

**PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS**

AGENDA ITEM SUMMARY

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Meeting Date: May 2, 2017	[X]	Consent	[]	Regular
	[]	Ordinance	[]	Public Hearing

Department
Submitted By: Community Services
Submitted For: Ryan White Program

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I. EXECUTIVE BRIEF

Motion and Title: Staff recommends motion to receive and file:

A) Amendment No. 1 to the Contract for Provision of Ryan White Part A HIV Health Support Services with the Health Care District of Palm Beach County (R2016-0850), for the period March 1, 2016, through February 28, 2017, increasing funding by \$135,199 for a new contract amount not to exceed \$254,230, to provide additional HIV medications to Palm Beach County residents living with HIV/AIDS; and

B) Amendment No. 2 to the Contract for Provision of Ryan White Part A HIV Health Support Services with Treasure Coast Health Council, Inc. d/b/a Health Council of Southeast Florida (R2016-0489), for the period March 1, 2016, through February 28, 2017, increasing funding by \$29,976 for a new contract amount not to exceed \$466,755, for specialty outpatient medical care services for Ryan White Program clients.

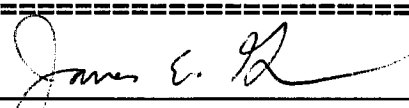
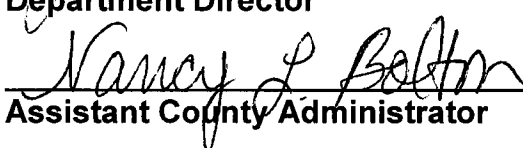
Summary: The purpose of these amendments is to increase the GY16 contract amounts by a combined total of \$165,175. These funds will allow our system of care to provide additional HIV medications to Palm Beach County residents living with HIV/AIDS and meet shifting Ryan White Program service needs. Marcia Hayden, employee of Treasure Coast Health Council, Inc. d/b/a Health Council of Southeast Florida is a member of the Planning Commission. The Planning Commission provides no regulation, oversight, management, or policy-setting recommendations regarding the agency amendments listed above. Disclosure of this contractual relationship at a duly noted public meeting is being provided in accordance with the provisions of Section 2-443, of the Palm Beach County Code of Ethics. These amendments were executed by the County Administrator in order to maximize expenditures of existing GY16 funds, in accordance with Resolution R2013-0519, which delegates signatory authority to the County Administrator or designee. These receive and file items are being submitted in accordance with Countywide PPM No. CW-O-051 to allow the Clerk's office to receive and file the executed amendments. **No County funds are required.** (Ryan White Program) Countywide (HH)

Background and Justification: Funds are used to provide various services to serve persons living with HIV/AIDS. Grant adjustments are made in order to align services with need.

Attachments:

1. Amendment No. 1 to Contract for Provision of Ryan White Part A HIV Health Support Services with Health Care District of Palm Beach County with Walkthrough Memo
2. Amendment No. 2 to Contract for Provision of Ryan White Part A HIV Health Support Services with Treasure Coast Health Council, Inc. with Walkthrough Memo

=====

Recommended By:		4/5/17	
	Department Director	Date	
Approved By:		4/12/17	
	Assistant County Administrator	Date	

II. FISCAL IMPACT ANALYSIS

A. Five Year Summary of Fiscal Impact:

Fiscal Years	2017	2018	2019	2020	2021
Capital Expenditures					
Operating Costs	165,175				
External Revenue	(165,175)				
Program Income					
In-Kind Match (County)					
NET FISCAL IMPACT	0	0			

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

Budget Account No.:

Fund 1010 Dept 142 Unit 1475 Object 8201 Program Code RW52/RW53 Program
Period GY16

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

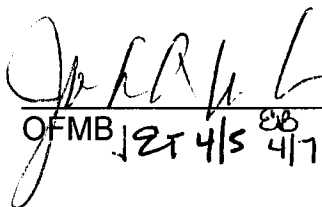
Funding source is the U.S. Department of Health and Human Services. No County funds are required. Budget will be aligned once the final notice of award has been received.


