

Draft Policy Budget

June 10, 2004

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Outline

- Recap of General Fund 3 Year Forecast
- Recommended Budget Policies
- Major Operational Assessments
- Service Deliver Improvements
- Utility Rate Increases
- Hospital District
- Budget Calendar



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Recap of Major Revenue Assumptions - **2005**

- Effective Tax 50.13¢ (current year tax rate is 49.28¢)
- AV Growth 1.3%
- Sales Tax 4.5% (being revised to 5%)
- Maintain Utility Transfer Rates
 - Electric Utility 9.1%
 - Water Utility 8.2%
- Revenue Initiative Results \$ 1.1 million impact



Recap of Major Expenditure Assumptions - **2005**

- Maintain 2.0 Officers per 1,000
- 2% Public Safety Premium
- Maintain current funding levels for public health and social services
- O&M for new / expanded facilities based on 2-yr revised schedule
- Pay for Performance all employees
- Health Benefits Increase

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Recap of Major Cost Drivers

		2005		2006	2007
Public Safety	\$_	18.31	\$	18.89	\$ 15.72
Health Insurance	\$	4.13	\$	4.81	\$ 5.53
PFP - non-uniform		\$2.22		\$2.47	\$2.54
New Facilities O&M	\$	0.85	\$	1.91	\$ 0.37
Subtotal Major Cost Driver Increases	\$	25.52	\$	28.08	\$ 24.16
Other Estimated Cost Increases		\$2.97	<u> </u>	(\$0.84)	\$2.49
Total Estimated Cost Increases	\$	28.49	\$	27.23	\$ 26.64

One-Time Critica	al Costs	
Vehicle Replacements	\$ 4.86	
Technology replacements& upgrades	\$ 1.50	
EMS Safety Equipment	\$ 0.60	
Firefighter Equipment	\$ 0.30	
HHSD Facility Equipment	\$ 0.04	
Library Facility Equipment	\$ 0.20	
Parks Facility Equipment	<u>\$ 0.50</u>	
Total	\$ 8.00	7

Recap Financial Forecast

		2005		2006		2007	
Beginning Balance	\$	38.15	\$	30.15	\$	25.66	
Revenues	\$_	471.38	\$	488.45	\$	510.66	
Expenditures:							
Base Budget - Prior Fiscal Year	\$	462.31	\$	471.38	\$	488.44	
Cost Drivers	\$	28.49	\$	27.23	\$	26.64	
Total Expenditures	\$	490.80	\$	498.62	\$	515.08	
Excess / (Deficit)	\$	(19.42)	Ś	(10.17)	\$	(4.42)	
Required Cost Reductions:							
Departmental Percentage Reduction		5.00%		2.76%		1.23%	
Reduced Expenditures	\$	19.41	\$	10.18	\$	4.41	
Total Revised Expenditures	\$	471.38	\$	488.44	\$	510.67	
Revised Excess / (Deficit)	s	(0.00)	\$	0.01	\$	(0.01)	
Ending Balance	s	38.14	\$	30.16	\$	25.65	
Critical One-Time Costs: Equipment & Repairs	\$	7.99	\$	4.50	\$\$	5.04	
Adjusted Ending Balance	\$	30.15	\$	25.66	\$	20.61	



Recommended Budget Policies

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Revenue Policies

- Continuation of Effective Property Tax Rate
- Maintenance of Utility Transfer Rates
- Judicious utilization of Unreserved Fund Balance for one-time capital purchases
- Capturing additional revenue through fee increases and new fees



Expenditure Policies – City Council Commitments

- Maintain 2.0 Police Officers per 1,000 pop.
- Preserve Fire Dept. Task Force Staffing
- Implement Public Safety Premium through Authorized Negotiations
- Reinstate Pay For Performance
- Mitigate Health Care Increases to our Workforce
- Maintain 2004 Revised Schedule for opening new / expanded facilities

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Major Operational Assessments



Four Key Areas

- **■** Community Services
- Infrastructure
- Public Safety
- Citywide Support Services

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Community Services

- Increased park mowing cycle times
- Inadequate park facility maintenance
- Decreased availability of structured youth programming
- Reduced library hours and inadequate library materials



Infrastructure

- Inadequate street maintenance
- Deteriorated / Failing Storm Drainage System
- Reduced Water Wastewater System Upgrades / Improvements
- Limited Code Enforcement staffing and increasing workload
- Inadequate preventative maintenance funding for signalization

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Public Safety

- Delays in records and evidence processing
- Backlog on entering latent prints from crime scenes
- Decreasing Equipment and Inventory Control
- Increased time to issue a warrant
- Increased time to update cases on municipal court system



Citywide Support Services

- Decreased internal controls
- Lack of depth / limited succession planning

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Service Delivery Improvements



Services

- Customer Service Call Center
- One Stop Shop and Amanda Technology
- Consolidated Code Enforcement

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Utility Rate Increases



Water Utility

- Cost Drivers
 - Aging infrastructure
 - Increased treatment volume
 - Service extensions / system growth
- Rate Increases

Water 9.2%
Wastewater 14.7%
Combined 11.8%

Avg Residential bill \$ 5.16 per month increase

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Drainage Utility

- Cost Drivers
 - Deteriorated / failing drainage infrastructure
 - \$ 800 million infrastructure improvements for critical areas only
- Rate Increases (4th year of 5 year approved plan)

