Introduced by Boffaloe

First Reading 6-5-23

Second Reading _____6-20-23

Council Bill No. B 139-23

AN ORDINANCE

authorizing a program services contract with the Missouri Department of Health and Senior Services for workforce services; amending the FY 2023 Annual Budget by appropriating funds; amending the FY 2023 Annual Budget by adding and deleting positions in the Department of Public Health and Human Services; amending the FY 2023 Annual Budget Appendix - Authorized Full Time Equivalent (FTE) position identification summary; amending the FY 2023 Classification and Pay plan by adding, closing, and reassigning classifications; and fixing the time when this ordinance shall become effective.

BE IT ORDAINED BY THE COUNCIL OF THE CITY OF COLUMBIA, MISSOURI, AS FOLLOWS:

SECTION 1. The City Manager is hereby authorized to execute a program services contract with the Missouri Department of Health and Human Services for workforce services for the period of October 1, 2022 through June 30, 2024. The form and content of the program services contract shall be substantially as set forth in "Exhibit A" attached hereto and made a part hereof. Any actions taken by or on behalf of the City in connection with such agreement prior to the date of this ordinance are hereby approved and ratified.

SECTION 2. The FY 2023 Annual Budget adopted by Ordinance No. 025123 is amended by appropriating the sum of \$516,393.71 from the State Revenue HEALTH-WORKFORCE-MDHSS Account No. 11003030-462100 in the following amounts to the following accounts:

\$45,228.40	Permanent Positions Account No. 11003020-500101 HEALTH-WORKFORCE-MDHSS
\$37,086.00	Permanent Positions Account No. 11003310-500101 HEALTH-WORKFORCE-MDHSS
\$905.00	Deferred Compensation Account No. 11003020-500135 HEALTH-WORKFORCE-MDHSS

\$742.00	Deferred Compensation Account No. 11003310-500135 HEALTH-WORKFORCE-MDHSS
\$650.00	Cell Phone Allowance Account No. 11003020-500138 HEALTH-WORKFORCE-MDHSS
\$10,543.14	Social Security Account No. 11003020-500210 HEALTH-WORKFORCE-MDHSS
\$2,837.00	Social Security Account No. 11003310-500210 HEALTH-WORKFORCE-MDHSS
\$6,151.00	LAGERS Account No. 11003020-500220 HEALTH-WORKFORCE-MDHSS
\$5,044.00	LAGERS Account No. 11003310-500220 HEALTH-WORKFORCE-MDHSS
\$140.00	Disability Insurance Account No. 11003020-500230 HEALTH-WORKFORCE-MDHSS
\$115.00	Disability Insurance Account No. 11003310-500230 HEALTH-WORKFORCE-MDHSS
\$18,270.00	Employee Health Insurance Account No. 11003020-500234 HEALTH-WORKFORCE-MDHSS
\$9,135.00	Employee Health Insurance Account No. 11003310-500234 HEALTH-WORKFORCE-MDHSS
\$52.00	Life Insurance Account No. 11003020-500236 HEALTH-WORKFORCE-MDHSS
\$42.00	Life Insurance Account No. 11003310-500236 HEALTH-WORKFORCE-MDHSS
\$3,000.00	Non-Accountable Auto Allowance Account No. 11003020-500184 HEALTH-WORKFORCE-MDHSS
\$92,590.00	Temporary Positions Account No. 11003020-500105 HEALTH-WORKFORCE-MDHSS
\$2,500.00	Printing Account No. 11003020-501220 HEALTH-WORKFORCE-MDHSS

