

**AMENDMENT TO AGREEMENT  
BETWEEN THE COUNTY OF SAN MATEO AND  
LIFEMOVES**

THIS AMENDMENT TO THE AGREEMENT, entered into this \_\_\_\_ day of \_\_\_\_\_, 2019, by and between the COUNTY OF SAN MATEO, hereinafter called "County," and LifeMoves, hereinafter called "Contractor";

**W I T N E S S E T H:**

WHEREAS, pursuant to Government Code Section 31000, County may contract with independent contractors for the furnishing of such services to or for County or any Department thereof;

WHEREAS, the parties entered into an Agreement for enabling services for homeless individuals March 13, 2018, for the term of January 1, 2018, through December 31, 2018, in an amount not to exceed \$298,030; and

WHEREAS, the parties wish to amend the Agreement to extend the term by one year, through December 31, 2019, and to increase the amount payable by \$296,500, to an amount not to exceed \$594,530.

**NOW, THEREFORE, IT IS HEREBY AGREED BY THE PARTIES HERETO AS FOLLOWS:**

1. Section 3. Payments of the Agreement is amended in its entirety, to read as follows:

In consideration of the services provided by Contractor in accordance with all terms, conditions, and specifications set forth in this Agreement and in Exhibit A, County shall make payment to Contractor based on the rates and in the manner specified in Exhibit B. County reserves the right to withhold payment if County determines that the quantity or quality of work performed is unacceptable. In no event shall County's total fiscal obligation under this Agreement exceed FIVE HUNDRED NINETY-FOUR THOUSAND FIVE HUNDRED THIRTY DOLLARS (\$594,530). In the event that the County makes any advance payments, Contractor agrees to refund any amounts in excess of the amount owed by the County at the time of contract termination or expiration. Contractor is not entitled to payment for work not performed as required by this Agreement. All invoices must be approved by the Director of Health Care for the Homeless and Farmworkers Health program or their Designee and paid within 30 days of receipt of the invoice. Invoices must be sent to: [SMMC-Accounts-Payable@smcgov.org](mailto:SMMC-Accounts-Payable@smcgov.org). Processing time may be delayed if invoices are not submitted electronically.

2. Section 4. Term of the Agreement, is amended to read as follows:


Subject to compliance with all terms and conditions, the term of this Agreement shall be

from January 1, 2018, through December 31, 2019.

3. Original Exhibit A and Exhibit B are each hereby replaced with Revised Exhibit A, (rev. 11/5/18) and Revised Exhibit B (rev. 11/5/18) respectively, copies of which are attached hereto and incorporated into the Agreement by this reference.
4. **All other terms and conditions of the Agreement dated March 13, 2018, between the County and Contractor shall remain in full force and effect.**

In witness of and in agreement with this Agreement's terms, the parties, by their duly authorized representatives, affix their respective signatures:

For Contractor: LifeMoves

  
Contractor Signature

2/5/2019  
Date

Bruce Ives  
Contractor Name (please print)

---

COUNTY OF SAN MATEO

By:  
President, Board of Supervisors, San Mateo County

Date:

ATTEST:

By:  
Clerk of Said Board

---

**Revised Exhibit A**  
(rev. 11/5/18)

In consideration of the payments set forth in Exhibit B, Contractor shall provide the following services:

Each reporting period shall be defined as one (1) calendar year running from January 1st through December 31st, unless specified otherwise in this agreement. The "first reporting period" is January 1, 2018 through December 31, 2018. The "second reporting period" is January 1, 2019 through December 31, 2019.

Contractor shall provide the following services during the term of the Agreement.

The County of San Mateo, through the Health Care for the Homeless/Farmworker Health (HCH/FH) Program, is contracting with Contractor for a full range of enabling services to homeless individuals, centered on care coordination, eligibility assistance and transportation, and for enabling services to unsheltered homeless individuals in collaboration with San Mateo County's Street Medicine Team.

