

# REQUEST FOR LEGISLATIVE ACTION

Completed by County Counselor's Office:

Res/Ord No.: 19307

Sponsor(s): Crystal Williams

Date: November 14, 2016

<b>SUBJECT</b>	<p>Action Requested  <input checked="" type="checkbox"/> Resolution  <input type="checkbox"/> Ordinance</p> <p>Project/Title: PDMP User Agreement</p>														
<b>BUDGET INFORMATION</b> <i>To be completed By Requesting Department and Finance</i>	<table border="1" data-bbox="316 514 1201 861"> <tr> <td>Amount authorized by this legislation this fiscal year:</td> <td>\$0</td> </tr> <tr> <td>Amount previously authorized this fiscal year:</td> <td>\$0</td> </tr> <tr> <td>Total amount authorized after this legislative action:</td> <td>\$0</td> </tr> <tr> <td>Amount budgeted for this item * (including transfers):</td> <td>\$0</td> </tr> <tr> <td>Source of funding;</td> <td></td> </tr> <tr> <td>FROM: Unappropriated Fund 2017</td> <td>FROM ACCT: \$0</td> </tr> <tr> <td></td> <td>TO ACCT: \$0</td> </tr> </table> <p>* If account includes additional funds for other expenses, total budgeted in the account is: \$</p> <p><b>OTHER FINANCIAL INFORMATION:</b></p> <p><input type="checkbox"/> No budget impact (no fiscal note required)  <input type="checkbox"/> Term and Supply Contract (funds approved in the annual budget); estimated value and use of contract:  Department: Estimated Use: \$</p> <p>Prior Year Budget (if applicable):  Prior Year Actual Amount Spent (if applicable):</p>	Amount authorized by this legislation this fiscal year:	\$0	Amount previously authorized this fiscal year:	\$0	Total amount authorized after this legislative action:	\$0	Amount budgeted for this item * (including transfers):	\$0	Source of funding;		FROM: Unappropriated Fund 2017	FROM ACCT: \$0		TO ACCT: \$0
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Source of funding;															
FROM: Unappropriated Fund 2017	FROM ACCT: \$0														
	TO ACCT: \$0														
<b>PRIOR LEGISLATION</b>	<p>Prior ordinances and (date): Ord 4912- October 17, 2016</p> <p>Prior resolutions and (date):</p>														
<b>CONTACT INFORMATION</b>	<p>RLA drafted by: Jaime Rogers, Chief of Health Services, 816-881-1348</p>														
<b>REQUEST SUMMARY</b>	<p>Attached please find the User Agreement provided by St Louis County, that they are requesting Jackson County sign in order to participate in the PDMP.</p> <p>Participation cost is also outlined in the attached on Exhibit C. The first year will be prorated at 75% of cost to cover April-December 2017.</p> <p>Funds have been requested to cover the first year for Unincorporated Jackson County, Kansas City, and Independence for a total of \$28,097.21.</p> <p>Jackson County: \$4,982.29  Kansas City: \$20,482.76  Independence: \$2,632.16</p>														

CLEARANCE	<input type="checkbox"/> Tax Clearance Completed (Purchasing & Department) <input type="checkbox"/> Business License Verified (Purchasing & Department) <input type="checkbox"/> Chapter 6 Compliance - Affirmative Action/Prevailing Wage (County Auditor's Office)	
ATTACHMENTS		
REVIEW	Department Director: <i>[Signature]</i>	Date: 11-9-14
	Finance (Budget Approval): <i>If applicable</i> <i>[Signature]</i>	Date: 11/9/14
	Division Manager: <i>[Signature]</i>	Date: 11/9/14
	County Counselor's Office:	Date:

Fiscal Information (to be verified by Budget Office in Finance Department)

- This expenditure was included in the annual budget.
- Funds for this were encumbered from the \_\_\_\_\_ Fund in \_\_\_\_\_.
- There is a balance otherwise unencumbered to the credit of the appropriation to which the expenditure is chargeable and there is a cash balance otherwise unencumbered in the treasury to the credit of the fund from which payment is to be made each sufficient to provide for the obligation herein authorized.
- Funds sufficient for this expenditure will be/were appropriated by Ordinance # \_\_\_\_\_
- Funds sufficient for this appropriation are available from the source indicated below.

Account Number:	Account Title:	Amount Not to Exceed:
_____	_____	_____

- This award is made on a need basis and does not obligate Jackson County to pay any specific amount. The availability of funds for specific purchases will, of necessity, be determined as each using agency places its order.
- This legislative action does not impact the County financially and does not require Finance/Budget approval.

**Jaime Rogers**

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**From:** Varner, Emily <EVarner@stlouisco.com>  
**Sent:** Wednesday, November 2, 2016 4:36 PM  
**To:** Jaime Rogers  
**Cc:** Schmidt, Spring; Donaldson, Kate  
**Subject:** RE: PDMP User Agreement

Hi Jaime!

Thanks for sending the ordinance last week; I'm hoping the introduction went well! In following up from our last call, I split the number of users and annual cost estimates for Kansas City out by county. I have the user counts and cost estimates for Kansas City, Jackson County, and Independence below! As a reminder, there are 2,439 users attributed to Kansas City with an estimated annual participation cost of \$33,967.33.

**Kansas City (in Clay County)**

- 328 users
- \$4,567.97 per year

**Kansas City (in Platte County)**

- 150 users
- \$2,089.01 per year

**Kansas City (in Jackson County)**

- 1,961 users
- \$27,310.34 per year

75% the 1st year

**Jackson County (excluding Kansas City & Independence)**

- 477 users
- \$6,643.06 per year

**Independence**

- 252 users
- \$3,509.54 per year

Please let me know if there is anything else we can do to assist!

Thanks!  
Emily

**Emily Varner, MPH**

*Prescription Drug Monitoring Program Coordinator  
Assessment, Evaluation, and Policy  
Division of Health Promotion and Public Health Research  
Saint Louis County Department of Public Health  
314-615-1658  
evarner@stlouisco.com*

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## Jaime Rogers

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**From:** Jay D. Haden  
**Sent:** Tuesday, November 8, 2016 3:30 PM  
**To:** Jaime Rogers  
**Subject:** RE: PDMP User Agreement

Jaime:

This looks fine. It will need to go to the legislature, so we'll require an RLA.

Jay D. Haden  
Chief Deputy County Counselor  
Jackson County, Missouri  
Direct Dial (816) 881-3150  
Fax (816) 881-3398

\*\*\*\*\*PLEASE NOTE\*\*\*\*\*

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**From:** Jaime Rogers  
**Sent:** Friday, November 4, 2016 2:22 PM  
**To:** Jay D. Haden  
**Subject:** FW: PDMP User Agreement

Jay,

The PDMP Agreement is attached.

Have a great weekend

-jaime

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**From:** Varner, Emily [<mailto:EVarner@stlouisco.com>]  
**Sent:** Friday, November 4, 2016 11:07 AM  
**To:** Jaime Rogers <[JRogers@jacksongov.org](mailto:JRogers@jacksongov.org)>