## PALM BEACH COUNTY BOARD OF COUNTY COMMISSIONERS

### **AGENDA ITEM SUMMARY**

Meeting Date:	December 3, 2013	[X] []	Consent Ordinance	] ]	 Regular Public Hearing
	<u>Community Services</u> <u>Ryan White Part A</u>	<u>8</u>			
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## I. EXECUTIVE BRIEF

**Motion and Title: Staff recommends motion to approve:** Memorandum of Agreement (MOA) with the Florida Department of Health, for the period April 1, 2013, through February 28, 2014, in an amount not to exceed \$1,000,000 for the costs of purchase and distribution of drugs for Ryan White clients in Palm Beach County participating in the AIDS Drug Assistance Program (ADAP State Program).

**Summary:** This MOA will provide a funding allocation to the ADAP State Program from the Ryan White HIV Care Part A grant funds provided to Palm Beach County by the Health Resources Services Administration (HRSA). A total HRSA grant amount of \$7,778,227 was provided to the County this contract year. The ADAP State Program provides life-sustaining drugs to uninsured individuals living with HIV/AIDs and to individuals that do not have adequate prescription coverage. The allocation of Ryan White funds will help alleviate a shortfall in ADAP State Program funding and ensure that Palm Beach County residents receive the needed HIV/AIDS prescription medication. The amount of funding unexpended by our local network of providers varies each year. This amount determines the allocation to the ADAP State Program. No County match is required. <u>Countywide</u> (TKF)

**Background and Justification:** 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 for medical and support services for residents of Palm Beach County who are living with HIV/AIDS. The Department has selected agencies to receive funding in accordance with the service priorities and funding allocations designated by the Palm Beach County HIV CARE Council. Palm Beach County Board of County Commissioners has been receiving this grant since 1994, and has assisted thousands of persons living with HIV/AIDS with medical and support services.

Attachments:	Memorandum	of Agreement	

Recommended By: 🥧

el **Department Director** 

11-18-13 Date

**Approved By:** 

Assistant County Administrator

# **II. FISCAL IMPACT ANALYSIS**

# A. Five Year Summary of Fiscal Impact:

Fiscal Years	2014	2015	2016	2017	2018
Capital Expenditures	·			· ·	
Operating Costs	204,000				
External Revenue	(204,000)				
Program Income					
In-Kind Match (County)					
NET FISCAL IMPACT	* 0				

# ADDITIONAL FTE POSITIONS (Cumulative)

# Is Item Included In Current Budget? Yes X No Budget Account No.:

Fund <u>1010</u> Dept <u>142</u> Unit <u>1475 Object 8101</u> Program Code <u>Var.</u> Program Period <u>GY13</u>

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

- ✗ At this time the estimated amount allocated to ADAP services is \$204,000. This is based on the amount of current unobligated funding available. Should additional funding become available, up to a total allocation of \$1,000,000 will be allocated to ADAP services.
- C. Departmental Fiscal Review:

Taruna Malhotra, Director, Financial & Support Svcs.

# **III. REVIEW COMMENTS**

A. OFMB Fiscal and/or Contract Development and Control Comments:

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B. Legal Sufficiency:

Contract Development an

Chief Assistant County Attorney

C. Other Department Review:

Department Director

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

#### Memorandum of Agreement,

#### Between

#### The Florida Department of Health AIDS Drug Assistance Program (ADAP State Program) and

#### Palm Beach County, FL through its Board of County Commissioners (Ryan White Part A Grantee Office Palm Beach County, Florida - Part A Grantee)

This Memorandum of Agreement (MOA) is between **the ADAP State Program** and the Part A Grantee, as administered by Palm Beach County Florida, a charter county and political subdivision of the State of Florida on behalf of the Palm Beach County EMA. The Part A Grantee and the ADAP State Program both serve eligible Ryan White clients located in the Palm Beach County EMA (Clients). This MOA addresses the Part A Grantee's reimbursement of the ADAP State Program for the costs of purchase and distribution of drugs on the ADAP formulary by the ADAP State Program to Clients. The time frame for incurring reimbursable costs is from April 1, 2013 through February 28, 2014 and is unaffected by date of full execution of this MOA.

