



Mark Farrell, Mayor

Trent Rhorer, Executive Director

MEMORANDUM

**TO:** AGING & ADULT SERVICES COMMISSION

**THROUGH:** SHIREEN McSPADDEN, EXECUTIVE DIRECTOR

**FROM:** CINDY KAUFFMAN, DEPUTY DIRECTOR  
 JOHN TSUTAKAWA, DIRECTOR OF CONTRACTS *(JC)*

**DATE:** JUNE 20, 2018

**SUBJECT:** GRANT RENEWAL: **SELF-HELP FOR THE ELDERLY (NON-PROFIT)** FOR THE PROVISION OF HEALTH INSURANCE COUNSELING AND ADVOCACY PROGRAM (HICAP) TO SENIORS AND YOUNGER ADULTS WITH DISABILITIES

<b>GRANT TERM:</b>	<u>7/1/18-6/30/19</u>	<u>Contingency</u>	<u>Total</u>		
<b>GRANT AMOUNT:</b>	\$367,928	\$36,792	\$404,720		
<b>FUNDING SOURCE</b>	<u>County</u>	<u>State</u>	<u>Federal</u>	<u>Contingency</u>	<u>Total</u>
<b>ANNUAL AMOUNT</b>	\$71,876	\$65,766	\$230,286	\$36,792	\$404,720
<b>PERCENTAGE</b>	19%	18%	63%		100%

The Department of Aging and Adult Services requests authorization to renew the grant agreement with Self-Help for the Elderly for the time period beginning July 1, 2018 and ending June 30, 2019 in the amount of \$367,928 plus a 10% contingency for a total not to exceed amount of \$404,720. The purpose of these grants is for the provision of the Health Insurance Counseling and Advocacy Program (HICAP) to seniors and younger adults with disabilities.

**Background**

DAAS/OOA receives funding from the California Department of Aging to administer a Health Insurance Counseling and Advocacy Program (HICAP) in San Francisco. HICAP is the primary local source for accurate, objective information and assistance with Medicare benefits,

prescription drug plans, and Medicare related health plans. This service is available to all who are receiving Medicare benefits, those soon to become eligible, and persons acting on behalf of a Medicare beneficiary (or soon to be beneficiary). Services are confidential and free of charge.

### **Services to be Provided**

Trained and registered HICAP counselors will provide objective information via one to one counseling sessions to eligible consumers on Medicare (Parts A, B, C and D), Medicare supplement insurance, managed care, long-term care planning, and health insurance. The HICAP program will also participate in outreach and publicity campaigns designed to increase awareness of HICAP services and knowledge of Medicare related topics.

The HICAP design includes utilization of volunteers for delivery of services, and thus Grantee will recruit, train, and register volunteer counselors to better deliver services to the community. As part of the best possible delivery of services, Grantee will work to recruit and develop a diverse, culturally competent, and linguistically capable HICAP staff and volunteer corps.

Benchmarks for program performance are established annually by the California Department of Aging and include measures such Clients Counseled, Public and Media Events, and Total Counseling Hours. A complete list of Performance Measures and Benchmarks is included in Appendix A – Scope of Services, included with this Memo.

### **Location and Time of Services**

HICAP administrative offices are located at 601 Jackson St., San Francisco, CA 94133, and are open during the hours of 9 a.m. to 5 p.m. Monday to Friday. In addition, HICAP services are also offered at ten (10) other outstations throughout San Francisco for pre-arranged scheduled appointments with a HICAP counselor.

### **Performance**

Grantees received program monitoring in April 2018 and fiscal monitoring in March 2018. Grantee was determined to be compliant with no findings.

### **Grantee Selection**

Grantees were selected through Request for Proposals (RFP) 635, which was competitively bid in February 2015.

### **Funding**

The funding is a combination of County General funds, State funds and Federal funds.

## **ATTACHMENTS**

### **Self Help for the Elderly**

Appendix A-Services to be Provided

Appendix B- Program Budget

## APPENDIX A – SCOPE OF SERVICES

### SELF HELP FOR THE ELDERLY

#### HEALTH INSURANCE COUNSELING AND ADVOCACY PROGRAM (HICAP)

**July 1, 2018 - June 30, 2019**

#### **I. Purpose**

The purpose of this grant is to provide community education, counseling, and advocacy services to Medicare beneficiaries, their representatives, and those who will soon be eligible for Medicare.

