

**PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS**

AGENDA ITEM SUMMARY

Meeting Date: April 7, 2009

(X) Consent

☐ Regular

() Ordinance

☐ Public Hearing

Department

Submitted By: Community Services

Submitted For: Division of Senior Services

I. EXECUTIVE BRIEF

Motion and Title: Staff recommends motion to approve: Amendment No. 004 to Standard Agreement No. IU008-9500 (R2008-0171) for the Nutrition Services Incentive Program (NSIP) with the Area Agency on Aging of Palm Beach/Treasure Coast, Inc. for the period October 1, 2008 through April 30, 2009, increasing the maximum reimbursement by \$222,268.44 for a new not-to-exceed amount of \$598,739.20 for various supportive services to seniors and to extend the reconciliation period.

Summary: Additional funding has been granted under the NSIP grant. This amendment will increase the new maximum reimbursement, adjust the per meal rates, and extend the reconciliation period. In the area south of Hypoluxo Road, Mae Volen Senior Center Inc. currently provide OAA services under a similar grant from the AAA. (DOSS) Countywide except for portions of Districts 3, 4, 5, and 7 south of Hypoluxo Road (TKF)

Background and Justification: The AAA has negotiated an entitlement program with NSIP through the Department of Elder Affairs (DoEA). In this program providers may receive cash or commodities to supplement the cost of providing meals. DOSS has elected to receive cash to supplement the cost of the meals. DOSS provides meals to eligible seniors through the Congregate and Home Delivered Meals program under the OAA Title III Agreement.

Attachments:

Amendment No. 004

Recommended by:

Department Director

Date _____

Approved By:

Assistant County Administrator

Date

II. FISCAL ANALYSIS IMPACT

A. Five Year Summary of Fiscal Impact:

Fiscal Years	<u>2009</u>	<u>2010</u>	<u>2011</u>	<u>2012</u>	<u>2013</u>
Capital Expenditures	_____	_____	_____	_____	_____
Operating Costs	_____	_____	_____	_____	_____
External Revenue	(222,268.44)	_____	_____	_____	_____
Program Income (County)	_____	_____	_____	_____	_____
In-Kind Match (County)	_____	_____	_____	_____	_____
NET FISCAL IMPACT	(222,268.44)	_____	_____	_____	_____
# ADDITIONAL FTE POSITIONS (Cumulative)	_____	_____	_____	_____	_____

Is Item Included in Current Budget: Yes X No
Budget Account No.: Fund 1006 Dept 144 Unit 1458/1459/ Obj. Var.
Program Code Var.

B. Recommended Sources of Funds/Summary of Fiscal Impact:

Federal funds through the Department of Elder Affairs.

Departmental Fiscal Review: FEW

III. REVIEW COMMENTS

A. OFMB Fiscal and/or Contract Administration Comments:

[Signature] 3-26-09
OFMB
3/25/09 3/25/09 m 3/23/09

[Signature] 3/26/09
Contract Administration
3/25/09

B. Legal Sufficiency:

[Signature] 3/31/09
Assistant County Attorney

This amendment complies with
our review requirements.

C. Other Department Review:

Department Director

This summary is not to be used as a basis for payment.

THIS AMENDMENT, entered into between the Area Agency on Aging of Palm Beach/Treasure Coast, Inc., hereinafter referred to as the "Area Agency", and the Palm Beach County Department of Senior Services hereinafter referred to as the "Provider", amends contract # IU008-9500.

The purpose of this amendment is to increase the amount of the agreement by \$246,619.19 and to reflect the Unit Rate 1.939546406 per eligible meal, to decrease by (\$24,350.75) to reflect the rate of .60731 per eligible meal, for a net increase of \$222,268.44 and extend the reconciliation period.

1. Section II, A., is hereby amended to read:

A. Contract Amount:

To pay for contracted services according to the conditions of **PROGRAM PROVISIONS** in an amount not to exceed \$598,739.20, subject to the availability of funds.

