

II. FISCAL IMPACT ANALYSIS

A. Five Year Summary of Fiscal Impact:

Fiscal Years	2022	2023	2024	2025	2026
Capital Expenditures					
Operating Costs	8,667				
External Revenue	(8,667)				
Program Income					
In-Kind Match (County)					
NET FISCAL IMPACT	-0-				

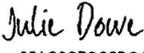
# ADDITIONAL FTE POSITIONS (Cumulative)					

Is Item Included in Current Budget? Yes No
 Does this item include the use of federal funds Yes No

Budget Account No.:
 Fund 1006 Dept. 144 Unit 1483 Object Var. Program Code Var. Program Period Var.

B. Recommended Sources of Funds/Summary of Fiscal Impact:
 Funding source is Federal.

Total Funding	1483
Funds	
Grant	8,667
Match (10%)	0
NSIP	0
Program Income	0
Addnl. County Funds	0
Total	8,667

DocuSigned by:

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C. Departmental Fiscal Review: _____
 Julie Dowe, Director, Financial & Support Services

III. REVIEW COMMENTS

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

Shane M. ... 5/10/22
 OFMB *MA 5/10/22 LM 5/11*
MG 5/10/22

Ann J. ... 5/19/22
 Contract Development and Control
5-18-22 TW

B. Legal Sufficiency:

Debra C. ... 5/23/22
 Senior Assistant County Attorney

C. Other Department Review:

 Department Director

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

EMERGENCY HOME ENERGY ASSISTANCE FOR THE ELDERLY PROGRAM (EHEAEP)

AMERICAN RESCUE PLAN (ARP)

INTAKE CENTER REFERRAL AGREEMENT

This Referral Agreement between the **Area Agency on Aging of Palm Beach/Treasure Coast, Inc.** (Agency) and **Palm Beach County, a political subdivision of the State of Florida, by and through its Board of County Commissioners (Intake Center)**. This referral agreement is in effect for a period of time that is equal to the Intake Center’s voluntary enrollment period in the EHEAEP American Rescue Plan (ARP) program. One purpose of this agreement is to promote the development of a coordinated service delivery system to meet the energy needs of the aged. Another purpose of this agreement is to enable eligible elderly participants to access the EHEAEP ARP program in a convenient manner by going to the intake center nearest to their place of residence. Both parties agree to and will treat each participant with dignity and respect.

1. Objectives

- 1.1 To maintain a climate of cooperation and consultation with and between agencies, in order to achieve maximum efficiency and effectiveness. To promote programs and activities designed to prevent the premature institutionalization of elders and disabled adults.
- 1.2 To require the parties of this Agreement to provide technical assistance and consultation to each other on matters pertaining to EHEAEP ARP benefits and share appropriate information so duplication may not occur.
- 1.3 To establish an effective working relationship between the Intake Center responsible for the initial assessment and verification of need, and the Agency that is responsible for management and oversight of the EHEAEP ARP program.

2. Term of Agreement

- 2.1 This Agreement shall begin at twelve (12:00) A.M., Eastern Standard Time April 1, 2022 and shall end at eleven fifty-nine (11:59) P.M., Eastern Standard Time September 30, 2022.

3. Under this Agreement, the Intake Center agrees to the following:

- 3.1 To accept referrals at large from any elderly individuals in the community experiencing an energy emergency crisis and in need of assistance.
- 3.2 To provide quality service(s) to the EHEAEP ARP applicant.
- 3.3 To obtain all documentation required under EHEAEP ARP guidelines in order to establish that an energy crisis exists and that the applicant meets all pertinent eligibility requirements.
- 3.4 To maintain the EHEAEP ARP applicant’s confidentiality according to 42 CFR 431.301.
- 3.5 To provide bi-weekly a transmittal report detailing assistance to the Fiscal Manager at the Agency.
- 3.6 To adhere to the requirements and the policies and procedures outlined in the EHEAEP manual.
- 3.7 Any Intake Center staff receiving and/or assisting with EHEAEP ARP applications are paid from non-federal resources.
- 3.8 The Intake Center agrees to maintain all information on case approval and processing for a period of six years.
- 3.9 The Intake Center will submit an invoice monthly for the number of cases served with EHEAEP ARP funds, the number of cases served by referral to other community resources for energy assistance, and the number of cases ineligible or denied crisis assistance.
- 3.10 The Intake Center shall provide quarterly a EHEAP ARP Outreach Activity Report which shall consist of the following:

- a. Date;
 - b. County;
 - c. Location Address;
 - d. Description of Activity; and
 - e. Name and Position of Staff.
- 3.11 Invoicing and payments will be governed in accordance with the provisions of Section 215.422, F.S.
- 3.12 The Intake Center shall submit requests for payment to the Agency on Agency-approved forms.