#### **II. Definitions**

ACL	Administration for Community Living; an agency of the larger Federal Department of Health and Human Services; provides funding and regulation for SHIP / HICAP programs
CARBON	Contracts Administration, Reporting and Billing On Line System
CDA	California Department of Aging; a State of California agency which regulates HICAP program function
City	City and County of San Francisco
Controller	Controller of the City and County of San Francisco or designated agent.
DAAS	Department of Aging and Adult Services
Grantee	Self-Help for the Elderly (SHE)
HICAP	Health Insurance Counseling and Advocacy Program
HSA	Human Services Agency of the City and County of San Francisco
Older Adult	Person who is 60 years or older, used interchangeably with Senior
OOA	Office on the Aging
Senior	Person who is 60 years or older, used interchangeably with Older Adult
SHIP	State Health Insurance Assistance Program; term used at the federal level to describe the network of State level Medicare Counseling programs (like HICAP)

SOGI	Sexual Orientation and Gender Identity; Ordinance No. 159-16 amended the San Francisco Administrative Code to require City departments and contractors that provide health care and social services to seek to collect and analyze data concerning the sexual orientation and gender identity of the clients they serve ( <i>Chapter 104, Sections 104.1 through 104.9.</i> )

**III. Eligibility for HICAP Services**

- 1) A resident of San Francisco *and*
- 2) Receiving Medicare *or*
- 3) Soon to be eligible for Medicare *or*
- 4) Authorized representative of San Francisco resident receiving or soon to be eligible for Medicare

**IV. Location and Time of Services**

Grantee offices are located at 601 Jackson Street in San Francisco. Offices are open Monday through Friday during regular business hours. Grantee will also staff HICAP counseling sites at Community Centers, local Government offices, and other shared spaces throughout San Francisco. Locations and times for counseling sites will be determined and publicized by Grantee.

**V. Description of Services**

Grantee will operate San Francisco Health Insurance Counseling and Advocacy Program. HICAP will provide counseling, information and advocacy assistance about Medicare, supplemental health insurance, managed care or related health insurance plan issues and long-term care insurance. Services will be provided directly to individuals and through larger community education activities.

While paid staff may deliver HICAP services, Grantee is expected to recruit, train, and register a cohort of volunteer counselors to better deliver HICAP services to the large and diverse eligible population in San Francisco. Volunteer recruitment is important to the development of a diverse, culturally competent, and linguistically capable HICAP.

In addition, HICAP program will:

- Develop and implement HICAP outreach strategies and campaigns to promote awareness of HICAP services.
- Target additional outreach to underserved and hard-to-reach populations to raise awareness and utilization of HICAP services by these populations.
- Collaborate with information and assistance programs, services for older adults, and other community based organizations to ensure awareness among other organizations

serving the target population and to ensure an effective referral system for potential HICAP clients.

- Comply with all program requirements and regulations as determined by California Department of Aging and Administration for Community Living.

## VI. Grantee Responsibilities / Units of Service and Definitions

During the term of the grant, the Grantee will provide services in all of the following categories, as established and defined by ACL and CDA. Service categories are listed and described as follows:

- A. **Clients Counseled:** Number of finalized Intakes for all clients/beneficiaries that received counseling services.
- B. **Public and Media (PAM) Events:** Includes education/outreach presentations, booths/exhibits at health/senior fairs, and enrollment events; excludes non-interactive events such as public service announcements, radio or TV appearances, and printed outreach.
- C. **Total Client Contacts:** This includes all counseling via telephone, in-person at home, in-person at site, and electronic contacts (email, fax, etc.).
- D. **Persons Reached at Public and Media (PAM) Events:** Estimated number of attendees reached through Public and Media Events
- E. **Contacts with Medicare Beneficiaries due to Disability:** Includes all contacts, regardless of type, with Medicare beneficiaries whose eligibility is based on disability.
- F. **Low-income Medicare Beneficiary Contacts:** Includes all contacts, regardless of type, where income level is below 150% of Federal Poverty Level.
- G. **Contacts with One or More Qualifying Enrollment Topics:** Includes all contacts, regardless of type, where one or more Medicare or Medicare related enrollment topic is covered.
- H. **Contacts with One or More Part D Enrollment Topics:** Includes all contacts, regardless of type, where one or more Medicare ore Medicare related enrollment topic is covered.
- I. **Total Counseling Hours:** Number of hours spent with or on behalf of a client regardless of type of contact.

## **VII. Service Objectives**

Benchmarks for performance in the above categories are established on an annual basis by ACL and CDA; they are posted at:

<https://www.aging.ca.gov/ProgramsProviders/AAA/Planning/>

Grantee will, on an annual basis, meet benchmark service delivery levels as established by ACL and CDA.

