

City and County of San Francisco



London Breed, Mayor

Human Services Agency

 Department of Human Services
 Department of Disability and Aging Services
 Office of Early Care and Education

Trent Rhorer, Executive Director

MEMORANDUM

TO: DISABILITY & AGING SERVICES COMMISSION

THROUGH: SHIREEN McSPADDEN, EXECUTIVE DIRECTOR

FROM: CINDY KAUFFMAN, DEPUTY DIRECTOR
 ESPERANZA ZAPIEN, ACTING DIRECTOR OF CONTRACTS DS
EB

DATE: SEPTEMBER 2, 2020

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

GRANT TERM: 1/1/2021 – 6/30/2024

GRANT AMOUNT:

	<u>New</u>	<u>Contingency</u>	<u>Total</u>
	\$1,364,052	\$136,405	\$1,500,457

ANNUAL AMOUNT:

	<u>FY 20-21</u>	<u>FY 21-22</u>	<u>FY 22-23</u>	<u>FY 23-24</u>
	\$194,865	\$389,729	\$389,729	\$389,729

Funding Source

	<u>County</u>	<u>State</u>	<u>Federal</u>	<u>Contingency</u>	<u>Total</u>
FUNDING:	\$321,969	\$737,579	\$304,504	\$136,405	\$1,500,457
PERCENTAGE:	24%	54%	22%		100%

The Department of Disability and Aging Services (DAS) requests authorization to enter into a new grant agreement with Self-Help for the Elderly for the period of January 1, 2021 to June 30, 2024, in an amount of \$1,364,052 plus a 10% contingency for a total amount not to exceed \$1,500,457. The purpose of this grant is for the provision of the Health Insurance Counseling and Advocacy Program (HICAP), a Medicare benefits counseling service.

Background

DAS 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 and objective information and assistance with Medicare benefits, prescription drug plans and health plans. This service is beneficial to people that have reached Medicare eligibility age or are imminently Medicare eligible.

Services to be Provided

The Health Insurance Counseling and Advocacy Program (HICAP) assists individuals and families with Medicare problems and other health insurance concerns. Trained and registered volunteer counselors provide objective information on Medicare (Parts A, B, C and D), Medicare supplement insurance (“MediGap”), managed care, long-term care planning and health insurance. The HICAP also leads community education events and participates in networking and other outreach efforts to best raise awareness among consumers of Medicare benefits and HICAP services.

HICAP will help an individual file Medicare or other related health insurance claims, understand his or her coverage and consumer rights, assist with managed care issues and long-term care planning, and evaluate his or her insurance or health care needs.

HICAP is required to meet strict federal performance benchmarks related to the number of clients served; counselors recruited, trained and registered; number of active counselors available to assist clients; number of media and outreach events, etc.

HICAP serves current Medicare beneficiaries and those planning for future health and long-term care needs. HICAP counseling is confidential, free of charge, and all efforts are made to maintain appropriate language capability (e.g, Cantonese, Mandarin, Spanish, Tagalog).

Location and Time of Services

HICAP services will be provided at 601 Jackson St., San Francisco, CA 94133, during the hours of 9 a.m. to 5 p.m. Monday to Friday. In addition, HICAP services are offered at nine (9) other outstations throughout San Francisco with pre-arranged scheduled appointments with a HICAP volunteer counselor. Per the City’s Health Directives, the nine (9) HICAP outstations are currently closed due to COVID-19.

Performance

Self-Help for the Elderly received program monitoring in January 2019 (FY 2018-2019) and fiscal monitoring in July 2020 (FY 2019-2020). Contractor was determined to be compliant with findings resolved. Program monitoring will be conducted in September 2020 (FY 2019-2020).

Grantee Selection

Self-Help for the Elderly was selected through Request for Proposals (RFP) 868, which was competitively bid in January 2020.