C. Departmental Fiscal Review:


Julie Dowe, Director, Financial & Support Svcs

III. REVIEW COMMENTS

A. OFMB Fiscal and/or Contract Administration Comments:

 4/10/17
OFMB JET 4/5 4/7

 4/11/17
Contract Development and Control
4/11/17 TD

B. Legal Sufficiency:


Assistant County Attorney

C. Other Department Review:

Department Director

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



**Department of Community
Services**

810 Datura Street
West Palm Beach, FL 33401
(561) 355-4700
FAX: (561) 355-3863
www.pbcgov.com

**Palm Beach County
Board of County
Commissioners**

Paulette Burdick, Mayor
Melissa McKinlay, Vice Mayor

Hal R. Valeche

Dave Kerner

Steven L. Abrams

Mary Lou Berger

Mack Bernard

County Administrator

Verdenia C. Baker

*"An Equal Opportunity
Affirmative Action Employer"*

MEMORANDUM

TO: Verdenia C. Baker, County Administrator
Board of County Commissioners

THRU: Nancy L. Bolton, Assistant County Administrator *NLB*
Board of County Commissioners

FROM: James Green, Director *JG*
Community Services Department

DATE: February 21, 2017

RE: Grant Year 16 - Ryan White Amendment No. 1 with Health Care District of Palm Beach County and Amendment No. 2 with Treasure Coast Health Council, Inc. d/b/a Health Council of Southeast Florida

Pursuant to Resolution R2013-0519, your signature is needed for the approval of the following Amendments to the Contracts for Provision of Ryan White Part A HIV Health Support Services. This resolution authorizes the County Administrator signatory authority on contract amendments related to the Ryan White Program Part A HIV Health Support Services for not more than ten percent (10%) of the contracted amount, or \$150,000, whichever is greater. No County funds are required. The amendments are as follows:

- Amendment No. 1 with the Health Care District of Palm Beach County (R2016-0850) to increase the GY 16 contract amount by \$135,199' for a new final contract amount of \$254,230. These new funds allow our system of care to provide additional HIV medications to Palm Beach County residents living with HIV/AIDS and meet shifting Ryan White service needs.
- Amendment No. 2 with Treasure Coast Health Council, Inc. d/b/a Health Council of Southeast Florida (R2016-0489) to increase the GY 16 contract amount for Specialty Outpatient Medical Care services for Ryan White clients by \$29,976, for a new final contract amount of \$466,755.

Staff will submit these items at the Board's next Commission meeting as a "Receive and File" item to allow the Clerk's office to receive and file the documents in accordance with PPM CW-O-051. If additional information is needed, please contact Geoffrey Downie at 561-355-4730.

mal
Assistant Department Director

Debra C. Boyd
Assistant County Attorney

OFMB
Nancy L. Bolton
Assistant County Administrator

Attachments:

1. Resolution No. R-2013-0519
2. Amendment No. 1 with Health Care District of Palm Beach County
3. Amendment No. 2 with Treasure Coast Health Council, Inc. d/b/a Health Council of Southeast Florida

RESOLUTION NO. R-2013-0519

RESOLUTION OF THE BOARD OF COUNTY COMMISSIONERS OF PALM BEACH COUNTY, FLORIDA, AUTHORIZING THE COUNTY ADMINISTRATOR, OR HIS DESIGNEE, SIGNATORY AUTHORITY ON CONTRACT AMENDMENTS FOR INDIVIDUAL RYAN WHITE CONTRACTED AGENCIES FOR NOT MORE THAN TEN PERCENT OF THE CONTRACTED AMOUNT OR \$150,000, WHICHEVER IS GREATER.

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 contract amendments not involving more than 10% or \$150,000 of the total agency contracted amount, whichever is greater. This would facilitate timely spending of grant funds which would better enable the grantee to avoid Federal penalty because 95% of grant funds 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 to the County Administrator, or his designee, the authority to execute amendments to standard contracts 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 the Federal mandate; and

WHEREAS, the specific delegation of signatory authority is in accordance with PPM#CW-O-051 when said documents follow the format as set forth in paragraph 2 herein below, which document is incorporated herein and made a part hereof.

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, contract amendments related to the Ryan White Part A Program funds.
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.

4. The foregoing Resolution was offered by Commissioner Taylor, who moved its adoption. The motion was seconded by Commissioner Vana, 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. Valeche	<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 Chair thereupon declared the Resolution duly passed and adopted this 7th day of May, 2013.

