Dep't Recomm.:

SUBMITTAL TO THE BOARD OF SUPERVISORS COUNTY OF RIVERSIDE, STATE OF CALIFORNIA

685



SUBMITTAL DATE:

June 22, 2010

SUBJECT: Amended FY 2009/2010 Agreement #2 HI-0910-21 between California Department of Aging (CDA) and County of Riverside for Health Insurance Counseling and Advocacy Program (HICAP)

RECOMMENDED MOTION: That your Honorable Board:

FROM: Office on Aging

- 1. Approve and Authorize Chair to execute amended Agreement #2 HI-0910-21 for FY 2009-2010 (July 1, 2009 to June 30, 2010) with the California Department of Aging (CDA).
- 2. Direct the Auditor-Controller to increase Estimated Revenue and Appropriations by \$19,213 as outlined in Attachment A.
- 3. Return all 4 copies to the Office on Aging for further processing.

	BACKGROUND: The last agreement was a is being amended to include additional One Department of Aging. Continued next page		approved on January 26, 2010 as agenda item 3.33. It is Time Only (QTO) funds received from the California			
•			Hilary F. Cla Director.	rke Deputy Director	For Edward F. W	alsh,
	FINANCIAL DATA	Current F.Y. Total Cost:	\$ 19,213	In Current Year	Budget:	No
		Current F.Y. Net County Cost:	\$ 0	Budget Adjustn	nent:	Yes
		Annual Net County Cost:	\$ 0	For Fiscal Year:	•	09/10
SOURCE OF FUNDS: Federal 100%			1	Positions To Deleted Per A		
					Requires 4/5 V	ote 🖂
	C.E.O. RECOM	MENDATION:	APPROVE	Sioson		

ani Sioson

LAGG. CIC.

Prev. Agn. Ref.: 3.33 (1/26/10) District: All ATTACHMENTS FILED

WITH THE CLERK OF THE BOARD

County Executive Office Signature

Agenda Number:

3.58

SUBJECT: Amended FY 2009/2010 Agreement #2 HI-0910-21 between California Department of Aging (CDA) and the County of Riverside for Health Insurance Counseling and Advocacy Program (HICAP) June 22, 2010 Page 2

BACKGROUND: (continued)

The previous agreement signed by the Board on January 26, 2010 was for \$443,901. This new amendment shows an increase amount of \$19,213 and a new amendment agreement total of \$463,114.

The increase amount was not included in our current budget for FY 2009/2010 and an adjustment to our Agency budget is needed as shown on Attachment "A".

The amended total includes \$17,467 Federal SHIP funds, and \$1,746 Federal Administration SHIP funds all OTO funds.

Under the terms of this agreement with CDA, OTO funds can be used for the following purposes:

- 1. Purchase of equipment which enhances the delivery of services to the eligible service population.
- 2. Innovative pilot projects as approved by CDA.
- 3. Home and Community based projects as approved by CDA.

We are requesting no additional matching contribution and there is no impact to County General Fund.

OFFICE ON AGING ATTACHMENT A

Adjusting revenues and appropriations:

INCREASED ESTIMATED RE	EVENUE	
21450-5300100000-767140	Fed-Misc Reimbursement	19,213
		\$19,213
INCREASED APPROPRIATION	DNS	
21450-5300100000-523640	Computer Equip-Non Fixed Asset	1,746
21450-5300100000-536200	Contributions to Non-Co Agency	17,467
		\$19,213

Attachment A: Date: 6/22/10

STD, 213	3 A (Day 6	/U3/

X	CHECK HERE IF ADDITIONAL PAGES ARE ATTACHED 1 Pages	AGREEMENT NUMBER	AMENDMENT NUMBER
		HI-0910-21	2
		REGISTRATION NUMBER	
		·	
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 RIVERSIDE		
2.	The term of this		
	Agreement is July 1, 2009 through	June 30, 2010	
3.	The maximum amount of this \$ 463,114.00		
	Agreement after this amendment is: Four hundred sixty-th	ree thousand one hundr	ed fourteen and 00/100
4.	The parties mutually agree to this amendment as follows. All a	ctions noted below are by	this reference made a part
	of the Agreement and incorporated herein:		
	This amendment increases funds by \$ 19,213 in order to pro		
	Exhibit B-1, Budget Detail, Payment Provisions, and Closeou	t, amendment 1, page 7, is	deleted. Exhibit B-2,

Budget Detail, Payment Provisions, and Closeout, amendment 2, page 7 is attached and incorporated.

All other terms and conditions shall remain the same. IN WITNESS WHEREOF, this Agreement has been executed by the parties there CALIFORNIA **CONTRACTOR Department of General Services Use Only** CONTRACTOR'S NAME (If other than an individual, state whether a corporation, partnership, etc.) **COUNTY OF RIVERSIDE** BY (Authorized Signature) DATE SIGNED (Do hol PRINTED NAME AND TITLE OF PERSON SIGNING **ADDRESS** 6296 RIVERCREST DRIVE, SUITE K RIVERSIDE CA 92507 STATE OF CALIFORNIA AGENCY NAME California Department of Aging BY (Authorized Signature) DATE SIGNED (Do not type) Ø PRINTED NAME AND TITLE OF PERSON SIGNING Exempt per: Mello Grunland Rachel de la Cruz, Manager, Contracts and Business Services Section Older Californians Act **ADDRESS** 1300 National Drive, Sacramento, CA 95834

State of California
California Department of Aging
CDA 303 (New 12/05)

Agreement #: HI-0910-21
Effective Date: 07/01/09
Amendment #: 2
Amendment Date 6/1/2010

Exhibit B- Budget Detail, Payment Provisions, and Closeout HEALTH INSURANCE COUNSELING AND ADVOCACY PROGRAM BUDGET DISPLAY Fiscal Year 2009/10

County of Riverside

	PROGRAM	ONE-TIME		NET
	BASELINE	ONLY	TOTAL	CHANGE
HICAP Program				
HICAP Fund	95,192	-	95,192	-
Reimbursements (Ins Fund)	190,433	· · •	190,433	· , =
Federal SHIP Performance Award	-	3,483	3,483	-
Federal SHIP Rural Funds	5,225	-	5,225	·
Federal SHIP Funds	99,974	37,501	137,475	17,467
TOTAL HICAP Program	390,824	40,984	431,808	17,467
HICAP Administration				
HICAP Fund	5,678	-	5,678	
Reimbursements (Ins Fund)	11,366	-	11,366	- ·
Federal SHIP Rural Funds	522	-	522	-
Federal SHIP Funds	9,991	3,749	13,740	1,746
TOTAL Administration	27,557	3,749	31,306	1,746
Grand Total All Funds	418,381	44,733	463,114	19,213
Funding Summary				
HICAP Fund	100,870	-	100,870	
Reimbursements (Ins Fund)	201,799	•	201,799	<u>-</u>
Federal SHIP Performance Award	·-	3,483	3,483	_
Federal SHIP Rural Funds	5,747		5,747	-
Federal SHIP Funds	109,965	41,250	151,215	19,213
Total Funds	418,381	44,733	463,114	19,213
				Page 7