

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

417



**FROM :** Office on Aging

**SUBMITTAL DATE:**  
October 9, 2012

**SUBJECT:** Amended FY 2012/2013 Agreement #1 HI-1213-21 between California Department of Aging (CDA) and County of Riverside for Health Insurance Counseling and Advocacy Program (HICAP)

**RECOMMENDED MOTION:** That the Board of Supervisors:

1. Approve and Authorize Chair to execute amended Agreement #1 HI-1213-21 for FY 2012-2013 (July 1, 2012 to June 30, 2013) with the California Department of Aging (CDA).
2. Approve and direct the Auditor-Controller to increase Estimated Revenue and Appropriations by \$22,525 as outlined in Schedule A.
3. Return all 4 copies to the Office on Aging for further processing.

**BACKGROUND:** The 2012-2013 original agreement was approved by the Board of Supervisor on June 5, 2012 as agenda item 3.46. It is being amended to include One Time Only (OTO) budget adjustments received from the California Department of Aging.

Continued next page...

*Edward F. Walsh*

Edward F. Walsh, Director

<b>FINANCIAL DATA</b>	Current F.Y. Total Cost:	\$ 22,525	In Current Year Budget:	No
	Current F.Y. Net County Cost:	\$ 0	Budget Adjustment:	Yes
	Annual Net County Cost:	\$ 0	For Fiscal Year:	12/13

<b>SOURCE OF FUNDS:</b> Federal 100%	<b>Positions To Be Deleted Per A-30</b>	<input type="checkbox"/>
	<b>Requires 4/5 Vote</b>	<input checked="" type="checkbox"/>

**C.E.O. RECOMMENDATION:**

**APPROVE**

BY: *Ivan M. Chand*

Ivan M. Chand 10/29/2012

**County Executive Office Signature**

Per Exec. Ofc.:  Consent  Policy

ATTACHMENTS FILED  
 Dept't Reporting THE CLERK OF THE COUNTY OF RIVERSIDE  
 Per Exec. Ofc.:  Consent  Policy  
 FISCAL PROCEDURES APPROVED  
 FORM APPROVED COUNTY COUNSEL  
 BY: NEAL R. KIPNIS  
 PAUL ANGULO, CPA, AUDITOR-CONTROLLER  
 BY: Samuel Wong 10/22/12  
 SAMUEL WONG  
 Departmental Concurrent

From: OFFICE ON AGING

**Subject:** FY 2012/2013 Agreement #1 HI-1213-21 between California Department of Aging (CDA) and County of Riverside for Health Insurance Counseling and Advocacy Program (HICAP)

The previous agreement was for the amount of \$459,094. This new amendment shows an increase of \$22,525 in OTO Federal SHIP Funds, the new amended total amount is \$481,619; therefore an adjustment to our Agency budget are needed as shown on Schedule "A".

Under the terms of this agreement with CDA, OTO funds must be expended by March 31, 2013. All other HICAP funds must be expended by June 30, 2013.

These funds can be used for the following purpose:

1. To increase one-on-one counseling services.
2. Increase outreach and education activities.
3. Maintain and expand quality assurance activities.
4. Augmenting HICAP staff and volunteer base on meet the needs of the increasing numbers of Medicare-eligible beneficiaries.
5. Outreach and counseling services to low-income, dual-eligible and hard-to-reach populations.
6. Training HICAP staff on accurate and thorough reporting of all HICAP activities.
7. Designing activities to enhance HICAP services to clients with limited English proficiency.

We are requesting for no additional cash matching contribution and there is not impact on County General Funds.

From: OFFICE ON AGING

**Subject:** FY 2012/2013 Agreement #1 HI-1213-21 between California Department of Aging (CDA) and County of Riverside for Health Insurance Counseling and Advocacy Program (HICAP)

OFFICE ON AGING  
SCHEDULE A  
FY 12/13

**INCREASE ESTIMATED REVENUE**

21450-5300100000-767140	Fed-Misc. Reimbursement	<u>22,525</u>
	Total	<u>\$22,525</u>

**INCREASE APPROPRIATION**

21450-5300100000-536200	Contributions to Non-Co Agency	<u>22,525</u>
	Total	<u>\$22,525</u>

CHECK HERE IF ADDITIONAL PAGES ARE ATTACHED  2  Pages

AGREEMENT NUMBER <b>HI-1213-21</b>	AMENDMENT NUMBER <b>1</b>
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, 2012  through  June 30, 2013

3. The maximum amount of this  **\$ 481,619.00**   
 Agreement after this amendment is:  **Four hundred eighty-one thousand six hundred nineteen 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 will be used to enhance HICAP services.

Exhibit B, Amendment 1, Budget Detail, Payment Provisions and Closeout, page 7, is attached and incorporated, and replaces the original Exhibit B, Budget Detail and Payment Provisions, page 7.

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

Revisions to Exhibit A, ARTICLE II, Scope of Work, are attached.

All other terms and conditions shall remain the same.

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

<b>CONTRACTOR</b>		CALIFORNIA 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 not type)	
PRINTED NAME AND TITLE OF PERSON SIGNING		
ADDRESS 6296 RIVERCREST DRIVE, SUITE K RIVERSIDE CA 92507		
<b>STATE OF CALIFORNIA</b>		
AGENCY NAME California Department of Aging		FOR APPROVED COUNTY COUNSEL BY:  N. R. KIRN DATE:
BY (Authorized Signature) 	DATE SIGNED (Do not type)	
PRINTED NAME AND TITLE OF PERSON SIGNING Dyanne Macias, Manager, Contracts and Business Services Section		
ADDRESS 1300 National Drive, Suite 200, Sacramento, CA 95834		
		<input checked="" type="checkbox"/> Exempt per: Older Californians Act

**Exhibit B - Budget Detail, Payment Provisions, and Closeout**  
**HEALTH INSURANCE COUNSELING AND ADVOCACY PROGRAM**  
**Budget Display**  
**Fiscal Year 2012/13**  
**County of Riverside**

	PROGRAM BASELINE	ONE-TIME ONLY	TOTAL	NET CHANGE
<b>HICAP Funds</b>				
Reimbursements (Ins Fund)	203,994	-	203,994	-
State HICAP Fund	101,970	-	101,970	-
Federal SHIP Funds	153,130	22,525	175,655	22,525
<b>TOTAL HICAP Funds</b>	<b>459,094</b>	<b>22,525</b>	<b>481,619</b>	<b>22,525</b>

The maximum allowable funding available from the allocations above for Administration is:

Reimbursements (Ins Fund)	13,974
State HICAP Fund	6,982
Federal SHIP	15,313

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

CFDA#	Project Title	Award #	Effective Date
93.779	State Health Insurance Assistance Program	1N0CMS020196-20-00	4/1/2012
93.779	State Health Insurance Assistance Program	1N0CMS020196-21-00	4/1/2013