## PALM BEACH COUNTY BOARD OF COUNTY COMMISSIONERS

Agenda Item: 3E-1

## AGENDA ITEM SUMMARY

Meeting Date: July	y 10, 2012	[X] [ ]	Consent Workshop		Regular Public Hearing
Department Submitted By: Submitted For:	Community Serv Ryan White Part		•		
	12222222222	·	VE DDIEE	فنند فنب يهبيه	
	<del></del>		VE BRIEF		
Motion and Title:			,		
A) receive and the period Ma \$9,054,547; a	arch 1, 2012, through	ward from February	the Departme 28, 2013, in	ent of H an amo	lealth & Human Services, for unt not to exceed
for the period  1. Amen Medic excee 2. Amen (Form \$252, 3. Amen Housi \$538, 4. Amen South Medic  Summary: A Notice Resources and Serv	March 1, 2012, throudment No. 2 to Combal Case Management \$380,322; and dment No. 2 to Control (R2012-0597) 000 for a new total condition of the control of	ugh February Sent by \$4 mprehense to increate and Care, 56,994 for a new or the De (HRSA)	lary 28, 2013: (Formula) (	R2012-0 new to ogram of or Med xceed \$ i) (R20 al confi ouncil, se fund t amour Health on Mai	n Support Services (Formula)  2483) to increase funding for otal contract amount not to of Palm Beach County, Inc. lical Case Management by \$1,448,728; and 12-0599) to add funding for tract amount not-to-exceed Inc. d/b/a Health Council of ding for Specialty Outpatient not-to-exceed \$483,000.  and Human Services Health rch 1, 2012 and conveys arugh February 28, 2013. The
amendments listed a BCC on April 3, 2013 dates are being am CARE Council. The	represent a portion of 2, April 17, 2012 and ended to reflect acti amendments are fo	of the total June 5, 2 ual award or services	al funding of t 2012. Four (4 I amount and s for HIV affe	he age ) of the allocat cted cli	ncy awards approved by the contracts approved on these tions made by the PBC HIV ents, including medical case are required. (Ryan White)
Background and Ju	ustification: (On pag	je 3)			
Attachments: 1. Notice of Grant A 2. Four (4) Amenda	Award nents for Provision of	f Ryan Wl	nite Part A HI\	/ Health	n Support Services
Recommended B	y: Department Dire	ector			Chishe Date
Approved By:	Assistant Coun	tv Admir	nistrator		Date Date

## II. FISCAL IMPACT ANALYSIS

## **Five Year Summary of Fiscal Impact:** A.

Fiscal Years	2012	2013	2014	2015	2016
Capital Expenditures					
Operating Costs	266,580	190,414			
External Revenue	(266,580)	(190,414)			
Program Income					
In-Kind Match (County)					
NET FISCAL IMPACT	0	0			

Program Income					
In-Kind Match (County)					
NET FISCAL IMPACT	0	0			
			·		1
# ADDITIONAL FTE POSITIONS (Cumulative)					
Is Item Included In Currer Budget Account No.: Fund 1010 Dept 142 Un	71				
B. Recommended Sou Funding source is the match is required.	e U.S. Departm	ent of Health a	nd Human S	Services. N	
C. Departmental Fisca	I <b>Review:</b> Taru	Tauuna M Ina Malhotra, D	irector of Fir	i <u> </u>	Support Svcs.
	III. REVIE	W COMMENT	<u>s</u>		
A. OFMB Fiscal and/o	r Contract Dev	elopment and	Control Co	mments:	
OFMB OFMB	JAM WWW	Contract E	Development	Jueoba t and Cont	7/3 (

B. **Legal Sufficiency:** 

C.

Septor Assistant County Atto

Other Department Review:

Department Director

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

**Background and Justification:** (Continued from page 1) Under the Ryan White Part A Treatment Extension Act of 2009, 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) and selecting and contracting with the selected service providers. The RFP process for this grant cycle has been completed and the listed agencies have been selected to receive funding in accordance with the service priorities and funding allocations designated by the Palm Beach County HIV CARE Council. HRSA has issued the FY2012 award to serve persons living with HIV/AIDS.