



COUNTY OF SAN MATEO
Inter-Departmental Correspondence
Health System



DATE: February 7, 2012
BOARD MEETING DATE: March 13, 2012
SPECIAL NOTICE/HEARING: None
VOTE REQUIRED: 4/5ths Vote

TO: Honorable Board of Supervisors

FROM: Jean S. Fraser, Chief, Health System
Lisa Mancini, Director, Aging and Adult Services

SUBJECT: Amendment to the Agreement with the California Department of Aging for the Health Insurance Counseling and Advocacy Program for FY 2011-12

RECOMMENDATION:

- A) Adopt a Resolution authorizing the President of the Board to execute Amendment One to Agreement HI-1112-08 with the California Department of Aging for the addition of \$29,188 in one-time-only funding for the term July 1, 2011 through June 30, 2012, increasing the total from \$286,547 to \$315,735; and
- B) Approve an Appropriation Transfer Request in the amount of \$29,188 from Unanticipated Revenue to Provider Services Programs.

BACKGROUND:

Your Board has designated itself as the Area Agency on Aging (AAA) of San Mateo County to carry out state-funded programs pursuant to the Older Americans Act of 1965. On April 28, 2009, your Board approved the 2009-12 Area Plan for Services for Older Adults and Adults with Disabilities. This plan, together with the annual budget, fulfills the California Department of Aging's (CDA) requirements and generates a contract from CDA for funding.

On June 28, 2011, your Board authorized Resolution 71496 approving Agreement HI-1112-08 with CDA for FY 2011-12 in the amount of \$286,547 for Health Insurance Counseling and Advocacy Program (HICAP) services. This Resolution also authorized the Chief of the Health System or designee to execute limited contract amendments.

Aging and Adult Services (AAS) contracts with a community-based organization, Self-Help for the Elderly, to provide HICAP services, a volunteer-supported program that provides three basic services: community education, lay counseling, and advocacy related to Medicare. HICAP is an integral component of California's community-based

long-term care system. Medicare beneficiaries and those under 65 who are about to become eligible for Medicare or who are disabled and on Medicare are eligible for HICAP services. Locally, the program is designed to carry out goals and objectives of the AAA Plan related to advocacy and health care.

DISCUSSION:

Amendment One provides additional one-time-only federal funding from State Health Insurance Program (SHIP) funds that were unspent at the end of FY 2010-11 and funds from the past year's grants reconciliation. These funds will be used to promote and expand HICAP activities in the community and meet or exceed State required benchmarks. An amendment with Self Help for the Elderly will be brought before your Board or designee for review and approval.

County Counsel has reviewed and approved the Resolution and Amendment as to form and content.

The increase in federal funding from this Amendment contributes to the Shared Vision 2025 outcome of a Healthy Community by providing clients with objective health insurance counseling, advocacy and assistance. It is anticipated that 75% of HICAP services recipients will feel that they have gained useful knowledge and feel that their personal life has improved.

Performance Measure:

Measure	FY 2010-11 Actual	FY 2011-12 Projected
Percent of HICAP service recipient stakeholder survey respondents indicating that their personal life has improved as a result of services received	93%*	75%

* The FY 2010-11 performance exceeded the division's expectations.

FISCAL IMPACT:

The term of the Agreement remains July 1, 2011 through June 30, 2012. The maximum obligation for this Agreement is increased by \$29,188 in federal funds, from \$286,547 to a new maximum obligation of \$315,735. There is no impact on the Net County Cost as a result of this action.

RESOLUTION NO. _____

BOARD OF SUPERVISORS, COUNTY OF SAN MATEO, STATE OF CALIFORNIA

* * * * *

**RESOLUTION AUTHORIZING THE PRESIDENT OF THE BOARD TO EXECUTE
AMENDMENT ONE TO AGREEMENT HI-1112-08 WITH THE CALIFORNIA
DEPARTMENT OF AGING FOR THE ADDITION OF \$29,188 IN ONE-TIME-ONLY
FUNDING FOR THE TERM JULY 1, 2011 THROUGH JUNE 30, 2012, INCREASING
THE TOTAL FROM \$286,547 TO \$315,735**

RESOLVED, by the Board of Supervisors of the County of San Mateo, State of California, that

