

II. FISCAL IMPACT ANALYSIS

A. Five Year Summary of Fiscal Impact:

Fiscal Years	2014	2015	2016	2017	2018
Capital Expenditures					
Operating Costs	35,658	35,657			
External Revenue	(4,880)	(4,879)			
Program Income					
In-Kind Match (County)					
NET FISCAL IMPACT	30,778	30,778			

# ADDITIONAL FTE POSITIONS (Cumulative)					
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Is Item Included in Current Budget? Yes ___ No X

Budget Account No.:

Fund 1006 Dept 144 Unit Var. Object Var. Program Code Var. Program Period Var.

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

Funding sources are the Federal, State of Florida and Palm Beach County. Sufficient funding is included in the current budget to meet County obligations.

<u>Funds</u>	<u>14-15 EHEAP</u>	<u>13-14 CCE</u>	<u>13-14 HCE</u>	<u>Total</u>
Federal/State	9,759	(15,000)	15,000	9,759
Match (10%)	0	(1,667)	0	(1,667)
Addl. Cnty Funds	<u>63,223</u>	<u>0</u>	<u>0</u>	<u>63,223</u>
Total	72,982	(16,667)	15,000	71,315

C. Departmental Fiscal Review:

mal
Taruna Malhotra, Director, Financial & Support Svcs

III. REVIEW COMMENTS

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

OFMB [Signature] 5/15/2014
[Signature] for Contract Development and Control
 5-30-14 [Signature]

B. Legal Sufficiency:

[Signature] 5/30/14
 Chief Assistant County Attorney

C. Other Department Review:

 Department Director

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

Summary: Grant adjustments are made during the contract year to align services with need. These amendments were executed by the County Administrator in accordance with Resolution R2013-0242, which delegated authority to the County Administrator, or his designee, to sign documents related to DOSS/AAA grant amendments. These items are being submitted in accordance with Countywide PPM No. CW-O-051 to allow the Clerk's Office to note and receive the executed amendments. The Budget Amendment is aligning the County budget with the actual grant award. (DOSS) Countywide except for portions of Districts 3, 4, 5, and 7 south of Hypoluxo Rd (TKF)

Background and Justification: CCE assists seniors by providing in-home services to help seniors live independently; HCE assists seniors and their caregivers with the provision of care in a family-type living arrangement as an alternative to institutional care; ADI ensures persons afflicted with Alzheimer's disease and other forms of dementia are given services to help them live independently. EHEAP provides seniors with emergency assistance to prevent disconnection of utility services.

This RENEWAL is entered into by the Area Agency on Aging of Palm Beach/Treasure Coast, Inc. hereinafter referred to as the "Agency" and Palm Beach County Board of County Commissioners, hereinafter referred to as "Provider" and renews agreement #IP012-9500.

As stated on Page 2, Section 5 of Agreement IP012-9500, by mutual Agreement of the Parties, in accordance with s. 287.058(1) (g), F.S., the Agency may renew the Agreement for a period not to exceed three years, or the term of the original Agreement, whichever is longer. The renewal price, or method for determining a renewal price, is set forth in the bid, proposal, or reply. No other costs for the renewal may be charged. Any renewal is subject to the same terms and conditions as the original Agreement and contingent upon satisfactory performance evaluations by the Agency and the availability of funds

The purpose of this Renewal is to outline the funding allocation for the 2014-2015 Agreement period. Additionally, this renewal (1) amends paragraph 4 of the Standard Agreement; (2) revises and replaces Attachment III, Exhibit – 1; (3) revises and replaces Attachment VII Budget Summary; (4) revises Attachment VIII; and (5) revises Attachment I paragraph 2.3.2.1.1.

STANDARD AGREEMENT:

(1) Paragraph 4 of the Standard Agreement is hereby amended to read:

4. Agreement Amount

The Agency agrees to pay for services according to the terms and conditions of this Agreement in an amount not to exceed the Total Agreement Amount per funding year outlined below subject to the availability of funds. The Agency will provide a spending authority as outlined in Attachment VII for client services. Any costs or services paid for under any other contract and or agreement from any other source are not eligible for payment under this Agreement.

These funds are allocated for the period August 1, 2012 – March 31, 2013

Funding Allocation				
Program Title	Year	Funding Sources	CFDA	Amount
Emergency Home Energy Assistance Program	2012-2013	U.S. Health and Human Services	93.568	\$10,713.00
TOTAL AGREEMENT AMOUNT:				\$10,713.00

These funds are allocated for the period April 1, 2013 – March 31, 2014

Funding Allocation				
Program Title	Year	Funding Sources	CFDA	Amount
Emergency Home Energy Assistance Program	2013-2014	U.S. Health and Human Services	93.568	\$11,606.00
TOTAL AGREEMENT AMOUNT:				\$11,606.00

These funds are allocated for the period April 1, 2014 – March 31, 2015

Funding Allocation				
Program Title	Year	Funding Sources	CFDA	Amount
Emergency Home Energy Assistance Program	2014-2015	U.S. Health and Human Services	93.568	\$9,759.00
TOTAL AGREEMENT AMOUNT:				\$9,759.00

TOTAL FEDERAL AWARD FOR FUNDING YEARS 2012-2013, 2013-2014, AND 2014-2015:	\$32,078.00
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(2) Attachment III, Exhibit-1 is replaced with the following Attachment III: ✓

ATTACHMENT III

1. **FEDERAL RESOURCES AWARDED TO THE PROVIDER PURSUANT TO THIS AGREEMENT CONSIST OF THE FOLLOWING:**

PROGRAM TITLE	YEAR	FUNDING SOURCE	CFDA	AMOUNT
Emergency Home Energy Assistance Program	2012-2013	U.S. Health and Human Services	93.568	\$158,261.00
PROGRAM TITLE	YEAR	FUNDING SOURCE	CFDA	AMOUNT
Emergency Home Energy Assistance Program	2013-2014	U.S. Health and Human Services	93.568	\$162,232.00
PROGRAM TITLE	YEAR	FUNDING SOURCE	CFDA	AMOUNT
Emergency Home Energy Assistance Program	2014-2015	U.S. Health and Human Services	93.568	\$132,391.00