## **VIII. Outcome Objectives**

The following Outcome Objectives will be used to measure the amount, range, and impact of services provided:

- At least 85% of HICAP clients completing a satisfaction survey will report that HICAP staff was courteous.
- At least 85% of HICAP clients completing a satisfaction survey will report that HICAP counselor was helpful.
- At least 85% of HICAP clients completing a satisfaction survey will rate HICAP counselor's communication skills as good or very good.
- At least 85% of HICAP clients completing a satisfaction survey will rate the outcome of their HICAP consultation as good or very good.

## **IX. Reporting Requirements**

Grantee will provide various reports during the term of the grant agreement:

- A. Grantee shall input all required data into the Statewide HICAP Automated Reporting Program (SHARP) database. SHARP, operated by CDA, is designed to meet the HICAP case management needs and is the required database for collection and reporting of HICAP data for HICAPs and Area Agencies on Aging statewide.
- B. Grantee is also responsible for providing reports as scheduled and requested by the California Department of Aging, ensuring that copies are shared with Office on the Aging program analyst.
- C. Grantee shall issue a Fiscal Closeout Report at the end of the fiscal year. The report is due to HSA no later than July 31st.
- D. Monthly, quarterly, and annual reports must be entered into the Contracts Administration, Reporting, and Billing Online (CARBON) system as required by DAAS/OOA and Contracts Department staff.
- E. Grantee will provide an annual consumer satisfaction survey report to OOA by March 15<sup>th</sup> of the contract year. Satisfaction survey response rate goal is at least 35% of unduplicated consumers.

- F. Grantee program staff will complete the California Department of Aging (CDA) Security Awareness Training on an annual basis; Grantee will maintain evidence of staff completion of this training.
- G. Grantee shall develop and deliver an annual summary report of SOGI data collected in the year as required by state and local law. The due date for submitting the annual summary report is July 10th.
- H. Grantee shall be compliant with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) privacy and security rules to the extent applicable.
- I. Grantee shall develop and deliver ad hoc reports as requested by DAAS/HSA.
- J. For assistance with reporting requirements or submission of reports, please contact:

Michael Zaugg  
Director, Office on the Aging  
DAAS  
P.O. Box 7988  
San Francisco, CA 94120-7988  
[michael.zaugg@sfgov.org](mailto:michael.zaugg@sfgov.org)

Tahir Shaikh,  
Contracts Manager  
Human Services Agency  
PO Box 7988  
San Francisco, CA 94120-7988  
[tahir.shaikh@sfgov.org](mailto:tahir.shaikh@sfgov.org)

## **X. Monitoring Activities**

- A. Program Monitoring: Program monitoring will include, but not be limited to, review of compliance specific program standards or requirements; client eligibility and targeted mandates, back up documentation for the units of service and all reporting, and progress of service and outcome objectives; how participant records are collected and maintained; reporting performance utilizing Statewide HICAP Automated Recording Program (SHARP), agency and organization standards, which include current organizational chart, evidence of provision of training to staff regarding the Elder Abuse Reporting, evidence that program staff have completed the California Department of Aging (CDA) Security Awareness Training; program operation, which includes a review of a written policies and procedures manual of all OOA funded programs, written project income policies if applicable, grievance procedure posted in the center/office, and also given to the consumers who are homebound, hours of operation are current according to the site chart; a Board of Director list and whether services are provided appropriately according to Sections V and VI.

- B. Fiscal Compliance and Contract Monitoring: Fiscal monitoring will include review of the Grantee's organizational budget, the general ledger, quarterly balance sheet, cost allocation procedures and plan, State and Federal tax forms, audited financial statement, fiscal policy manual, supporting documentation for selected invoices, cash receipts and disbursement journals. The compliance monitoring will include review of Personnel Manual, Emergency Operations Plan, Compliance with the Americans with Disabilities Act, subcontracts, and MOUs, and the current Board roster and selected Board minutes for compliance with the Sunshine Ordinance.



