



Edwin M. Lee, Mayor

Shireen McSpadden, Executive Director

## MEMORANDUM

**TO:** AGING AND ADULT SERVICES COMMISSION

**THROUGH:** SHIREEN McSPADDEN, EXECUTIVE DIRECTOR

**FROM:** DANIEL KAPLAN, HUMAN SERVICES AGENCY DEPUTY DIRECTOR OF ADMINISTRATION  
MARTHA PETERSON, PRINCIPAL ADMINISTRATIVE ANALYST

**DATE:** JUNE 1, 2016

**SUBJECT:** **REVIEW AND APPROVAL OF FY 2016/17 CDA-122 AREA PLAN AND HICAP BUDGETS, ASSOCIATED CONTRACTS AP-16/17-06 AND HI-16/17-06 AND ALL SUBSEQUENT AMENDMENTS**

### INTRODUCTION

As part of the California Department on Aging (CDA) required annual update, the Department of Aging and Adult Services (DAAS) is submitting for your review and approval the FY 2016/17 Area Plan budget and associated contracts AP-16/17-06, and all subsequent amendments. This item does not reflect all of the local funding associated with these programs, just the Federal and State allocations and required match.

The Department is also seeking review and approval of the FY 16/17 HICAP (Health Insurance Counseling and Advocacy Program) budget and associated contract HI-16/17-06, and all subsequent amendments.

Attached are three documents related to the Area Plan Budget for FY 2016/17:

- The first document details changes in the Federal and State allocations for Older Americans Act programs, by Title, from FY 2015/16 to FY 2016/17. Overall, the total Area Plan Budget of \$5,267,883 reflects an increase of \$231,459, (7%). The increase in funding from FY 2015/16 is largely due to increases made to the NSIP (Nutrition Supplementary Incentive Program).
- The additional two documents are the corresponding Area Plan Contract (AP-16/17-06) and corresponding budget for review and approval. This is the standard agreement between DAAS and the State that documents the requirements related to the programs and fund sources.

The State provided the Department with details on the FY 16/17 Health Insurance Counseling and Advocacy Program (HICAP) budget and corresponding contract HI-16/17-06. The funds received for the HICAP program partially offset the salary of a DAAS program analyst and provides funding for a

contract with Self-Help for the Elderly, the local HICAP provider. Based on this allocation, the program funding is slightly increased by \$578 in FY 16/17, compared to the FY15/16 base. Attached for your review and approval are two documents related to this program:

- The first document is the *HICAP Budget*, reflecting the full spending plan for the \$364,770 base budget.
- The corresponding contract HI-16/17-06 is presented for your review and approval. This is the standard agreement between DAAS and the State which reflects all of requirements related to the program and funding sources.

**Recommended Action: Approve the FY 2016/17 Area Plan spending plan and HICAP Budget and associated contract modifications, the Area Plan Contracts AP-16/17-06 and HICAP Contract HI-16/17-06, and all subsequent amendments.**

**City and County of San Francisco, Department of Aging and Adult Services  
Area Plan Budget FY 2015/16 Budget Display**

	FY 15/16 Base	FY 16/17 Base	Difference from FY 15.16 Base	DAAS Recommendations
<b>Supportive Services</b>				
Federal Title IIIB	718,276	730,612	12,336	
Total Supportive Services	718,276	730,612	12,336	Increase the Emergency Home Care program with Self Help for the Elderly
<b>Ombudsman</b>				
Federal Title IIIB	24,500	24,200	(300)	
Federal Title VII Ombudsman	30,852	30,474	(378)	
General Fund IIIB	25,469	13,472	(11,997)	
Public Health L & C Program Fund		5,389	5,389	
State Health Facilities Citation Penalties Account		23,410	23,410	
SNF Quality & Accountability	26,477	25,596	(881)	
Total Ombudsman	107,298	122,541	15,243	Increase the Family Service Agency contract
<b>Congregate Nutrition</b>				
Federal Title IIIC1	1,001,403	1,061,070	59,667	
State General Fund C1	156,029	137,443	(18,586)	
State C1 Special Nutrition Funds	-	-	-	
NSIP C1	524,202	527,485	3,283	
Total Congregate Nutrition	1,681,634	1,725,998	44,364	Increase the overall Congregate Nutrition funding pool for allocation
<b>Home-Delivered Meals</b>				
Federal Title IIIC2	505,221	542,547	37,326	
State General Fund C2	338,260	271,278	(66,982)	
State C2 Special Nutrition Funds	-	-	-	
NSIP C2	1,004,441	1,160,264	155,823	
Total Home Delivered Meals	1,847,922	1,974,089	126,167	Increase the overall Home Delivered Meals funding pool for allocation
<b>Disease Prevention</b>				
Federal Title IIID	55,510	56,208	698	
Total Disease Prevention	55,510	56,208	698	Increase the Chronic Disease Self Management Program contract with On Lok
<b>Family Caregiver</b>				
Federal Title IIIE	336,449	357,141	20,692	
Total Family Caregiver	336,449	357,141	20,692	Increase the Family Caregiver Alliance contract
<b>Elder Abuse</b>				
Federal Title VII Elder Abuse Prevention	12,582	12,819	237	
Total Elder Abuse Prevention	12,582	12,819	237	Increase the Insitute on Aging contract
<b>Administration</b>				
Federal Title IIIB	83,810	84,670	860	
Federal Title IIIC1	104,536	109,990	5,454	Shift to Title IIIB Administration
Federal Title IIIC2	52,740	56,240	3,500	Shift to Title IIIB Administration
Federal Title IIIE	35,034	36,934	1,900	Shift to Title III E Program
State General Fund C1	500	506	6	Shift to C1 Program
State General Fund C2	133	135	2	Shift to C2 Program
Total Administration	276,753	288,475	11,722	
<b>Grand Total - All Funds</b>	<b>5,036,424</b>	<b>5,267,883</b>	<b>231,459</b>	
<b>Funding Summary</b>				
Federal Funds	4,489,556	4,790,654	301,098	
State General Fund	494,922	422,834	(72,088)	
State Special Nutrition Funds	-	-	-	
Public Health L & C Program Fund		5,389	5,389	
SNF Quality & Accountability	26,477	25,596	(881)	
State Health Facilities Citation Penalties Account	25,469	23,410	(2,059)	
	5,036,424	5,267,883	231,459	