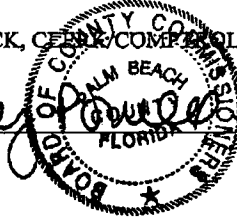
APPROVED AS TO FORM
LEGAL SUFFICIENCY

By: [Signature]
Chief Assistant County Attorney

PALM BEACH COUNTY, FLORIDA, BY ITS
BOARD OF COUNTY COMMISSIONERS

SHARON R. BOCK, COUNTY COMPTROLLER

By: [Signature]
Deputy Clerk



APPROVED AS TO TERMS
AND CONDITIONS

BY: [Signature]
DEPARTMENT HEAD

**AMENDMENT TO CONTRACT FOR PROVISION
OF RYAN WHITE PART A HIV HEALTH SUPPORT SERVICES**

THIS AMENDMENT TO CONTRACT FOR PROVISION OF THE RYAN WHITE PART A HIV HEALTH SUPPORT SERVICES (R2016-0850) made and entered into at West Palm Beach Florida, on this 28th day of February 2017 by and between Palm Beach County, a Political Subdivision of the State of Florida, by and through its Board of Commissioners, hereinafter referred to as the COUNTY, and Health Care District of Palm Beach County hereinafter, referred to as the DISTRICT, an independent Special Taxing District of the State of Florida subject to the terms of the Palm Beach County Health Care Act (2003 Fla. Laws 326-2003), authorized to do business in the State of Florida, whose Federal Tax I.D. is 65-0145123.

WITNESSETH:

WHEREAS, the need exists to amend the contract to increase funding for ADAP/Local Supplemental Drug Reimbursement Program

NOW THEREFORE, the above named parties hereby mutually agree that the Contract entered into on July 12, 2016 is hereby amended as follows:

- I. New Work Plan Exhibit "A1" attached hereto shall be added to the Work Plan Exhibit "A." in its entirety.
- II. New Budget Exhibit "B1" for the service category of **ADAP/Local Supplemental Drug Reimbursement Program** attached hereto showing the new total budget for funding shall replace the New Budget Exhibit "B" for the service category of **ADAP/Local Supplemental Drug Reimbursement Program** in its entirety.
- III. Increase funding for ADAP/Local Supplemental Drug Reimbursement Program by **ONE HUNDRED THIRTY FIVE THOUSAND, ONE HUNDRED AND NINETY NINE DOLLARS (\$135,199) and a not to exceed service category amount of TWO HUNDRED NINETEEN THOUSAND, TWO HUNDRED AND THIRTY DOLLARS (\$219,230).**
- IV. Total amended contract not to exceed amount will be **TWO HUNDRED FIFTY FOUR THOUSAND, TWO HUNDRED AND THIRTY DOLLARS (\$254,230).**

OTHER PROVISIONS

All provisions in the Contract or exhibits to the Contract in conflict with this Amendment to the Contract shall be and are hereby changed to conform to this Amendment.

All provisions not in conflict with this Amendment are still in effect and are to be performed at the same level as specified in the Contract.

IN WITNESS WHEREOF, the Board of County Commissioners of Palm Beach County, Florida has made and executed this Contract on behalf of the COUNTY and AGENCY has hereunto set his/her hand the day and year above written.

ATTEST:

Sharon R. Bock
Clerk and Comptroller

PALM BEACH COUNTY BOARD OF
COUNTY COMMISSIONERS

BY _____
Deputy Clerk

BY Verdenia C. Baker
Verdenia C. Baker, County Administrator

WITNESS:

AGENCY:

BY: [Signature]
Signature

BY: Health Care District of Palm
Beach County
AGENCY's Name Typed

BY: TEYUANA HONTAR
Name Typed

BY: Darcy J. Davis
Signature

65-0145123
AGENCY's Federal ID Number

BY: Darcy J. Davis, Chief Executive Officer
AGENCY's Signatory Name Typed

AGENCY APPROVED
AS TO LEGAL SUFFICIENCY:

APPROVED AS TO FORM AND
LEGAL SUFFICIENCY

[Signature]
Assistant County Attorney

BY [Signature]
General Counsel

APPROVED AS TO TERMS
AND CONDITIONS

[Signature]
James Green, Director
Palm Beach County
Department of Community Services

Exhibit A1

#	Agency	Service	Total # to be Served	Unit Definition	Total Units to be Provided
1	Healthcare District of Palm Beach County	Local Drug Reimbursement/ LPAP	400	1 unit = 1 prescription, copay, or deductible	1200
2	Healthcare District of Palm Beach County	Emergency Financial Assistance/ Prior Authorization	40	1 unit = 1 Prior Authorization Request	120
3	Healthcare District of Palm Beach County	Food Bank/ Nutritional Supplements	30	1 unit = 1 nutritional supplement	300

