

## Jackson County Missouri

Jackson County Courthouse 415 E.12th Street, 2nd floor Kansas City, Missouri 64106 (816)881-3242

## Legislation Text

File #: 14899, Version: 0

## IN THE COUNTY LEGISLATURE OF JACKSON COUNTY, MISSOURI

**A RESOLUTION** authorizing the County Executive to execute a Memorandum of Understanding with Truman Medical Center Behavioral Health Services, a division of Truman Medical Center to cover the cost of atypical anti-psychotic medications dispensed at the Jackson County Detention Center at a cost to the County not to exceed \$89,993.00.

**RESOLUTION #14899**, February 9, 2004

INTRODUCED BY Robert A. Stringfield, County Legislator

WHEREAS, the County and Truman Medical Center Behavioral Health Services, a division of Truman Medical desire to enter into an Agreement, a copy of which is attached hereto and incorporated by reference herein, whereunder Truman Medical Center will supplement services for inmates in the Jackson County Detention Center; and,

WHEREAS, the County has determined that it is in the best interest of its citizenry to contract Truman Medical Center Behavioral Health Services for the provision of for these supplemental services to cover the cost of atypical anti-psychotic medications dispensed at the Detention Center; and,

WHEREAS, the attached Memorandum of Understanding provides a suitable mechanism by which to implement the mutual goal of the parties; now therefore,

BE IT RESOLVED by the County Legislature of Jackson County, Missouri, that the County Executive be, and is hereby, authorized to execute the Memorandum of Understanding on behalf of the County.

| File #: 14899, Version: 0  |  |                |            |            |           |                 |        |
|--|--|----------------|------------|------------|-----------|-----------------|--------|
| Effective Date: This Res<br>Legislature.   | solution shall b                       | e effective in | nmediatel  | y upon its | s passage | e by a majority | of the |
| APPROVED AS TO FOR   | RM:                                    |                |            |            |           |                 |        |
|  |  |                |            |            |           |                 |        |
| Acting County Counselor  |  |                |            |            |           | <del></del>     |        |
| Certificate of Passage   |  |                |            |            |           |                 |        |
| I hereby certify that the passed on The votes thereon were a                                 | _February 17_                          |                |            |            | •         |                 | •      |
| Yeas8  | <u> </u>                               | Nays           | 0          |            | -         |                 |        |
| Abstaining   | 0                                      | Absent         | 1          |            | _         |                 |        |
|  |  |                |            |            |           |                 |        |
| Date   |  | Mary Jo Sp     | ino Clerk  | of Legisla | ture      | _               |        |
| There is a balance otl expenditure is chargeab the credit of the fund fro herein authorized. | le and there is                        | a cash bala    | ince othei | wise une   | ncumber   | ed in the treas | ury to |
| ACCOUNT NUMBER:  | 002 2602 71                            | 70             |            |            |           |                 |        |
| ACCOUNT TITLE:   | h Fund<br>Health Care<br>ental Supplie | s              |            |            |           |                 |        |
| NOT TO EXCEED:   | \$89,993.00                            |                |            |            |           |                 |        |
| Date   |  | Mar<br>Finance | nager      | of         | the       | <br>Division    | of     |