■ Residential 6.98% (\$ 0.44 increase: \$ 6.30 to \$ 6.74)

■ Commercial 22.85% (\$27.51 increase: \$ 120.41 to \$ 147.92)



Hospital District

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Hospital District Election

- May 15, 2004 Travis County voters created a county-wide hospital district in an election initiated by citizen petition
- Neither the City of Austin nor Travis County can levy taxes for hospital purposes or for indigent medical care
- New District must therefore be organized promptly to levy taxes for fiscal year 2004-05
- Failure to do so will mean disruption in the management and funding of the components of the local health care system, as follows:
 - the Daughters of Charity Health Services of Austin ("Seton") and UTMB leases at Brackenridge Hospital
 - the City and County Community Health Centers (FQHCs)
 - the City and County Medical Assistance (MAP/RMAP) Programs



History of our Health Care System

- 1880s City and County funded what became known as the "City/County Hospital"
- By 1907, the County had sold its interest in the hospital to the City
- City opened what was then known as the "City Hospital" in 1915. The new hospital had forty beds and was later named Brackenridge Hospital
- Based on demand for pediatric services and the support of the physician community, the City established Children's Hospital on the Brackenridge campus in 1988

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History of our Health Care System (cont.)

- Recognizing the need for clinic care for the uninsured, City and County established clinics and medical assistance programs in the 1970s and 1980s
- Clinics initially limited to MAP and Medicaid patients
- 1991 City sought and received Federally Qualified "Look-Alike" status, allowing clinics to receive higher cost-based Medicaid and Medicare reimbursement
- 2001 City received full status as FQHC
 - better pricing for pharmaceuticals
 - addition of a behavioral health program
 - opportunities for additional grants or programs
 - group purchasing through Texas and National Associations



Current Status of Clinic System

- 11 medical, 3 dental centers with approximately 50,000 patients
- Medical services include:
 - Primary care
 - Maternity
 - Pediatrics
 - Internal medicine
 - Women's health services
- Approximately 320 employees in Primary Care Department

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Lease of Brackenridge to Seton

- 1980s / 1990s increasing complexity in healthcare market
- Financially risky for City to continue to operate Brackenridge
 - Stand-alone operations, no network
 - Federal aid expected to decrease
 - Governmental constraints resulted in lack of flexibility
 - Increased competition two systems emerging in Austin
- Seton lease provided for:
 - Rental of Brackenridge and Children's Hospital
 - Responsibility for operating these as part of Seton's business
 - Provision of indigent hospital and related physician care to all
 - Provision of specified services to MAP patients
 - City's risk capped for these services



- Seton obligated to operate Brackenridge and Children's and to provide specified levels of trauma and other care at Seton facilities for 50 years (plus 30 more)
- Seton has economic risk in indigent care demand for City residents
- District not have burden or risk of operating a hospital
- Seton has provided same level of care for non-City Travis County residents
- Seton may seek to negotiate with District for additional payments for non-City indigent residents of Travis County

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What Transfers to the District?

- Title to land and improvements of Brackenridge and Children's
- Rights and obligations, including funding of Seton / UTMB leases
- Rights to leased space and equipment used by Community Health Centers
- Rights and obligations of operating Community Health Centers and to administering MAP and charity care programs
- Cash appropriated by City for remainder of current fiscal year related to assets and services transferred
- Obligation to contribute tax money to State for Disproprogram for matching federal funds



What does not Transfer?

- Public health functions related to disease and pest control, certain immunizations
- Rights and obligations related to EMS and Star Flight
- Public safety functions
- General Fund reserves

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Transition Steps

- Appointment and qualification of the District board by the City and County
- Establishment of an initial District infrastructure sufficient for the District to conduct business
- Consideration and approval of a budget for the fiscal year 2004-05
- Certification of the tax rate adjustment for services that are no longer the responsibility of the City and County



Transition Steps (cont.)

- Adoption of necessary methods for purchasing, disbursements, and methods for accounting and control
- Selection of an employee retirement and benefits system
- Determination of how District services will be structured in the future, including which functions or employees transfer to the District and what the effect of such a transfer will be on the related employees

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Reduction to the City's Tax Rate

- In fiscal year 2004-05, City no longer be able to tax for health care system and for the related services that transfer to the District.
- Also required under State law City must take into account the decrease in the amount it will spend (would have spent) for health care purposes in fiscal year 2004-05 and must reduce its property tax rate in accordance with the amount of the decrease.
- City Manager expects her fiscal year 2004-05 budget to be proposed at the effective tax rate less the property tax rate reduction related to costs transferred to the District.
- Many variables yet to be known precisely: assessed valuation, effective tax rate



Reduction to the City's Tax Rate

Overall assessed value	\$49.8 billion
Effective tax rate	\$0.5013
Total current (FY 05) tax revenue	\$244,846,049
Amount of revenue per one-cent tax	\$4,884,222
Amount that would have been spent on	
transferred health care services	\$29,644,784
Proposed reduction to the tax rate	\$0.0607
Reduced tax rate proposed for adoption	\$0. 44 06

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Budget Calendar

Key Dates

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July 29th City Manager submits Proposed Budget

July 29th City Council sets dates for Public

Hearings on Proposed Budget

August 5th Budget Presentations & Public Hearings

August 12th Budget Presentations & Public Hearings

August 26th Budget Presentations & Public Hearings

Sept. 2nd Budget Presentations & Public Hearings

Sept. 13th - 15th Budget Approval Readings