Estimated Unit Cost	HRSA Implementation Plan Objective	Activities
\$70	a. 75% of clients receiving supplemental medications will have at least two CD4/Viral Load tests annually	1. Review patient eligibility for Ryan White Program pursuant to Palm Beach County HIV CARE Council adopted standards and eligibility criteria. 2. Disseminate Ryan White Drug Assistance Formulary to all participating pharmacies and physicians (known to HCDPBC) treating HIV/AIDS infected patients. 3. Fill prescriptions for eligible Ryan White clients. 4. Prepare monthly reports for DUR. Review and prepare a trend analysis of pharmaceutical usage. Review billing records. 5. Prepare demographics, utilization, and other Community Service required reports. 6. Audit for Grant compliance. 7. Purchase bulk medications on behalf of the Local Pharmacy Assistance Program
	b. 100% of prescription, copay, and deductible data will be submitted at least monthly to the Grantee	
\$250	a. 85 % of clients receiving EFA will have at least one primary care appointment annually	
\$17	a. 75 % of clients linked to care will have at least two CD4/Viral Load tests per year.	

Non-Duplicating Statement: Indicate any other program in your agency or other agency in Palm Beach County which provides similar services. Explain how you will avoid duplication of services, or why additional units of services are needed.	Impact Statement: When the objective is accomplished, what impact will it have?
<p>There is no program in Palm Beach County that specifically addresses the HIV infection problems in the communities where hard-to-reach individuals and under-served populations are prevalent. Due to unique religious and cultural beliefs, language barriers, immigration status, and a basic mistrust of the traditional health care system, a special approach is required to reach this segment of the community.</p>	<p>Impact: Improve patients' health status. i.e. viral loads or CD4 counts and increase the life span of the client.</p> <p>Unit of Service = One month filled prescription. Unit cost = Actual cost of the drug plus a three dollar (3.00) handling fee, per prescription. 11,200 units will be provided to Ryan White eligible clients.</p> <p>A unit of service includes one filled drug prescription, including information regarding dosages and adherence.</p>

EXHIBIT B-1		
HEALTH CARE DISTRICT OF PALM BEACH COUNTY		
ADAP/LOCAL SUPPLEMENTAL DRUG AND NUTRITIONAL SUPPLEMENTS		
CURRENT & PROPOSED OPERATING BUDGET		
FISCAL YEAR RW-GY16		
ACCT #	TITLE	BUDGET AMOUNT
PROGRAM EXPENSES		
140.1201	Regular Salaries and Wages	
140.2101	FICA	
140.2201	Retirement Contributions	
140.2301	Life and Health Insurance	
140.2401	Workers Compensation	
140.2501	Unemployment Compensation	
140.3101	Professional Services	
140.3103	Medical/Health Care and Nutrition Services	\$ 219,230
140.3118	Dental Services	
140.3125	Legal Services	
140.3126	Interpreter Services	
140.3127	Health Disabilities	
140.3140	Consultant Services	
140.3201	Audit Services	
140.3203	Accounting and Consulting Services	
140.3401	Other Contractual Services	
140.3419	Contracted Food	
140.3421	Training	
140.3431	Laboratory Testing	
140.3438	Emergency Assistance	
140.4001	Travel Per Diem and Mileage	
140.4101	Communication Services	
140.4200	Child Transportation Services	
140.4201	Other Transportation	
140.4205	Postage/Shipping	
140.4301	Utilities	
140.4401	Rent	
140.4405	Rent-Other Equipment	
140.4601	Repair and Maintenance	
140.4701	Printing and Graphics	
140.4909	Licenses, Permits and Certifications	
140.4932	Parent Activity	
140.4945	Advertising	
140.5101	Office Supplies	
140.5111	Office Furniture And Equipment	
140.5121	Data Processing Software/Accessories	
140.5201	Materials/Supplies Operating	
140.5202	Janitorial Supplies	
140.5230	Medicine and Drugs	
140.5231	Medical-Surgical Supplies	
140.5233	Laboratory Supplies	
140.5242	Food Prep and Serving Supplies	
140.5243	Personal Care Items	
140.5244	Food and Dietary	
140.5401	Books, Publications and Subscriptions	
140.5402	Educational Training Materials	
140.5412	Dues and Memberships	
140.6401	Machinery and Equipment	
140.6405	Data Processing Equipment	
140.6406	Data Processing Software	
140.8000	Unit Cost - Direct Services	
Total Program Expenses		\$ 219,230

