PALM BEACH COUNTY BOARD OF COUNTY COMMISSIONERS

AGENDA ITEM SUMMARY

Meeting Date: Dec	ember 15, 2015	[X] Consent [] Ordinance	======================================
Department Submitted By: Co Submitted For: Ry	ommunity Services van White Part A		
	I. EXECUTI	VE BRIEF	
Provision of Ryan W	taff recommends motion White Part A HIV Health S 1, 2015, through February	upport Services wit	th below listed agencies
A) Amendment No. increase funding by	1 with Legal Aid Society o \$11,615, for a new total co	of Palm Beach Cour ontract amount not t	nty, Inc. (R2015-0468), to o exceed \$300,860; and
	1 with Compass, Inc. (R2 exceed \$698,309; and	2015-0615), to incre	ease funding by \$15,000
	. 1 with AIDS Healthcare for a new total not to exc		₹2015-0811), to increase
	lo. 2 with FoundCare, I total not to exceed \$3,761		to increase funding by
contract year and re allow our system of a County residents liver reallocated from a sy These amendment Outpatient/Ambulato Health Care, Housing	hite HIV Health Support sallocated to best meet the care to provide additional wing with HIV/AIDS. The weep in the amount of \$25 s are for services for Medical Care, Home and Services, Health Insumining Eligibility. (Ryan W	e needs of affected medical and suppore funds in these 0,000 from the Head and Community Brance Continuation	clients. These funds will to services to Palm Beach amendments are being alth Care District contract clients, which include ased Health Care, Oral and Non Medical Case
Background and J persons living with I align services with ne	ustification: Funds are HIV/AIDS. Grant adjustn eed.	used to provide v nents are made du	arious services to serve
Attachments: 1. Amendments (4), 2. Health Care Distr	ict Sweep Letter dated Se	ptember 30, 2015 ========	=======================================
Recommended By:	Department Director		1
Approved By:	Ja	-	11 23/15 Date 12-8-15
- - - - - - - - - - - - -	Deputy County Adminis	trator	Date

II. FISCAL IMPACT ANALYSIS

A. Five Year Summary of Fiscal Impact:

Fisc	al Years	2016	2017	· 2018	2019	2020		
Capi	ital Expenditures							
Ope	rating Costs	132,506						
Exte	rnal Revenue	(132,506)						
Prog	ıram Income							
In-Ki	ind Match (County)							
NET	FISCAL IMPACT	0	0					
	DDITIONAL FTE SITIONS (Cumulative)							
Is Item Included In Current Budget? Yes X No Budget Account No.: Fund 1010 Dept 142 Unit Varies Object 8201Program Code Varies Program Period GY15 B. Recommended Sources of Funds/Summary of Fiscal Impact: Funding source is the Department of Health and Human Services. No County funds are required. Funds are being reallocated from a previously contracted amount to the Health Care District which was swept in a letter dated September 30, 2015.								
C.	\mathcal{T}							
III. REVIEW COMMENTS A. OFMB Fiscal and/or Contract Development and Control Comments:								
B.	Shin man J. Janoban 1317/1. OFMB 123 (k) Contract Development and Control Ballo 2-15 Legal Sufficiency:							
	Assistant County At	Lund						
C.	Other Department I	Review:						
	Department Director							

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