TOTAL FEDERAL AWARD FOR FUNDING YEARS 2012-2013, 2013-2014, AND 2014-2015:	\$452,884.00
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(3) Attachment VII Budget Summary is replaced with the following Attachment VII:

ATTACHMENT VII

EMERGENCY HOME ENERGY ASSISTANCE FOR THE ELDERLY PROGRAM

BUDGET SUMMARY

PSA: 9

Original ____

Renewal 002

PROVIDER: Palm Beach County Board of County Commissioners

2012-2013 FUNDING YEAR

1.	Administration*	\$1,800.00
2.	Outreach*	\$8,913.00
3.	EHEAP Crisis Benefits (Spending Authority)	\$147,548.00
4.	Weather-Related/Supply-Shortage**(Spending Authority)	\$0.00
5.	Total	\$158,261.00
6.	Projected minimum number of consumers to be served (Crisis):	245
7.	Projected minimum number of consumers to be served (Weather-Related/Supply Shortage):	0

2013-2014 FUNDING YEAR

1.	Administration*	\$1,800.00
2.	Outreach*	\$9,806.00
3.	EHEAP Crisis Benefits (Spending Authority)	\$146,061.00
4.	Weather-Related/Supply-Shortage**(Spending Authority)	\$4,565.00
5.	Total	\$162,232.00
6.	Projected minimum number of consumers to be served (Crisis):	243
7.	Projected minimum number of consumers to be served (Weather-Related/Supply Shortage):	8

2014-2015 FUNDING YEAR

1.	Administration*	\$1,200.00
2.	Outreach*	\$8,559.00
3.	EHEAP Crisis Benefits (Spending Authority)	\$122,632.00
4.	Weather-Related/Supply-Shortage**(Spending Authority)	\$0.00
5.	Total	\$132,391.00
6.	Projected minimum number of consumers to be served (Crisis):	204
7.	Projected minimum number of consumers to be served (Weather-Related/Supply Shortage):	0

NOTE: Eligible households may be provided with one benefit per season up to six hundred dollars per benefit. The minimum number of consumers may reflect duplicated consumers if a consumer received a benefit in both seasons.*Allowable administrative and outreach funds may be used for emergency energy assistance benefits upon approval of the transfer by the Agency.

(4) Attachment VIII EHEAP Fiscal and Programmatic Agreement Report and Expenditure Schedule is replaced with the following Attachment VIII.

ATTACHMENT VIII

EHEAP Fiscal and Programmatic Agreement Report and Expenditure Schedule

Report	Report Name	Submit to the "AGENCY" on or before this Date
1	April Expenditure Report	May 10
2	April Surplus/Deficit Report	May 15
3	May Expenditure Report	June 10
4	May Surplus/Deficit Report	June 15
5	June Expenditure Report	July 10
6	June Surplus/Deficit Report	July 15
7	EHEAP Enrollment and Exception Statistical Report #1	July 10
8	July Expenditure Report	August 10
9	July Surplus/Deficit Report	August 15
10	August Expenditure Report	Sept 10
11	August Surplus/Deficit Report	Sept 15
12	September Expenditure Report	Oct 10
13	September Surplus/Deficit Report	Oct 15
14	EHEAP Enrollment and Exception Statistical Report # 2	Oct 10
15	October Expenditure Report	Nov 10
16	October Surplus/Deficit Report	Nov 15
17	November Expenditure Report	Dec 10
18	November Surplus/Deficit Report	Dec 15
19	December Expenditure Report	Jan 10
20	December Surplus/Deficit Report	Jan 15
21	EHEAP Enrollment and Exception Statistical Report # 3	Jan 10
22	January Expenditure Report	Feb 10
23	January Surplus/Deficit Report	Feb 15
24	February Expenditure Report	Mar 10
25	February Surplus/Deficit Report	Mar 15
26	March Expenditure Report	April 10
27	March surplus/Deficit Report	April 15
28	EHEAP Enrollment and Exception Statistical Report # 4	April 10

29	Final Request for Payment / Closeout Report	April 20
Note # 1: Submission of expenditure reports may or may not generate a payment request. If final expenditure report reflects funds due back to the Agency, payment is to accompany the report.		

(5) Attachment I, paragraph 2.3.2.1.1. is hereby revised to read:

2.3.2.1 Program Reports

2.3.2.1.1 Emergency Home Energy Assistance for the Elderly Statistical Report

The Provider shall submit to the Consumer Services Consultant the service report entitled, "EHEAP Enrollment and Exception Statistical Report, Attachment X" in CIRTS. The report shall reflect the use of EHEAP in each CCSA. The report shall be submitted based on the following schedule:

REPORT	REPORTING PERIOD	SEASON	DATE DUE TO AGENCY
1	4/01/14 -6/30/14	Cooling Season	July 10, 2014
2	7/01/14 -9/30/14	Cooling Season	October 10, 2014
3	10/01/14 – 12/31/14	Heating Season	January 10, 2015
4	01/01/15 – 03/31/15	Heating Season	April 10, 2015

This Renewal shall be effective on the last date that the Renewal has been signed by both Parties.

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

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

This Renewal and all of its attachments are hereby made a part of this Agreement.

IN WITNESS THEREOF, the parties hereto have caused this 6 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: _____
Priscilla A. Taylor, Mayor

SIGNED
BY: _____

DATE: _____

NAME: _____

TITLE: _____

BY: _____

DATE: _____

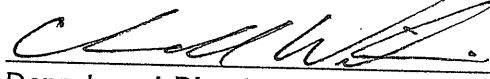
FEDERAL ID NUMBER: _____

FISCAL YEAR END DATE: _____

Approved as to form and legal sufficiency

County Attorney

Approved as to terms and conditions



Department Director

ATTEST:
SHARON R. BOCK
CLERK AND COMPTROLLER

By: _____
Deputy Clerk



MEMORANDUM

TO: Robert Weisman, County Administrator
Board of County Commissioners
THRU: Jon Van Arnam, Assistant County Administrator
Board of County Commissioners
FROM: Channell Wilkins, Director
Community Services Department
DATE: April 16, 2014
RE: Division of Senior Services (DOSS) Grant Amendments