EXHIBIT B-1		
HEALTH CARE DISTRICT OF PALM BEACH COUNTY		
ADAP/LOCAL SUPPLEMENTAL DRUG AND NUTRITIONAL SUPPLEMENTS		
CURRENT & PROPOSED OPERATING BUDGET		
FISCAL YEAR RW-GY16		
ADMIN EXPENSES		
800.1201	Salaries and Wages Regular Admin	
800.2101	FICA-Taxes Admin	
800.2105	FICA Medicare Admin	
800.2112	Other Benefits Admin	
800.2201	Retirement Contributions-FRS Admin	
800.2301	Insurance-Life and Health Admin	
800.2401	Workers' Compensation Admin	
800.2501	Unemployment Compensation Admin	
800.3201	Audit Services Admin	
800.3203	Accounting and Consulting Service Admin	
800.4001	Travel And Per Diem Admin	
800.4101	Communication Services Admin	
800.4301	Utilities Admin	
800.4401	Rent Admin	
800.5101	Office Supplies Admin	
800.5201	Materials/Supplies Operating Admin	
800.5242	Food Prep and Serving Supplies Admin	
800.6401	Machinery and Equipment Admin	
800.8000	Other Administrative	
800.9515	Admin Costs-Indirect	
820.1201	Salaries and Wages Regular Prgm	
820.2101	FICA-Taxes Prgm	
820.2105	FICA Medicare Prgm	
820.2112	Other Benefits Prgm	
820.2201	Retirement Contributions-FRS Prgm	
820.2301	Insurance-Life and Health Prgm	
820.2401	Workers' Compensation Prgm	
820.2501	Unemployment Compensation Prgm	
Total Admin Expenses	(NOT TO EXCEED 10% OF BUDGET)	\$ -
Grand Total		\$ 219,230
Total Admin %		
Total Program %		100%

Summary of Certificates

This report displays detailed Certificate of Insurance information for a selected Insured. Any items shown in red are deficient.

Wednesday, February 22, 2017

Simple View

Certificate Images

Documents

Insured:

Health Care District of Palm Beach County

Insured ID: 029RW01FY15

Status:

Compliant (with overrides)

ITS Account Number:

PLC2029

Project(s):

Palm Beach County - Community Services

Insurance Policy	Required	Provided	Override
<u>General Liability</u>			
General Aggregate:	\$500,000	\$300,000	X
Products - Completed Operations Aggregate:	\$0	\$0	X
Personal And Advertising Injury:	\$0	\$0	X
Each Occurrence:	\$500,000	\$300,000	X
Fire Damage:	\$0	\$0	X
Medical Expense:	\$0	\$0	X
<u>Automobile Liability</u>			
Expiration: 10/1/2017	All Owned Autos	Any Auto not provided	X
	Hired Autos	not provided	X
	Non-Owned Autos	not provided	X
Combined Single Limit:	\$500,000	\$1,000,000	
<u>Workers Compensation/Employers Liability</u>			
Expiration: 10/1/2017	WC Stat. Limits	WC Stat. Limits	
<u>Professional Liability</u>			
Each Occurrence:	\$500,000	\$300,000	X
Aggregate Limit:	\$500,000	\$300,000	X

Missing Policy Information	Override
The original Certificate of Insurance received did not include policies for the following coverages:	
• General Liability	X
• Professional Liability	X

Additional Insured	Override
Missing <u>General Liability</u> Additional Insured Endorsement	X



**Department of Community
Services**

810 Datura Street
West Palm Beach, FL 33401
(561) 355-4700

FAX: (561) 355-3863

www.pbcgov.com



**Palm Beach County
Board of County
Commissioners**

Paulette Burdick, Mayor
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County Administrator

Verdenia C. Baker

*"An Equal Opportunity
Affirmative Action Employer"*

MEMORANDUM

TO: Verdenia C. Baker, County Administrator
Board of County Commissioners

THRU: Nancy L. Bolton, Assistant County Administrator *NLB*
Board of County Commissioners

FROM: James Green, Director *JG*
Community Services Department

DATE: February 21, 2017

RE: Grant Year 16 - Ryan White Amendment No. 1 with Health Care District of Palm Beach County and Amendment No. 2 with Treasure Coast Health Council, Inc. d/b/a Health Council of Southeast Florida

Pursuant to Resolution R2013-0519, your signature is needed for the approval of the following Amendments to the Contracts for Provision of Ryan White Part A HIV Health Support Services. This resolution authorizes the County Administrator signatory authority on contract amendments related to the Ryan White Program Part A HIV Health Support Services for not more than ten percent (10%) of the contracted amount, or \$150,000, whichever is greater. No County funds are required. The amendments are as follows:

- Amendment No. 1 with the Health Care District of Palm Beach County (R2016-0850) to increase the GY 16 contract amount by \$135,199' for a new final contract amount of \$254,230. These new funds allow our system of care to provide additional HIV medications to Palm Beach County residents living with HIV/AIDS and meet shifting Ryan White service needs.
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Staff will submit these items at the Board's next Commission meeting as a "Receive and File" item to allow the Clerk's office to receive and file the documents in accordance with PPM CW-O-051. If additional information is needed, please contact Geoffrey Downie at 561-355-4730.

mal
Assistant Department Director

Verdenia C. Baker
Assistant County Attorney

OFMB

Nancy L. Bolton
Assistant County Administrator

Attachments:

1. Resolution No. R-2013-0519
2. Amendment No. 1 with Health Care District of Palm Beach County
3. Amendment No. 2 with Treasure Coast Health Council, Inc. d/b/a Health Council of Southeast Florida

**AMENDMENT TO CONTRACT FOR PROVISION
OF RYAN WHITE PART A HIV HEALTH SUPPORT SERVICES**

THIS AMENDMENT TO CONTRACT FOR PROVISION OF THE RYAN WHITE PART A HIV HEALTH SUPPORT SERVICES (R2016-0489) made and entered into at West Palm Beach Florida, on this 28th day of February 2017, by and between Palm Beach County, a Political Subdivision of the State of Florida, by and through its Board of Commissioners, hereinafter referred to as the COUNTY, and Treasure Coast Health Council, Inc. d/b/a Health Council of Southeast Florida, hereinafter referred to as the AGENCY, a not-for-profit corporation authorized to do business in the State of Florida, whose Federal Tax I.D. is 59-2242689.

In consideration of the mutual promises contained herein, the COUNTY and the Agency agree as follows:

WITNESSETH:

WHEREAS, the need exists to amend the contract to increase funding for Specialty Outpatient Medical Care.

NOW THEREFORE, the above named parties hereby mutually agree that the Contract entered into on April 19, 2016 is hereby amended as follows:

- I. New Work Plan Exhibit "A2" attached hereto shall be added to the Work Plan Exhibit "A1."
- II. New Budget Exhibit "B1" attached hereto showing the new total budget for Specialty Outpatient Medical Care funding shall replace Exhibit "B" for Specialty Outpatient Medical Care in its entirety.
- III. Increase funding for Specialty Outpatient Medical Care by TWENTY NINE THOUSAND, NINE HUNDRED AND SEVENTY SIX DOLLARS (\$29,976).
- IV. Total amended contract not to exceed amount will be FOUR HUNDRED SIXTY SIX THOUSAND, SEVEN HUNDRED AND FIFTY FIVE DOLLARS (\$466,755).

OTHER PROVISIONS

All provisions in the Contract or exhibits to the Contract in conflict with this Amendment to the Contract shall be and are hereby changed to conform to this Amendment.

All provisions not in conflict with this Amendment are still in effect and are to be performed at the same level as specified in the Contract.

IN WITNESS WHEREOF, the Board of County Commissioners of Palm Beach County, Florida has made and executed this Contract on behalf of the COUNTY and AGENCY has hereunto set his/her hand the day and year above written.

ATTEST:

Sharon R. Bock
Clerk and Comptroller


PALM BEACH COUNTY BOARD OF
COUNTY COMMISSIONERS

BY _____
Deputy Clerk

BY 
Verdenia C. Baker, County Administrator

WITNESS:

AGENCY:
Treasure Coast Health Council, Inc.
DBA Health Council of Southeast Florida


Signature

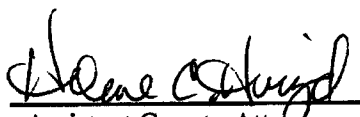
By: 
Signature
Andrea Stephenson
Executive Director