#### ADAP State Program agrees to:

- Only request reimbursement for purchase and distribution of drugs on the ADAP formulary for Clients incurred between April 1, 2013 and February 28, 2014.
- Request reimbursement by invoice which shall include the unique Client identifiers, dates of services, medications provided, and the total cost to serve the Clients for which reimbursement is requested (Complete Monthly Invoice).
- Mail, telefax or email one Complete Invoice to the Part A Grantee.
- Serve all eligible Ryan White clients located in Palm Beach County.

#### Part A Grantee agrees to:

Reimburse the ADAP State Program the Complete Invoices up to a total of \$1,000,000.00. The parties recognize that such obligation to reimburse is contingent upon sufficient surplus funds available to cover any or all of an invoice. If no such funds are available the County shall have no obligation to reimburse ADAP. Grantee agrees to bill and receive no later than December 31, 2013 for any amount exceeding \$250,000.

**HIPAA:** Where applicable, all parties to this Agreement will comply with the Health Insurance Portability and Accountability Act (HIPAA), as well as all regulations promulgated there under (45CFR Parts 160, 162, and 164).

**NONDISCRIMINATION:** The AGENCY warrants and represents that all of its employees, and participants in the programs it serves are treated equally during employment and/or services without regard to race, color, religion, sex, age, disability, marital status, sexual orientation, national origin or ancestry, familial status and gender identity and gender expression. Agency will comply with Executive Order No. 11246 entitled "Equal Employment Opportunity" and as

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amended by Executive Order No. 11375, and as supplemented by the Department of Labor Regulations (41 CFR, Part 60).

PALM BEACH COUNTY OFFICE OF THE INSPECTOR GENERAL: Palm Beach County has established the Office of the Inspector General in Palm Beach County Code Section 2-421 through 2-440, as may be amended, which is authorized and empowered to review past, present and proposed County contracts, transactions, accounts and records. The Inspector General has the power to subpoena witnesses, administer oaths and require the production of records, and audit, investigate, monitor, and inspect the activities of the Agency, its officers, agents, employees, and lobbyists in order to ensure compliance with contract requirements and detect corruption and fraud.

Failure to cooperate with the Inspector General or interference or impeding any investigation shall be in violation of Palm Beach County Code 2-421 through 2-440, and punished pursuant to Section 125.69, Florida Statutes, in the same manner as a second degree misdemeanor.

This Agreement may be terminated without cause by either party with no less than thirty (30) days notice, unless a lesser time is mutually agreed to by both parties. Termination with cause (breach of agreement) may result in a lesser time, as determined by both parties. Under this Agreement, any termination notice shall be delivered by certified mail, return receipt requested, or in person with proof of delivery. Termination shall not affect any obligations hereunder that are incurred prior to the date and hour of termination, nor shall it affect the schedule for invoicing and payment.

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**IN WITNESS WHEREOF,** In witness thereof, the parties hereto have caused this Agreement to be executed by their authorized representatives.

ATTEST:

Sharon R. Bock **Cierk and Comptroller** 

BY

**Deputy Clerk** 

WITNESS:

Signature

Unielle Runtsch Witness Name Typed

59-3502843 **Federal ID Number** 

PALM BEACH COUNTY BOARD OF **COUNTY COMMISSIONERS** 

BY Steven-L.-Abrams, Mayor Chair

AGENCY:

Florida Department of Health AIDS **Drug Assistance Program** Agency's Name Typed

Anna Marie-Likos, MD, MPH Agency's Signatory Name Type

Director, Division of Disease **Control and Health Protection** 

**Agency's Signatory Title Typed** 

BY\_

**APPROVED AS TO TERMS** AND CONDITIONS Ų Æ

**Channell Wilkins, Director** 

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APPROVED AS TO FORM AND LEGAL SUFFICIENCY

**Chief Assistant County Attorney**