Department of Community Services
Division of Senior Services
Administration

- Central Office: 810 Datura Street, Suite 300, West Palm Beach, FL 33401
North Office: 5217 Northlake Boulevard, Palm Beach Gardens, FL 33418
South Office: 3680 Lake Worth Road, Lake Worth, FL 33461
West Office: 2916 State Road #15, Belle Glade, FL 33430

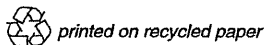
www.pbcgov.com

Palm Beach County
Board of County Commissioners

- Priscilla A. Taylor, Mayor
Paulette Burdick, Vice Mayor
Hal R. Valeche
Shelley Vana
Steven L. Abrams
Mary Lou Berger
Jess R. Santamaria

County Administrator
Robert Weisman

An Equal Opportunity
Affirmative Action Employer




Pursuant to Resolution R-2013-0242, your signature is needed for the approval of the enclosed grant amendments. This resolution authorizes the County Administrator signatory authority on grant amendments related to DOSS/Area Agency on Aging of Palm Beach/Treasure Coast, Inc. (AAA) grants for no more than ten percent (10%) of the contracted amount or \$150,000, whichever is greater. Please find grant amendments and resolution attached:

- A) Amendment 004 to Standard Agreement No. IC012-9500 (R2012-1632) for Community Care for the Elderly (CCE) with AAA for period July 1, 2013 to June 30, 2014, to decrease overall total funding by \$15,000; amend Section D; revise Section LL and Section YY of Standard Agreement; and Attachment I Section II.C.1.2 and Attachment I Section III. B.1; and replace Attachment II, Budget Summary and Attachment III, CCE Rate Sheet. CCE defers the need for more costly institutional care by providing seniors case management.
B) Amendment 003 to Standard Agreement No. IH012-9500 (R2012-1634) for Home Care for the Elderly (HCE) with AAA for period July 1, 2013 to June 30, 2014, to increase overall total funding by \$15,000; amend Section D; revise Section LL and Section YY of Standard Agreement; and Attachment I Section II.C.1.2 and Attachment I Section III. B.1; and replace Attachment II, Budget Summary and Attachment III, HCE Rate Sheet. HCE provides case management to seniors and provides caregivers resources to afford care in family-type living setting as an alternative to institutional care.
C) Amendment 004 to Standard Agreement No. IZ012-9500 (R2012-1631) for Alzheimer's Disease Initiative (ADI) with AAA for period July 1, 2013 to June 30, 2014, amend Section D; revise Section LL and Section YY of Standard Agreement; and Attachment I Section II.C.1.2 and Attachment I Section III. B.1; and replace Attachment II, Budget Summary and Attachment III, ADI Rate Sheet. ADI ensures through case management that seniors afflicted with Alzheimer's and dementia are provided services.

Staff will submit these items at the Board's May 20, 2014 Commission Meeting as a "Receive and File" item to allow the Clerk's office to note and receive the documents in accordance with PPM CW-O-051. For additional information, contact Faith R. Manfra at (561) 355-4750.

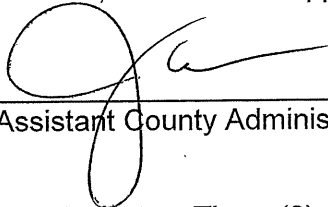
Approved by:



Director, Financial & Support Svcs.



Chief Assistant County Attorney



Assistant County Administrator



OFMB

Attachments: Three (3) Amendments
Resolution 2013-0242

RESOLUTION NO. R-2013-0242

RESOLUTION AMENDING RESOLUTION NO. 2010-1942 OF THE BOARD OF COUNTY COMMISSIONERS OF PALM BEACH COUNTY, FLORIDA, AUTHORIZING THE COUNTY ADMINISTRATOR, OR HIS DESIGNEE, SIGNATORY AUTHORITY ON INDIVIDUAL AMENDMENTS AND ANY OTHER NECESSARY DOCUMENTS RELATED TO AREA AGENCY ON AGING OF PALM BEACH/TREASURE COAST, INC. (AAA) AND DEPARTMENT OF ELDER AFFAIRS (DOEA) GRANT AGREEMENTS/CONTRACTS FOR NOT MORE THAN TEN PERCENT (10%) OF THE GRANT AWARD OR \$150,000, WHICHEVER IS GREATER.

WHEREAS, Palm Beach County has been notified that the Division of Senior Services is a Lead Agency which will receive Federal and State funds through Area Agency on Aging of Palm Beach/Treasure Coast, Inc.; and

WHEREAS, since streamlining of the agenda process has increased the length of time between Board meetings and it is imperative that individual amendments and any other necessary documents be executed with the greatest dispatch; and

WHEREAS, Palm Beach County has adopted an optional Home Rule Charter pursuant to Section 1(g) of Article VIII of the Florida State Constitution and Chapter 125 of the Florida Statutes; and

WHEREAS, Section 125.85, Florida Statutes, authorizes the delegation of any powers and duties not set forth therein by resolution or ordinance of the Board of County Commissioners; and

WHEREAS, the delegation of signing authority to the County Administrator, or his designee, on individual amendments and any other necessary documents related to AAA and DOEA grant agreements/contracts for not more than ten percent (10%) of the grant award or \$150,000, whichever is greater, would facilitate timely spending of grant funds which must be spent within a program year; and

WHEREAS, the agenda process is at times, not conducive to allowing documents to be executed with the greatest dispatch; and

WHEREAS, the delegation of signature authority to the County Administrator, or his designee, on individual amendments and any other necessary documents related to AAA and DOEA grant agreements/contracts would also allow for reallocation of funding in a more expeditious manner and would eliminate delays caused by such items to be brought before the Board of County Commissioners and would therefore be consistent with the goal of the grantee to expend funds in compliance with grant requirements; and

WHEREAS, Countywide PPM#CW-O-051 establishes procedures and policies regarding delegated authority for execution of County contracts, agreements, and grants.

NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF COUNTY COMMISSIONERS OF PALM BEACH COUNTY, FLORIDA, as follows:

1. The foregoing recitals are true and correct and are expressly incorporated herein by reference and made a part hereof.

2. The County Administrator, or his designee, is hereby expressly authorized to execute, on behalf of the Board of County Commissioners, individual amendments and any other necessary documents related to the AAA and DOEA within the defined threshold effective March 12, 2013.