WHEREAS, this Board has designated itself as the Area Agency on Aging of San Mateo County to carry out programs pursuant to the Older Americans Act of 1965; and

WHEREAS, on June 28, 2011, this Board of Supervisors, by Resolution 71496, authorized Agreement HI-1112-08 with the California Department of Aging (CDA) for Health Insurance Counseling and Advocacy Program (HICAP) funding in the amount of \$286,547 for the term July 1, 2011 through June 30, 2012; and

WHEREAS, both parties now wish to amend the Agreement by increasing the amount by \$29,188 for the purpose of enhancing services for older adults in the community with no change to the term; and

WHEREAS, there has been presented to this Board of Supervisors for its consideration and acceptance an Amendment, reference to which is hereby made for

further particulars, and this Board of Supervisors has examined and approved the same as to form and content and desires to enter into the same.

NOW, THEREFORE, IT IS HEREBY DETERMINED AND ORDERED that the President of the Board of Supervisors be and is hereby authorized and directed to execute said Amendment to Agreement HI-1112-08 with CDA for and on behalf of the County of San Mateo, and the Clerk of this Board shall attest the President's signature thereto.

* * * * *

STANDARD AGREEMENT AMENDMENT

STD. 213 A (Rev 6/03)

☒ CHECK HERE IF ADDITIONAL PAGES ARE ATTACHED 1 Pages

AGREEMENT NUMBER

HI-1112-08

REGISTRATION NUMBER

AMENDMENT NUMBER

1

1. This Agreement is entered into between the State Agency and Contractor named below:

STATE AGENCY'S NAME

California Department of Aging

CONTRACTOR'S NAME

COUNTY OF SAN MATEO, Aging and Adult Services

2. The term of this

Agreement is **July 1, 2011** through **June 30, 2012**

3. The maximum amount of this
- \$ 315,735.00**

Agreement after this amendment is: **Three hundred fifteen thousand seven hundred thirty-five and 00/100 dollars**

4. The parties mutually agree to this amendment as follows. All actions noted below are by this reference made a part of the Agreement and incorporated herein:

This amendment increases the dollar amount available under this Agreement. The additional funds consisting of the following will be used to enhance HICAP services:

- State Health Insurance Assistance Program (SHIP) Performance Grant funds to local assistance.
- Reconciled SHIP funds.
- Area Agency on Aging's (AAA) unspent FY 2010-11 HICAP funds to FY 2011-12
- Unspent HICAP funding from the previous federal grant.
- Transfers of funding requested by AAAs.

Exhibit B, Amendment 1, Budget Detail, Payment Provisions and Closeout, page 6, is attached and incorporated, and replaces the original Exhibit B, Budget Detail and Payment Provisions, page 6.

The Budget, amendment 1, is hereby incorporated by reference and replaces the original Budget.

All other terms and conditions shall remain the same.

IN WITNESS WHEREOF, this Agreement has been executed by the parties hereto.

CONTRACTOR

CONTRACTOR'S NAME (If other than an individual, state whether a corporation, partnership, etc.)

COUNTY OF SAN MATEO, Aging and Adult Services

BY (Authorized Signature)



DATE SIGNED (Do not type)

PRINTED NAME AND TITLE OF PERSON SIGNING

Adrienne J. Tissier, President, Board of Supervisors

ADDRESS

225 37TH AVE SAN MATEO CA 94403**STATE OF CALIFORNIA**

AGENCY NAME

California Department of Aging

BY (Authorized Signature)



DATE SIGNED (Do not type)

PRINTED NAME AND TITLE OF PERSON SIGNING

Rachel de la Cruz, Manager, Contracts and Business Services Section

ADDRESS

1300 National Drive, Suite 200, Sacramento, CA 95834

CALIFORNIA
Department of General Services
Use Only

☒ Exempt per: Older Californians Act

Exhibit B - Budget Detail, Payment Provisions, and Closeout

**HEALTH INSURANCE COUNSELING AND ADVOCACY PROGRAM
 BUDGET DISPLAY - Fiscal Year 2011/12**

County of San Mateo

	PROGRAM BASELINE	ONE-TIME ONLY *	TOTAL	NET CHANGE
HICAP Program				
HICAP Fund	57,347	-	57,347	-
Reimbursements (Ins Fund)	114,726	-	114,726	-
Federal SHIP Funds	95,645	21,182	116,827	21,182
TOTAL HICAP Program	267,718	21,182	288,900	21,182
HICAP Administration				
HICAP Fund	3,086	-	3,086	-
Reimbursements (Ins Fund)	6,179	-	6,179	-
Federal SHIP Funds	9,564	8,006	17,570	8,006
TOTAL Administration	18,829	8,006	26,835	8,006
Grand Total All Funds	286,547	29,188	315,735	29,188