Contractor will provide care coordination, including outreach, patient and community education, transportation, follow-up, translation services, referral services and ongoing support to improve client access to San Mateo County Health primary medical services and HCH/FH Program contractors, and eligibility assistance for health coverage and Supplemental Security Income (SSI) or Social Security Disability, to at least **550 unduplicated homeless individuals** during the first reporting period and at least **500 unduplicated homeless individuals** during the second reporting period, who meet Bureau of Primary Health Care (BPHC) criteria for homeless individuals. A unique unduplicated individual is one who has not been previously served and invoiced for during each reporting period. At a **minimum, 75%** of these individuals will meet the BPHC definition as a "street" or "shelter" homeless individual. A **minimum of 75 of these homeless individuals** during first reporting period, and a **minimum of 50 of these homeless individuals** during second reporting period, will complete an SSI (Medi-Cal) or SSDI (Medicare) application. A **minimum of 30 of these homeless individuals** during first reporting period, and a **minimum of 50 of these homeless individuals** during second reporting period, will complete a health coverage application.

In collaboration and coordination with San Mateo County's Street Medicine Team, Contractor will provide care coordination, including transportation to medical appointment, picking up medication, and establishing and evaluating adherence to case plan, medical needs assessments and intensive follow-up to at least **140 unduplicated street homeless individuals** during each reporting period who meet BPHC criteria for street homeless individuals. A unique unduplicated individual is one who have not been previously served and invoiced for during each reporting period, including for the care coordination services specified in the preceding paragraph. **100%** of these individuals (**140**) will meet the BPHC definition as a street homeless individual at the time service is initiated.

The services to be provided by Contractor will be implemented as measured by the following objectives and outcome measures:

**OBJECTIVE 1:** Provide initial assessments, healthcare planning and on-going **care coordination** services to a minimum of **550 unduplicated homeless individuals** during first reporting period and a minimum of **500 unduplicated homeless individuals** during the second reporting period in order to better access primary medical care through the San Mateo County Health, and HCH/FH Program contractors. A minimum of **1,375** on-going care coordination

encounters will be provided to these individuals during each reporting period. At least 90% will have a documented care plan.

Care Coordinator/Manager definition- Acts as a liaison between the target population patient and health care organizations. They offer support by providing some or all of the following: information on health and community resources, coordinating transportation, making appointments, delivering appointment reminders, tracking whether appointments are kept, and accompanying people at appointments; help clients and providers develop a care management plan and assist clients to adhere to the plan.

Each care coordination encounter must meet BPHC visit criteria to be included in the count. Such criteria, as they may be amended from time to time, are incorporated by reference into this Agreement. BPHC presently defines a enabling services encounters as an encounter between a service provider and a patient during which services are provided that assist patients in the management of their health needs, including patient needs assessments, the establishment of service plans, the maintenance of referral, tracking, and follow-up systems, and the provision of support services in accessing health care. These encounters must be face-to-face with the patient. Third party and remote (telephone, email) interactions on behalf of or with a patient are **not** counted in care coordination encounters.

**OBJECTIVE 1.1.: Intensive Care Coordination-** Of the 550 homeless individuals served during first reporting period and the 500 homeless individuals served during second period, assist at least **50** new (client has not been seen for primary care in the past two years) unduplicated homeless individuals each reporting period to engage and maintain participation in health programs and the health care system in order to better access health services through the San Mateo County Health and HCH/FH Program contractors. These individuals will receive intensive and on-going care coordination services as appropriate. The determination of a client's status as a new unduplicated homeless individual shall be determined by Contractor through use of a standard information gathering protocol, as approved by the HCH/FH Program, which may include self-attestation by the client. A minimum of **150** on-going encounters will be provided to these 50 individuals.

**Outcome Measure 1.A:** Of the homeless individuals that do not currently have a medical home, a minimum of 50% will establish a medical home, as defined by a minimum of two (2) attended primary medical care service appointments (one initial appointment and one follow-up appointment).

**Outcome Measure 1.B:** At least 150 of homeless individuals served will be homeless individuals with chronic health conditions (including, but not limited to, obesity, hypertension, diabetes, and asthma).

**Outcome Measure 1.C:** At least 75% of clients with a scheduled primary care appointment will attend at least one scheduled primary care appointment.

**OBJECTIVE 2:** To improve access to health care by providing eligibility assistance to homeless individuals in making application for appropriate health insurance coverage plans.

**Outcome 2.A.** 100% of clients that are uninsured will be referred to Contractor Health Care for Homeless staff for health insurance enrollment. As warm hand offs increase rate of success, it is highly encouraged that Contractor HCH eligibility staff accompany the

Community Health Outreach Worker in the field as schedule permits.