3. This delegation of signature authority is strictly limited to the parameters set forth herein above so that the execution of the aforementioned document by the County Administrator constitutes a ministerial act on his part in accordance with PPM #CW-O-051.

The foregoing resolution was offered by Commissioner Berger who moved its adoption. The motion was seconded by Commissioner Taylor and upon being put to a vote, the vote was as follows:

Commissioner Steven L. Abrams, Mayor	<u>Aye</u>
Commissioner Priscilla A. Taylor, Vice Mayor	<u>Aye</u>
Commissioner Hal R. Vaieche	<u>Aye</u>
Commissioner Paulette Burdick	<u>Aye</u>
Commissioner Shelley Vana	<u>Aye</u>
Commissioner Mary Lou Berger	<u>Aye</u>
Commissioner Jess R. Santamaria	<u>Aye</u>

The Mayor thereupon declared the Resolution duly passed and adopted this 12th day of March, 2013.

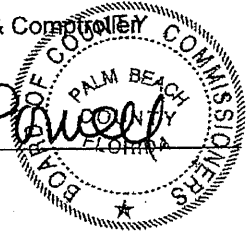
**APPROVED AS TO FORM
LEGAL SUFFICIENCY**

**PALM BEACH COUNTY, FLORIDA
BOARD OF COUNTY COMMISSIONERS**

Sharon R. Bock, Clerk & Comptroller
Palm Beach County

By: [Signature]
County Attorney

By: [Signature]
Deputy Clerk



**APPROVED AS TO TERMS
AND CONDITIONS**

BY: [Signature]
DEPARTMENT HEAD

This AMENDMENT, entered into by the Area Agency on Aging of Palm Beach/Treasure Coast, Inc., hereinafter referred to as the "Agency", and Palm Beach County Board of County Commissioners, hereinafter referred to as the "Provider" and collectively referred to as the "Parties", amends Agreement IC012-9500.

The purpose of this amendment is to decrease the overall total funding for the period of July 1, 2013 through June 30, 2014 by \$15,000.00. Additionally, this amendment (1) amends Section D of the Standard Agreement, (2) revises Section LL of the Standard Agreement; (3) revises Section YY of the Standard Agreement; (4) revises Attachment I Section II.C.1.2; (5) revises Attachment I Section III. B.1; (6) replaces Attachment II, Community Care for the Elderly Budget Summary and (7) replaces Attachment III, CCE Rate Sheet.

STANDARD AGREEMENT:

(1) Section D of the Standard Agreement, is hereby amended to read:

D. Agreement Amount

The Agency agrees to pay for contracted services according to the terms and conditions of this Agreement in an amount not to exceed the Total Agreement Amount per funding year outlined below or the rate schedule, with expenditures to be based upon an approved annual budget, subject to adjustment in accordance with Attachment II and subject to the availability of funds. Any costs or services paid for under any other contract or agreement or from any other source are not eligible for payment under this agreement.

These funds are allocated for the period July 1, 2012 – June 30, 2013

Funding Allocation				
Program Title	Year	Funding Sources	CSFA	Amount
Community Care for the Elderly (CCE)	2012	General Revenue	65.010	\$1,069,802.58
TOTAL AGREEMENT AMOUNT:				\$1,069,802.58

These funds are allocated for the period July 1, 2013 through June 30, 2014.

Funding Allocation				
Program Title	Year	Funding Sources	CSFA	Amount
Community Care for the Elderly (CCE)	2013	General Revenue	65.010	\$1,189,532.00
TOTAL AGREEMENT AMOUNT:				\$1,189,532.00

(2) Section LL of the Standard Agreement is hereby revised to read:

LL. Purchasing

The Provider may procure any recycled products or materials, which are the subject of or are required to carry out this agreement, in accordance with the provisions of s. 403.7065 F.S.

The Agency is committed to embracing diversity in the provision of services to Florida's elders and in providing fair and equal opportunities for all qualified minority businesses in Florida. The Provider shall report information to the Agency on utilization of certified minority and non-certified minority subcontractors and/or vendors receiving funds pursuant to this contract. This report shall be submitted to the Agency by the 5th of the month following the end of each quarter.

(3) Section YY of the Standard Agreement is hereby revised to read:

YY. Final Invoice

The Provider shall submit the final invoice for payment to the Agency as specified in Attachment I, Section III.B.5. If the Provider fails to submit final request for payment by the deadline, then all rights to payment may be forfeited and the Agency may not honor any requests submitted after the aforesaid time period. Any payment due under the terms of this Agreement may be withheld until all reports due from the Provider and necessary adjustments thereto have been approved by the Agency.

(4) Attachment I Section II.C.1.2 is hereby revised to read:

1.2 Client Information and Registration Tracking System (CIRTS) Reports

The Provider shall input CCE specific data into CIRTS to ensure CIRTS data accuracy. The Provider shall use CIRTS generated reports, which include the following:

- (1) Client Reports;
- (2) Monitoring Reports;
- (3) Services Reports;
- (4) Miscellaneous Reports;
- (5) Fiscal Reports;
- (6) Aging and Disability Resource Center Reports; and
- (7) Outcome Measurement Reports
- (8) To ensure CIRTS data integrity, the following timeframes are required for entering data into CIRTS:
 - CIRTS Enrollment Screen reflects ACTV – Within 10 working days
 - Assessments - Within 30 days of Assessment Date
 - Care Plans – Within 30 days of Care Plan Date

(5) Attachment I Section III. B.1 is hereby revised to read:

- 1. The due date for the request for reimbursement and report(s) shall be no later than the 15th day of the month following the month being reported. The CIRTS report “Clients Served Not Enrolled” must be submitted with the request for payment. It should be run for the period from the Agreement start date to the month in which the invoice is submitted.

(6) Attachment II, Budget Summary, is replaced with the following Attachment II.

ATTACHMENT II

BUDGET SUMMARY
(For the Period July 1, 2012-June 30, 2013)

1. CCE Client Services	\$979,062.10
2. CCE Case Management	\$89,222.59
3. CCE Case Aide	\$1,517.89
4. Total	\$1,069,802.58

BUDGET SUMMARY
(For the Period July 1, 2013-June 30, 2014)

1. CCE Client Services	\$963,625.00
2. CCE Case Management	\$201,816.00
3. CCE Case Aide	\$24,091.00
4. Total	\$1,189,532.00

This amendment shall be effective on the last date that the amendment has been signed by both Parties.

