Original documents can be viewed in Minutes

Agenda Item: 3E-15

PALM BEACH COUNTY BOARD OF COUNTY COMMISSIONERS AGENDA ITEM SUMMARY

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Meeting Date: August 18, 2009			Consent Workshop	[] Regular [] Public Hearing
Department Submitted By:	Community Service	es		
Submitted For:	Ryan White Part A	<u>.</u> =====		=======================================

I. EXECUTIVE BRIEF

Motion and Title: Staff recommends motion to approve: contracts and contract amendments with listed provider agencies for the period March 1, 2009, through February 28, 2010, totaling \$208,376, for Ryan White Part A HIV Emergency Relief Formula funds and \$1,613,161 Supplemental funds:

	rormula (amendment)	(contract)
1) Treasure Coast Health Council- Medical	119,500	308,332
2) Treasure Coast Health Council-CC Support	88,876	101,576
3) Palm Beach County Health Department		<u>1,203,253</u>
,	\$ 208,376	\$1,613,161

Summary: The above contracts are for the remaining funds from the Department of Health and Human Services Health Resources and Services Administration (HRSA) award received on March 8, 2009. Total funds awarded are \$4,892,639. Contracts totaling \$3,071,102 were previously submitted and approved on a prior BCC agenda. The grant award is for the provision of services related to HIV affected clients, such as medical case management, medical care, oral health care and substance abuse treatment. The agencies listed were selected through the Request For Proposal (RFP) process and have been recommended to receive funding. (Ryan White) Countywide (TKF)

Background and Justification: Under the new Ryan White Treatment Modernization Act of 2006, the Palm Beach County HIV CARE Council establishes priority service areas and assigns funding percentages. The grantee, Palm Beach County, is responsible for the Request For Proposal (RFP), selection and contracting with the selected service providers. The RFP process for this grant cycle has been completed and the Department has selected agencies to receive funding in accordance with the service priorities and funding allocations designated by the HIV Care Council.

Attachments: 1. Co. 2. No.	ontracts otice of Grant Award	
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Recommended by:	Clall Will	7/17/09
-	Department Director	Date 1
Approved by:	C)an	7/51/09
	Assistant County Administrator	Date

II. FISCAL IMPACT ANALYSIS

Five Year Summary of	f Fiscal Impact:						
Fiscal Years Capital Expenditures	2009	2010	2011	2012			
Operating Costs External Revenue	\$1,062,563 (\$1,062,563)	\$758,974 (\$758,974)					
Program Income (Cour In-Kind Match (County) NET FISCAL IMPAC							
# ADDITIONAL FTE POSITIONS (Cumula	itive) <u> </u>						
Is Item Included in Cur Budget Account No.: F Program	rent Budget? Y Fund <u>1010</u> De Code <u>varies</u>	'es <u>X</u> ept <u>142</u> U	No nit_1475/1479	<u>)</u> Object <u>Var</u>			
B. Recommended	Sources of Fu	nds/Summar	y of Fiscal In	npact:			
Funding provided through the U.S. Department of Health and Human Services. No County match is required. Federal funds will provide needed services to HIV/AIDS clients in Palm Beach County.							
C.Departmental Fisca	ıl Review <u>:</u>	TRee 8	(m				
	III. REV	/IEW COMME	<u>ENTS</u>				
A. OFMB Fiscal a	nd/or Contract	Administratio	on Comment	s:			
28 1/27/09 OFMB TO		Contract De	J. Jaw	7130/09			
B. Legal Sufficier	ncy:		County policies.				
Assistant Count	ty Attorney	19					
C. Other Departm	ent Review:						
Department Di	rector						

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