COUNTY AUDITOR-CONTROLLER

Positions Added

A-30

Change Order

4/5 Vote

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





SUBMITTAL DATE:

January 6, 2014

SUBJECT: FY2013/2014 Standard Agreement H9-1314-21, Amendment 1 between California Department of Aging (CDA) and County of Riverside for Health Insurance Counseling and Advocacy Program (HICAP). [District – ALL] [Total Cost: \$5,067] [Source of Funds – 100% Federal].

RECOMMENDED MOTION: That the Board of Supervisors:

- 1. Approve and Authorize Chair to execute FY2013/14 Standard Agreement H9-1314-21, Amendment 1 (July 1, 2013 to March 31, 2014) with the California Department of Aging (CDA).
- 2. Approve and direct the Auditor-Controller to increase Estimated Revenue and Appropriations by \$5,067 as outlined in Schedule A.
- 3. Return four (4) copies of the agreement to Riverside County Office on Aging for further processing.

BACKGROUND:

Summary

This amended agreement and budget display provides the allocation of reconciled Federal One-Time-Only (OTO) Health Insurance Counseling and Advocacy Program (HICAP) funding.

(Continued on Page 2)

FROM: Office on Aging

Michele Haddock

Director

CEO BECOMME			API	PROYE	10-		For F	iscal Year	20	13/2014
SOURCE OF FUN	DS: Fe	deral 100	%				Budg	get Adjustn	n ent : Ye	s
NET COUNTY COST	\$	0	\$	0	\$	0	\$	0	Consent	- Policy Jai
COST	\$	5,067	\$	0	\$	5,067	\$	0	Concept	□ Policy X
FINANCIAL DATA	Current Fi	sçal Year:	Next Fiscal Ye	ar:	Total Co	st:	Ongoing	Cost:		Y/CONSENT xec, Office)

C.E.O. RECOMMENDATION:

County Executive Office Signature

BY: July a Str

MINUTES OF THE BOARD OF SUPERVISORS

On motion of Supervisor Jeffries, seconded by Supervisor Ashley and duly carried by	
unanimous vote, IT WAS ORDERED that the above matter is approved as recommended.	

Ayes:

Jeffries, Tavaglione, Stone, Benoit and Ashley

Nays:

None

Absent:

None

Date:

January 28, 2014

XC:

Office on Aging, Auditor

Kecia Harper-Ihem

Clerk of the Board

Deputy

Prev. Agn. Ref.: 3-Officey 30 Agong: Apple Pict: ALL

Agenda Number:

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

FORM 11: FY2013/2014 Standard Agreement H9-1314-21, Amendment 1 between California Department of Aging (CDA) and County of Riverside for Health Insurance Counseling and Advocacy Program (HICAP).

[District – ALL] [Total Cost: \$5,067] [Source of Funds – 100% Federal].

DATE: January 6, 2014 **PAGE:** Page 2 of 3

BACKGROUND:

Summary (continued)

The amendment also includes information and instruction for the use of OTO funds:

The original agreement was approved and signed by the Board of Supervisors on July 30, 2013, Agenda Item 3-41; for the amount of \$335,545. This amendment shows an increase of \$5,067 in OTO Federal SHIP Funds, which results to a total amount of \$340,612. Therefore, an adjustment to our Department budget is needed, as shown in Schedule A.

Under the terms of this agreement with CDA, OTO funds must be expended by March 31, 2014.

The parties agree to comply with the terms and conditions including the purposes for which they were originally allocated:

- 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.

There is no impact to County General Funds and we are requesting no additional matching requirements.

Impact on Citizens and Businesses

These funds are to be utilized in accordance with HICAP eligible service population, which means Medicare Beneficiaries, including Medicare Beneficiaries by virtue of a disability and those persons imminent of Medicare eligibility.

ATTACHMENTS:

A. **BUDGET ADJUSTMENT**

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

FORM 11: FY2013/2014 Standard Agreement H9-1314-21, Amendment 1 between California Department of Aging (CDA) and County of Riverside for Health Insurance Counseling and Advocacy Program (HICAP).