All provisions in the Agreement 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 of its attachments are hereby made a part of this Agreement.

(7) Attachment III, CCE Rate Sheet, is replaced with the following Attachment III.

ATTACHMENT III

CCE 2012-2013 RATE SHEET

SERVICE	2011 REIMBURSEMENT UNIT RATE	2012 REIMBURSEMENT UNIT RATE
ADULT DAY CARE	\$9.83	\$10.03
ADULT DAY HEALTH CARE	\$0.00	\$0.00
CAREGIVER TRAIN/SUPPORT (GRP)	\$0.00	\$0.00
CAREGIVER TRAIN/SUPPORT (INDV)	\$0.00	\$0.00
CASE AIDE	\$23.34	\$23.81
CASE MANAGEMENT	\$39.66	\$40.45
CHORE	\$14.47	\$14.76
CHORE (ENHANCED)	\$0.00	\$0.00
CHORE (ENHANCED) - VENDOR PAYMENT	\$0.00	\$0.00
COMPANIONSHIP	\$14.47	\$14.76
CONSUMABLE MEDICAL SUPPLIES	\$0.00	\$0.00
COUNSELING (GERONTOLOGICAL) - INDIVIDUAL	\$68.25	\$69.62
COUNSELING (MENTAL HEALTH COUNSELING/SCREENING) - INDIVIDUAL	\$0.00	\$0.00
EMERGENCY ALERT RESONSE - INSTALLATION	\$0.00	\$0.00
EMERGENCY ALERT RESPONSE	\$0.83	\$0.85
ESCORT	\$14.47	\$14.76
GERONTOLOGICAL COUNSELING	\$0.00	\$0.00
HEALTH SUPPORT	\$0.00	\$0.00
HOME DELIVERED MEALS	\$0.00	\$0.00
HOME HEALTH AIDE	\$0.00	\$0.00
HOME NURSING	\$0.00	\$0.00
HOMEMAKER	\$14.47	\$14.76
HOUSING IMPROVEMENT	\$0.00	\$0.00
LEGAL SERVICES	\$0.00	\$0.00
MATERIAL AID	\$0.00	\$0.00
MEDICATION MANAGEMENT	\$0.00	\$0.00
NURSING SERVICES	\$0.00	\$0.00
NUTRITION COUNSELING	\$0.00	\$0.00
NUTRITION EDUCATION	\$0.00	\$0.00
OCCUPATIONAL THERAPY	\$0.00	\$0.00
OTHER SERVICES	\$0.00	\$0.00

PERSONAL CARE	\$14.47	\$14.76
PEST CONTROL INITIATION	\$0.00	\$0.00
PEST CONTROL MAINTENANCE	\$0.00	\$0.00
PHYSICAL THERAPY	\$0.00	\$0.00
RESPIRE	\$14.47	\$14.76
RESPIRE IN-FACILITY	\$0.00	\$0.00
RISK REDUCTION FINANCIAL ASSES	\$0.00	\$0.00
RISK REDUCTION FINANCIAL MAINT	\$0.00	\$0.00
RISK REDUCTION NUTRITIONAL	\$0.00	\$0.00
RODENT CONTROL INITIATION	\$0.00	\$0.00
RODENT CONTROL MAINTENANCE	\$0.00	\$0.00
SHOPPING ASSISTANCE	\$0.00	\$0.00
SPECIALIZED MEDICAL EQUIPMENT & SUPPLIES	\$30.00	\$30.60
SPEECH THERAPY	\$0.00	\$0.00
SUPPLIES/SERVICES	\$0.00	\$0.00
TRANSPORTATION	\$0.00	\$0.00

CCE 2013-2014 RATE SHEET

SERVICE	REIMBURSABLE UNIT RATE
ADULT DAY CARE	\$10.23
ADULT DAY HEALTH CARE	\$0.00
CAREGIVER TRAIN/SUPPORT (GRP)	\$0.00
CAREGIVER TRAIN/SUPPORT (INDV)	\$0.00
CASE AIDE	\$24.29
CASE MANAGEMENT	\$41.26
CHORE	\$15.06
CHORE (ENHANCED)	\$0.00
CHORE (ENHANCED) - VENDOR PAYMENT	\$0.00
COMPANIONSHIP	\$15.06
CONSUMABLE MEDICAL SUPPLIES	\$0.00
COUNSELING (GERONTOLOGICAL) - INDIVIDUAL	\$71.01
COUNSELING (MENTAL HEALTH COUNSELING/SCREENING) - INDIVIDUAL	\$0.00
EMERGENCY ALERT RESONSE - INSTALLATION	\$0.00
EMERGENCY ALERT RESPONSE	\$0.87
ESCORT	\$15.06
GERONTOLOGICAL COUNSELING	\$0.00
HEALTH SUPPORT	\$0.00
HOME DELIVERED MEALS	\$0.00
HOME HEALTH AIDE	\$0.00

HOME NURSING	\$0.00
HOMEMAKER	\$15.06
HOUSING IMPROVEMENT	\$0.00
LEGAL SERVICES	\$0.00
MATERIAL AID	\$0.00
MEDICATION MANAGEMENT	\$0.00
NURSING SERVICES	\$0.00
NUTRITION COUNSELING	\$0.00
NUTRITION EDUCATION	\$0.00
OCCUPATIONAL THERAPY	\$0.00
OTHER SERVICES	\$0.00
PERSONAL CARE	\$15.06
PEST CONTROL INITIATION	\$0.00
PEST CONTROL MAINTENANCE	\$25.00
PHYSICAL THERAPY	\$0.00
RESPIRE	\$15.06
RESPIRE IN-FACILITY	\$0.00
RISK REDUCTION FINANCIAL ASSES	\$0.00
RISK REDUCTION FINANCIAL MAINT	\$0.00
RISK REDUCTION NUTRITIONAL	\$0.00
RODENT CONTROL INITIATION	\$0.00
RODENT CONTROL MAINTENANCE	\$0.00
SHOPPING ASSISTANCE	\$0.00
SPECIALIZED MEDICAL EQUIPMENT & SUPPLIES	\$0.00
SPEECH THERAPY	\$0.00
SUPPLIES/SERVICES	\$0.00
TRANSPORTATION	\$0.00

This amendment shall be effective on the last date that the amendment has been signed by both Parties.