Anil Pandya
Witness Name

Jan 6, 2017
Date

APPROVED AS TO FORM AND
LEGAL SUFFICIENCY

APPROVED AS TO TERMS
AND CONDITIONS


Assistant County Attorney


James Green, Director
Community Services Department

Exhibit A
Ryan White Part A HIV Health Support Services
GFY 2016 - 2017

#	Agency	Service	Total # to be served	Unit Definition	Total Units Provided	Estimated Unit Cost	HRSA Implementation Plan Objective/Program Objective	Activities	Non-Duplicating Statement:	Impact Statement:
1	HCSEF	Specialty Outpatient Medical Care	138 Clients	1 unit = 1 specialty medical visit	585 units		Assist 75% of PLWH/A referrals with access to timely, cost effective, HIV/AIDS specialty outpatient medical care, which will have a direct impact on their quality and length of life.	1. Negotiate service rates with medical outpatient specialists 2. Process referrals received from Case Managers, Referral Clerks, or nurses when a primary physician identifies a need for specialty care service 3. Process referrals within 72 hours of receipt. HCSEF will confirm eligibility using documentation in Provide, and ensure that the referral is appropriate prior to approval.	Ryan White specialty outpatient medical care providers in Palm Beach County report their services by client URN thus duplication of services is easily identifiable.	PLWH/A will have access to timely, cost effective, HIV/AIDS specialty outpatient medical care which will have a direct impact on their quality and length of life.
2	HCSEF	Care Council Support	n/a	n/a	n/a	n/a	Provide member support for the Palm Beach HIV Care Council and sub-committees	1. Staff Support: A) Provide staff support to officially convened CARE Council Meetings. B) Provide staff support to officially convened CARE Council Membership Committee meetings throughout the year. C) Provide staff support to officially convened CARE Council Community Awareness Committee Meetings. D) Arrange for members transportation as needed and as outlined in the CARE Council policies. E) Reimburse members for transportation and childcare expenses as needed and as outlined in the CARE Council policies. 2. Community Engagement: A) Provide the support for public outreach events intended to broaden and enhance the general public's knowledge of issues related to living with HIV disease, current treatment practices and or available services within the EMA. B) Actively participate in Care Council Meetings in order to maintain up to date knowledge regarding key HIV/AIDS issues in Palm Beach County, and become a trusted source of reliable information and support for committee members. C) Serve as a conduit for information sharing between the Care Council and other relevant planning bodies or entities.	HCSEF is the sole service provider in this category	Successful completion of the accompanying activities will effect accomplishing the Council's goal to work across all locally available funding streams to collaboratively identify, prioritize and allocate funding for HIV/AIDS Services in Palm Beach County. Successful implementation of CARE Council activities will ensure the community based identification of need, needs based allocation of funding for services and the rapid contracting of identified services.
								3. Membership Activities: A) Maintain an up-to-date Members Orientation Manual for CARE Council Members as outlined in the 12/13 Training Work Plan. B) Hold orientation/training meetings in conjunction with the Membership Committee to develop or strengthen members' ability to understand the complex issues the CARE Council must act upon. Continue the Mentor Program for new members to strengthen participation on both the CARE Council and its committees. C) Assist CARE Council members with participating in additional training programs sponsored by HRSA, relating to enhancing capacity to perform committee and group activities such as developing community plans, coming to group consensus, and maintaining community involvement. D) Co-sponsor trainings as appropriate and within the resources available (both human and financial). E) Provide staff support to the Membership Committee to continue and enhance activities which will develop Council Membership utilizing the CARE Council Membership policy as a guide. F) Increase community wide participation in Council activities through networking, and increasing awareness of the Council's value to Palm Beach County as a whole. G) Maintain up to date demographic matrix, inventory of seats, member renewal schedules. H) Submit membership packets to grantee.		