## HICAP BUDGET SUMMARY

BUDGET PERIOD: 7/1/2016 - 6/30/2017		CONTRACT NO: HI 1617-06		SUBMISSION DATE: 5/26/16		PSA No: 06
[X] ORIGINAL [ ] REVISION #		3 MONTH FEDERAL (SHIP) FUNDS (4/1 - 6/30)		12 MONTH STATE FUNDS		LOCAL FUNDS
COST CATEGORY	9 MONTH FEDERAL (SHIP) FUNDS (7/1 - 3/31)	HICAP Federal Admin	HICAP Reimb. Admin	HICAP Fund Admin	Program Income / Other Funds	TOTAL FUNDS
<b>AAA ADMINISTRATION</b>						
Personnel	9,750	3,250	11,041	5,516	12,987	42,544
Operating Expenses	0	0	0	0	0	0
Indirect Admin	0	0	0	0	0	0
<b>TOTAL HICAP ADMINISTRATION</b>	<b>9,750</b>	<b>3,250</b>	<b>11,041</b>	<b>5,516</b>	<b>12,987</b>	<b>42,544</b>
<b>HICAP PROGRAM</b>						
Direct Services	0	0	0	0	0	0
Subrecipient Contractor Services	94,131	29,249	141,248	70,585	29,902	365,115
<b>TOTAL HICAP PROGRAM</b>	<b>94,131</b>	<b>29,249</b>	<b>141,248</b>	<b>70,585</b>	<b>29,902</b>	<b>365,115</b>
<b>TOTAL HICAP BUDGET</b>	<b>103,881</b>	<b>32,499</b>	<b>152,289</b>	<b>76,101</b>	<b>42,889</b>	<b>407,659</b>

HICAP Legal Representation Services are provided: [X] Yes

Amount Budgeted: \$ 7500

[W&I Code, Section 9541 (c) (3)]

## AAA ADMINISTRATION BUDGET - FEDERAL & LOCAL FUNDS

BUDGET PERIOD: 7/1/2016 - 6/30/2017		CONTRACT NO: HI 1617-06		SUBMISSION DATE: 42516		PSA No: 06	
PERSONNEL	[X] ORIGINAL [ ] REVISION #	Total Annual FTE	9 Month	3 Month	Local Funds	TOTAL	
Position Classification:	Monthly	% of Time Worked	Salaries & Wages	Salaries & Wages	Salaries & Wages		
2917 Program Analyst	9,255	12.50%	9,750	3,250	7,383	20,383	
						0	
						0	
						0	
						0	
						0	
						0	
						0	
						0	
						0	
<b>TOTAL SALARIES &amp; WAGES</b>			9,750	3,250	7,383	20,383	
<b>STAFF BENEFITS</b>						0	
<b>TOTAL PERSONNEL</b>			9,750	3,250	7,383	20,383	
<b>OPERATING EXPENSES</b>			9 Month	3 Month	Local Funds	TOTAL	
Rent:	Sq ft:	Sq ft Rate/mo.:	Quantity				
*Equipment (List Item below):							
						0	
						0	
						0	
						0	
						0	
						0	
						0	
						0	
						0	
Travel:							
Other Operating Expenses (List below):							
						0	
						0	
						0	
						0	
						0	
						0	
						0	
						0	
<b>TOTAL OPERATING EXPENSES</b>			0	0		0	
INDIRECT COSTS							
<b>TOTAL FEDERAL &amp; LOCAL ADMINISTRATION</b>			9,750	3,250	7,383	20,383	