3. Section II, C., is hereby amended to read:

C. Source of Funds:

The costs of services paid under any other contract or from any other source are not eligible for reimbursement under this contract. The funds awarded to the provider pursuant to this agreement are in the state grants and aids appropriations and consist of the following:

Program Title	Year	Funding Source	CFDA#	Fund Amounts
Nutrition Services Incentive Program	2007-2008	Older Americans Act	93.053	\$598,739.20
TOTAL FUNDS CONTAINED IN THIS AGREEMENT:				\$598,739.20

2. Contract Provisions, Section III, A., is hereby amended to read:

1. This agreement shall begin on October 1, 2007 or on the date the agreement has been signed by both parties, whichever is later. The service dates of this agreement are October 1, 2007 to September 30, 2008.
2. The reconciliation period is from October 1, 2008 to April 30, 2009.
3. In the event that a subsequent agreement may not be executed prior the October 1st start date, the Agency may at its discretion, extend this agreement upon written notice for up to 90 days to ensure continuity of services. Services provided under this extension will be paid for out of the succeeding agreement amount.

3. Section III, Paragraph A is amended to read:

- A.** This is a fixed rate agreement. The department shall make payment to the Provider for provision of services up to a maximum number of units of service and at the rate established by the department stated below:

AMENDMENT 004

Agreement Number IU008-9500

<u>Service to be Provided</u>	<u>Units of Services</u>	<u>Unit Rate</u>	<u>Maximum Units</u>	<u>Maximum Reimbursement</u>
Eligible Congregate And Home Delivered Meals	1 unit = 1 meal	0.6137002	298,268	\$183,047.14
Eligible Congregate And Home Delivered Meals	1 unit = 1 meal	0.59534527	215,297	\$128,176.06
Eligible Congregate And Home Delivered Meals	1 unit = 1 meal	0.60731	67,341	\$40,896.81
Eligible Congregate And Home Delivered Meals	1 unit = 1 meal	0.60731	40,096	\$24,350.75
Eligible Congregate and Home Delivered Meals (final usage of available funds)	1 unit = 1 meal	.60731	(40,096)	(\$24,350.75)
	1 unit = 1 meal	1.939546406	127,153	\$246,619.19

4. This amendment shall be effective on the last date that the amendment is signed by both parties.

All provisions in the contract and any attachments thereto in conflict with this amendment shall be and are hereby changed to conform with this amendment.

All provisions not in conflict with this amendment are still in effect and are to be performed at the level specified in the agreement.

This amendment and all its attachments are hereby made a part of the agreement.

IN WITNESS THEREOF, the parties hereto have caused this 4 page agreement to be executed by their undersigned officials as duly authorized.

PROVIDER: PALM BEACH COUNTY,
FLORIDA, A Political
Subdivision of the State of
Florida

Area Agency on Aging of Palm Beach/
Treasure Coast, Inc.

SIGNED
BY: _____

NAME: John F. Koons, Chairman

TITLE: Chairman

DATE: _____

SIGNED
BY: _____

NAME: _____

TITLE: _____

DATE: _____

SHARON R. BOCK, Clerk

BY: _____

DATE: _____

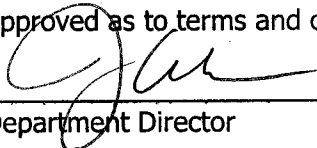
FEDERAL ID NUMBER: 59-6000785

FISCAL YEAR END DATE: _____

Approved as to form and legal sufficiency

Assistant County Attorney

Approved as to terms and conditions



Department Director

Attestation StatementAgreement Number IU008-9500Amendment Number 004

I, John F. Koons, Chairman, attest that no changes or revisions have been
(Provider representative)

made to the content of the above referenced agreement/contract or amendment between the Area Agency on Aging of Palm Beach/Treasure Coast and Palm Beach County Board of County Commissioners. The only exception to this statement would be for changes in page formatting, due to the differences in electronic data processing media, which has no affect on the agreement/contract content.

Signature of Provider Representative

Date