	A	B	C	D
1	Appendix B, Page 1			
2				
3	<b>HUMAN SERVICES AGENCY BUDGET SUMMARY</b>			
4				
5	Name	Term		
6	Self Help for the Elderly	7/1/18-6/30/19		
7	(Check One) New <input type="checkbox"/> Renewal <input checked="" type="checkbox"/> Modification _____			
8	If modification, Effective Date of Mod.	No. of Mod.		
9	Program: HICAP			
10	Budget Reference Page No.(s)			
11	Program Term	7/1/18-6/30/19	Total	
12	<b>Expenditures</b>			
13	Salaries & Benefits	\$264,718	\$264,718	
14	Operating Expenses	\$60,882	\$60,882	
15	<b>Subtotal</b>	<b>\$325,600</b>	<b>\$325,600</b>	
16	Indirect Percentage (%)	13%	13%	
17	Indirect Cost (Line 16 X Line 15)	\$42,328	\$42,328	
18	Capital/Subcontractor Expenditures	\$0	\$0	
19	Total Expenditures	\$367,928	\$367,928	
20	<b>HSA Revenues</b>			
21				
22	General Fund	\$71,876	\$71,876	
23	Federal	\$230,286	\$230,286	
24	State	\$65,766	\$65,766	
25				
26				
27				
28				
29	TOTAL HSA REVENUES	\$367,928	\$367,928	
30	<b>Other Revenues</b>			
31				
32				
33				
34				
35				
36	Total Revenues	\$367,928	\$367,928	
37	Full Time Equivalent (FTE)	5.04	5.04	
39	Prepared by: Leny Nair	Telephone No.:415-677-76 Date: 05/30/2018		
40	HSA-CO Review Signature:	_____		
41	HSA #1		10/25/2016	

	A	B	C	D	E	F	G
1	Appendix B, Page 2						
2							
3							
4	Program: HICAP						
5	(Same as Line 9 on HSA #1)						
6							
7	<b>Salaries &amp; Benefits Detail</b>						
8							
9							
10							
11						7/1/18-6/30/19	7/1/18-6/30/19
		Agency Totals		HSA Program		DAAS	TOTAL
12	POSITION TITLE	Annual Full Time Salary for FTE	Total FTE	% FTE funded by HSA (Max 100%)	Adjusted FTE	Budgeted Salary	Budgeted Salary
13	Program Manager	\$60,670	1.00	85%	0.85	\$51,570	\$51,570
14	Program Specialist	\$42,432	1.00	85%	0.85	\$36,067	\$36,067
15	Volunteer Coordinator	\$36,067	1.00	85%	0.85	\$30,657	\$30,657
16	Outreach Coordinator	\$37,128	1.00	88%	0.88	\$32,543	\$32,543
17	Program Assistant	\$39,250	1.00	88%	0.88	\$34,540	\$34,540
18	Program Assistant (Cantonese)	\$38,480	0.83	88%	0.73	\$28,106	\$28,106
19							
20							
21							
22							
23							
24							
25							
26							
27							
28							
29							
30	TOTALS	\$254,027	5.83	519%	5.04	\$213,482	\$213,482
31							
32	FRINGE BENEFIT RATE	24%					
33	EMPLOYEE FRINGE BENEFITS	\$60,966				\$51,236	\$51,236
34							
35							
36	TOTAL SALARIES & BENEFITS	\$314,993				\$264,718	\$264,718
37	HSA #2						10/25/2016

	A	B	C	D	E	F	G
1	Appendix B, Page 3						
2							
3							
4	Program: HICAP						
5	(Same as Line 9 on HSA #1)						
6							
7	<b>Operating Expense Detail</b>						
8							
9							
10							
11							
12	<u>Expenditure Category</u>				TERM	<u>7/1/18-6/30/19</u>	TOTAL <u>7/1/18-6/30/19</u>
13	Rental of Property					\$33,531	\$33,531
14	Utilities(Elec, Water, Gas, Phone, Garbage)					\$8,697	\$8,697
15	Office Supplies, Postage					\$500	\$500
16	Building Maintenance Supplies and Repair					\$6,940	\$6,940
17	Printing and Reproduction					\$1,000	\$1,000
18	Insurance					\$1,866	\$1,866
19	Staff Training					\$2,000	\$2,000
20	Staff Travel-(Local & Out of Town)					\$400	\$400
21	Rental of Equipment						
22							
23	<b>CONSULTANTS</b>						
24	Auto Insurance					\$1,902	\$1,902
25	Vehicle Expenses					\$2,000	\$2,000
26							
27	<b>OTHER</b>						
28	Membership Dues & Fees					\$2,046	\$2,046
29							
30							
31	<b>TOTAL OPERATING EXPENSE</b>					<b>\$60,882</b>	<b>\$60,882</b>
32							
33	<b>HSA #3</b>						<b>10/25/2016</b>