**Outcome 2.B:** At least 75 individuals during the first reporting period, and at least 50 individuals during the second reporting period, will complete an SSI (Medi-Cal) or SSDI (Medicare) application. SSI/SSDI claims will be supported from the initial submission to the time of any proceedings before an Administrative Law Judge (AJL), as needed. At least 60% (45) will attend their scheduled Consultative Exam. At least 20% (15) of these individuals will be classified in the "street" homeless category.

**Outcome 2.C:** All (100%) homeless clients will be screened for health insurance/coverage eligibility. At least 30 homeless individuals each reporting period will complete a submission for coverage through Covered California, the Medi-Cal Program or the Access to Care for Everyone (ACE) Program, as appropriate.

**OBJECTIVE 3:** Provide initial assessments, healthcare planning and on-going care coordination services to a minimum of **140** street homeless individuals for coordination with the San Mateo County Street Medicine Team each reporting period in order to better access primary medical care through the San Mateo County Health, and HCH/FH Program contractors. A minimum of **300** on-going care coordination encounters will be provided to these 140 individuals. At least 90% will have a documented care plan.

**Outcome Measure 3.A:** Working with the Street Medicine Team, provide medical needs assessment for 100% (140) of the individuals served.

**Outcome Measure 3.B:** Of the homeless individuals that do not currently have a medical home, a minimum of 20% (28) will establish a medical home, as defined by a minimum of two (2) attended primary medical care service appointments (one initial appointment and one follow-up appointment).

**Outcome Measure 3.C:** At least 80% (112) of clients with a scheduled primary care appointment will attend at least one scheduled primary care appointment.

## **RESPONSIBILITIES:**

The following are the contracted reporting requirements that Contractor must fulfill:

All demographic information as defined and required by the HCH/FH Program will be obtained from each homeless individual receiving enabling services from Contractor during the term of the Agreement. All encounter information as defined by the HCH/FH Program shall be collected for each encounter. Demographic and encounter data will be submitted to the HCH/FH Program with the monthly invoice. **This may include data for homeless individuals for whom the Contractor is not reimbursed.** The contractor will also assess and report each individual's farmworker status as defined by BPHC.

If Contractor charges for services provided in this contract, a **sliding fee scale policy** must be in place.

Any **revenue** received from services provided under this contract must be reported.

**Site visits by the County** will occur at least annually, to review patient records and program operations, to verify the accuracy of invoicing and to assess the documentation of client

activities/outcome measures. The HCH/FH Program will work with contractor to reasonably accommodate scheduling for routine site visits and will provide contractor with a minimum notice of two (2) weeks for routine site visits. If the HCH/FH Program has identified issues, such as, but not limited to:

- a. Lack of timely reporting, especially repeatedly
- b. Multiple invoicing errors: billings for duplicates; spreadsheet and invoice don't match; etc.
- c. Ongoing difficulties in scheduling routine site visits
- d. Complaints or reports that raise concerning issues; etc.,

The HCH/FH Program will advise the contractor of the issue and provide notice to the Contractor of the possibility to perform an unannounced site visit.

**Reporting requirements-** Monthly and quarterly submission of invoices and reports are required via template supplied by the County to Contractor. If during the term of the Agreement, the County pursues a cloud-based data depository (data base) for monthly and quarterly data, contractor will be required to upload/submit data into data base.

A monthly invoice detailing the number of new unduplicated individuals served in the previous month and the total encounters provided to all homeless individuals in this same time period will be submitted to the HCH/FH Program by the 10<sup>th</sup> day of the following month. A separate transportation encounter spreadsheet will also be provided monthly. Invoices shall be sufficiently detailed to allow for tracking an individual to their provided demographic data.

Quarterly reports providing an update on the contractual goals, objectives, and outcome measures shall be submitted no later than the 15<sup>th</sup> day of the month following the completion of each calendar quarter throughout the contract.

If contractor observes routine and/or ongoing **problems in accessing medical or dental care services within SMMC**, Contractor shall track and document problematic occurrences and submit this information to designated HCH/FH staff for follow up.