Funding Summary

HICAP Fund	60,433	-	60,433	-
Reimbursements (Ins Fund)	120,905	-	120,905	-
Federal SHIP Funds	105,209	29,188	134,397	29,188
Total Funds	286,547	29,188	315,735	29,188

*ONE-TIME ONLY includes 10/11 carryover, reconciliation, unallocated and performance grant funds

**Funds for this contract are provided by using the following Centers for Medicare & Medicaid Services grant:

CFDA#	Project Title	Award #	Effective Date
93.779	State Health Insurance Assistance Program	1NOCMS020196-18-00	4/1/2010
93.779	State Health Insurance Assistance Program	1NOCMS020196-19-00	4/1/2011
93.779	State Health Insurance Assistance Program	1NOCMS020196-20-00	4/1/2012

COUNTY OF SAN MATEO			REQUEST NO.	
APPROPRIATION TRANSFER REQUEST				
DEPARTMENT HEALTH SYSTEM - AGING AND ADULT SERVICES			DATE 12/20/2011	
1. REQUEST TRANSFER OF APPROPRIATIONS AS LISTED BELOW:				
	C O D E S			
	FUND OR ORG.	ACCOUNT	AMOUNT	DESCRIPTION
From	57071	1952	29,188.00	FEDERAL AID-AGING
To	57071	6169	29,188.00	PSP-AGING AND ADULT
Justification. (Attach Memo if Necessary)				
TO RECONGNIZE ADDITIONAL FUNDS FROM CALIFORNIA DEPARTMENT OF AGING FOR HICAP PROGRAMS PER AMENDMENT NO. 1, AGREEMENT NO. HI-1112-08. THERE IS NO ADDITIONAL NET COUNTY COST AS RESULT OF THIS ATR.				
			DEPARTMENT HEAD	
			BY: <div style="text-align: right;">TV</div>	DATE
2. <input type="checkbox"/> Board Action Required <input type="checkbox"/> Four-Fifths Vote Required <input type="checkbox"/> Board Action Not Required				
Remarks:			COUNTY CONTROLLER	
			BY:	DATE
3. <input type="checkbox"/> Approve as Requested <input type="checkbox"/> Approve as Revised <input type="checkbox"/> Disapprove				
Remarks:			COUNTY MANAGER	
			BY:	DATE

DO NOT WRITE BELOW THIS LINE — FOR BOARD OF SUPERVISORS' USE ONLY

BOARD OF SUPERVISORS, COUNTY OF SAN MATEO, STATE OF CALIFORNIA
RESOLUTION TRANSFERRING FUNDS
RESOLUTION NO. _____

RESOLVED, by the Board of Supervisors of the County of San Mateo, that

WHEREAS, the Department hereinabove named in the Request for Appropriation, Allotment or Transfer of Funds has requested the transfer of certain funds as described in said Request; and

WHEREAS, the County Controller has approved said Request as to accounting and available balances, and the County Manager has recommended the transfer of funds as set forth hereinabove:

NOW, THEREFORE, IT IS HEREBY ORDERED AND DETERMINED that the recommendations of the County Manager be approved and that the transfer of funds as set forth in said Request be effected.

Regularly passed and adopted this _____ day of _____, 19_____.

Ayes and in favor of said resolution:

Supervisors: _____

Noes and against said resolution:

Supervisors: _____

Absent

Supervisors: _____

ATTEST:

Clerk of Said Board

CHAIRMAN, BOARD OF SUPERVISORS
COUNTY OF SAN MATEO

DISTRIBUTION:	
WHITE	— BOARD OF SUPERVISORS
GREEN	— CONTROLLER
CANARY	— COUNTY MANAGER
PINK	— DEPARTMENT
GOLDENROD	— TREASURER