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)

January 1, 2021 - June 30, 2024

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
DAS	Department of Disability and Aging Services
Disability	A condition or combination of conditions that is attributable to a mental, cognitive or physical impairment, including hearing and visual impairments, that results in substantial functional limitations in one (1) or more of the following areas of major life activity: a) Self-care: activities of daily living (ADL), and instrumental activities of daily living (IADL); b) Capacity for independent living and self-direction; c) Cognitive functioning, and emotional adjustment.
Frail	An individual determined to be functionally impaired in one or both of the following areas: (a) unable to perform two or more activities of daily living (such as bathing, toileting, dressing, eating, and transferring) without substantial human assistance, including verbal reminding, physical cueing or supervision; (b) due to a cognitive or other mental impairment, requires substantial supervision because the individual behaves in a manner that poses a serious health or safety hazard to the individual or others.
Grantee	Self-Help for the Elderly (SHE)

HICAP	Health Insurance Counseling and Advocacy Program; a program designed to provide Medicare beneficiaries and those imminent of becoming eligible for Medicare with counseling and advocacy about Medicare, private health insurance, and related health care coverage plans for the purpose of preserving service integrity on a Statewide basis. [Welf. & Inst. Code § 9541]
HSA	Human Services Agency of the City and County of San Francisco
Low-income	Having income at or below 150% of the Federal Poverty Level as defined by the Federal Bureau of the Census and published annually by the U.S. Department of Health and Human Services.
LGBTQ+	An acronym/term used to refer to persons who self-identify as non -heterosexual and/or whose gender identity does not correspond to their birth sex. This includes, but is not limited to, lesbian, gay, bisexual, transgender, genderqueer, and gender non-binary.
Minority	An ethnic person of color who is any of the following: a) Black – a person having origins in any of the Black racial groups of Africa, b) Hispanic – a person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish or Portuguese culture or origin regardless of race, c) Asian/Pacific Islander – a person whose origins are from India, Pakistan or Bangladesh, Japan, China, Taiwan, Korea, Vietnam, Laos, Cambodia, the Philippines, Samoa, Guam, or the United States Territories of the Pacific including the Northern Marianas, d) American Indian/Alaskan Native – an American Indian, Eskimo, Aleut, or Native Hawaiian. Source: California Code of Regulation Sec. 7130.
Older Adult	Person who is 60 years or older, used interchangeably with senior
OCP	Office of Community Partnerships
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. Target Population

Services must target those older adults and adults with disabilities (aged 18-59) who are members of one or more of the following target groups that have been identified as demonstrating the greatest economic and social need. In particular:

1. Low-income
2. Limited English Proficiency
3. Minority
4. Frail
5. Member of LGBTQ+ Community

IV. Eligibility for HICAP Services

Medicare beneficiaries, including Medicare beneficiaries by virtue of a disability, and those persons imminent of Medicare eligibility [Welf. & Inst. Code § 9541(a), (c)(2)], and the public at large who are eligible to receive HICAP community education services, including long-term care planning and long-term care insurance counseling services. [Welf. & Inst. Code § 9541(c)(1), (c)(2), (c)(4)-(6)]

V. 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. Grantee will also honor the City's Health Directives for COVID-19 and close the nine (9) HICAP outstations when necessary. Services will be available via telephone and video-conferencing during those times.

VI. 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 the 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.
- Dependent upon California Department of Aging and DAS policymaking and funding availability, Grantee may be required to administer the Medicare Improvements for Patients and Providers (MIPPA) programs as an expansion or sub-program of larger HICAP.
- Comply with all program requirements and regulations as determined by California Department of Aging and Administration for Community Living

Current HICAP requirement and regulations established by the California Department of Aging and the Administration for Community Living can be found online here: [https://www.aging.ca.gov/Contracts_Download_Page/HealthInsuranceCounseling&AdvocacyProgram\(HI\)](https://www.aging.ca.gov/Contracts_Download_Page/HealthInsuranceCounseling&AdvocacyProgram(HI)). Note: these requirements may change on an annual basis.

VII. 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:

- Clients Counseled:** Number of finalized intakes for all clients/beneficiaries that received counseling services.
- Public and Media (PAM) Events:** Includes education/outreach presentations, booths/exhibits at health/senior fairs, and enrollment events; excluding non-interactive events such as public service announcements, radio or television appearances, and printed outreach.
- Client Contacts (Interactive):** This includes all counseling via telephone, in-person, at home, in-person at site, and electronic contacts (email, fax, etc.).
- Medicare Beneficiaries Under 65:** Number of Medicare beneficiaries under 65 receiving counseling services.
- Hard to Reach (Total):** Percentage of clients receiving counseling services who are at or below 150% of Federal Poverty Level, reside in a zip code in a rural area, or primary language is not English.