Contractor will provide County with notice (within 10 calendar days) of staff changes involving services provided under this Agreement, and a plan on how to ensure continuity of services. Contractor will facilitate HCH/FH staff meeting with new staff members soon after they have started to orient them with the Agreement and program, including contracting and related staff.

Participate in planning and quality assurance activities related to the HCH/FH Program.

Participate in HCH/FH Provider Collaborative Meetings and other workgroups.

Participate in community activities that address homeless issues (i.e., Homeless, One Day Count, Homeless Project Connect, etc.).

Provide active involvement in the BPHC Office of Performance Review Process.

**Revised Exhibit B**  
(rev. 11/5/18)

In consideration of the services provided by Contractor described in Exhibit A and subject to the terms of the Agreement, County shall pay Contractor based on the following fee schedule and terms:

County shall pay Contractor at a rate of \$275.00 for each established (not "new" as defined in Exhibit A) unduplicated homeless individual invoiced up to the maximum of 500 individuals during the first reporting period and at a rate of \$315.00 for each established unduplicated homeless individual invoiced up to the maximum of 450 individuals during the second reporting period for delivery of care coordination services, limited as defined in Exhibit A for "unique unduplicated."

County shall pay Contractor at a rate of \$525.00 for each unduplicated homeless individual invoiced for delivery of intensive care coordination services for "new" clients as defined in Exhibit A, up to the maximum of 50 during each reporting period, limited as defined in Exhibit A for "unique unduplicated."

County shall pay contractor at a rate of \$420.00 per unduplicated homeless individual invoiced, during the term of the Agreement, for completing application to SSI (Medi-Cal) or SSDI (Medicare) up to and including at least one potential appeal of a denial, up to a maximum of 75 during first reporting period and up to a maximum of 50 during second reporting period, limited as defined in Exhibit A for homeless category and "unique unduplicated".

County shall pay contractor at a rate \$110.00 per unduplicated homeless individual invoiced during the term of the Agreement for completing the enrollment process for Covered California, Medi-Cal or the ACE program, as appropriate, up to a maximum of 30 during first reporting period and up to a maximum of 50 during the second reporting period, limited as defined in Exhibit A for "unique unduplicated."

County shall pay Contractor at a rate of \$600.00 for each unduplicated street homeless individual during each reporting period, for delivery of care coordination services for street medicine clients, up to the maximum of 140 individuals during each reporting period limited as defined in Exhibit A for "unique unduplicated." Individuals invoiced under this term must also be unique and unduplicated from the care coordination terms in the second and third paragraphs of this Exhibit B.

County shall pay Contractor at a rate \$45.00 per unduplicated one-way trip provided to homeless individuals invoiced during each reporting period for the delivery of transportation services, up to the maximum of 344 trips during the first reporting period and up to a maximum of 400 trips during the second reporting period. Contractor will provide a separate transportation encounter spreadsheet to County on a monthly basis.

Contractor will invoice the HCH/FH Program by the 10<sup>th</sup> day of the month after rendered services with the number of homeless individuals and encounters for the previous month.



## Budget Overview

<b>January 1, 2018 to December 31, 2018</b>	<b>Service</b>	<b>Unduplicated Maximum</b>	<b>Payment per Unit</b>
Must be unduplicated across all three categories and invoiced only once in one category	Care Coordination	500 patients	\$275/patient
	Intensive Care Coordination	50 patients	\$525/patient
	Street Medicine Care Coordination	140 patients	\$600/patient
Can be invoiced in addition to any care coordination	SSI/SSDI	75 patients	\$420/patient
Can be invoiced in addition to any care coordination	Health Coverage	30 patients	\$110/patient
Can be invoiced in addition to any care coordination	Transportation	344 trips	\$45/trip

<b>January 1, 2019 to December 31, 2019</b>	<b>Service</b>	<b>Unduplicated Maximum</b>	<b>Payment per Unit</b>
Must be unduplicated across all three categories and invoiced only once in one category	Care Coordination	450 patients	\$315/patient
	Intensive Care	50 patients	\$525/patient
	Street Medicine Care Coordination	140 patients	\$600/patient
Can be invoiced in addition to any care coordination	SSI/SSDI	50 patients	\$420/patient
Can be invoiced in addition to any care coordination	Health Coverage	50 patients	\$110/patient
Can be invoiced in addition to any care coordination	Transportation	400 trips	\$45/trip