 26th District and/or the country-at large as defined as enhancing life, liberty, or the general welfare. |
| All requests must be a proper and wise use of federal taxpayer dollars and must be justified as such. Projects that include a commitment to match federal funds will receive priority consideration. |
| All requests will be immediately posted on the website and supporting documentation made available to press outlets and interested individuals. |
| 4. None of the funding requested will be used for a building, program, or project that has been named for Congressman Michael C. Burgess, M.D. No request will be made that Congressman Burgess or his spouse has any financial interest. |
| All requests shall be made in accordance with House of Representatives rules, and within Appropriations Committee deadlines. No funding request will be submitted after the deadline established by the Committee |
| Name of person certifying Dr. Ron J. Anderson, MD |
| Title of person certifying President and CEO |
| Project name as it will appear in the bill Parkland Health and Hospital System (PHHS) Community Oriented Primary Care (COPC) Mobile Medical Suite |
| Legal name of entity making request Dallas Co. Hospital District d/b/a Parkland Health & Hospital System (PHHS) |
| Address |
| 5201 Harry Hines Blvd Dallas, TX 75235 |
| Signature 3/4/208 |
| |