\$11,456.47	Office Supplies Account No. 11003020-501210 HEALTH-WORKFORCE-MDHSS
\$112,911.68	Training and Travel Account No. 11003020-502010 HEALTH-WORKFORCE-MDHSS
\$13,101.54	Training and Travel Account No. 11003030-502010 HEALTH-WORKFORCE-MDHSS
\$688.75	Training and Travel Account No. 11003310-502010 HEALTH-WORKFORCE-MDHSS
\$762.04	Training and Travel Account No. 11003313-502010 HEALTH-WORKFORCE-MDHSS
\$1,495.00	Training and Travel Account No. 11003011-502010 HEALTH-WORKFORCE-MDHSS
\$95.00	Training and Travel Account No. 11003012-502010 HEALTH-WORKFORCE-MDHSS
\$7,181.28	Training and Travel Account No. 11003210-502010 HEALTH-WORKFORCE-MDHSS
\$997.00	Training and Travel Account No. 11003010-502010 HEALTH-WORKFORCE-MDHSS
\$926.81	Training and Travel Account No. 11004440-502010 HEALTH-WORKFORCE-MDHSS
\$936.00	Telephone Account No. 11003020-503555 HEALTH-WORKFORCE-MDHSS
\$14,377.60	Miscellaneous Account No. 11003020-505990 HEALTH-WORKFORCE-MDHSS
\$5,000.00	Mileage Account No. 11003020-504840 HEALTH-WORKFORCE-MDHSS
\$10,000.00	Program Supplies Account No. 11003020-501301 HEALTH-WORKFORCE-MDHSS
\$2,400.00	Software Account No. 11003020-506653 HEALTH-WORKFORCE-MDHSS

\$36,034.00	Computer/Electronic Items Account No. 11003020-501820 HEALTH-WORKFORCE-MDHSS
\$58,000.00	Contractual Services Account No. 11003020-504990 HEALTH-WORKFORCE-MDHSS
\$5,000.00	Food Account No. 11003020-501392 HEALTH-WORKFORCE-MDHSS

SECTION 3. The FY 2023 Annual Budget is further amended by adding and deleting positions in the Department of Public Health and Human Services as follows:

Positions Added

1.00 FTE	7304 Public Health Planning Manager	Grade E6	Exempt
			Non-Exempt
1.00 FTE	1006 Senior Administrative Support Assistant	Grade B6	Non-Exempt

Position Deleted

1.00 FTE 7308 Public Health Planning Supervisor Grade D9 Exempt

SECTION 4. The FY 2023 Annual Budget Appendix – Authorized Full Time Equivalent (FTE) position identification summary adopted by Ordinance No. 025123 is amended by adding and deleting positions in the Department of Public Health and Human Services as follows:

Public Health and Human Services

Administration (3010)

7700 - Director, Public Hlth & Hum Srvs	1.00 FTE
7680 – Asst. Director, Pub. Hlth & Hum Srvs	1.00 FTE
7308 - Public Health Planning Supervisor	1.00 FTE
7304 – Public Health Planning Manager	<u>1.00 FTE</u>
4801 – Public Information Specialist	1.00 FTE
4103 – Senior Planner	5.00 FTE
1030 – Medical Billing Clerk	1.00 FTE
1008 – Senior Administrative Supervisor	1.00 FTE
1006 – Senior Administrative Supp. Assistant	1.00-2.00 FTE
1005 – Administrative Support Assistant	1.00 FTE

SECTION 5. The FY 2023 Classification and Pay Plan adopted by Ordinance No. 025129 is amended by adding, closing, and reassigning classifications as follows:

	ASSIFICATION: c Health Planning Manager	Grade	E6	Exem	pt
CLOSED CLASSIFICATION: 7308 – Public Health Planning Supervisor		Grade D9		Exempt	
REASSIGNE 1.00 FTE	TO CLASSIFICATION: 7308 – Public Health Planning Supervis		Grade		Exempt
SECT passage.	7304 – Public Health Planning Manager		Grade		Exempt n and after its
PASSED this day of, 2023.					
ATTEST:					4
City Clerk	<u>Mayor</u>	pANO r and Pr	residin	g Offic	uffalve er
APPROVED	AS TO FORM:				
City Counsel		do eve!!	oble :-	a 4b - C	State Devices
OLIVIII IOAI	TION: I certify there are sufficient fund	is avail	able II	i uie c	state Reveilue

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cover the above appropriations.

HEALTH-WORKFORCE-MDHSS Account No. 11003030-462100 to

Director of Finance