[District - ALL] [Total Cost: \$5,067] [Source of Funds - 100% Federal].

DATE: January 6, 2014 **PAGE:** Page 3 of 3

Office on Aging Schedule A FY 2013/2014

Increase Office on Aging Estimated Revenue:

21450-5300100000-767140

Fed-Misc. Reimbursement

5,067

Increase Office on Aging Appropriation:

21450-5300100000-536200

Contrib. to Non-County Agency

5,067

RESOLUTION

BE IT RESOLVED by the Board of Supervisors of the County of Riverside, State of California, in regular session assembled on January 28, 2014, that Jeff Stone, the Chairman of this Board is authorized and directed to execute on behalf of said County the <u>State of California Standard Agreement No. H9-1314-21</u> between the Riverside County and the <u>California Department of Aging providing for: Health Insurance Counseling and Advocacy Program (HICAP).</u>

ROLL CALL:

Ayes:

Jeffries, Tavaglione, Stone, Benoit and Ashley

Nays: Absent:

None

Abstain:

None

The foregoing is certified to be a true copy of a resolution duly adopted by said Board of Supervisors on the date therein set forth.

KECIA HARPER-IHEM, Clerk of the Board

Deputy Clerk

STATE OF CALIFORNIA BOARD OF SUPERVISORS COUNTY OF RIVERSIDE

I, April Eckles, Deputy Clerk of the Board for the County of Riverside, do hereby certify that the foregoing is a full, true and correct copy of <u>Standard Agreement No. No. H9-1314-21</u>, approved by the Board of Supervisors at a regular meeting duly held and convened on January 28, 2014, at which meeting a quorum of said Board was present and acting throughout.

Furthermore, I hereby certify that according to provisions of Government Code Section 25103, a copy of <u>Standard Agreement No. No. H9-1314-21</u> was delivered to the Chairman of the Board, Jeff Stone.

Dated this 28th day of January, 2014

WITNESS my hand and official seal

Kecia Harper-Ihem, Clerk of the Board

De

X C			
	HECK HERE IF ADDITIONAL PAGES ARE ATTACHED 1 Pages AGREEMENT NU	MBER	AMENDMENT NUMBER
	H9-1314-21 REGISTRATION	NUMBER OF THE PERSON OF THE PE	1
	REGISTRATION	NUMBER	
1.	This Agreement is entered into between the State Agency and Contractor name	ed below:	
٠.	STATE AGENCY'S NAME		
	California Department of Aging		
	COUNTY OF RIVERSIDE		
2.	The term of this		
	Agreement is July 1, 2013 through March 31, 201	4	
3.	The maximum amount of this Agreement after this amendment is: \$ 340,612.00 Three hundred forty thousand six hundred to	welve and 00	/100 dollars
4.	The parties mutually agree to this amendment as follows. All actions noted be of the Agreement and incorporated herein:	low are by	this reference made a part
	This amendment increases the dollar amount available under this Agreement. be used to enhance HICAP services.	This incre	ase of \$ 5,067.00 will
	Exhibit B, Amendment 1, Budget Detail, Payment Provisions and Closeout, pa and replaces the original Exhibit B, Budget Detail and Payment Provisions, pa		ached and incorporated,
	The Budget, amendment 1, is hereby incorporated by reference and replaces	the origina	l Budget.
Α.	TTP Cor.	HEN DOCU	MENT IS FULLY EXECUTED R
	ITESI:	(CLERK'S COPY
K	ECIA-HARPER-IHEM, Clerk	Riverside Co	unty Clerk of the Board, Stop 101
В		st Office Boz ank you.	1147, Riverside, Ca 92502-1147
	DEPUTY	ziik you.	
	DEPUTY	ank you.	
	All other terms and conditions shall remain the same.	ank you.	
IN V	All other terms and conditions shall remain the same.	znk you.	
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State of California California Department of Aging CDA 303 (New 12/05) Agreement #: H9-1314-21
Date: 07/01/13
Amendment #: 1
Date 12/06/13