All provisions in the Agreement 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.

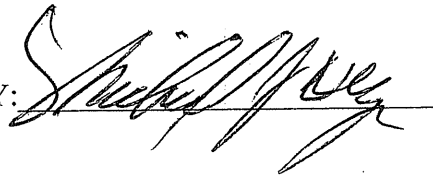
This amendment and all of its attachments are hereby made a part of this Agreement.

IN WITNESS WHEREOF, the Parties hereto have caused this 10 page amendment to be executed by their officials there unto 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: 
Robert Weisman, County Administrator

SIGNED BY: 

DATE: 4/24/14

SHARON R. BOCK, Clerk and Comptroller

NAME: Michael Dyer

TITLE: Board Chair

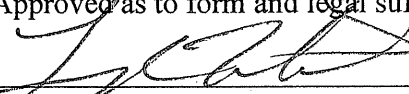
BY: _____

DATE: 3/18/2014

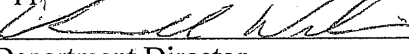
DATE: _____

Federal Tax ID: 59-6000785
Fiscal Year Ending Date: _____

Approved as to form and legal sufficiency


Chief Assistant County Attorney

Approved as to terms and conditions


Department Director

Attestation Statement

Agreement/Contract Number IC012-9500

Amendment Number 004

I, Robert Weisman, County Administrator, attest that no changes or revisions have
(*Provider Representative*)
been made to the content of the above referenced agreement/contract or amendment between the
Area Agency on Aging 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 effect on the agreement/contract content.



Signature of Provider Representative

4/24/14

Date

APPROVED AS TO FORM
AND LEGAL SUFFICIENCY


COUNTY ATTORNEY

This AMENDMENT, entered into by the Area Agency on Aging of Palm Beach/Treasure Coast, Inc., hereinafter referred to as the "Agency", and Palm Beach County Board of County Commissioners, hereinafter referred to as the "Provider" and collectively referred to as the "Parties", amends Agreement IH012-9500.

The purpose of this amendment is to increase the overall total funding for the period of July 1, 2013 through June 30, 2014 by \$15,000.00. Additionally, this amendment (1) amends Section D of the Standard Agreement; (2) revises Section LL of the Standard Agreement; (3) revises Section YY of the Standard Agreement; (4) revises Attachment I Section II.C.1.2; (5) revises Attachment I Section III. B.1; (6) replaces Attachment II, Home Care for the Elderly Budget Summary and (7) replaces Attachment III, HCE Rate Sheet.

STANDARD AGREEMENT:

(1) Section D of the Standard Agreement, is hereby amended to read:

D. Agreement Amount

The Agency awards for services according to the statement of work, ATTACHMENT I of this Agreement in an amount not to exceed the Total Agreement Amount per funding year outlined below, subject to the availability of funds. The Agency will provide a spending authority as outlined in ATTACHMENT II for client services. Any costs or services paid for under any other contract or agreement or from any other source are not eligible for payment under this agreement. The Provider agrees to utilize the approved rate sheet, ATTACHMENT III for contracted services the Agency agrees to pay for.

These funds are allocated for the period July 1, 2012 – June 30, 2013

Funding Allocation				
Program Title	Year	Funding Sources	CSFA	Amount
Home Care for the Elderly (HCE)	2012	General Revenue	65.001	\$17,363.27
TOTAL AGREEMENT AMOUNT:				\$17,363.27

These funds are allocated for the period July 1, 2013 through June 30, 2014.

Funding Allocation				
Program Title	Year	Funding Sources	CSFA	Amount
Home Care for the Elderly (HCE)	2013	General Revenue	65.001	\$29,141.00
TOTAL AGREEMENT AMOUNT:				\$29,141.00

(2) Section LL of the Standard Agreement is hereby revised to read:

LL. Purchasing

The Provider may procure any recycled products or materials, which are the subject of or are required to carry out this agreement, in accordance with the provisions of s. 403.7065 F.S.

The Agency is committed to embracing diversity in the provision of services to Florida's elders and in providing fair and equal opportunities for all qualified minority businesses in Florida. The Provider shall report information to the Agency on utilization of certified minority and non-certified minority subcontractors and/or vendors receiving funds pursuant to this contract. This report shall be submitted to the Agency by the 5th of the month following the end of each quarter.

(3) Section YY of the Standard Agreement is hereby revised to read:

YY. Final Invoice

The Provider shall submit the final invoice for payment to the Agency as specified in Attachment I, Section III.B.5. If the Provider fails to submit final request for payment by the deadline, then all rights to payment may be forfeited and the Agency may not honor any requests submitted after the aforesaid time period. Any payment due under the terms of this Agreement may be withheld until all reports due from the Provider and necessary adjustments thereto have been approved by the Agency.

(4) Attachment I Section II.C.1.2 is hereby revised to read:

1.2 Client Information and Registration Tracking System (CIRTS) Reports

The Provider shall input HCE specific data into CIRTS to ensure CIRTS data accuracy. The Provider shall use CIRTS generated reports, which include the following:

- (1) Client Reports;
 - (2) Monitoring Reports;
 - (3) Services Reports;
 - (4) Miscellaneous Reports;
 - (5) Fiscal Reports;
 - (6) Aging and Disability Resource Center Reports; and
 - (7) Outcome Measurement Reports
- (8) To ensure CIRTS data integrity, the following timeframes are required for entering data into CIRTS:
- CIRTS Enrollment Screen reflects ACTV – Within 10 working days
 - Assessments - Within 30 days of Assessment Date
 - Care Plans – Within 30 days of Care Plan Date

(5) Attachment I Section III. B.1 is hereby revised to read:

- 1. The due date for the request for reimbursement and report(s) shall be no later than the 20th day of the month following the month being reported. The CIRTS report “Clients Served Not Enrolled” must be submitted with the request for payment. It should be run for the period from the Agreement start date to the month in which the invoice is submitted.

