Agenda Item #: 3E-5

PALM BEACH COUNTY BOARD OF COUNTY COMMISSIONERS

AGENDA ITEM SUMMARY					
Meeting Date: April 16, 2019		Consent Ordinance		===]]	Regular Public Hearing
Department Submitted By: Community Serv Submitted For: Ryan White Progression		=======================================			
<u> </u>	<u>. EXECL</u>	JTIVE BRIEF			
Motion and Title: Staff recommends motion to receive and file:					
A) Contract for Provision of Ryan V Healthcare Foundation, Inc. (AHF), for in an amount not to exceed \$88,825 services for persons living with HIV Sp	or the peo 5, for the	riod March 1, provision of	201	19 t	hrough February 28, 2020.
B) Intergovernmental Agreement for Florida International University Boa December 31, 2018 through December \$25,000 is budgeted in GY 2019 wit subsequent grant year contingent up Commissioners, subject to funding Services, Health Resources and Sprogram evaluation services intended Spectrum Disease.	rd of Toper 30, 2 th an an oon a bu approvatervices	rustees (FIU) 2021, in the a ticipated annu dgetary appro I by U.S. De Administration	, fo mo ual opri par n (or t unt allo atio tme HR:	the three (3) year period totaling \$75,000, of which cation of \$25,000 in each on by the Board of County and Human SA), for the provision of
Summary: The AHF contract will covic clients and replace the expiring contrated following its discontinuance of offer disseminate the Ryan White Drug As physicians treating HIV/AIDS patient prepare trend analysis of pharmaceutic collaboration between FIU and the Ryan White Program and research White Program will include activities of long-term evaluation and quality improdute authority. Kristen Harrington, employed the HIV CARE Council. This board prosetting recommendations regarding contractual relationship at a duly notice the provisions of Section. 2-443, of the with County PPM CW-O-051, all desubmitted by the initiating Department are required. (Ryan White Program) One of the program	act with tring this sistance s, fill procal usage yan White opported well-train to the ager and public ed public ed public elegated t as a re	the Health Ca s service. AH Formulary to escriptions to e. AHF will se te Program wi unities for FIU ined students projects. This projects. This or regulation, or regulation, or contract c meeting is b Beach Count contracts, ag ceive and file	re I IF all eli rve ill p ite Fo ver liste ein gree	Dist will par gibl an rovi nis co cam w und sigh ed g pr code	rict of Palm Beach County review patient eligibility, rticipating pharmacies and le clients and review and estimated 400 clients. The ide evaluation services for collaborative with the Ryan an help with short-term and vas executed by delegated lation, Inc. is a member of int, management, or policyabove. Disclosure of this rovided in accordance with e of Ethics. In accordance ents, and grants must be
Background and Justification: Under 2009, the HIV CARE Council estatement percentages. The U.S. Health are Administration has issued the FY 2019	ıblishes nd Hum	priority servinan Services	ce , I	are Iea	eas and assigns funding lith Resources Services
Attachments: 1. Contract for Provision of Ryan White 2. Intergovernmental Agreement for Ry	Part A l	HIV Health Su e Part A HIV F	ippo lea	ort S Ith S	Services with AHF Support Services with FIU
Recommended By: Tally					
Department Dire	ctor	Obn			Date
Approved By: Name of Stant Count	y Admir	nistrator			Date

II. FISCAL IMPACT ANALYSIS

Five Year Summary of Fiscal Impact: A.

Fiscal Years	2019	2020	2021	2022	2023
Capital Expenditures				LULL	2023
Operating Costs	70,565	62,010	25,000	6,250	
External Revenue	(70,565)	(62,010)	(25,000)	(6,250)	
Program Income (County)			(=0,000)	(0,230)	
In-Kind Match (County)					
NET FISCAL IMPACT	0	0	0	0	
NO ADDITIONAL ETE				·····	

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N	ET FISCAL IMPACT	0	0	0	0	
N P	o. ADDITIONAL FTE OSITIONS (Cumulative)					
Is Item Included In Current Budget? Yes X No Does this item include the use of federal funds? Yes X No Does this item include the use of federal funds?						
Fund	get Account No.: d <u>1010</u> Dept <u>142</u> Ur ram Period <u>VAR</u>	nit <u>VAR</u> Obje	ect <u>VAR</u> Pr	ogram Coo	de <u>VAR</u>	
B.	Recommended Source Funding source is the Funds are required.	es of Funds/S U.S. Departme	ummary of ent of Healt	Fiscal Imp h and Hur	pact: man Service	s. No County
C.	Departmental Fiscal Re	eview:	Owe, Directo	or of Financ	ce and Supp	ort Services
A.	OFMB Fiscal and/or Co	III. REVIEW		<u> </u>	comments:	

OFMB EGUI	Contract Development and Control
Legal Sufficiency:	

B.

Other Department Review: C.

Department Director

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