Exhibit B - Budget Detail, Payment Provisions, and Closeout

HEALTH INSURANCE COUNSELING AND ADVOCACY PROGRAM Budget Display

Fiscal Year 2013/14
July 1, 2013 - March 31, 2014 (Nine Months)

County of Riverside

	PROGRAM BASELINE	ONE-TIME ONLY	TOTAL	NET CHANGE
HICAP Funds				
Reimbursements (Ins Fund)	153,209	-	153,209	· · · · · · · · ·
State HICAP Fund	76,585	·	76,585	_
Federal SHIP Funds	105,751	5,067	110,818	5,067
TOTAL HICAP Funds	335,545	5,067	340,612	5,067

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

Reimbursements (Ins Fund)
State HICAP Fund

State HICAP Fund 5,241 Federal SHIP 10,575

10,490

The minimum that must be expended for Mental Health Pharmaceutical Benefits Counseling/Outreach/Education is:
Federal SHIP
5,529

**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	1N0CMS020196-21	4/1/2013	

CALIFORNIA DEPARTMENT OF AGING

1300 National Drive, Suite 200 SACRAMENTO, CA 95834 Internet Home Page: www.aging.ca.gov TDD Only 1-800-735-2929 FAX Only (916) 928-2500 (916) 419-7531



December 3, 2013

To: COUNTY OF RIVERSIDE

California Department of Aging

amount of \$ 340,612.00 which in	ements for Contract Number H9-1 acreases the contract amount by \$ itted with this contract are checked	5,067.00. Any additional
☐ Insurance Certificate or letter	Auto (7/1/20	Liability (7/1/2014) 014) nal (10/1/2014)
☐ No Documents Required		
Please sign and return all four co	pies of the Contract and any addit	onal documents required to:
	California Department of Aging 1300 National Drive, Suite 200 Sacramento, CA 95834	
If you have any questions, please	e contact me at (916) 419-7157. T	hank you.
Don Fingado Contract Analyst		



CALIFORNIA DEPARTMENT OF AGING

1300 NATIONAL DRIVE, SUITE 200 SACRAMENTO, CA 95834-1992

www.aging.ca.gov TDD Only 1-800-735-2929 FAX (916) 928-2267 TEL (916) 419-7500



PROGRAM MEMO

CDA 1014 (Rev. 04/11)	AIVI IVILIVIO				
	ncy on Aging Directors	NO.: PM 13-12(P)			
SUBJECT: HI	CAP	DATE ISSUED: December 6, 2013			
	13-14 Health Insurance d Advocacy Program Contract 1				
REVISED:		EXPIRES: March 31, 2014			
Welfare and In	∶ Older Californians Act, stitutions Code 9100, et. seq.	SUPERSEDES: PM 13-07(P)			
PROGRAMS A		itle III-D [] Title III-E [] Title V [] CBSP			
[] MSSP [Title VII [] CBAS [X] Oth	er: HICAP			
Purpose	Purpose This Program Memo (PM) transmits your Fiscal Year (FY) 2013-2014 Health Insurance Counseling and Advocacy Program (HICAP) Contract Amendment #1 and revised HICAP H9 Budget Display.				
Amendment Contents	The California Department of Aging (CDA) is amending the contract to allocate \$296,831 in One-Time Only (OTO) State Health Insurance Assistance Program (SHIP) funds. These funds comprise unspent Area Agency on Aging (AAA) SHIP grant funds from FY 2012-2013. No additional administration dollars are available from these OTO funds.				
Expenditure Details/ Deadlines	Details/ consistent with SHIP grant Terms and Conditions and your AAA's previously				
	The HICAP Budget (CDA 229) is	located on CDA's website at:			
	http://www.aging.ca.gov/Programs	sProviders/AAA/Fiscal Form Documents/			
		Continued on part page			

Inquiries

For fiscal inquiries, contact your assigned Fiscal Team Specialist. For programmatic inquiries, contact your assigned HICAP Specialist.

Enclosures

This Program Memo includes the following enclosures:

- H9 HICAP 2013-2014 Amendment #1
- H9 HICAP 2013-2014 Amendment #1 Budget Displays

Enclosures will be mailed to each AAA's Contract Representative.

Lora Connolly Director