- F. **Enrollment Contacts (Qualifying)**: Percentage of clients receiving counseling services where one or more of the following enrollment topics are discussed: Medicare Part A/B, Medigap Supplemental Policies, Medicare Advantage, Medical, Part D Prescription Drug Coverage, Part D Plan Problems, Part D Low-Income Subsidy.

VIII. 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.

IX. Outcome Objectives

The following Outcome Objectives will be used to measure the amount, range, and impact of services provided. Survey completion rate shall be 35% of annual Clients Counseled State Performance Measure. (For FY18-19, Clients Counseled Performance Measure was 1,939.)

- Clients report that because of their HICAP counseling session they were able to maintain or increase Medicare or health insurance benefits available to them. Target 75%.
- Clients feel better able to make more informed decisions about their Medicare or health insurance benefits. Target 75%.
- Clients develop new knowledge of health services for which they are eligible. Target 50%.
- Clients rate their HICAP counselor's communication skills as good. Target 75%

X. 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 of Community Partnerships 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 DAS/OCP and Contracts Department staff.
- E. Grantee will provide an annual consumer satisfaction survey report to OCP by March 15th 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 will assure that services delivered are consistent with professional standards for this service.
- I. Pursuant to California Department of Aging Requirement, Grantor reserves the right to reduce funding available for this contract in the event that actual costs are below funding levels initially budgeted for the delivery of services.
- J. Grantee will develop a Grievance Policy consistent with Office on the Aging Program Memorandum #33 - Consumer Grievance Policy.
- K. Through the Older Americans Act Area Plan development process, the City of San Francisco identifies "Focal Points" which are designed to help older adults connect to services throughout the City. These Focal Points are:

Designated Community Focal Points		
Name	Address	Phone
Western Addition Senior Center	1390 1/2 Turk St, San Francisco, 94115	415-921-7805
Bayview Senior Connections	5600 3rd St, San Francisco, 94124	415-647-5353
OMI Senior Center (CCCYO)	65 Beverly St, San Francisco, 94132	415-335-5558
Richmond Senior Center (GGSS)	6221 Geary Blvd, San Francisco, 94121	415-404-2938
30th Street Senior Center (On Lok)	225 30th St, San Francisco, 94131	415-550-2221
Openhouse	1800 Market St, San Francisco, 94102	415-347-8509
SF Senior Center (SFSC)	481 O'Farrell St, San Francisco, 94102	415-202-2983
Aquatic Park Senior Center (SFSC)	890 Beach St, San Francisco, 94109	415-202-2983
South Sunset Senior Center (SHE)	2601 40th Ave , San Francisco, 94116	415-566-2845
Self-Help for the Elderly	601 Jackson St, San Francisco, 94133	415-677-7585
Geen Mun Activity Center (SHE)	777 Stockton St, San Francisco, 94108	415-438-9804
Toolworks	25 Kearny St, San Francisco, 94108	415-733-0990
DAS Benefits and Services Hub	2 Gough St, San Francisco, 94103	415-355-6700

- L. Grantee shall be compliant with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) privacy and security rules to the extent applicable.
- M. Grantee shall develop and deliver ad hoc reports as requested by HSA/DAS.
- N. For assistance with reporting requirements or submission of reports, please contact:

