



County of San Mateo

Inter-Departmental Correspondence

Department: HEALTH SERVICES ADMIN

File #: 18-406

Board Meeting Date: 5/22/2018

Special Notice / Hearing: None
Vote Required: Majority

To: Honorable Board of Supervisors

From: Louise F. Rogers, Chief, Health System
Lisa Mancini, Director, Aging and Adult Services

Subject: Executing Older Americans Act Title III, VII, Ombudsman and Health Insurance Counseling and Advocacy Program Provider Agreements

RECOMMENDATION:

Adopt a resolution authorizing the Chief of the Health System or her designee to execute the Older Americans Act Community provider agreements and subsequent amendments, for the term July 1, 2018, through June 30, 2019, in an aggregate amount not to exceed \$3,593,896.

BACKGROUND:

In January 2017, Aging and Adult Services (AAS) issued a Request for Proposal (RFP) to community providers providing services to older adults and adults with disabilities, for the term July 1, 2017, through June 30, 2020. Community providers were selected by the RFP Evaluation Committee to provide Older Americans Act (OAA) Title III, Title VII, Ombudsman and Health Insurance Counseling and Advocacy Program (HICAP) services.

On April 24, 2018, your Board, acting as the Area Agency on Aging (AAA), approved the updated Area Plan for Services for Older Adults and Adults with Disabilities (Plan) 2016-2020. The Plan provides a profile of the County's senior population, identifies goals, and makes recommendations for services to be funded with San Mateo County's OAA funds. The Plan, along with the annual budget, fulfilled the California Department of Aging's (CDA) requirements and generated an agreement for CDA funding.

At today's meeting, your Board is requested to ratify the CDA funding contracts for OAA Title III, Title VII, and Ombudsman programs, as well as for HICAP, for the period July 1, 2018, through June 30, 2019.

DISCUSSION:

Provisions in the agreements with OAA community providers are essentially the same as in the prior

agreements and are in conformance with CDA requirements. These agreements target those in economic and social need, with particular attention to low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas. AAS requests that your Board authorize the Chief of the Health System or her designee to prepare and execute the OAA community provider agreements for an aggregate total amount not to exceed \$3,593,896.

AAS also requests your Board to authorize the Chief of the Health System or her designee to execute individual provider agreement amendments that modify the County's maximum fiscal obligation and/or modify the contract term and/or services so long as the modified term or services is/are within the current or revised fiscal provisions, including future One-Time-Only funds or additional funds received and allocated for the contract period.

The resolution has been reviewed and approved by County Counsel as to form, and the individual provider agreements will be approved by County Counsel as to form.

This resolution contributes to the Shared Vision 2025 outcome of a Healthy Community by facilitating the execution of these OAA provider agreements, which allows AAS to provide home and community-based services to individuals aged 60 and above. It is anticipated that the OAA community providers will serve 32,500 individuals aged 60 and above.

PERFORMANCE MEASURE:

Measure	FY 2017-18 Estimated	FY 2018-19 Projected
Number of individuals (60 and above) who receive home and community based services through the AAA.	32,500 individuals	32,500 individuals

FISCAL IMPACT:

The term of the OAA provider agreements is July 1, 2018, through June 30, 2019, in an aggregate amount not to exceed \$3,593,896. Of this total, \$2,709,725 is from OAA Area Plan funding, \$277,688 is from HICAP, \$9,400 is from Medicare Improvements for Patients and Providers Act of 2008 (MIPPA), \$36,469 is from Financial Alignment, and the remaining \$560,614 is Net County Cost. Funds for these services are included in the AAS FY 2018-19 Recommended Budget.