\* Equipment exceeding \$500 must be reported on Property page



## HICAP DIRECT SERVICES BUDGET - FEDERAL & LOCAL FUNDS

CONTRACT NO: HI 1617-06

BUDGET PERIOD: 7/1/2016 - 6/30/2017		[X] ORIGINAL [ ] REVISION #		SUBMISSION DATE: 5/26/2016	PSA No: 06	
PERSONNEL	Position Classification:	Monthly	Total Annual FTE	9 Month	3 Month	TOTAL
		Wage Rate FTE	% of Time Worked	Salaries & Wages	Salaries & Wages	
				Local Funds	Local Funds	Salaries & Wages
TOTAL SALARIES & WAGES				0	0	0
STAFF BENEFITS						0
TOTAL PERSONNEL				0	0	0
OPERATING EXPENSES		Sq ft:	Sq ft Rate (mo.):	9 Month	3 Month	TOTAL
Rent:			Quantity			0
*Equipment (List item below):						0
						0
						0
						0
						0
						0
Travel:						0
Other Operating Expenses (List):						0
						0
						0
						0
						0
TOTAL OPERATING EXPENSES				0	0	0
INDIRECT COSTS						0
TOTAL FEDERAL & LOCAL DIRECT SERVICES				0	0	0

\* Equipment exceeding \$500 must be reported on Property page





# HICAP SUBRECIPIENT CONTRACTOR SERVICES SCHEDULE - 12 Month

CONTRACT NO: HI 1617-06

BUDGET PERIOD: 7/1/2016 - 6/30/2017		SUBMISSION DATE: 42516			PSA No: 06		
		<input checked="" type="checkbox"/> ORIGINAL	<input type="checkbox"/> REVISION #				
<b>Contractors</b>		HICAP 9 Month Federal Funds	HICAP 3 Month Federal Funds	HICAP Reimbursement Program	HICAP Fund Program	Program Income and Other Local Funds	TOTAL CONTRACTED SERVICES
Name:	Self Help for the Elderly	94,131	29,249	141,248	70,585	29,902	365,115
Address:	407 Sansome Street, SF, CA 94111						
Telephone:	1-415-677-7594						
Contact Person:	Amanda White						
Name:							0
Address:							
Telephone:							
Contact Person:							
Name:							0
Address:							
Telephone:							
Contact Person:							
Name:							0
Address:							
Telephone:							
Contact Person:							
<b>TOTAL HICAP CONTRACTED SERVICES</b>		<b>94,131</b>	<b>29,249</b>	<b>141,248</b>	<b>70,585</b>	<b>29,902</b>	<b>365,115</b>
		<b>9 MONTH FED.</b>	<b>3 MONTH FED.</b>	<b>HICAP REIMB.</b>	<b>HICAP FUND</b>	<b>LOCAL FUNDS</b>	<b>TOTAL</b>

Budget Contracted expenses from all funding sources

## HICAP PROPERTY/EQUIPMENT BUDGETED

CONTRACT NO: HI 1617-06

BUDGET PERIOD: 7/1/2016 - 6/30/2017	[X] ORIGINAL [ ] REVISION #	SUBMISSION DATE: 4/25/1600%	PSA No: 06
ITEM DESCRIPTION	EXPECTED ACQUIRE DATE	Purpose/Justification	Per Unit Cost
FUNDING USED Select from dropdown			
HICAP COST			
<b>AAA ADMIN EQUIPMENT</b>			
	Include all property with a unit cost exceeding \$500		
		HICAP Federal	
		HICAP Reimb.	
		HICAP Fund	
		None	
		None	
<b>AAA ADMINISTRATION - EQUIPMENT PURCHASES TOTAL</b>			<b>0</b>
<b>AAA DIRECT PROGRAM EQUIPMENT</b>			
	Include all property with a unit cost exceeding \$500		
		HICAP Federal	
		None	
		None	
		None	
		None	
<b>AAA DIRECT PROGRAM - EQUIPMENT PURCHASES TOTAL</b>			<b>0</b>
<b>TOTAL AAA EQUIPMENT PURCHASES</b>			<b>0</b>
<b>SUBRECIPIENT CONTRACTOR EQUIPMENT</b>			
	Include all property with a unit cost exceeding \$500		
		HICAP Reimb.	
		None	
		None	
		None	
		None	
		None	
		None	
		None	
		None	
<b>SUBRECIPIENT CONTRACTOR EQUIPMENT PURCHASES TOTAL</b>			<b>0</b>
<b>TOTAL EQUIPMENT PURCHASES BUDGETED</b>			<b>0</b>