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XI. 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 OCP 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	E	F
1						Appendix B, Page 1
2						8/25/2020
3	HUMAN SERVICES AGENCY BUDGET SUMMARY					
4	BY PROGRAM					
5	Name			Term		
6	SELF-HELP FOR THE ELDERLY			1/1/21-6/30/24		
7	(Check One) New <input checked="" type="checkbox"/> Renewal <input type="checkbox"/> Modification <input type="checkbox"/>					
8	If modification, Effective Date of Mod.		No. of Mod.			
9	Program: HICAP					
10	Budget Reference Page No.(s)					Total
11	Program Term	1/1/21-6/30/21	7/1/21-6/30/22	7/1/22-6/30/23	7/1/23-6/30/24	1/1/21-6/30/24
12	Expenditures					
13	Salaries & Benefits	\$138,840	\$277,679	\$277,679	\$277,679	\$971,877
14	Operating Expenses	\$30,608	\$61,215	\$61,215	\$61,215	\$214,253
15	Subtotal	\$169,448	\$338,894	\$338,894	\$338,894	\$1,186,130
16	Indirect Percentage (%)	15%	15%	15%	15%	15%
17	Indirect Cost (Line 16 X Line 15)	\$25,417	\$50,835	\$50,835	\$50,835	\$177,922
18	Subcontractor/Capital Expenditures	\$0	\$0	\$0	\$0	\$0
19	Total Expenditures	\$194,865	\$389,729	\$389,729	\$389,729	\$1,364,052
20	HSA Revenues					
21	General Fund	\$45,996	\$91,991	\$91,991	\$91,991	\$321,969
22	Federal CFDA 92.324	\$43,501	\$87,001	\$87,001	\$87,001	\$304,504
23	State	\$105,368	\$210,737	\$210,737	\$210,737	\$737,579
24						
25						
26						
27						
28						
29	TOTAL HSA REVENUES	\$194,865	\$389,729	\$389,729	\$389,729	\$1,364,052
30	Other Revenues					
31						
32	In-Kind Match (Volunteers)	\$16,022	\$32,043	\$32,043	\$32,043	\$112,150
33						
34						
35						
36	Total Revenues	\$210,886	\$421,772	\$421,772	\$421,772	\$1,476,202
37	Full Time Equivalent (FTE)					
39	Prepared by: Leny Nair	Telephone No.: 415-677-7682				
40	HSA-CO Review Signature:	_____				
41	HSA #1	6/20/2018				

	A	B	C	D	E	F	G	H	I	J
1										
2										
3	SELF-HELP FOR THE ELDERLY									
4	Program: HICAP									
5										
6										
7	Salaries & Benefits Detail									
8										
9										
10										
11		Agency Totals		HSA Program		1/1/21-6/30/21	7/1/21-6/30/22	7/1/22-6/30/23	7/1/23-6/30/24	1/1/21-6/30/24
12	POSITION TITLE	Annual Full Time Salary for FTE	Total FTE	% FTE funded by HSA (Max 100%)	Adjusted FTE	DAAS Budgeted Salary	DAAS Budgeted Salary	DAAS Budgeted Salary	DAAS Budgeted Salary	TOTAL Budgeted Salary
13	Program Manager	\$67,554	1.00	100%	0.80	\$27,021	\$54,043	\$54,043	\$54,043	\$189,150
14	Program Specialist	\$47,258	1.00	100%	0.80	\$18,903	\$37,806	\$37,806	\$37,806	\$132,321
15	Volunteer Coordinator	\$41,600	1.00	100%	0.80	\$16,640	\$33,280	\$33,280	\$33,280	\$116,480
16	Community Outreach Coordinator	\$42,640	1.00	100%	0.80	\$17,056	\$34,112	\$34,112	\$34,112	\$119,392
17	Program Assistant	\$43,680	1.00	100%	0.78	\$17,035	\$34,070	\$34,070	\$34,070	\$119,245
18	Program Assistant (Cantonese)	\$43,888	1.00	100%	0.50	\$10,972	\$21,944	\$21,944	\$21,944	\$76,804
19										
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29										
30	TOTALS	\$286,619	6.00	600%	4.48	\$107,627	\$215,255	\$215,255	\$215,255	\$753,392
31										
32	FRINGE BENEFIT RATE	29%								
33	EMPLOYEE FRINGE BENEFITS	\$83,120				\$31,213	\$62,424	\$62,424	\$62,424	\$218,485
34										
35										
36	TOTAL SALARIES & BENEFITS	\$369,739				\$138,840	\$277,679	\$277,679	\$277,679	\$971,877
37	HSA #2									6/20/2018

