

**SUBMITTAL TO THE IN-HOME SUPPORTIVE SERVICES
PUBLIC AUTHORITY BOARD
COUNTY OF RIVERSIDE, STATE OF CALIFORNIA**

721



FORM APPROVED COUNTY COUNSEL
BY: [Signature] 2/2/16
DATE: _____
GREGORY P. PRIAMOS

FROM: Department of Public Social Services (DPSS)
In-Home Supportive Services (IHSS) Public Authority

SUBMITTAL DATE:
January 28, 2016

SUBJECT: Ratify and approve the Agreements #AS-02988 and #AS-02989, and accept the Advance Payments, to provide an emergency back-up system for In-Home Supportive Services (IHSS) on behalf of DPSS for one year with the option to renew the agreements for four (4) additional years. Districts All; [\$15,000 total; Inland Empire Health Plan 2/3rds, Molina Healthcare 1/3rd].

RECOMMENDED MOTION: That the Board of Supervisors:

1. Ratify and authorize the Chairman of the Board to sign attached Agreements #AS-02988 and #AS-02989 between Riverside County In-Home Supportive Services Public Authority (PA) and Inland Empire Health Plan (IEHP) and Molina HealthCare of California for the period of 07/01/15-06/30/16 for \$15,000, and thereafter annually at \$15,000 for the four (4) additional years; and
2. Accept the Annual Advance Payment of \$10,000 from IEHP and \$5,000 from Molina HealthCare; and
3. Authorize the Purchasing Agent, in accordance with Ordinance 459, to exercise renewal options and to sign amendments that do not change the substantive terms of the Agreement, including amendments to the compensation provision that do not exceed a 10% contingency, based on the availability of fiscal funds for required services as approved to form by County Council.

BACKGROUND:

Summary (see page 2)

[Signature: Susan von Zabern]

Susan von Zabern
Director

FINANCIAL DATA	Current Fiscal Year:	Next Fiscal Year:	Total Cost:	Ongoing Cost:	POLICY/CONSENT (per Exec. Office)
COST	\$ 15,000	\$ 15,000	\$ 75,000	\$ 0.00	Consent <input type="checkbox"/> Policy <input checked="" type="checkbox"/>
NET COUNTY COST	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	

SOURCE OF FUNDS: IEHP-2/3rds, Molina-1/3rd	Budget Adjustment: No
	For Fiscal Year: FY15/16-FY19/20

C.E.O. RECOMMENDATION:

APPROVE

BY: [Signature: Jennifer L. Sargent]
Jennifer L. Sargent

County Executive Office Signature

MINUTES OF THE BOARD OF SUPERVISORS

- A-30
- Positions Added
- 4/5 Vote
- Change Order

Prev. Agn. Ref.: 8/20/13, 3.71

District: All

Agenda Number:

7-1

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

FORM 11: Ratify and approve the Agreements #AS-02988 and #AS-02989, and accept the Advance Payments, to provide an emergency back-up system for In-Home Supportive Services (IHSS) on behalf of DPSS for one year with the option to renew the agreements for four (4) additional years. Districts All: [\$15,000 total];

DATE:

PAGE: Page 2 of 2

BACKGROUND:

Summary (continued)

The California State Welfare and Institutions Code (W & IC) section 14186.3(a) requires that In-Home Supportive Services (IHSS) be a Medi-Cal benefit available through managed care health plans in specific counties. The Legislature's intent is to provide IHSS as a managed care benefit, while counties continue to perform functions necessary for the administration of the IHSS program including conducting assessments and determining authorized hours for recipients.

Riverside County In-Home Supportive Services Public Authority (PA) works under the guidance of Riverside County Department of Public Social Services (DPSS). To fulfill this directive, DPSS and PA will enter into MOUs with Inland Empire Health Plan (IEHP) and Molina Healthcare of California, Partner Plan, Inc. to establish and maintain an emergency back-up plan/system in case the regularly assigned In-Home Supportive Services (IHSS) home care provider does not arrive to deliver activities of daily living which are essential to the client's health and safety. The Back-Up System (BUS) provides authorization until a more permanent home-care provider is established.

The Back Up system provides for temporary assistance through the Riverside County IHSS Public Authority home care providers on an emergency and after-hours basis. Situations that would warrant the back-up system include but are not limited to the following unforeseen circumstances: 1) the regular health plan provider is not available and the client does not have adequate care or meal services; 2) a change in medical condition and the regular health plan provider is unable to appropriately meet the new level of care; and 3) the client is in need of emergency (after hours and weekend hours) and short-term services in the home are necessary until a more permanent care plan and home care provider are in place.

Impact on Residents and Businesses

The Back-Up System will provide a safety net for those elderly and dependent adults who need emergency and short term services in the home, until a permanent provider is in place.

Financial Impact

The PLANs (Molina & IEHP) shall provide the PA with advance payments of \$5,000 and \$10,000 respectively within 30 days of execution of the initial agreement. At the beginning of each subsequent fiscal year (July 1 – June 30), the PLANs shall replenish the fund so that the PA will start each year with \$15,000. At the conclusion of the agreement, all unused funding will be returned to the PLANs. The PLANs are responsible to file claims for reimbursement to the State for funds that they have advanced to the County.

Attachments

#AS-02988 In-Home Supportive Services Public Authority (PA) & Inland Empire Health Plan
#AS-02989 In-Home Supportive Services Public Authority (PA) & Molina Healthcare of California, Partner Plan, Inc.