(6) Attachment II, Budget Summary, is replaced with the following Attachment II.

ATTACHMENT II

BUDGET SUMMARY
(For the Period July 1, 2012-June 30, 2013)

1. Spending Authority for HCE Subsidies	\$105,685.00
2. HCE Case Management	\$17,192.77
3. Background Screening for Caregivers	\$170.50
4. Total	\$123,048.27

BUDGET SUMMARY
(For the Period July 1, 2013-June 30, 2014)

1. Spending Authority for HCE Subsidies	\$123,685.00
2. HCE Case Management	\$23,291.00
3. Background Screening for Caregivers	\$5,850.00
4. Total	\$152,826.00

This amendment shall be effective on the last date that the amendment has been signed by both Parties.

All provisions in the Agreement 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 of its attachments are hereby made a part of this Agreement.

(7) Attachment III, HCE Rate Sheet, is replaced with the following Attachment III.

ATTACHMENT III

HCE 2012-2013 RATE SHEET

SERVICE	2011 REIMBURSEMENT UNIT RATE	2012 REIMBURSEMENT UNIT RATE
BASIC SUBSIDY	\$106.00	\$106.00
BACKGROUND SCREENING-VENDOR	\$0.00	\$85.25
CASE AIDE	\$0.00	\$0.00
CASE MANAGEMENT	\$51.30	\$51.30
RESPIRE	\$0.00	15..92
SUPPLIES/SERVICES (AVERAGE COST)	\$0.00	\$33.00
SUPPLIES/SERVICES MEDICAL-VENDOR PAYMENT (AVERAGE COST)	\$0.00	\$0.00

HCE 2013-2014 RATE SHEET

SERVICE	REIMBURSABLE UNIT RATE
BASIC SUBSIDY	\$106.00
OTHER - BACKGROUND SCREEN - VENDOR	\$85.25
OTHER - BACKGROUND SCREEN - RETENTION - VENDOR	\$6.00
CASE AIDE	\$0.00
CASE MANAGEMENT	\$51.30
RESPIRE	15..92
SUPPLIES/SERVICES (AVERAGE COST)	\$1.00
SUPPLIES/SERVICES MEDICAL-VENDOR PAYMENT (AVERAGE COST)	\$0.00

This amendment shall be effective on the last date that the amendment has been signed by both Parties.

All provisions in the Agreement 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 of its attachments are hereby made a part of this Agreement.

IN WITNESS WHEREOF, the Parties hereto have caused this 8 page amendment to be executed by their officials there unto 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: 
Robert Weisman, County Administrator

SIGNED BY: 

DATE: 4/24/14

SHARON R. BOCK, Clerk and Comptroller

NAME: Michael Dyer

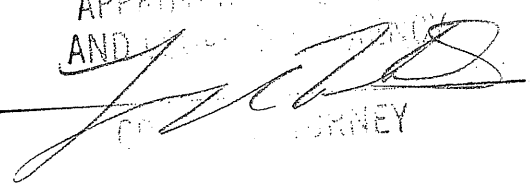
BY: _____

TITLE: Board Chair

DATE: _____

DATE: 3/18/2014

Federal Tax ID: 59-6000785
Fiscal Year Ending Date: _____

APPROVED AND FORWARDED:

J. J. JORNEY


Attestation Statement

Agreement/Contract Number IH012-9500

Amendment Number 003

I, Robert Weisman, County Administrator, attest that no changes or revisions have
(Provider Representative)

been made to the content of the above referenced agreement/contract or amendment between the Area Agency on Aging 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 effect on the agreement/contract content.



Signature of Provider Representative

4/24/14

Date

APPROVED AS TO FORM
AND LEGAL SUFFICIENCY


COUNTY ATTORNEY

This AMENDMENT, entered into by the Area Agency on Aging of Palm Beach/Treasure Coast, Inc., hereinafter referred to as the "Agency", and Palm Beach County Board of County Commissioners, hereinafter referred to as the "Provider" and collectively referred to as the "Parties", amends Agreement IZ012-9500.

The purpose of this amendment is to (1) revise Section LL of the Standard Agreement; (2) revise section YY of the Standard Agreement; (3) revise Attachment I Section II.C.1.2; (4) revise Attachment I Section III. B.1; and (5) replace Attachment III, ADI Rate Sheet.

(1) Section LL of the Standard Agreement is hereby amended to read:

LL. Purchasing

The Provider may procure any recycled products or materials, which are the subject of or are required to carry out this agreement, in accordance with the provisions of s. 403.7065 F.S.

The Agency is committed to embracing diversity in the provision of services to Florida's elders and in providing fair and equal opportunities for all qualified minority businesses in Florida. The Provider shall report information to the Agency on utilization of certified minority and non-certified minority subcontractors and/or vendors receiving funds pursuant to this contract. This report shall be submitted to the Agency by the 5th of the month following the end of each quarter.

(2) Section YY of the Standard Agreement is hereby amended to read:

YY. Final Invoice

The Provider shall submit the final invoice for payment to the Agency as specified in Attachment I, Section III.B.5. If the Provider fails to submit final request for payment by the deadline, then all rights to payment may be forfeited and the Agency may not honor any requests submitted after the aforesaid time period. Any payment due under the terms of this Agreement may be withheld until all reports due from the Provider and necessary adjustments thereto have been approved by the Agency.

(3) Attachment I Section II.C.1.2 is hereby amended to read:

1.2 Client Information and Registration Tracking System (CIRTS) Reports

The Provider shall input ADI specific data into CIRTS to ensure CIRTS data accuracy. The Provider shall use CIRTS generated reports, which include the following:

- (1) Client Reports;
- (2) Monitoring Reports;
- (3) Services Reports;
- (4) Miscellaneous Reports;
- (5) Fiscal Reports;
- (6) Aging and Disability Resource Center Reports; and
- (7) Outcome Measurement Reports
- (8) To ensure CIRTS data integrity, the following timeframes are required for entering data into CIRTS:
 - CIRTS Enrollment Screen reflects ACTV – Within 10 working days
 - Assessments - Within 30 days of Assessment Date
 - Care Plans – Within 30 days of Care Plan Date

(4) Attachment I Section III. B.1 is hereby amended to read:

- 1. The due date for the request for reimbursement and report(s) shall be no later than the 15th day of the month following the month being reported. The CIRTS report “Clients Served Not Enrolled” must be submitted with the request for payment. It should be run for the period from the Agreement start date to the month in which the invoice is submitted.