4. Under this Agreement, the Agency agrees to the following:

- 4.1 To oversee the processing of all requests for assistance on behalf of eligible elderly individuals.
- 4.2 To provide technical assistance and training to the Intake Center.
- 4.3 To transmit payment to the utility vendor within seven days of the transmittal from the Intake Center.
- 4.4 Provide a schedule for submission of invoices at least once per year.
- 4.5 Provide a schedule of initial funding from 04/01/2022 to 09/30/2022.
- 4.6 Notify the Intake Center of when a change occurs to the following items:
 - EHEAP ARP Fiscal Year
 - Number of crisis payments allowed
 - Benefit amount limit per year
 - Administrative reimbursement allowance

5. Payment Method Used

5.1 Unit Rate

- a. The method of payment for this Agreement is a combination of Fixed-Fee/Unit Rate, and Cost Reimbursement, subject to the availability of funds.
- b. The Agency will pay the Intake Center an initial rate of \$27.60 per EHEAP application intake.
- c. The rate may be adjusted annually through the unit cost methodology process.

5.2 Cost Reimbursement

- a. Payment shall only be for Administrative Costs, per the limits established by the Agency.

6. Background Screening

The Intake Center shall ensure that the requirements of Section 430.0402 and Chapter 435, F.S., as amended, are met regarding background screening for all persons who meet the definition of a direct service provider and who are not exempt from the Department of Elder Affairs level 2 background screening pursuant to Section 430.0402(2)-(3), F.S. The Intake Center must also comply with any applicable rules promulgated by the Department of Elder Affairs and the Agency for Health Care Administration regarding implementation of Section 430.0402 and Chapter 435, F.S. To demonstrate compliance with this provision, Intake Center shall submit to the Agency, the Background Screening Affidavit of Compliance (Screening Form) within thirty (30) days of execution of this Agreement. Should the Agency have a completed Screening Form on file for the Provider, a new Screening Form will be required every twelve (12) months.

EHEAP ARP Intake Center Referral Agreement No. IPP021-9500

CFDA #93.568

7. Termination

In the event this agreement is terminated, the Intake Center agrees to submit, at the time notice of intent to terminate is delivered, a plan which identifies procedures to ensure services to consumers will not be interrupted or suspended by the termination.

7.1 Termination at Will

This agreement may be terminated by any party upon no less than thirty (30) calendar days notice, without cause, unless a lesser time is mutually agreed upon by both parties, in writing. Said notice shall be delivered by certified mail, return receipt requested, or in person with proof of delivery.

7.2 Termination for Breach

Unless a breach is waived by the Agency in writing, or the parties fail to cure the breach within the time specified by the Agency, the Agency may, by written notice to the parties, terminate the agreement upon no less than twenty-four (24) hours notice. Said notice shall be delivered by certified mail, return receipt requested, or in person with proof of delivery.

In witness whereof, the parties have caused this 3 page agreement to be executed by their undersigned officials as duly authorized.

Provider: Palm Beach County, a political subdivision of the State of Florida, by and through its Board of County Commissioners

AREA AGENCY ON AGING OF PALM BEACH/TREASURE COAST, INC.

SIGNED BY: _____
Robert S. Weinroth, Mayor

SIGNED BY: _____

DATE: _____

ATTEST: JOSEPH ABRUZZO, Clerk and Comptroller

NAME: _____

BY: _____

TITLE: _____

DATE: _____

DATE: _____

Federal Tax ID: 59-000785

Fiscal Year Ending Date: _____

Approved as to form and legal sufficiency
Helene C. Hvizd
BE3DE20B2223413
Assistant County Attorney

Approved as to terms and conditions
James Green
BF34EF228FDF492...
Department Director

BOARD OF COUNTY COMMISSIONERS
PALM BEACH COUNTY, FLORIDA

BUDGET AMENDMENT

BGEX - 144 - 041822*1169
BGRV - 144 - 041822*451

FUND (1006) - DOSS - Administration

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 4/18/2022	REMAINING BALANCE
REVENUE								
EHEAP								
144 1483 3169	Fed Grnt Other Human Services	0	0	8,667		8,667		
Total Revenue		11,118,815	17,314,396	8,667	0	17,323,063		
EXPENDITURE								
EHEAP								
144 1483 3401	Other Contractual Services	1	28,291	8,667		36,958	0	36,958
Total Expenditures		11,118,815	17,314,396	8,667	0	17,323,063	6,183,232	11,139,831

Signatures

Date

By Board of County Commissioners
At Meeting on June 14, 2022

COMMUNITY SERVICES

INITIATING DEPARTMENT/DIVISION James Green

Administration/Budget Department Approval

OFMB Department - Posted

DocuSigned by:
James Green
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5/6/2022

Deputy Clerk to the
Board of County Commissioners