EXHIBIT B-1		
TREASURE COAST DBA HEALTH COUNCIL		
SPECIALTY MEDICAL CARE		
CURRENT & PROPOSED OPERATING BUDGET		
FISCAL YEAR RW-GY16		
ACCT #	TITLE	BUDGET AMOUNT
PROGRAM EXPENSES		
820.1201	Regular Salaries and Wages - Prgm	\$ 68,425
820.2101	FICA Taxes - Prgm	
820.2105	FICA Medicare - Prgm	
820.2112	Other Benefits - Prgm	\$ 13,800
820.2201	Retirement Contributions - Prgm	
820.2301	Life and Health Insurance - Prgm	
820.2401	Workers Compensation - Prgm	
820.2501	Unemployment Compensation - Prgm	
820.4101	Communication Services - Prgm	
820.4301	Utilities - Prgm	
820.4401	Rent - Prgm	
820.8000	Other Program Costs	\$ 19,138
820.9515	Prgm Costs - Indirect	
140.3101	Professional Services	
140.3103	Medical/Health Care and Nutrition Services	\$ 180,301
140.3118	Dental Services	
140.3125	Legal Services	
140.3126	Interpreter Services	
140.3127	Health Disabilities	
140.3140	Consultant Services	
140.3201	Audit Services	
140.3203	Accounting and Consulting Services	
140.3401	Other Contractual Services	
140.3419	Contracted Food	
140.3421	Training	
140.3431	Laboratory Testing	
140.3438	Emergency Assistance	
140.4001	Travel Per Diem and Mileage	
140.4200	Child Transportation Services	
140.4201	Other Transportation	
140.4205	Postage/Shipping	
140.4405	Rent-Other Equipment	
140.4601	Repair and Maintenance	
140.4701	Printing and Graphics	
140.4909	Licenses, Permits and Certifications	
140.4932	Parent Activity	
140.4945	Advertising	
140.5101	Office Supplies	
140.5111	Office Furniture And Equipment	
140.5121	Data Processing Software/Accessories	
140.5201	Materials/Supplies Operating	
140.5202	Janitorial Supplies	
140.5230	Medicine and Drugs	
140.5231	Medical-Surgical Supplies	
140.5233	Laboratory Supplies	
140.5242	Food Prep and Serving Supplies	
140.5243	Personal Care Items	
140.5244	Food and Dietary	
140.5401	Books, Publications and Subscriptions	
140.5402	Educational Training Materials	
140.5412	Dues and Memberships	
140.6401	Machinery and Equipment	
140.6405	Data Processing Equipment	
140.6406	Data Processing Software	
140.8000	Unit Cost - Direct Services	
Total Program Expenses		\$ 281,664

EXHIBIT B-1		
TREASURE COAST DBA HEALTH COUNCIL		
SPECIALTY MEDICAL CARE		
CURRENT & PROPOSED OPERATING BUDGET		
FISCAL YEAR RW-GY16		
ADMIN EXPENSES		
800.1201	Salaries and Wages Regular Admin	
800.2101	FICA-Taxes Admin	
800.2105	FICA Medicare Admin	
800.2112	Other Benefits Admin	
800.2201	Retirement Contributions-FRS Admin	
800.2301	Insurance-Life and Health Admin	
800.2401	Workers' Compensation Admin	
800.2501	Unemployment Compensation Admin	
800.3201	Audit Services Admin	
800.3203	Accounting and Consulting Service Admin	
800.4001	Travel And Per Diem Admin	
800.4101	Communication Services Admin	
800.4301	Utilities Admin	
800.4401	Rent Admin	
800.5101	Office Supplies Admin	
800.5201	Materials/Supplies Operating Admin	
800.5242	Food Prep and Serving Supplies Admin	
800.6401	Machinery and Equipment Admin	
800.8000	Other Administrative	\$ 25,165
800.9515	Admin Costs-Indirect	
Total Admin Expenses	(NOT TO EXCEED 10% OF BUDGET)	\$ 25,165
Grand Total		\$ 306,829
Total Admin %		8%
Total Program %		92%

Summary of Certificates

This report displays detailed Certificate of Insurance information for a selected Insured. Any items shown in red are deficient.

Wednesday, February 22, 2017

Simple View

Certificate Images

Documents

Call Log

Insured:	Treasure Coast Health Council, Inc.	Insured ID:	047RW02FY16
Status:	Compliant (with overrides)		
ITS Account Number:	PLC2031		
Project(s):	Palm Beach County - Community Services		
Insurance Policy	Required	Provided	Override
General Liability			
Expiration: 5/30/2017			
General Aggregate:	\$500,000	\$2,000,000	
Products - Completed Operations Aggregate:	\$0	\$0	
Personal And Advertising Injury:	\$0	\$0	
Each Occurrence:	\$500,000	\$1,000,000	
Fire Damage:	\$0	\$0	
Medical Expense:	\$0	\$0	
Automobile Liability	All Owned Autos	not provided	X
Expiration: 5/30/2017	Hired Autos	Hired Autos	
	Non-Owned Autos	Non-Owned Autos	
Combined Single Limit:	\$500,000	\$1,000,000	
Workers Compensation/Employers Liability	WC Stat. Limits	WC Stat. Limits	
Expiration: 1/1/2018			
Each Accident:	\$0	\$1,000,000	
Disease - Policy Limit:	\$0	\$1,000,000	
Disease - Each Employee:	\$0	\$1,000,000	
Professional Liability			
Each Occurrence:	\$500,000	\$0	X
Aggregate Limit:	\$500,000	\$0	X
Missing Policy Information			Override
The original Certificate of Insurance received did not include policies for the following coverages:			
• Professional Liability			X