(5) Attachment III, ADI Rate Sheet, is replaced with the following Attachment III.

ATTACHMENT III

ADI 2012-2013 RATE SHEET

SERVICE	2011 REIMBURSEMENT UNIT RATE	2012 REIMBURSEMENT UNIT RATE
CAREGIVER TRAIN/SUPPORT (GRP)	\$0.00	\$0.00
CAREGIVER TRAIN/SUPPORT (INDV)	\$0.00	\$0.00
CASE AIDE	\$0.00	\$0.00
CASE MANAGEMENT	\$39.66	\$40.45
COUNSELING	\$0.00	\$0.00
COUNSELING (GERONTOLOGICAL) - INDIVIDUAL	\$0.00	\$0.00
GERONTOLOGICAL COUNSELING	\$0.00	\$0.00
MODEL DAY CARE	\$0.00	\$0.00
OTHER SERVICES	\$0.00	\$0.00
RESPIRE	\$16.56	\$16.89
RESPIRE IN-FACILITY	\$9.83	\$10.03
SUPPLIES/SERVICES	\$0.00	\$0.00

ADI 2013-2014 RATE SHEET

SERVICE	REIMBURSABLE UNIT RATE
CAREGIVER TRAIN/SUPPORT (GRP)	\$0.00
CAREGIVER TRAIN/SUPPORT (INDV)	\$0.00
CASE AIDE	\$0.00
CASE MANAGEMENT	\$41.26
COUNSELING	\$0.00
COUNSELING (GERONTOLOGICAL) - INDIVIDUAL	\$0.00
GERONTOLOGICAL COUNSELING	\$0.00
MODEL DAY CARE	\$0.00
OTHER SERVICES	\$0.00
RESPIRE	\$17.23
RESPIRE IN-FACILITY	\$10.23
SUPPLIES/SERVICES	\$0.00

This amendment shall be effective on the last date that the amendment has been signed by both Parties.

All provisions in the Agreement 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.

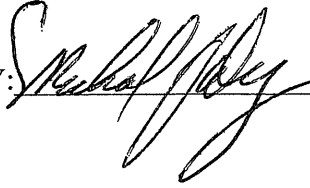
This amendment and all of its attachments are hereby made a part of this Agreement.

IN WITNESS WHEREOF, the Parties hereto have caused this 5 page amendment to be executed by their officials there unto 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: 
Robert Weisman, County Administrator

SIGNED BY: 

DATE: 4/24/14

SHARON R. BOCK, Clerk and Comptroller

NAME: Michael Dyer

BY: _____

TITLE: Board Chair

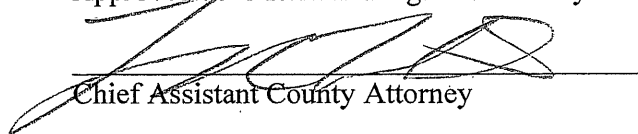
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DATE: 3/18/2014

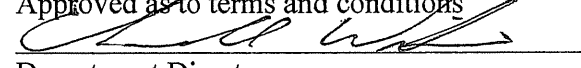
Federal Tax ID: 59-6000785

Fiscal Year Ending Date: _____

Approved as to form and legal sufficiency


Chief Assistant County Attorney

Approved as to terms and conditions


Department Director

Attestation Statement

Agreement/Contract Number IZ012-9500

Amendment Number 004

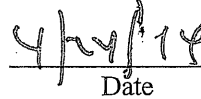
I, Robert Weisman, County Administrator, attest that no changes or revisions have

(Provider Representative)

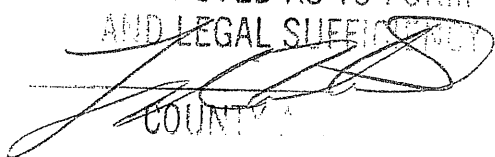
been made to the content of the above referenced agreement/contract or amendment between the Area Agency on Aging and Palm Beach Board of County Commissioners. The only exception to this statement would be for changes in page formatting, due to the differences in electronic data processing media, which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



Signature of Provider Representative



Date

APPROVED AS TO FORM
AND LEGAL SUFFICIENCY

COUNTY

**BOARD OF COUNTY COMMISSIONERS
PALM BEACH COUNTY, FLORIDA
BUDGET AMENDMENT
FUND 1006 DOSS - Administration**

BGRV - 144- 041514*546
BGEX - 144- 041514*1253

Use this form to provide budget for items not anticipated in the budget.

ACCT.NUMBER	ACCOUNT NAME	ORIGINAL BUDGET	CURRENT BUDGET	INCREASE	DECREASE	ADJUSTED BUDGET	EXPENDED/ ENCUMBERED AS OF 5/12/14	REMAINING BALANCE
REVENUES								
DOSS-EHEAP								
144-1483-3168	Fed Grant Indirect - Human Services	10,713	6,727	7,938		14,665		
DOSS-CCE								
144-1443-3469	State Grant Other Human Services	1,047,904	1,295,441		15,000	1,280,441		
DOSS-HCE								
144-1481-3469	State Grant Other Human Services	14,141	12,995	15,000		27,995		
	Total Receipts and Balances	8,291,364	8,550,101	22,938	15,000	8,558,039		
EXPENDITURES								
DOSS-EHEAP								
144-1483-3401	Other Contractual Services	1	1	7,938		7,939	0	7,939
DOSS-CCE								
144-1443-3401	Other Contractual Services	1,088,118	1,236,853		15,000	1,221,853	709,990	511,863
DOSS-HCE								
144-1481-3401	Other Contractual Services	1	1	15,000		15,001	0	15,001
	Total Appropriations & Expenditures	8,291,364	8,550,101	22,938	15,000	8,558,039		

Signatures

Date

By Board of County Commissioners
At Meeting of June 3, 2014

COMMUNITY SERVICES

INITIATING DEPARTMENT/DIVISION Channell Wilkins

 5/12/14

Administration/Budget Department Approval

OFMB Department - Posted

Deputy Clerk to the
Board of County Commissioners